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| <p><u>Board Members</u> J. Woodfin Thomas, Chairman, District 4 Mark G. Dewane, Vice Chairman, District 2 Mary A. Harden, RN, Director, District 1 Kate Brophy McGee, Director, District 3 Mary Rose Garrido Wilcox, Director, District 5</p> <p><u>President & Chief Executive Officer</u> Stephen A. Purves, FACHE</p> <p><u>Clerk of the Board</u> Melanie Talbot</p> <p><u>Meeting Location</u> Virginia G. Piper Charitable Trust Pavilion 2609 East Roosevelt Street Phoenix, Arizona 85008 3rd Floor, Board Room</p> | <p style="text-align: center;"><u>AGENDA – Formal Meeting</u></p> <p style="text-align: center;">Maricopa County Special Health Care District Board of Directors</p> <p><u>Mission Statement</u> The Valleywise Health’s mission is to provide exceptional care, without exception, every patient, every time.</p> |
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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 Request to Speak form Speaker’s Slip and deliver it to the Clerk of the Board prior to the Call to the 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 the 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 the 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 at Valleywise Health Medical Center, 2601 East Roosevelt, Phoenix, Arizona 85008 and on the internet at <https://valleywisehealth.org/about/board-of-directors/>. Accommodations for individuals with disabilities, alternative format materials, sign language interpretation, and assistive listening devices are available upon 72 hours advance notice via the Clerk’s Office, Virginia G. Piper Charitable Trust Pavilion, 2609 East Roosevelt Street, Phoenix, Arizona 85008, (602) 344-5177. To the extent possible, additional reasonable accommodations will be made available within the time constraints of the request.

• Virginia G. Piper Charitable Trust Pavilion •
• 2609 East Roosevelt Street • Phoenix, Arizona 85008 •
• 3rd Floor, Board Room •

Wednesday, January 24, 2024
1:00 p.m.

Access to the meeting room will start at 12:50 p.m., 10 minutes prior to the start of the meeting.

One or more members of the Board of Directors of the Maricopa County Special Health Care District may be in attendance by technological means. Board members attending by technological means 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.

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

1:00 **Call to Order**

Roll Call

Pledge of Allegiance

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:

- 1:15 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:**
- i. **Approve** Maricopa County Special Health Care District Board of Directors meeting minutes dated [November 21, 2023](#)
Melanie Talbot, Chief Governance Officer; and Clerk of the Board
- ii. **Approve** Maricopa County Special Health Care District Board of Directors meeting minutes dated [December 13, 2023](#)
Melanie Talbot, Chief Governance Officer; and Clerk of the Board

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

- 1:15 1. Approval of Consent Agenda, cont.:
- b. Contracts:
- i. **Approve** a new agreement ([MCO-24-002-MSA](#)) between Blue Cross and Blue Shield of Arizona, Inc, and Maricopa County Special Health Care District dba Valleywise Health, to allow members to receive dental services through Valleywise Health dental providers
Renee Clarke, MBA, Senior Vice President, Managed Care
 - ii. **Approve** addendum #7 to the contract ([90-19-192-1-07](#)) between GE Precision Healthcare LLC, a GE HealthCare Business, and Maricopa County Special Health Care District dba Valleywise Health, to add GE XR Service at Valleywise Community Health Center-Avondale from February 1, 2024 through August 31, 2024
Kelly Summers, CHCIO, Senior Vice President, Chief Information Officer
 - iii. **Approve** amendment #2 to the contract ([90-16-044-6-02](#)) between Carefusion Solutions, LLC, and Maricopa County Special Health Care District dba Valleywise Health, to add equipment for the Pyxis stations at the new acute care hospital
Michael D. White, MD, MBA, Executive Vice President, Chief Clinical Officer
 - iv. **Approve** a new grant agreement ([90-24-184-1](#)) between the Arizona Early Childhood Development and Health Board Phoenix South Regional Partnership Council, and Maricopa County Special Health Care District dba Valleywise Health, for grant funding for Family Resource Center services at the Valleywise Community Health Center-West Maryvale
Michael D. White, MD, MBA, Executive Vice President, Chief Clinical Officer
 - v. **Approve** amendment #3 to the sub-recipient agreement ([90-23-13-1-03](#)) between Arizona Association of Community Health Centers dba Arizona Alliance for Community Health Centers (AACHC), and Maricopa County Special Health Care District dba Valleywise Health, for grant funding for facility alterations and renovations at Valleywise Community Health Center-Chandler
Michael D. White, MD, MBA, Executive Vice President, Chief Clinical Officer
 - vi. **Approve** a new agreement ([90-24-189-1](#)) between Abbott Laboratories, Inc, and Maricopa County Special Health Care District dba Valleywise Health, for the Alinity i analyzer equipment, service, products, and consumables for the lab at the new acute care hospital
Jo-el Detzel, MSHA, RRT, Vice President Clinical Ancillary Services
 - vii. **Approve** amendment #1 to the intergovernmental agreement ([90-22-167-1-01](#)) between Maricopa County, Ryan White Part A Program, and Maricopa County Special Health Care District dba Valleywise Health, to increase funding and revise the scope of service
Michael D. White, MD, MBA, Executive Vice President, Chief Clinical Officer
 - viii. **Approve** amendment #4 to the contract ([90-17-083-1-04](#)) between Progressive Management Systems, and Maricopa County Special Health Care District dba Valleywise Health, to add collection services for employee contract defaults with the Sign On and Retention (SOAR) program
Lia Christiansen, MBC, Executive Vice President, Chief Administrative Officer

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

- 1:15 1. Approval of Consent Agenda, cont.:
- b. Contracts, cont.:
 - ix. **Approve** amendment #3 to the sub-recipient agreement ([90-23-14-1-03](#)) between Arizona Association of Community Health Centers dba Arizona Alliance for Community Health Centers (AACHC), and Maricopa County Special Health Care District dba Valleywise Health, for grant funding for facility renovations at Valleywise Community Health Center-Guadalupe
Michael D. White, MD, MBA, Executive Vice President, Chief Clinical Officer
 - x. **Approve** a new agreement ([90-24-196-1](#)) between Elevate Patient Financial Solutions, LLC, and Maricopa County Special Health Care District dba Valleywise Health, for revenue cycle services to include underpayment recovery, third party liability reimbursement, workers compensation, and Veterans Administration services
Claire Agnew, CPA, MBA, Executive Vice President, Chief Financial Officer
 - c. Governance:
 - i. **Approve** revisions to [policy 06503 S: HRSA Legislative Mandate Compliance Policy](#)
Michelle Barker, DHSc, Senior Vice President Ambulatory Services; and Chief Executive Officer Federally Qualified Health Centers
 - ii. **Approve** [Valleywise Health Foundation's ALL IN Campaign donor recognition requests](#)
Lisa Hartsock, MPH, CFRE, Foundation Relations Executive
 - d. Medical Staff:
 - i. **Approve** Valleywise Health's Medical Staff credentials for [December 2023](#) and [January 2024](#)
Mark M. MacElwee, MD, Chief of Staff
 - ii. **Approve** Valleywise Health's Advanced Practice Clinician/Allied Health Professional Staff credentials for [December 2023](#) and [January 2024](#)
Mark M. MacElwee, MD, Chief of Staff
 - iii. **Approve** proposed revisions to the [Certified Nurse Mid-Wife Privileges/Practice Prerogatives](#)
Mark M. MacElwee, MD, Chief of Staff
 - iv. **Approve** proposed revisions to the [Nurse Practitioner – Women's Health Privileges/Practice Prerogatives](#)
Mark M. MacElwee, MD, Chief of Staff
 - v. **Approve** proposed revisions to the [Nurse Practitioner Family & Community Medicine Privileges/Practice Prerogatives](#)
Mark M. MacElwee, MD, Chief of Staff
 - vi. **Approve** proposed revisions to the [Physician Assistant Family & Community Medicine Privileges/Practice Prerogatives](#)
Mark M. MacElwee, MD, Chief of Staff

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

- 1:15 1. Approval of Consent Agenda, cont.:
- d. Medical Staff, cont.:
 - vii. **Approve** proposed revisions to the [Department of Family & Community Medicine Privileges](#)
Mark M. MacElwee, MD, Chief of Staff
 - viii. **Approve** proposed revisions to the [Global Advanced Hand Surgery Privileges](#)
Mark M. MacElwee, MD, Chief of Staff
 - ix. **Approve** proposed revisions to the [Department of Surgery-Plastic Surgery Privileges](#)
Mark M. MacElwee, MD, Chief of Staff
 - x. **Approve** proposed revisions to the [Department of Orthopedic Surgery Privileges](#)
Mark M. MacElwee, MD, Chief of Staff
 - xi. **Approve** proposed revisions to the [Department of Surgery Privileges](#)
Mark M. MacElwee, MD, Chief of Staff
 - e. Care Reimagined Capital:
 - i. INTENTIONALLY LEFT BLANK
 - f. Capital:
 - i. INTENTIONALLY LEFT BLANK

End of Consent Agenda

- 1:30 2. Presentation on [Valleywise Health Foundation's 2024 Organizational and Budget Goals](#) 15 min
Patti Gentry, Chair, Valleywise Health Foundation Board of Directors
Nicole Rivet, President & Chief Executive Officer, Valleywise Health Foundation
- 1:45 3. Discuss and Review [Valleywise Health's Patient Experience Data and Action Plans](#) 10 min
Crystal Garcia, MBA/HCM, RN, Vice President, Specialty Services, Quality and Patient Safety
- 1:55 4. Discussion and **Possible Action** on [Valleywise Health's 2024 Legislative Agenda](#) and/or the Maricopa County Special Health Care District's position regarding proposed State and Federal legislative items 10 min
Michael Fronske, Legislative and Governmental Affairs Director
- 2:05 5. Annual [Compliance and Conflict of Interest Training and Education](#) 20 min
L.T. Slaughter, CPA, MBA, Chief Compliance Officer
- 2:25 6. Discuss and Review Valleywise Health's [November](#) and [December](#) 2023 Financials, Statistical Information and [Quarterly Investment of Funds Report](#) 15 min
Claire Agnew, CPA, MBA, Executive Vice President, Chief Financial Officer

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

- 2:40 7. Update on [Care Reimagined Projects](#) 10 min
Lia Christiansen, MBC, Executive Vice President, Chief Administrative Officer
- 2:50 8. Review and **Possible Action** on the Following Reports to the Board of Directors: 15 min
- a. Monthly Marketing and Communications Report ([November](#) and [December](#) 2023)
Runjhun Nanchal, MHA, Senior Vice President, Strategy, Marketing and Communications
 - b. Monthly Care Reimagined Capital Purchases Report ([November](#) and [December](#) 2023)
Claire Agnew, CPA, MBA, Executive Vice President, Chief Financial Officer
 - c. Monthly Valleywise Health [Employee Turnover Report \(November and December 2023\)](#)
Susan Lara-Willars, HCS, MBA, Senior Vice President, Chief Human Resources Officer
 - d. Quality Management Council Meeting Minutes ([December 2023](#))
Crystal Garcia, MBA/HCM, RN, Vice President, Specialty Services, Quality and Patient Safety
- 3:05 9. Concluding Items 10 min
- a. Old Business: - **NO HANDOUT**

November 21, 2023

Consent Agenda

Future discussion on disclosure of gifts District Board members receive

Behavioral Health Update

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

Care Reimagined Update

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

August 23, 2023

Care Reimagined Update

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

June 28, 2023

Care Reimagined Update

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

Marketing and Communications Report

Have a ceremony for the launch of the mobile health unit

May 24, 2023

April 2023 Financials

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

August 24, 2022

Monthly Update on Care Reimagined Projects

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

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

- 3:05 9. Concluding Items, cont.:
- b. Board Member Requests for Future Agenda Items or Reports - **NO HANDOUT**
 - c. Comments - **NO HANDOUT**
 - i. Chairman and Member Closing Comment
 - ii. President and Chief Executive Officer Summary of Current Events

3:15 **Adjourn**

1.a.i. Minutes - November 21, 2023

Minutes

**Maricopa County Special Health Care District
Board of Directors Meeting
Virginia G. Piper Charitable Trust Pavilion
2609 East Roosevelt Street, Phoenix, Arizona 85008
3rd Floor, Board Room
November 21, 2023, 1:00 p.m.**

DRAFT

Present: J. Woodfin Thomas, Chairman, District 4
Mark G. Dewane, Vice Chairman, District 2
Mary A. Harden, RN, Director, District 1
Kate Brophy McGee, Director, District 3
Mary Rose Garrido Wilcox, Director, District 5 – *participated remotely*

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

**Guest Presenters/
Speakers:** Michelle Barker, DHSc, Senior Vice President Ambulatory Services; and
Chief Executive Officer Federally Qualified Health Centers
L.T. Slaughter, CPA, MBA, Chief Compliance Officer
Crystal Garcia, MBA/HCM, RN, Vice President, Specialty Services, Quality
and Patient Safety
Gene Cavallo, MC, LPC, Senior Vice President, Behavioral Health Services
Martha Steiner, MSN-L, RN, Vice President, Behavioral Health Nursing and
Clinical Care
Susan Lara-Willars, HCS, MBA, Senior Vice President, Chief Human
Resources Officer

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

Call to Order:

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

Roll Call

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

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

NOTE: Director Brophy McGee arrived at 1:07 p.m.

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

Pledge of Allegiance

Chairman Thomas led the Pledge of Allegiance.

Call to the Public

Chairman Thomas called for public comment.

Dr. Barker announced the outcome of the most recent Health Resources and Services Administration (HRSA) Operational Site Visit (OSV), which was conducted in early November 2023. It was determined that Valleywise Health was compliant with all 94 elements evaluated, achieving a perfect score.

Chairman Thomas congratulated Dr. Barker and all staff involved.

Mission Statement

Vice Chairman Dewane read the mission statement aloud.

General Session, Presentation, Discussion and Action:

1. Approval of Consent Agenda:
 - a. Minutes:
 - i. Approve Maricopa County Special Health Care District Board of Directors general session meeting minutes dated October 25, 2023
 - ii. Approve Maricopa County Special Health Care District Board of Directors general session meeting minutes dated October 30, 2023
 - b. Contracts:
 - i. Approve amendment #1 to the subcontract agreement (90-23-145-1-01) between Mercy Care and the Maricopa County Special Health Care District dba Valleywise Health, for a mental health block grant for the First Episode Center
 - ii. Approve amendment #4 to the memorandum of understanding (MOU) (90-21-021-1-04) between Central Arizona Shelter Services, Inc. (CASS), and the Maricopa County Special Health Care District dba Valleywise Health, for emergency shelter beds and a healthcare navigator
 - iii. Approve amendment #1 to the agreement (90-22-249-1-01) between Vizient, Inc., and the Maricopa County Special Health Care District dba Valleywise Health, for the purchased services cost reduction engagement
 - iv. Approve a new hospital services agreement (MCO-20-040-MSA) between Cigna HealthCare of Arizona, Inc., and the Maricopa County Special Health Care District dba Valleywise Health, to allow members to continue to receive medical services through Valleywise Health facilities

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

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

1. Approval of Consent Agenda, cont.:
 - b. Contracts, cont.:
 - v. Approve amendment #2 to the facility agreement (MCO-20-003-02) between United Behavioral Health, Inc., and the Maricopa County Special Health Care District dba Valleywise Health, to allow members to continue to receive behavioral health services through Valleywise Health facilities
 - vi. Approve amendment #7 to the agreement (90-13-175-1-07) between Health Choice Arizona, and the Maricopa County Special Health Care District dba Valleywise Health, to add a new product to the agreement
 - vii. Approve amendment #8 to the contract (90-13-242-1-08) between Health Choice Arizona, and the Maricopa County Special Health Care District dba Valleywise Health, to add a new product to the contract
 - viii. Approve a new funds flow agreement (90-24-139-1) between Banner Health dba Banner University Medical Center Phoenix Campus, and the Maricopa County Special Health Care District dba Valleywise Health, for redistribution of newly generated graduate medical education funding
 - ix. Approve a new molecular master agreement (90-24-137-1) between Abbott Laboratories, Inc., and the Maricopa County Special Health Care District dba Valleywise Health, to lease the Alinity m instrument and compatible products
 - x. Approve a new agreement (MCO-20-045-MSA) between Envolve Dental, Inc., and the Maricopa County Special Health Care District dba Valleywise Health, to allow members to receive dental services through Valleywise Health dental providers
 - xi. Approve amendment #3 to the accountable care coordination agreement (MCO-20-039-03) between United Healthcare Insurance Company, and the Maricopa County Special Health Care District dba Valleywise Health, for participation in the quality incentive program
 - xii. Approve amendment #1 to the provider group services agreement (MCO-20-027-01) between Cigna HealthCare of Arizona, Inc., and the Maricopa County Special Health Care District dba Valleywise Health, to allow members to continue to receive medical services through Valleywise Health facilities
 - xiii. Approve a new consignment agreement (90-24-138-1) between MiMedx Group Inc., and the Maricopa County Special Health Care District dba Valleywise Health, for AxioFill and AmnioCord consigned products
 - c. Governance:
 - i. Approve application of Essen Otu for membership on the Valleywise Community Health Centers Governing Council
 - ii. Approve Valleywise Health's Code of Conduct and Ethics, Effective November 2023
 - iii. Approve revisions to Board Policy 99304 G - Code of Conduct and Ethics

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

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

1. Approval of Consent Agenda, cont.:

c. Governance, cont.:

- iv. Accept the Maricopa County Special Health Care District dba Valleywise Health, annual audit for fiscal year ending June 30, 2023
- v. Approve revisions to Policy 23624 D - Federally Qualified Health Centers Sliding Fee Discount Program
- vi. Approve Valleywise Health Foundation's ALL IN Campaign donor recognition requests
- vii. Approve affidavit appointing Kesley Pike, MD, as Deputy Medical Director in the Department of Psychiatry
- viii. Approve insurance premium payments and policy renewals for the following Maricopa County Special Health Care District insurance programs:
 - Professional/General Liability (COPIC, MedPro, Arch, Sompo)
 - Worker's Compensation/Employers Liability (Sentry)
 - Directors and Officers Liability (Beazley, RSUI, Berkley, RLI)
 - Crime/Fiduciary Insurance (Beazley)
 - Cyber/Privacy Liability (Beazley, Zurich)
 - Aviation Liability (ACE)
 - Environmental Liability (Ironshore)
 - Business Automobile Liability (Sentry)
- ix. Approve single case agreement for \$99,999: Cigna Claim Authorization #230560
- x. Approve patient account write-off greater than \$500,000 billed charges: Hartford Worker's Compensation Claim ID #271016

d. Medical Staff:

- i. Approve Valleywise Health's Medical Staff credentials for November 2023
- ii. Approve Valleywise Health's Advanced Practice Clinician/Allied Health Professional Staff credentials for November 2023
- iii. Approve proposed revisions to the Internal Medicine -Gastroenterology Privileges
- iv. Confirm Travis Joseph Powell, MD, (Department of OB/GYN); Paul Edwin Pugsley, MD, (Department of Emergency Medicine); Christina Marie Smarik Snyder, MD, (Department of Family and Community Medicine); and Dale Michael Stern, MD, (Department of Internal Medicine); as Physician Members at Large (January 1, 2024 – December 31, 2025)
- v. Confirm Tammalynn A Bambulas, CNM, (Department of OB/GYN); and Stacey Elizabeth Klein, ACNP (Department of Internal Medicine); as Advance Practice Clinician/Allied Health Professional Members at Large (January 1, 2024 – December 31, 2025)

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

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

1. Approval of Consent Agenda, cont.:
 - e. Care Reimagined Capital:
 - i. Approve amendment #2 to capital expenditure request (CER #19-947AQB) for additional infrastructure and installation of real time location services asset and staff tracking, and infant protection system from CenTrak for the new acute care hospital for an additional cost of \$10,591 for an aggregate total cost of \$1,597,939
 - ii. Approve amendment #1 to capital expenditure request (CER #19-947AKA) to purchase additional information technology equipment from CDW for the new acute care hospital and Piper Pavilion for an additional cost of \$507,801 for an aggregate total cost of \$1,978,251
 - iii. Approve amendment #2 to capital expenditure request (CER #19-947AOB) to purchase additional nurse call infrastructure from ECD Systems LLC., for the new acute care hospital for an additional cost of \$16,410 for an aggregate total cost of \$2,286,840
 - iv. Approve amendment #1 to capital expenditure request (CER #19-947ALA) to purchase additional Hewlett Packard endpoint devices from World Wide Technology for the new acute care hospital and Piper Pavilion for a cost of \$472,482 for an aggregate total cost of \$1,693,937
 - v. Approve amendment #6 to capital expenditure request (CER #19-947ANF) for additional cabling infrastructure from Cable Solutions for the new acute care hospital and Piper Pavilion for an additional cost of \$562,491 for an aggregate total cost of \$8,990,275
 - f. Capital:
 - i. Approve capital expenditure request (CER #24-429) to replace Cisco USC compute infrastructure nearing end of support for a cost of \$1,834,663 for fiscal year 2024

Director Harden removed item 1.c.vi. from the consent agenda to be discussed and voted on separately.

Director Brophy McGee removed items 1.c.ii. and 1.c.iii. from the consent agenda to be discussed and voted on separately.

MOTION: Director Wilcox moved to approve the consent agenda minus items 1.c.ii., 1.c.iii., and 1.c.vi. Director Harden seconded.

VOTE: 5 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee, Director Harden, Director Wilcox
0 Nays
Motion passed.

Director Harden addressed consent agenda item 1.c.vi., noting the misspelling of Dr. Herbert Johnson Louis's name in the memo.

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

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

1. Approval of Consent Agenda, cont.:

MOTION: Chairman Thomas moved to approve consent agenda item 1.c.v.i., Valleywise Health Foundation's ALL IN Campaign donor recognition requests, including the correction to Dr. Louis's name. Vice Chairman Dewane seconded.

VOTE: 5 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee, Director Harden, Director Wilcox
0 Nays
Motion passed.

MOTION: Director Brophy McGee moved to approve consent agenda item 1.c.ii., Valleywise Health's Code of Conduct and Ethics, effective November 2023, and consent agenda item 1.c.iii., revisions to Board Policy 99304 G - Code of Conduct and Ethics. Director Harden seconded.

Director Brophy McGee requested examples of the changes made to Valleywise Health's Code of Conduct and Ethics.

Mr. Slaughter said the primary change was separating the Board of Directors' Conflict of Interest policy from Valleywise Health's Code of Conduct and Ethics, and ensuring the Board of Directors were compliant with state statutes related to conflict of interests. He collaborated with the Chief Governance Officer, Board Counsel and District Counsel. The Code of Conduct and Ethics was then presented to the Finance, Audit and Compliance Committee, prior to submitting to the Board of Directors for consideration.

He outlined the revisions made, including clarifying nomenclature throughout the document.

Ms. Harris stated the Code of Conduct and Ethics now defined items allowed as gifts, delineated those items between the elected body and Valleywise Health employees, and ensured compliance with state statutes. There were also updates that reflected the current state of operations.

Director Brophy McGee commented the Legislature was responsible for the state statutes, which were the standard that the Board and Legislature were held to. She questioned if it would be appropriate to implement disclosure requirements for gifts received, to aid in further transparency, beyond what was required by statutes.

Ms. Harris said there was nothing to preclude the Board from implementing additional disclosure requirements.

Director Brophy McGee requested future agenda item to discuss additional disclosure of the gifts received by the Board members.

Chairman Thomas said he was willing to share information related to the gifts he received while serving as an elected official.

VOTE: 5 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee, Director Harden, Director Wilcox
0 Nays
Motion passed.

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

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

2. Discuss and Review the Quarterly Quality Report and Metrics Dashboard including but not limited to Patient Safety and Hospital Consumer Assessment of Healthcare Providers and Systems Results

Ms. Garcia outlined the quality results for the first quarter of fiscal year (FY) 2024, addressing the metrics that did not meet the benchmark. To address the hospital-wide inpatient, risk-adjusted mortality index, staff was working with various partners and groups to ensure the clinical documentation was accurately capturing the patient's condition upon admission.

There were various factors causing STEMI: door-to-balloon to miss the benchmark, including but not limited to a small number of cases to gather the data from and the time needed to transport patients from Valleywise Emergency-Maryvale to Valleywise Health Medical Center. Staff was reviewing how the process was managed.

Ms. Garcia addressed patient safety indicator (PSI) 06, iatrogenic pneumothorax rate, stating there was one occurrence in July 2023. The case was reviewed, and no trends were identified. PSI-04, death among surgical patients with serious treatable complications per 1,000 surgical discharges, did not meet the benchmark. Each case was individually reviewed, and no common trends were identified, however, many of the patients were placed on comfort care and ultimately passed away.

There were two perioperative hemorrhage or hematoma, PSI-09, in the first quarter. Staff continued to monitor all metrics to ensure no trends developed. She noted the improvement from prior year for PSI-12, postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT).

Director Harden said many surgical metrics did not meet the benchmark and asked how surgery department leadership was assisting to improve results.

Ms. Garcia stated the metrics were presented at the Perioperative Committee each month, with the quality analyst presenting each case to the group. Action plans were then developed to address any identified trends. She reviewed the details related to the analysis and action plans to improve PSI-14, postoperative wound dehiscence.

She reviewed the FY 2024 first quarter Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) preliminary results, which were consistent with the prior quarter results. A newly created patient experience collaborative developed a priority matrix table to determine which questions had the greatest impact to the overall score. After a recent meeting, staff would focus on answering the call light as soon as possible. Ms. Garcia reiterated the scores were based on the patient's perception of the care or service received.

She highlighted a low performing question, quiet around the room at night. She outlined several factors that may have contributed to the score and stated staff would continue to monitor and was hopeful the transition to the new acute care hospital would rectify the patient's perception.

Director Harden requested more information related to the question pertaining to the room being kept clean during the patient's stay.

Ms. Garcia stated that was a low performing question, however, it was determined that question did not have an impact on the overall score.

Director Harden noted that environmental services was outsourced many years ago and it was her expectation that the rooms be kept clean.

Ms. Garcia mentioned the HCAHPS were often delayed, and the quarterly scores did not include September 2023. The scores received for August 2023 were better than prior months and staff was hoping to maintain that momentum with the new patient experience collaborative.

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

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

2. Discuss and Review the Quarterly Quality Report and Metrics Dashboard including but not limited to Patient Safety and Hospital Consumer Assessment of Healthcare Providers and Systems Results, cont.:

A priority matrix table was also developed for the Federally Qualified Health Centers (FQHC) Net Promoter Scores (NPS), to aid staff in determining which questions would have the greatest impact on the overall score. There was a focus on the question related to providers knowing the patient's medical history.

Director Harden referenced the patient experience scores for behavioral health and asked if pet therapy was provided in the behavioral health units.

Ms. Garcia confirmed that inpatient behavioral health units were included in the pet therapy program.

3. Discuss and Review Quarterly Infection Control Metrics Dashboard

Ms. Garcia reviewed the infection control quality metrics for the first quarter of FY 2024, mentioning that all monitored metrics met the established benchmarks, including hand hygiene compliance.

Director Harden stated that she recently visited the Leapfrog website, which indicated that Valleywise Health did not meet the requirement for monitoring. She requested further information.

Ms. Garcia explained the timing and requirements for submitting the reports to Leapfrog. For the period reported on the Leapfrog website, Valleywise Health had not met the requirements, with every unit conducting at least 100 audits a quarter. A new process had been implemented to assist leaders in tracking the number of audits completed each quarter.

She highlighted the improvements related to Methicillin-resistant Staphylococcus aureus (MRSA) bacteremia infections. Staff continued to screen every patient and order decolonization, when needed, upon admission.

4. Update on Behavioral Health Programs and Services at Valleywise Health

Mr. Cavallo provided an update on behavioral health services throughout Valleywise Health, stating 80% of the licensed beds were in use, or 15 of the 18 inpatient behavioral health units. However, in mid-December 2023, Valleywise Behavioral Health-Phoenix would be operating at full capacity, due to onboarding of an additional psychiatrist.

He outlined the processes in place to manage the capacity at the different inpatient facilities, including the isolation protocols due to COVID-19, influenza, and other respiratory illnesses.

Ms. Steiner said that staff was focusing on enhancing the patient environment, including off-unit group activities. She announced that patients would be introduced to yoga in the new calendar year.

Director Harden questioned the COVID-19 testing and quarantine process.

Dr. White said the practices implemented made the inpatient environment as safe as possible. He outlined the testing and isolation protocol for the units, noting every patient was tested for COVID-19 upon admission.

Director Harden asked if COVID-19 and influenza vaccinations were offered to patients.

Ms. Steiner stated that patients were offered vaccinations during the nursing admission assessment.

Mr. Cavallo reviewed a three-year comparison of behavioral health inpatient volumes, noting the increased length of stay, currently 24.6 days, impacted the ability to admit new patients. Staff was working to improve the discharge process.

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

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

4. Update on Behavioral Health Programs and Services at Valleywise Health, cont.

Director Brophy McGee asked where patients were discharged to.

Mr. Cavallo said that patients were discharged to a variety of places, including other psychiatric hospitals, residential treatment centers, skilled nursing facilities, or to their home.

Ms. Steiner discussed behavioral health employee retention and turnover, highlighting a net gain of 12 registered nurses (RNs) and 60 behavioral health technicians (BHTs) over the past 12 months. In the first quarter of FY 2024, there was a net gain of 60 RNs and BHTs.

Due to the various efforts, the number of RN vacancies had dropped to 18 in September 2023, down from 47 vacancies in August 2023. One contributing factor to the reduction was the Grow Your Own program. To address the BHT shortage, staff was considering the development of a BHT specialty pool position, expanding the BHT clinical ladder, and increasing contract labor.

Ms. Steiner reviewed the capacity management and throughput plan, which included constant review of bed capacity, anticipated discharges, expected admissions, staffing challenges and the identification of strategies to improve all components.

She provided an overview of ongoing challenges, including staffing shortages throughout the healthcare industry, which contributes to not being able to admit more patients. She highlighted the success of the Sign On and Retention (SOAR) program, resulting in more experienced RNs joining the workforce.

Mr. Cavallo provided an overview of the outpatient behavioral health programs, including the Assertive Community Treatment (ACT) program. A recent article in *The Arizona Republic* detailed the importance of the program, a nationwide program that aimed to educate individuals with serious mental illnesses how to manage their lives successfully.

Mr. Purves stated that Valleywise Health's ACT team was the highest rated program in Arizona.

Mr. Cavallo added that the program also received 95.36% in a recent Mercy Care audit, the highest score ever.

The First Episode Center now had two locations; Avondale and Mesa. The primary referral source for the First Episode Centers were the inpatient behavioral health units.

Volumes within the Mesa Behavioral Health Specialty Clinic, which operated out of Valleywise Community Health Center-Mesa, continued to grow.

The Integrated Behavioral Health program continued to expand and there were now over 45 team members. Mr. Cavallo mentioned the program had unlimited growth potential.

Director Brophy McGee mentioned partnership opportunities with the Department of Child Safety, specifically with families whose children had been involved with, or were at risk of, being removed from their home. She believed the integration of primary care and behavioral health would be very beneficial and she noted that Valleywise Health was the organization to provide those services.

Mr. Cavallo stated that the primary goal in all behavioral health programs was early identification, diagnosis, and intervention. He stated Valleywise Health had received a grant related to Medication Assisted Treatment (MAT). The purpose was to provide prevention, treatment and recovery assistance to at-risk individuals battling Opioid Use Disorder (OUD).

Director Brophy McGee asked if Valleywise Health used methadone.

**Maricopa County Special Health Care District Board of Directors
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General Session, Presentation, Discussion and Action, cont.:

4. Update on Behavioral Health Programs and Services at Valleywise Health, cont.

Mr. Cavallo said methadone was not used in the outpatient setting, however, if a patient was admitted while undergoing methadone treatment, that treatment would continue.

He reviewed future behavioral health projects, including the expansion of outpatient behavioral health services at Valleywise Behavioral Health Centers-Mesa and Maryvale, utilizing American Rescue Plan Act (ARPA) grant funding.

Director Wilcox referenced the future behavioral health projects and asked if the Maricopa County Board of Supervisors had been updated on the progress of the various projects.

Mr. Cavallo stated that Maricopa County Assistant County Manager, Ms. Lee Ann Bohn, received regular updates related to the ongoing projects. He was also a member of the Mental Health Steering Committee and provided updates.

Director Wilcox requested that a letter or presentation outlining the progress be drafted and provided to the Maricopa County Board of Supervisors.

MOTION: Director Harden moved to recess general session and convene in executive session at 2:07 p.m. Vice Chairman Dewane seconded.

VOTE: 5 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee,
Director Harden, Director Wilcox
0 Nays
Motion passed.

General Session, Presentation, Discussion and Action

Chairman Thomas convened general session at 2:53 p.m.

Chairman Thomas announced that agenda items 8, 9 and 10 would be discussed after agenda item 5.

5. Discuss, Review and Approve Statements of Work for the Master Services Agreement between the Maricopa County Special Health Care District dba Valleywise Health, and District Medical Group

MOTION: Director Wilcox moved to approve the Statements of Work for the Master Services Agreement between the Maricopa County Special Health Care District dba Valleywise Health, and District Medical Group. Vice Chairman Dewane seconded.

VOTE: 4 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee,
Director Wilcox
1 Nay: Director Harden
Motion passed.

**Maricopa County Special Health Care District Board of Directors
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General Session, Presentation, Discussion and Action, cont.:

8. Consideration, Discussion and Possible Action on the Performance Evaluation for Melanie Talbot, Maricopa County Special Health Care District's Chief Governance Officer and Clerk of the Board, for Fiscal Year 2023

MOTION: Director Harden moved that based on the Board's review of Melanie Talbot's performance for the 2023 fiscal year, the Board had determined that she exceeded expectations. Vice Chairman Dewane seconded.

VOTE: 5 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee,
Director Harden, Director Wilcox
0 Nays
Motion passed.

9. Consideration, Discussion, and Possible Action on the Performance Evaluation and Attainment of Performance Goals for Steve Purves, Valleywise Health's President & Chief Executive Officer, for Fiscal Year 2023

MOTION: Director Wilcox moved that based on the Board's review of Mr. Purves's performance for the 2023 fiscal year, the Board had determined he exceeded expectations. The Board also determined that he met minimum target set by the Board for the quality and safety goal, and for part two of the patient experience goal, and met the midpoint target set by the Board for the people engagement goal, and met the maximum target set by the Board for the learning environment goal. After excluding an unexpected \$11.9 million Arizona State Retirement System (ASRS) year-end adjustment beyond Valleywise Health's control, the Board has determined that he met the maximum target set by the Board for the financial performance goal. Vice Chairman Dewane seconded.

Director Brophy McGee stated that she met with Mr. Purves in private and he was aware of her decision.

Director Harden commented that while she agreed with the outcome of many of the goals, she disagreed with result for people engagement and the Board discretionary goal.

VOTE: 3 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Wilcox
1 Nay: Director Brophy McGee
1 Abstain: Director Harden
Motion passed.

10. Election of Officers for the Board of Directors

MOTION: Director Harden moved to approve the appointment of J. Woodfin Thomas as Chair effective December 1, 2023. Vice Chairman Dewane seconded.

VOTE: 5 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee,
Director Harden, Director Wilcox
0 Nays
Motion passed.

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

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

10. Election of Officers for the Board of Directors, cont.

MOTION: Director Harden moved to approve the appointment of Mark Dewane as Vice Chair effective December 1, 2023. Director Brophy McGee seconded.

VOTE: 5 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee,
Director Harden, Director Wilcox
0 Nays
Motion passed.

NOTE: Director Wilcox exited the meeting at 3:04 p.m.

6. Discuss and Review Valleywise Health's October 2023 Financials and Statistical Information

Ms. Agnew reviewed the statistical information for October 2023. Total admissions were five percent better than budget, and emergency department visits were 7.3% better than budget.

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

Dr. White explained that more patients were seeking primary care in the emergency department setting and the increase was not attributed to respiratory viruses.

Ms. Agnew said ambulatory visits were 5.6% better than budget. On a year-to-date basis, total admissions missed budget by 2.6%, emergency department visits were 6.1% better than budget, and ambulatory visits were 3.7% better than budget.

She discussed the payer mix, noting the increases in uninsured and other government categories. The shifts in payer mix were partly attributed to the increase in emergency department visits. Many of those patients were uninsured and undocumented, therefore were not eligible for the state's Medicaid program, Arizona Health Care Cost Containment System (AHCCCS). However, those patients were able to utilize Federal Emergency Services (FES). Unfortunately, FES could not be applied to the ongoing medical care, as the care was no longer emergent.

Another contributing factor was the ongoing disenrollment from AHCCCS. Financial counselors assisted patients with the reenrollment process or with seeking other coverage options.

The October 2023 financial statement was reviewed. Despite significant volumes throughout the system, net patient service revenue was only 0.2% better than budget, due to the payer mix. Other revenue was 16.2% better than budget, due to the 340B program, retail pharmacy and grant foundation revenues.

Total operating expenses had a 0.2% negative variance. Contributing factors included increased expenses within salaries and wages due to more employed individuals, and distribution of payment for the SOAR program. There was a 2.1% positive variance in contract labor expenses.

Director Harden asked if staff was attempting to convert contract labor RNs to core staff.

Ms. Stotler confirmed that efforts were made and had yielded positive results.

Ms. Agnew highlighted the 59.1% positive variance for medical service fees. She explained the variance was due to an AHCCCS direct payment program to District Medical Group (DMG), offsetting Valleywise Health's fees. It would not be a recurring payment. The negative variance in supplies was attributed to pharmaceutical and surgery supply costs.

**Maricopa County Special Health Care District Board of Directors
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General Session, Presentation, Discussion and Action, cont.:

6. Discuss and Review Valleywise Health's October 2023 Financials and Statistical Information, cont.

She reviewed non-operating revenue and expenses, specifically grant funding to offset the SOAR expenses and investment income. Total non-operating revenue had an 8.2% positive variance.

Net assets, after factoring in non-operating revenue and expenses, and removing bond related activity, decreased by \$4,529,376, compared to a budgeted decrease of \$7,745,904, resulting in a positive variance of \$3,216,528.

Vice Chairman Dewane recalled he and staff met with the Maricopa County Treasurer to discuss adjusting the investment portfolio. He asked if there was a migration in the investment yield.

Ms. Agnew confirmed the investment yield had improved.

Ms. Agnew reviewed the year-to-date income statement, noting total operating revenues were three percent better than budget, however, total operating expenses had a 1.3% negative variance. Net assets, after factoring in non-operating revenue and expenses, and removing bond related activity, decreased by \$22,556,400, compared to a budgeted decrease of \$23,672,271, resulting in a positive variance of \$1,115,871. There were 89.8 days of cash on hand and 73.2 days in accounts receivable.

7. Update on Care Reimagined Projects

Ms. Christiansen provided an update on the Care Reimagined projects, highlighting approximately 14,173,316 accumulative manhours had been dedicated to the various projects. There were no changes to the program dashboard, which provided an overview of concerns.

She reviewed the construction progress of the new acute care hospital, noting the construction was 98% complete, while the overall project was 88% complete. She showcased photos of the current state, including the installation of medical equipment and preparations for patient move activities.

Director Harden asked if there were plans in place if it were raining on the day the patients were moved to the new acute hospital.

Ms. Christiansen stated that there were many contingency plans in place to ensure a smooth transition. She discussed the high-level patient move schedule, noting preparation for department relocation had already begun. The scheduled Day in the Life activities were designed to practice the patient move with various scenarios and solve any problems that were identified.

The patient move schedule was reviewed and she mentioned that there would soon be a volunteer sign-up portal available.

Director Harden asked if the Day in the Life activities would begin at the same time as the patient move schedule, which was 3:00 a.m.

Ms. Christiansen stated the Day in the Life activities were scheduled to begin at 6:00 a.m., however, beginning at 3:00 a.m. may be beneficial. Staff was also monitoring emergency department statistics by hour, to anticipate patient activity on the day of the move.

She outlined the various activities scheduled for the next two months, including the receipt of equipment at an off-site warehouse and the installation of laboratory automation lines to activate the clinical laboratory.

Director Harden asked when the Conference and Administration Center was scheduled to close.

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

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

7. Update on Care Reimagined Projects, cont.

Ms. Christiansen said the closing of the building was not yet scheduled, as there were still employees working out of that building, including DMG providers and support staff. The physician offices on the fifth floor of the Virginia G. Piper Charitable Trust Pavilion (Piper Pavilion) were nearly completed, with the move-in date anticipated for February or March 2024. **As soon as a date was determined, the information would be provided to the Board.**

Director Brophy McGee mentioned the complexity surrounding licensing and asked what was needed to obtain final sign-off.

Ms. Christiansen agreed that the process was complex. The scheduled opening date was April 11, 2024, and staff had commitments from those responsible, including Vanir Management and Kitchell Construction, to meet that date. There was also ongoing work with the Maricopa County inspector that was on site daily, to address any barriers that may impact that date.

Director Brophy McGee asked if there was a change to the architect's responsibility.

Ms. Christiansen explained the architect signed off on the packet submitted for licensure, affirming the building had been built to the specifications as designed and should function as designed.

11. Review and Possible Action on the Following Reports to the Board of Directors:

- a. Monthly Marketing and Communications Report (October 2023)
- b. Monthly Care Reimagined Capital Purchases Report (October 2023)
- c. Monthly Valleywise Health Employee Turnover Report (October 2023)
- d. Quality Management Council Meeting Minutes (October 2023)
- e. Quarterly Compliance Officer's Activities Report; Annual System-Wide Compliance Education Results; Valleywise Health's Finance, Audit and Compliance Committee Activities Report
- f. Quarterly Valleywise Health Foundation's Report to Valleywise Health's President & Chief Executive Officer
- g. Valleywise Health Community Health Needs Assessment Report for 2023-2025

Director Harden addressed item 11.c., Valleywise Health Employee Turnover Report, and questioned when the ADP conversion would be completed.

Ms. Lara-Willars said the ADP conversion was scheduled to be completed on December 20, 2023.

12. Concluding Items

- a. Old Business:

August 23, 2023

Care Reimagined

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

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – November 21, 2023**

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

12. Concluding Items, cont.

a. Old Business, cont.:

June 28, 2023

Care Reimagined Update

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

Marketing and Communications Report

Have a ceremony for the launch of the mobile health unit

May 24, 2023

April 2023 Financials

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

August 24, 2022

Monthly Update on Care Reimagined Projects

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

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

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

Dr. Barker addressed the old business from June 28, 2023, related to holding a ceremony to launch the mobile health unit. She announced that a driver for the unit had been hired and staff was in the process of obtaining licensing. The mobile health unit was anticipated to be operational in early January 2024.

Chairman Thomas said he attending the tagline unveiling event, which was well attended. The Valleywise Health tagline was “You’re More to Us”.

Mr. Purves mentioned that Board approved the annual audit through the consent agenda. He expressed his appreciation to the Ms. Agnew and the finance team for their work in compiling the information. He also thanked the volunteer members of the Finance, Audit and Compliance Committee for their oversight.

He announced that Ms. Amanda De Los Reyes contributed to an article that recently appeared on the news website *Axios*, highlighting issues with Medicaid redetermination process.

The Valleywise Health Foundation was set to host the dedication of the Piper Pavilion on Thursday, November 30, 2023.

**Maricopa County Special Health Care District Board of Directors
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Adjourn

MOTION: Director Harden moved to adjourn the November 21, 2023, Maricopa County Special Health Care District Board of Directors Formal and Executive Session meeting. Vice Chairman Dewane seconded.

VOTE: 4 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee,
Director Harden
0 Nays
1 Absent: Director Wilcox
Motion passed.

Meeting adjourned at 3:48 p.m.

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

1.a.ii. Minutes - December 13, 2023

Minutes

DRAFT

Maricopa County Special Health Care District
Board of Directors Meeting
Virginia G. Piper Charitable Trust Pavilion
2609 East Roosevelt Street, Phoenix, Arizona 85008
3rd Floor, Board Room
December 13, 2023, 2:00 p.m.

Present: J. Woodfin Thomas, Chairman, District 4 – *participated remotely*
Mark G. Dewane, Vice Chairman, District 2 – *participated remotely*
Mary A. Harden, RN, Director, District 1 – *participated remotely*
Kate Brophy McGee, Director, District 3 – *participated remotely*
Mary Rose Garrido Wilcox, Director, District 5 – *participated remotely*

Others Present: Steve A. Purves, FACHE, President & Chief Executive Officer
Michael D. White, MD, MBA, Executive Vice President, Chief Clinical Officer
Claire Agnew, CPA, MBA, Executive Vice President, Chief Financial Officer
– *participated remotely*
Lia Christiansen, MBC, Executive Vice President, Chief Administrative
Officer
Sherry Stotler, RN, MSN, Senior Vice President, Chief Nursing Officer
Ijana M. Harris, JD, Senior Vice President, General Counsel
William J. Sims, JD, Sims Mackin, Ltd., Board Counsel – *participated remotely*
Christopher Melton, Director, Contracts and Procurement – *participated remotely*

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

Call to Order:

Chairman Thomas called the meeting to order at 2:02 p.m.

Roll Call

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

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

Call to the Public

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

General Session, Presentation, Discussion and Action:

1. Approval of Consent Agenda
 - a. Governance:
 - i. Approve affidavit appointing Kathryn Vargas, MD and Curtis McKnight, MD, as Deputy Medical Directors in the Department of Psychiatry

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – December 13, 2023**

General Session, Presentation, Discussion and Action:

1. Approval of Consent Agenda
 - a. Governance, cont.:
 - ii. Approve Valleywise Health Foundation’s ALL IN Campaign donor recognition requests
 - iii. Approve a no objection letter to the proposed property tax reclassification of real and personal property of FUNKO LLC, to the proposed foreign trade zone (FTZ) user driven site – FTZ No. 277
 - b. Care Reimagined Capital:
 - i. Approve amendment #1 to the agreement (480-90-18-011-1-01) between Lovitt & Touche, Inc., and the Maricopa County Special Health Care District dba Valleywise Health, to extend the agreement for Valleywise Health’s Care Reimagined Project Owner Controlled Insurance Program (OCIP) coverage (CER #19-934 Project A21039)
 - ii. Approve amendment #1 to capital expenditure request (CER #19-947AA) to purchase additional booms and lights from Steris Corporation for the acute care hospital, for an additional cost of \$82,133 for an aggregate total cost of \$3,335,743
 - iii. Approve amendment #1 to capital expenditure request (CER #19-947ATA) to purchase interior signage from Smithcraft Signs for the Piper Pavilion for an additional cost of \$11,986 for an aggregate total cost of \$2,154,120
 - iv. Approve amendment #3 to capital expenditure request (CER #19-947TC) for SIRVA Worldwide Commercial Moving to provide IT equipment delivery and handling services for the new acute care hospital for an additional cost of \$168,019 for an aggregate total cost of \$897,436
 - v. Approve amendment #65 to the contract (480-90-18-012-65) between Kitchell Contractors, Inc. of Arizona, Construction Manager at Risk (CMAR) and the Maricopa County Special Health Care District dba Valleywise Health, for prime contract change order (PCCO) number 022 including potential change orders (PCO) 225, 232-240 and 242, for the new acute care hospital for \$276,628 (CER #19-947; Project A1440)
 - vi. Approve amendment #7 to programming agreement (90-17-041-1-07) between Vanir Construction Management, Inc., and the Maricopa County Special Health Care District dba Valleywise Health, for Integrated Program Management services for the Proposition 480 program, Authorize Valleywise Health’s Director of Contracts and Procurement to execute the amendment

Director Brophy McGee removed items 1.b.v. and 1.b.vi. from the consent agenda to be discussed and voted on separately.

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – December 13, 2023**

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

1. Approval of Consent Agenda, cont.

MOTION: Director Harden moved to approve the consent agenda minus 1.b.v. and 1.b.vi. Director Wilcox seconded.

VOTE: 4 Ayes: Chairman Thomas, Director Brophy McGee, Director Harden, Director Wilcox
0 Nays
1 Absent: Vice Chairman Dewane
Motion passed.

Director Brophy McGee addressed consent agenda item 1.b.v., amendment #65 to the contract between Kitchell Contractors, Inc. of Arizona and the Maricopa County Special Health Care District dba Valleywise Health. The amendment referenced primary contract change orders (PCCOs) and she asked if those change orders were included in, or were in addition to, the list of change orders provided to the Board.

Ms. Christiansen explained that the document with the list of change orders should capture all change orders, however, she would review the document to confirm the PCCOs were included in that information.

Director Harden asked if the PCCOs were due to the Maricopa County Inspector recommendations.

Ms. Christiansen stated that some change orders were related to the Maricopa County Inspector's requests, including code requirements. Other changes were more preferential in nature.

She requested clarification related to the originating question, which was to ascertain if the PCCOs were captured within the ongoing change order list provided to the Board.

Director Brophy McGee explained that the list contained various categories for the reason for the change orders, however, there was not a specific category for PCCOs. She restated the question, asking if the PCCOs were in addition to the change orders listed within that document.

Ms. Christiansen provided an overview of the change order process and how the change orders were categorized. She stated the items included in the amendment were in the change order document.

Director Brophy McGee asked if the PCCOs were encompassed in another category for the reason for change. She requested input from the attorneys regarding inconsistent language within the amendment.

Mr. Sims acknowledged the inconsistencies within the amendment, however, he stated those could be corrected at the time of a change order, prior to being presented to the Board.

Ms. Harris concurred and stated that she reviewed all contract amendments closely with Ms. Christiansen and outside construction attorneys to ensure appropriate language was included.

MOTION: Director Wilcox moved to approve consent agenda item 1.b.v., amendment #65 to the contract (480-90-18-012-65) between Kitchell Contractors, Inc. of Arizona, Construction Manager at Risk (CMAR) and the Maricopa County Special Health Care District dba Valleywise Health, for prime contract change order (PCCO) number 022 including potential change orders (PCO) 225, 232-240 and 242, for the new acute care hospital for \$276,628 (CER #19-947; Project A1440) . Director Harden seconded.

VOTE: 3 Ayes: Chairman Thomas, Director Harden, Director Wilcox
1 Nay: Director Brophy McGee
1 Absent: Vice Chairman Dewane
Motion passed.

**Maricopa County Special Health Care District Board of Directors
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General Session, Presentation, Discussion and Action, cont.:

1. Approval of Consent Agenda, cont.

Director Brophy McGee said that she was beginning to understand the change order process, however, she continued to have concerns with how the process was regulated and monitored.

She addressed consent agenda item 1.b.vi., amendment #7 to programming agreement between Vanir Construction Management, Inc. (Vanir), and the Maricopa County Special Health Care District dba Valleywise Health, to extend the agreement by twelve months, at no additional costs. She asked why the extension was for twelve months.

Ms. Christiansen said the extension to the agreement aligned with Vanir's staffing plan for the Care Reimagined projects, which was funded through February 2025. The additional contract period would provide construction management through the opening of the new acute care hospital and possibly begin the demolition planning. If Vanir's services were not needed through that time, Valleywise Health may give notice and withdraw.

MOTION: Director Brophy McGee moved to approve amendment #7 to the programming agreement between Vanir Construction Management, Inc. and the Maricopa County Special Health Care District dba Valleywise Health, to extend the completion date by twelve months, from February 29, 2024 to February 28, 2025, and further moved that any cost or change to the Vanir contract extension be approved by the Board prior to any action occurring. Director Harden seconded.

Director Wilcox asked if any additional amendments would automatically require Board approval.

Ms. Christiansen said that any amendment to the Vanir contract would be presented to the Board.

Director Wilcox said all future amendments would be presented to the Board and asked Director Brophy McGee if the additional language within the motion was necessary.

Director Brophy McGee stated that she wanted the language to be explicit in the motion.

Mr. Sims asked Director Brophy McGee if the intent of the motion was to have all expenditures and changes presented for Board approval, or only expenditures that exceeded the Mr. Purves's authority for the Care Reimagined project, \$499,999.

Director Brophy McGee said the intent of the motion was for all expenditures and changes to the specific contract require Board for approval.

Mr. Sims explained that the motion would deviate from the current practice of presenting only expenditures that exceeded the Mr. Purves's authority.

Director Wilcox expressed concern with changing practices without prior discussion, as it could create delays and additional work for staff.

Mr. Purves requested an explanation of the Approval, Authorization and Responsibility Matrix (Authority Matrix), specifically Section XII. Proposition 480 Projects.

Ms. Talbot stated that according to the Authority Matrix, Section XII, subsection C. Contracts, any new contracts and any amendments to previously approved contracts \$100,000 - \$499,999 in annual aggregate amount was within Mr. Purves's authority, with notice to the Board.

NOTE: Vice Chairman Dewane joined the meeting at 2:27 p.m.

**Maricopa County Special Health Care District Board of Directors
Meeting Minutes – General Session – December 13, 2023**

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

1. Approval of Consent Agenda, cont.

Mr. Purves said that the total contract amount with Vanir had exceeded that threshold, therefore, any amendments would require Board approval.

Mr. Sims clarified that if the annual aggregate amount was more than \$499,999, Board approval was required.

Ms. Harris added that the term of the contract extended past five years, which was another mechanism that would warrant the Board to approve all future amendments.

Mr. Melton confirmed that annual aggregate amounts determined which contracts and amendments required Board approval. Due to the value of the Vanir, all subsequent amendments would require Board approval.

Chairman Thomas asked if the language in the motion was specific to the Vanir contract, not all contracts pertaining to the Care Reimagined project.

Director Brophy McGee said that the motion language was specific to the Vanir contract. She reiterated that the intent was for any changes, particular to costs, were presented to the Board prior to moving forward, to increase transparency.

Director Wilcox understood the importance of the contract extension; however, she was concerned with altering established processes. She recommended that the Board discuss such matters prior to taking actions that affect policies.

Vice Chairman Dewane stated that he did not have enough information to vote on the item and would abstain.

VOTE: 4 Ayes: Chairman Thomas, Director Brophy McGee, Director Harden, Director Wilcox
0 Nays:
1 Abstain: Vice Chairman Dewane
Motion passed.

Adjourn

MOTION: Director Harden moved to adjourn the December 13, 2023, Maricopa County Special Health Care District Board of Directors Meeting. Director Wilcox seconded.

VOTE: 5 Ayes: Chairman Thomas, Vice Chairman Dewane, Director Brophy McGee,
Director Harden, Director Wilcox
0 Nays
Motion passed.

Meeting adjourned at 2:41 p.m.

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

1.b.i. Contracts - MCO-24-002-MSA

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Monday, January 8, 2024 8:29 AM
To: Melanie Talbot
Subject: Contract Approval Request: Blue Cross and Blue Shield of Arizona, Inc. Dental Agreement Blue Cross/Blue Shield of Arizona, Inc.

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

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


Message Information

From [Purves, Stephen](#)
To [Talbot, Melanie](#);
Subject Contract Approval Request: Blue Cross and Blue Shield of Arizona, Inc. Dental Agreement Blue Cross/Blue Shield of Arizona, Inc.
Additional Information Indicate whether you approve or reject by clicking the Approve or Reject button below.

Approve/Reject Contract

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

Attachments

| Name | Description | Type | Current File / URL |
|--|-------------|----------|--|
| Blue Cross and Blue Shield of Arizona, Inc. Dental Agreement | | Contract |  MCO-24-002-MSA Blue Cross Blue Shield AZ _Pending Signature.docx |

Contract Information

Division Contracts Division
Folder Contracts \ Managed Care/Revenue
Status Pending Approval
Title Blue Cross and Blue Shield of Arizona, Inc. Dental Agreement
Contract Identifier Board - New Contract
Contract Number MCO-24-002-MSA
Primary Responsible Party Orozco, Stephanie A.
Departments
Product/Service Description Commercial and Medicare Advantage lines of business
Action/Background Approve a new agreement (MCO-24-002-MSA) between Blue Cross and Blue Shield of Arizona, Inc. and Maricopa County Special Health Care District dba Valleywise Health, for the provision of comprehensive dental services.

Evaluation Process This is a new agreement (MCO-24-002-MSA) between Blue Cross and Blue Shield of Arizona, Inc. and Maricopa County Special Health Care District dba Valleywise Health. This agreement will allow members to receive comprehensive dental services through Valleywise Health dental providers. This agreement excludes retail pharmacy and medical or behavioral health services which are covered through a relationship with a separate entity or agreement.

Category Other

Effective Date 3/1/2024

Term End Date 2/28/2025

Annual Value \$0.00

Expense/Revenue Revenue

Budgeted Travel Type N/A

Procurement Number

Primary Vendor Blue Cross/Blue Shield of Arizona, Inc.

Responses

| Member Name | Status | Comments |
|--------------------|----------|----------|
| Tucker, Collee K. | Approved | |
| Clarke, Tina R. | Approved | |
| Harris, Ijana M. | Approved | |
| Agnew, Claire F. | Approved | |
| Purves, Stephen A. | Approved | |
| Talbot, Melanie L. | Current | |

1.b.ii. Contracts - 90-19-192-1-07

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Tuesday, January 9, 2024 9:36 AM
To: Melanie Talbot
Subject: Contract Approval Request: Addendum #7 - Avondale GE XR Service (Quote 4176237) GE Precision Healthcare LLC, a GE Healthcare business

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

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Message Information

From [Purves, Stephen](#)
To [Talbot, Melanie](#);
Subject Contract Approval Request: Addendum #7 - Avondale GE XR Service (Quote 4176237) GE Precision Healthcare LLC, a GE Healthcare business
Additional Information Indicate whether you approve or reject by clicking the Approve or Reject Information button below.

Approve/Reject Contract

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

Attachments

| Name | Description | Type | Current File / URL |
|---------------------------------------|-------------|------|---|
| RFBA | | File |  RFBA - GE Addendum 7.pdf |
| GE Addendum - pending Board signature | | File |  GE - VALLEYWISE - AVONDALE - 623VWAVN656 add addendum v3- quote expires 2.16.24.pdf |
| OIG - GE Healthcare 2024 | | File |  OIG - GE Healthcare 2024.pdf |
| SAM - GE Healthcare 2024 | | File |  SAM - GE Healthcare 2024.pdf |

Contract Information

Division Contracts Division
Folder Amendments
Status Pending Approval
Title Addendum #7 - Avondale GE XR Service (Quote 4176237)
Contract Identifier Board - Amendment
Contract Number 90-19-192-1-07
Primary Responsible Party Tymczyna, Katherine
Departments Health Technology Management
Product/Service Addendum #7 - Avondale Service - GE XR (Quote 4176237) Contract 1-
Description 465149605376

Action/Background Approve Addendum #7 to the agreement between GE Precision Healthcare LLC, a GE Healthcare business, and Maricopa County Special Health Care District dba Valleywise Health to add GE XR Service at the Valleywise Health Avondale Campus, from February 1, 2024 through August 31, 2024.

All other terms and conditions of the contract remain the same and in full effect. The anticipated annual expense of this addendum is \$22,357.41; for a total contract annual spend of \$1,167,730.41 and is budgeted for operational expenditures from the HTM department and is sponsored by Kelly Summers, Sr. VP & 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.

Category Other

Effective Date 2/1/2024

Term End Date 8/31/2024

Annual Value \$22,357.41

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor GE Precision Healthcare LLC, a GE Healthcare business

Responses

| Member Name | Status | Comments |
|------------------------|----------|-----------------------|
| Pardo, Laela N. | Approved | Reviewed and approve. |
| Melton, Christopher C. | Approved | |
| Pardo, Sean P. | Approved | |
| Summers, Kelly R. | Approved | |
| Harris, Ijana M. | Approved | |
| Christiansen, Lia K. | Approved | |
| Agnew, Claire F. | Approved | |
| Purves, Stephen A. | Approved | |
| Talbot, Melanie L. | Current | |

**1.b.iii. Contracts -
90-16-044-6-02**

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Tuesday, January 9, 2024 9:43 AM
To: Melanie Talbot
Subject: Contract Approval Request: Amendment #2 - Add Equipment for New ACH Carefusion Solutions, LLC

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

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




Message Information

From [Purves, Stephen](#)
To [Talbot, Melanie](#);
Subject Contract Approval Request: Amendment #2 - Add Equipment for New ACH Carefusion Solutions, LLC
Additional Information Indicate whether you approve or reject by clicking the Approve or Reject button below.

Approve/Reject Contract

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

Attachments

| Name | Description | Type | Current File / URL |
|-------------------------------|-------------|------|---|
| 90-16-044-6-02 (unsigned).pdf | | File |  90-16-044-6-02 (unsigned).pdf |
| OIG Carefusion 2024.pdf | | File |  OIG Carefusion 2024.pdf |
| SAM Carefusion 2024.pdf | | File |  SAM Carefusion 2024.pdf |

Contract Information

Division Contracts Division
Folder Amendments
Status Pending Approval
Title Amendment #2 - Add Equipment for New ACH
Contract Identifier Board - Amendment
Contract Number 90-16-044-6-02
Primary Responsible Party Pardo, Laela N.
Departments OFFICE OF THE CIO,PHARMACY - HOSPITAL
Product/Service Description Amendment #2 - Add Equipment for New ACH
Action/Background Approve Amendment #2 to Customer Order 1000196333 between Carefusion Solutions, LLC and Maricopa County Special Health Care District dba Valleywise Health for the new ACH. This amendment will add equipment for the Pyxis stations at the new hospital. Effective upon signatures, this

additional equipment will increase the rental fee by \$570.00/month and support by \$175.00/month. The annual increase is \$8,940.00 for an aggregate contract cost of \$1,241,434.00 which is budgeted for operational expenditures by the Pharmacy (rental) and IT (support) departments. All other terms and conditions remain the same and in full effect.

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

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

Category GPO

Effective Date

Term End Date

Annual Value \$8,940.00

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor Carefusion Solutions, LLC

Responses

| Member Name | Status | Comments |
|------------------------|----------|----------|
| Melton, Christopher C. | Approved | |
| Wynn, Diane J. | Approved | |
| Vo, Alba M. | Approved | |
| Detzel, Jo-El M. | Approved | |
| Harris, Ijana M. | Approved | |
| White, Michael | Approved | |
| Agnew, Claire F. | Approved | |
| Purves, Stephen A. | Approved | |
| Talbot, Melanie L. | Current | |

1.b.iv. Contracts - 90-24-184-1

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Tuesday, January 9, 2024 10:58 AM
To: Melanie Talbot
Subject: Contract Approval Request: Phoenix South Region - Maryvale (GRA-RC033-24-1280-01) First Things First AZ Early Childhood Development & Health Board

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Message Information

From [Purves, Stephen](#)
To [Talbot, Melanie](#);
Subject Contract Approval Request: Phoenix South Region - Maryvale (GRA-RC033-24-1280-01) First Things First AZ Early Childhood Development & Health Board
Additional Information Indicate whether you approve or reject by clicking the Approve or Reject button below.

Approve/Reject Contract

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

Attachments

| Name | Description | Type | Current File / URL |
|---|-------------|------|---|
| RFBA | | File |  RFBA.pdf |
| FTF Agreement - pending Board signature | | File |  FTF - SFY24 Valleywise FRC GRA-RC033-24-1280-01.pdf |
| FTF - Meeting Minutes | | File |  FTF - Meeting minutes 10-12-2023_PHXS_Attachments.pdf |
| OIG - First Things First 2024 | | File |  OIG - First Things First 2024.pdf |
| SAM - First Things First 2024 | | File |  SAM - First Things First 2024.pdf |

Contract Information

Division Contracts Division
Folder Contracts \ Grants
Status Pending Approval
Title Phoenix South Region - Maryvale (GRA-RC033-24-1280-01)
Contract Identifier Board - New Contract
Contract Number 90-24-184-1
Primary Responsible Party Tymczyna, Katherine

Departments GRANTS ADMINISTRATION

Product/Service Description Phoenix South Region - Maryvale (GRA-RC033-24-1280-01)

Action/Background Approve a new agreement between the Arizona Early Childhood Development and Health Board Phoenix South (Maryvale) Regional Partnership Council (First Things First - GRA-RC033-24-1280-01) and Maricopa County Special Health Care District dba Valleywise Health for grant funding to provide families with children birth to age 5 in the Phoenix South Region with welcoming, safe and accessible community hubs that offer flexible, multi-generational, family focused and culturally responsive information, resources and services covering a wide range of topics. The term of the Agreement is January 1, 2024 through June 30, 2024. The parties may renew this Agreement for up to three (3) additional twelve (12) month extensions. Either party may terminate the Agreement for any reason giving at least thirty (30) days written notice to the other party.

The anticipated revenue for the initial term is \$205,689.51, but full funding available for each fiscal year is \$250,000.00, which has been budgeted for operational funding to the Grants department.

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

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

Category Other

Effective Date

Term End Date 6/30/2024

Annual Value \$205,689.51

Expense/Revenue Revenue

Budgeted Travel Type Yes

Procurement Number

Primary Vendor First Things First AZ Early Childhood Development & Health Board

Responses

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

1.b.v. Contracts - 90-23-13-1-03

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Thursday, January 11, 2024 10:19 AM
To: Melanie Talbot
Subject: Contract Approval Request: Amendment #3 - Sub-Recipient Agreement - Facility Renovation - Chandler CHC - additional funding AACHC (Arizona Alliance for Community Health Centers)

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Message Information

From [Barker, Michelle](#)
To [Talbot, Melanie](#);
Subject Contract Approval Request: Amendment #3 - Sub-Recipient Agreement - Facility Renovation - Chandler CHC - additional funding AACHC (Arizona Alliance for Community Health Centers)
Additional Information Indicate whether you approve or reject by clicking the Approve or Reject Information button below.

Approve/Reject Contract

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

Attachments

| Name | Description | Type | Current File / URL |
|--|-------------|------|--|
| RFBA | | File |  RFBA - AACHC Amend 3.pdf |
| Amendment #3 - pending Board signature | | File |  AACHC - Amendment 3 Valleywise Chandler.pdf |
| OIG - AACHC 2023 | | File |  OIG - Arizona Alliance for Community Health Centers 2023.pdf |
| SAM - AACHC 2023 | | File |  SAM - Arizona Alliance for Community Health Centers 2023.pdf |

Contract Information

Status Pending Approval
Title Amendment #3 - Sub-Recipient Agreement - Facility Renovation - Chandler CHC - additional funding
Contract Identifier Board - Amendment
Contract Number 90-23-013-1-03
Primary Responsible Party Tymczyna, Katherine
Departments GRANTS ADMINISTRATION

Product/Service Amendment #3 - Sub-Recipient Agreement - Facility Renovation - Chandler
Description CHC - additional funding

Action/Background Approve Amendment #3 to the Sub-Recipient Agreement between Arizona Association of Community Health Centers dba Arizona Alliance for Community Health Centers (AACHC) and Maricopa County Special Health Care District dba Valleywise Health for funding for facility alteration and renovation at the Valleywise Community Health Center (CHC) in Chandler, Arizona. This Amendment #3 will delete and replace the budget template Section IV, which allocates and approves additional funding in the amount of \$868,122.60 bringing the total executed amount for contract #MCDPHCAP2 to \$4,595,673.60. The funding is 100% which includes the labor and equipment costs. All other terms and conditions remain unchanged.

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

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

Category Other

Effective Date

Term End Date 9/30/2026

Annual Value \$868,122.60

Expense/Revenue Revenue

Budgeted Travel Type Yes

Procurement Number

Primary Vendor AACHC (Arizona Alliance for Community Health Centers)

Responses

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

1.b.vi. Contracts - 90-24-189-1

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Tuesday, January 9, 2024 1:20 PM
To: Melanie Talbot
Subject: Contract Approval Request: Alinity i Equipment, Service and Supplies Abbott Laboratories Inc

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Message Information

From [Purves, Stephen](#)

To [Talbot, Melanie](#);





Subject Contract Approval Request: Alinity i Equipment, Service and Supplies Abbott Laboratories Inc

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

Approve/Reject Contract

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

Attachments

| Name | Description | Type | Current File / URL |
|--|-------------|------|---|
| RFBA | | File |  RFBA - Abbott Alinity i.pdf |
| Abbott Agreement - pending Board signature | | File |  Abbott Alinity I - Chemistry Agreement MA.pdf |
| OIG - Abbott Laboratories 2024 | | File |  OIG - Abbott Laboratories 2024.pdf |
| SAM - Abbott Laboratories 2024 | | File |  SAM - Abbott Laboratories 2024.pdf |

Contract Information

Division Contracts Division

Folder Contracts \ Leases - Equipment

Status Pending Approval

Title Alinity i Equipment, Service and Supplies

Contract Identifier Board - New Contract

Contract Number 90-24-189-1

Primary Responsible Party Tymczyna, Katherine

Departments LAB Clinical - Roosevelt

Product/Service Description Alinity i Equipment, Service and Supplies

Action/Background Approve a new agreement between Abbott Laboratories, Inc. (Abbott) and Maricopa County Special Health Care District dba Valleywise Health for the Alinity i analyzer equipment, service, products and consumables for the new Valleywise Health Clinical Lab.

This agreement is effective upon signature and effective for five (5) years from the integration completion date. Valleywise Health may terminate this agreement, for convenience, at any time upon ninety (90) days written notice to Abbott. Reagents/Consumables purchased for this equipment are offered through the Vizient GPO Contract #LB0976.

The anticipated annual expense is \$599,731.72 and has been budgeted for operational expenditures by the Clinical Lab department, which includes monthly payments of \$5,000.00 for equipment rental and \$2,966.67 for service; and estimated annual expense of \$446,563.36 for product commitment and \$57,568.32 for consumables.

This Agreement is sponsored by Jo-el Detzel, VP Clinical Ancillary 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.

Category GPO

Effective Date

Term End Date

Annual Value \$599,731.72

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor Abbott Laboratories Inc

Responses

| Member Name | Status | Comments |
|------------------------|----------|---|
| Pardo, Laela N. | Approved | Reviewed and approve. Allowances in the Pricing Schedule are value added products/services that Abbott has included at no additional cost to Valleywise Health. |
| Melton, Christopher C. | Approved | |
| Hixson, Jeffrey B. | Approved | |
| Candelaria, Wesley J. | Approved | |
| Detzel, Jo-El M. | Approved | |
| Harris, Ijana M. | Approved | |
| White, Michael | Approved | |
| Agnew, Claire F. | Approved | |
| Purves, Stephen A. | Approved | |
| Talbot, Melanie L. | Current | |

1.b.vii. Contracts - 90-22-167-1-01

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Wednesday, January 10, 2024 9:05 AM
To: Melanie Talbot
Subject: Contract Approval Request: Amendment #1 - IGA Increased funding and revised Scope of Work - Ryan White Part A (C-86-22-145-X-00) Emergency Relief Project Grant Maricopa County by and through the Ryan White Program

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Message Information

From [Purves, Stephen](#)

To [Talbot, Melanie](#);





Subject Contract Approval Request: Amendment #1 - IGA Increased funding and revised Scope of Work - Ryan White Part A (C-86-22-145-X-00) Emergency Relief Project Grant Maricopa County by and through the Ryan White Program

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

Approve/Reject Contract

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

Attachments

| Name | Description | Type | Current File / URL |
|--|-------------|------|---|
| Amendment #1 - pending BOARD signature | | File |  Maricopa County - Valleywise 90-22-167-1 IGA Amendment 1 01.8.24 .pdf |
| RFBA | | File |  RFBA - Maricopa County - Amend 1.pdf |
| OIG - Maricopa County 2024 | | File |  OIG - Maricopa County 2024.pdf |
| SAM - Maricopa County 2024 | | File |  SAM - Maricopa County 2024.pdf |

Contract Information

Division Contracts Division

Folder Amendments

Status Pending Approval

Title Amendment #1 - IGA Increased funding and revised Scope of Work - Ryan White Part A (C-86-22-145-X-00) Emergency Relief Project Grant

Contract Identifier Board - Amendment

Contract Number 90-22-167-1-01

Primary Responsible Party Tymczyna, Katherine

Departments Grants - Ryan White Part A Primary

Product/Service Description Amendment #1 - IGA Increased funding - Ryan White Part A (C-86-22-145-X-00) Emergency Relief Project Grant.

Action/Background Approve Amendment #1 to the Intergovernmental Agreement (IGA) between Maricopa County, Ryan White Part A Program (C-86-22-145-X-00) Emergency Relief Project Grant and Maricopa County Special Health Care District dba Valleywise Health for a new annual funding amount of \$3,000,000.00 and include two (2) new sections to Section III Scope of Work (Section 1.18 Referral for Health Care and Support and Section 1.19 Ending the HIV Epidemic (EHE) Infrastructure). All other terms and conditions of the original agreement shall remain in full force and effect.

This Amendment #1, adding \$3,000,000.00 to the final year (March 1, 2024 through February 28,2025) of this IGA, for a new aggregate value of \$9,000,000.00.

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

Evaluation Process The requesting department has determined that the Contractor is performing satisfactorily and is meeting the goals and objectives of the organization. The requesting department has elected that the contract should be continued and extended.

Category IGA

Effective Date

Term End Date 2/28/2025

Annual Value \$3,000,000.00

Expense/Revenue Revenue

Budgeted Travel Type Yes

Procurement Number

Primary Vendor Maricopa County by and through the Ryan White Program

Responses

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

1.b.viii. Contracts - 90-17-083-1-04

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Wednesday, January 10, 2024 9:05 AM
To: Melanie Talbot
Subject: Contract Approval Request: Amendment #4 - Add Collection Services for Employee Contract Defaults Progressive Management Systems

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Message Information

From [Purves, Stephen](#)
To [Talbot, Melanie](#);
Subject Contract Approval Request: Amendment #4 - Add Collection Services for Employee Contract Defaults Progressive Management Systems
Additional Information Indicate whether you approve or reject by clicking the Approve or Reject button below.

Approve/Reject Contract

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

Attachments

| Name | Description | Type | Current File / URL |
|---|---|------|---|
| Valleywise addendum #4--collect from employees.pdf | Valleywise addendum 4--collect from employees.pdf | File |  Valleywise addendum 4--collect from employees.pdf |
| RFBA - Progressive Management Systems - Collection Services.pdf | RFBA - Progressive Management Systems - Collection Services.pdf | File |  RFBA - Progressive Management Systems - Collection Services.pdf |
| Re- Amendment #4 - Early Out Collection Services.pdf | Re- Amendment 4 - Early Out Collection Services.pdf | File |  Re- Amendment 4 - Early Out Collection Services.pdf |
| OIG - Progressive Management Systems 2023.pdf | OIG - Progressive Management Systems 2023.pdf | File |  OIG - Progressive Management Systems 2023.pdf |
| SAM - Progressive Management Systems 2023.pdf | SAM - Progressive Management Systems 2023.pdf | File |  SAM - Progressive Management Systems 2023.pdf |

Contract Information

Division Contracts Division
Folder Amendments
Status Pending Approval
Title Amendment #4 - Add Collection Services for Employee Contract Defaults

Contract Identifier Board - Amendment
 Contract Number 90-17-083-1-04
 Primary Responsible Party Golden-Grady, Lei Ronda D.
 Departments HUMAN RESOURCES,PATIENT FINANCIAL SERVICES
 Product/Service Description Amendment #4 - Add Collection Services for Employee Contract Defaults
 Action/Background Approve Amendment #4 to the contract between Progressive Management Systems and Maricopa County Special Health Care District dba Valleywise Health to add collection services for employee contract defaults with Sign-on & Retention Agreement (SOAR). The cost of this amendment #4 will be \$30,000.00; for an aggregate contract cost of \$836,660.19. Human Resources will pay for the additional collection services budgeted for operational expenditures; however remaining contract services continues under Patient Financial Services.
 All other terms & conditions remain the same and in full effect.

 This amendment is sponsored by Claire Agnew, EVP and Chief Financial Officer.
 Evaluation Process The requesting department has determined that the Contractor is performing satisfactorily and is meeting the goals and objectives of the organization.
 Category Other
 Effective Date
 Term End Date 3/29/2024
 Annual Value \$30,000.00
 Expense/Revenue Expense
 Budgeted Travel Type Yes
 Procurement Number
 Primary Vendor Progressive Management Systems

Responses

| Member Name | Status | Comments |
|-------------------------|----------|-----------------------|
| Pardo, Laela N. | Approved | Reviewed and approve. |
| Melton, Christopher C. | Approved | |
| Willars, Juanita S. | Approved | |
| De Los Reyes, Amanda N. | Approved | |
| Harris, Ijana M. | Approved | |
| Agnew, Claire F. | Approved | |
| Purves, Stephen A. | Approved | |
| Talbot, Melanie L. | Current | |

1.b.ix. Contracts - 90-23-14-1-03

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Thursday, January 11, 2024 10:20 AM
To: Melanie Talbot
Subject: Contract Approval Request: Amendment #3 - Sub-Recipient Agreement - Facility Renovation - Guadalupe - additional funding AACHC (Arizona Alliance for Community Health Centers)

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

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





Message Information

From [Barker, Michelle](#)
To [Talbot, Melanie](#);
Subject Contract Approval Request: Amendment #3 - Sub-Recipient Agreement - Facility Renovation - Guadalupe - additional funding AACHC (Arizona Alliance for Community Health Centers)
Additional Information Indicate whether you approve or reject by clicking the Approve or Reject button below.

Approve/Reject Contract

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

Attachments

| Name | Description | Type | Current File / URL |
|--|-------------|------|--|
| RFBA | | File |  RFBA - AACHC Amend 3 - Guadalupe.pdf |
| Amendment #3 - pending Board signature | | File |  AACHC Amendment 3 Valleywise Guadalupe.pdf |
| OIG - AACHC 2023 | | File |  OIG - Arizona Alliance for Community Health Centers 2023.pdf |
| SAM - AACHC 2023 | | File |  SAM - Arizona Alliance for Community Health Centers 2023.pdf |

Contract Information

Status Pending Approval
Title Amendment #3 - Sub-Recipient Agreement - Facility Renovation - Guadalupe - additional funding
Contract Identifier Board - Amendment
Contract Number 90-23-014-1-03
Primary Responsible Party Tymczyna, Katherine
Departments GRANTS ADMINISTRATION

Product/Service Amendment #3 - Sub-Recipient Agreement - Facility Renovation - Guadalupe
Description - additional funding

Action/Background Approve Amendment #3 to the Sub-Recipient Agreement between Arizona Association of Community Health Centers dba Arizona Alliance for Community Health Centers (AACHC) and Maricopa County Special Health Care District dba Valleywise Health for funding for the facility renovation at the Valleywise Community Guadalupe Health Center (CHC). This Amendment #3 will delete and replace the budget template Section IV, which allocates and approves additional funding in the amount of \$289,934.06 bringing the total executed amount for contract #MCDPHCAP2 to \$1,556,377.06. The funding is 100% which includes the labor and equipment costs. All other terms and conditions remain unchanged.

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

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

Category Other

Effective Date

Term End Date 9/30/2026

Annual Value \$289,934.06

Expense/Revenue Revenue

Budgeted Travel Type Yes

Procurement Number

Primary Vendor AACHC (Arizona Alliance for Community Health Centers)

Responses

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

1.b.x. Contracts - 90-24-196-1

Melanie Talbot

From: Compliance 360 <msgsystem@usmail.compliance360.com>
Sent: Thursday, January 11, 2024 10:38 AM
To: Melanie Talbot
Subject: Contract Approval Request: Revenue Cycle Support Services Elevate Patient Financial Solutions, LLC

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

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





Message Information

From [Purves, Stephen](#)
To [Talbot, Melanie](#);
Subject Contract Approval Request: Revenue Cycle Support Services Elevate Patient Financial Solutions, LLC
Additional Information Indicate whether you approve or reject by clicking the Approve or Reject button below.

Approve/Reject Contract

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

Attachments

| Name | Description | Type | Current File / URL |
|--|--|------|--|
| OIG - Elevate Patient Financial Solutions 2024.pdf | OIG - Elevate Patient Financial Solutions 2024.pdf | File |  OIG - Elevate Patient Financial Solutions 2024.pdf |
| SAM - Elevate Patient Financial Solutions 2024.pdf | SAM - Elevate Patient Financial Solutions 2024.pdf | File |  SAM - Elevate Patient Financial Solutions 2024.pdf |
| RFBA - Elevate - MSA Revenue Cycles Support Services.pdf | RFBA - Elevate - MSA Revenue Cycles Support Services.pdf | File |  RFBA - Elevate - MSA Revenue Cycles Support Services.pdf |
| 90-24-196-1 (unsigned).pdf | 90-24-196-1 (unsigned).pdf | File |  90-24-196-1 (unsigned).pdf |

Contract Information

Division Contracts Division
Folder Contracts \ Services - Management/Outsourcing
Status Pending Approval
Title Revenue Cycle Support Services
Contract Identifier Board - New Contract
Contract Number 90-24-196-1
Primary Responsible Party Golden-Grady, Lei Ronda D.
Departments REVENUE INTEGRITY MANAGEMENT
Product/Service Description Revenue Cycle Support Services

Action/Background Approve a new agreement between Elevate Patient Financial Solutions, LLC, and Maricopa County Special Health Care District dba Valleywise Health for Revenue Cycle Services; to include Underpayment Recovery, Third Party Liability Reimbursement, Workers Compensation, and Veterans Administration Services. Elevate Patient Financial Solutions simplifies the challenges of the revenue cycle with industry experts and specialized technology to deliver Revenue Cycle Management (RCM) solutions.

This agreement consists of a Master Services Agreement and Statement of Work(s) defining the multiple RCM services Elevate will provide; effective January 24, 2024 and remain in effect for five (5) years. The Agreement or any SOW may be terminated by either Party with at least ninety (90) days written notice or may be terminated at any time upon mutual written agreement by the Parties.

The anticipated annual expense is \$1,384,000.00 and is budgeted for operational expenditures by the Patient Financial Services department. This Agreement is sponsored by Claire Agnew, EVP & Chief Financial Officer.

Evaluation Process This vendor was chosen from a Request for Proposal (RFP) through the Vizient Cost Reduction engagement. RFP was issued August 1, 2023, with proposals due September 6, 2023. Ten (10) vendors responded, and presentations were conducted September 19 through October 13, 2023. The following three (3) vendors were selected as the best choice for Valleywise Health: Elevate (Underpayment, TPL, Work Comp, and VA), GetixHealth (Insurance follow-up, Denial Management, Billing Assistance), and Aspirion (High Balance Denials). RFP process was conducted by Vizient, and included Revenue department leadership, and various Subject Matter Experts, to include IT.

Category Other

Effective Date 1/24/2024

Term End Date 1/23/2029

Annual Value \$1,384,000.00

Expense/Revenue Expense

Budgeted Travel Type Yes

Procurement Number

Primary Vendor Elevate Patient Financial Solutions, LLC

Responses

| Member Name | Status | Comments |
|-------------------------|----------|-----------------------|
| Pardo, Laela N. | Approved | Reviewed and approve. |
| Melton, Christopher C. | Approved | |
| Mee, Siobhan M. | Approved | |
| De Los Reyes, Amanda N. | Approved | |
| Summers, Kelly R. | Approved | |
| Harris, Ijana M. | Approved | |
| Agnew, Claire F. | Approved | |
| Purves, Stephen A. | Approved | |
| Talbot, Melanie L. | Current | |

1.c.i. Governance - Policy 06503 S_ HRSA Legislative Mandate Compliance

Valleywise Health Administrative Policy & Procedure

Effective Date: 09/20

Reviewed Dates: 00/00

Revision Dates: ~~06/23~~, 07/23, ~~11/23~~ 02/24

DRAFT

Policy #: 06503 S

Policy Title: HRSA Legislative Mandate Compliance Policy

Scope: District Governance (G)
 System-Wide (S)
 Division (D)
 Multi-Division (MD)
 Department (T)
 Multi-Department (MT)
 FQHC (F)

Purpose:

To establish a policy outlining the practices that Valleywise Health follows to comply with the legislative mandates required by the Further Consolidated Appropriations Act, ~~2020~~ 2023 (Public Law 117-328), for HRSA award recipients limiting the use of the funds received through HRSA grants and cooperative agreements. Legislative mandates remain in effect until a new appropriation bill is passed setting a new list of requirements.

Definitions:

HRSA - Health Resources & Services Administration

PPAC - The Patient Protection and Affordable Care Act, Public Law 111-148

The Act - The Consolidation Appropriations Act, 2023 (Public Law 117-328) signed into law on December 29, 2022 which provides funding to the HRSA for the fiscal year ending September 30, 2023.

Valleywise Health - Is a "d.b.a" of Maricopa County Special Health Care District

Policy:

Valleywise Health will adhere to the provisions listed below in accordance with the Health Resources & Services Administration's (HRSA) Legislative Mandates in Grants Management for FY 2023. The FY 2023 list of legislative mandates for HRSA recipients is very similar to the FY 2022 list.

1. Salary Limitation (Section 202)

Valleywise Health will not use funds received through federal grants and/or contracts to pay the salary of an individual at a rate in excess of the Federal Executive Schedule Level II.

2. Gun Control (Section 210)

Valleywise Health will not use funds received through federal grants and/or contracts, in whole or in part, to advocate or promote gun control.

3. Anti-Lobbying (Section 503)

- a. Valleywise Health will not use funds received through federal grants and/or contracts, other than for normal and recognized executive legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.
- b. Valleywise Health will not use funds received through federal grants and/or contracts, to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive Order proposed or pending before the Congress or any ~~State-state~~ government, ~~State-state~~ legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.
- c. The prohibitions in subsections (a) and (b) shall include any activity to advocate for or promote any proposed, pending or future ~~Federal~~federal, ~~State-state~~ or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.

4. Acknowledgement of Federal Funding (Section 505)

When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, as a grantee receiving ~~Federal~~federal funds included in this Act, Valleywise Health shall clearly state (1) the percentage of the total costs of the program or project which will be financed with ~~Federal~~federal money; (2) the dollar amount of ~~Federal~~federal funds for the project or program; and (3) percentage and dollar amount of the total

costs of the project or program that will be financed by non-governmental sources.

5. Restriction on Abortion (Section 506)

- a. None of the Federal funds appropriated to Valleywise Health will be expended for any abortion or on health benefits coverage that includes coverage of abortion. The term "health coverage" means the package of services covered by a managed provider or organization pursuant to a contract or other arrangements.

6. Exception to Restriction on Abortions (Section 507)

- a. The limitation established in the preceding section shall not apply to an abortion-
 - i. If the pregnancy is the result of an act of rape or incest; or
 - ii. In the case where a woman suffers from a physical disorder, physical injury, or physical illness, including a life-endangering physical condition caused by or arising from the pregnancy itself, that would, as certified by a physician, place the woman in danger of death unless an abortion is performed.
- b. Nothing in the preceding section shall be construed as prohibiting the expenditure by a ~~State~~state, locality, entity, or private person of ~~State~~state, local, or private funds (other than a ~~State's~~state's or locality contributions of Medicaid matching funds)
- c. Nothing in the preceding section shall be construed as restricting ability of any managed care provider from offering abortion coverage or the ability of a ~~State~~state or locality to contract separately with such a provider for such coverage with ~~State~~state funds (other than a ~~State's~~state's or locality's contribution of Medicaid matching funds)
 - i. None of the funds made available in the Act to Valleywise Health may be made available to a ~~Federal~~federal agency or program, or to a ~~State~~state or local government, if such agency, program, or government subjects any institutional or individual health care entity to discrimination on the basis that the health care entity does not provide, pay for, provide coverage of or refer for abortions.
 - ii. In this subsection, the term "health care entity" includes an individual physician or other health care professional, a hospital, a provider-sponsored organization, a health maintenance organization, a health insurance plan, or any other kind of health care facility, organization or plan.

7. Ban of Funding of Human Embryo Research (Section 508)

- a. None of the funds made available to Valleywise Health in this Act may be used for-
 - i. The creation of a human embryo or embryos for research purposes; or

- ii. Research in which a human embryo or embryos are destroyed, discarded, or knowingly subjected to risk of injury or death greater than that allowed for research on the fetuses in utero under 45 CFR 46.204(b) and section 498 (b) of the Public Health Service Act (42 U.S.C 289g(b))
- b. For purposes of this section, the term “human embryo or embryos” includes any organism not protected as a human subject under 45 CFR 46 as of the date of the enactment of this Act, that is derived by fertilization, parthenogenesis, cloning, or any other means from one or more human gametes or human diploid cells.

8. Limitation of Use of Funds for Promotion of Legalization of Controlled Substances (Section 509)

None of the ~~Federal~~federal funds made available to Valleywise Health will be used for any activity that promotes the legalization of any drug or other substance including Schedule I controlled substances established under section 202 of the Controlled Substances Act, except for normal and recognized executive-congressional communications. This limitation shall not apply if there is significant medical evidence of a therapeutic advantage to the use of such drug or other substance; or, if Valleywise Health is participating in a federally-sponsored clinical trial that is being conducted to determine the therapeutic advantage of a such a substance.

9. Restriction on Distribution of Sterile Needles (Section 526)

Notwithstanding any other provision of this Act, no funds appropriated to Valleywise Health in this Act shall be used to purchase sterile needles or syringes for the hypodermic injection of any illegal drug: Provided, That such limitation does not apply to the use of funds for elements of a program other than making such purchase if the relevant ~~State~~state or local health department, in consultation with Center for Disease Control and Prevention, determines that the ~~State~~state or local jurisdiction, as applicable, is experiencing, or is at risk for significant increase in hepatitis infections or an HIV outbreak due to injection drug use, and such program is operating in accordance with State and local law.

10. Restriction on Pornography on Computer Networks (Section 520)

(a) None of the funds made available in this Act may be used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of pornography. (b) Nothing in subsection (a) shall limit the use of funds necessary for any ~~Federal~~federal, state, tribal or local law enforcement agency or any other entity carrying out criminal investigations, prosecution, or adjudication activities.

11. Confidentiality Agreements (Section 742)

a. Valleywise Health shall not require its employees or contractors seeking to report fraud, waste, or abuse to sign internal confidentiality agreement or statements prohibiting or otherwise restricting such employees or contractors from lawfully reporting such waste, fraud, or abuse to designated investigative

or law enforcement representatives of a Federal Department or agency authorized to receive such information.

The limitations in subsection (a) shall not contravene requirements applicable to ~~standard~~ Standard Form 312, Form 4414, or any other form issued by a Federal department or agency governing the nondisclosure of classified information.

Procedure:

Valleywise Health will review HRSA's Legislative Mandates annually for the passage of a new HHS Appropriations Act or issuance of HRSA guidance regarding the Legislative Mandates and ensure Valleywise Health's policies and procedures are updated as necessary. Any modifications to Valleywise Health's legislative mandates policies and procedures will require review and approval by the Board of Directors.

References:

Grants Policy Bulletin Legislative Mandates in Grants Management for FY 2023 (HRSA, 2023)

The Consolidation Appropriations Act, 2023 (Public Law 117-328)

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

Policy Responsible Party: Jennifer Joiner, Director Grants

Development Team(s): Grants Department, Legal Department, and Compliance

Policy #: 06503 S

Policy Title: HRSA Legislative Mandate Compliance Policy

e-Signers:

Melanie Talbot, Chief Governance Officer and Board Clerk

Dr. Michelle Barker, Senior Vice President Ambulatory Services and Chief Executive Officer of the Federally Qualified Health Center Clinics

Place an X on the right side of applicable description:

New -

Retire -

Reviewed -

Revised with Minor Changes - X

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: Systemwide P&P | 06/23 12/23 |
| Committee: Medical Executive | 06/23 12/23 |
| Other: Legal Services | 05/23 |
| Other: Board of Directors | 06/23 01/24 |
| Other: Valleywise Community Health Centers | |
| Governing Council | 07/23 02/24 |

1.c.ii. Governance - Valleywise Health Foundation's ALL IN Campaign donor recognition requests



DATE: January 4, 2024

TO: J. Woodfin Thomas, Chairman, District 4
Mark G. Dewane, Vice Chairman, District 2
Mary A. Harden, R.N., Director, District 1
Kate Brophy McGee, Director, District 3
Mary Rose Wilcox, Director, District 5

FROM: Lisa Hartsock, Foundation Relations Executive

SUBJECT: Donor Recognition Requests

These donor recognition requests are submitted for Board approval. The Donor Recognition Guidelines, adopted in November 2019, have been followed and are attached as reference.

2023 BOARD OF DIRECTORS

OFFICERS

BOARD CHAIR

Patti Gentry

Former Senior Vice President - JLL

BOARD VICE CHAIR

Pam Stelzer, CPA

Business Development Manager
Baker Tilly US

BOARD TREASURER

Sel Nutor

Director/Arizona Market Executive
Capital One Bank

BOARD SECRETARY

Charles Brown

Founder and CEO
Impact Diversity Solutions Corporation

MEMBERS

Liz Agboola

CEO – Trinity Integrated Care

Claire Agnew

CFO - Valleywise Health

Honorable Betsey Bayless

President Emeritus - Valleywise Health

Jodi P. Carter, MD

Pediatric Department Chair
District Medical Group
Valleywise Health

Mark G. Dewane

Director - District 2 Maricopa County
Special Health Care District

Jill Krigsten

Media Consultant - Cox Media

Tim Louis

CEO - Desert Capital Investments, LLC

Scott R. Meyer

CEO - Straight A Properties

Alicia Nuñez

Executive Vice President / CFO
Chicanos Por La Causa

Josh Nuñez

Founder and CEO
Nuñez Law Firm

Susan M. Pepin MD, MPH

Managing Director, Health & Clinical
Partnerships - Arizona State University

Dave Pugh

SVP / Market Manager - Audacy

Steve Purves

President and CEO - Valleywise Health

Albert Roh, MD

Vice Chair of Radiology
District Medical Group
Valleywise Health

Jay R. Spector

CFP Partner, Wealth
Advisor
Barton Spector Wealth Strategies

Marci Zimmerman-White

Principal
Themis Holdings

Warren Whitney

Senior Vice President of
Government Affairs - Valleywise Health

December 31, 2023

The Valleywise Health Foundation requests recognizing the campaign gifts listed below with signage in highly visible locations, appropriate for the area the gift supports:

A gift of \$500,000 from Paige and Brandon Rafi in support of Care Reimagined. The Valleywise Health Foundation requests recognition of this gift in the Pediatric Intensive Care Unit.

A gift of \$25,000 from Cindy and Mike Watts in support of the mission of Valleywise Health. The Valleywise Health Foundation requests recognition of this gift within the Valleywise Health Community Health Center- West Maryvale.

Cumulative giving of \$40,000 from Delta Dental Foundation in support of dental services. Valleywise Health Foundation requests recognition of these gifts within the Valleywise Health Community Health Center – Peoria Dental Clinic.

Cumulative giving of \$25,130 from Tri Sigma Phoenix Alumnae Chapter. Valleywise Health Foundation requests recognition of these gifts within the Arizona Burn Center Pediatric Burn Unit.

Valleywise Health Donor Recognition Guidelines

The Valleywise Health Foundation (the “Foundation”) is the 501 c 3 nonprofit organization established to solely support the mission of Valleywise Health with philanthropic gifts. The Foundation is responsible for operating with the highest standards of ethical behavior, using best practices and policies, and providing contemporary donor stewardship and recognition programs.

The Foundation seeks gifts from individuals, foundations, corporations, and other organizations to advance the Valleywise Health mission in support of strategies, facilities, and programs aligned with top Valleywise Health institutional priorities. ALL IN, a four-year \$25 million comprehensive campaign launching in January 2020, offers multiple opportunities for donors to associate their names or the names of those they honor/memorialize with Valleywise Health.

The Foundation and Valleywise Health leadership recommend adoption of these guidelines for donor recognition opportunities during this four-year campaign. Qualifying gifts, gift levels, and the approval process are as follows:

1. **Qualifying gifts of \$7,500 and higher** will be recognized in a Donor Honor Roll in electronic form during the active years of fundraising and in a permanent Honor Roll after successful completion of the campaign.

2. **Donors making qualifying gifts of \$10,000 and higher** may be provided recognition opportunities in keeping with the type of gift, gift amount, and donor preferences.

A. Qualifying gifts and pledges are subject to the following guidelines:

- i. All recognition opportunities at Valleywise Health are reserved for those making financial contributions to the Foundation.
- ii. All recognition opportunities will adhere to Covenant A.2. of the Cooperative Service Agreement (adopted 7/2018), attached hereto.
- iii. Naming recognition will follow these approved guidelines for facilities and programs. Exceptional gifts (i.e., those outside the categories listed in this document) require review specified in the Foundation’s Gift Acceptance Policy (adopted 9/2018).
- iv. Recognition opportunities and gift ranges will align with institutional priorities and program budgets.

B. Gifts and pledges with recognition opportunities (\$10,000 and higher) undergo the following approval process:

- i. A gift agreement will be written for each qualified gift or pledge.
- ii. All naming commitments will be reviewed by the Foundation Executive Committee and the Valleywise Health CEO and EVPs.
- iii. The Special Health Care District Board of Directors will receive the list of naming commitments for approval; a commitment may be rescinded if the gift is inconsistent with these guidelines.
- iv. Approved commitments will be finalized with signed donor gift agreements.

3. **The gift levels and recognition opportunities** are as follows, based on the size, visibility and marketing potential:

A. Facilities (internal and external physical spaces):

- i. A gift of **\$10,000 or more** may include recognition with examination rooms, patient care rooms, or offices.
- ii. A gift of **\$25,000 or more** may include recognition with classrooms or meeting rooms.
- iii. A gift of **\$50,000 or more** may include recognition with large classrooms or auditoriums.
- iv. A gift of **\$200,000 or more** may include recognition with facility lobbies, waiting areas, or gardens.
- v. A gift of **\$350,000 or more** may include recognition with a wing or service area.
- vi. A gift of **\$750,000 or more** may include recognition with emergency departments.
- vii. A gift of **\$3M or more** may include recognition with the support services building, the community health centers or behavioral health centers (in Phoenix and Mesa).
- viii. A gift of **\$5M or more** may include recognition with the comprehensive health centers
- ix. A gift of **\$7M or more** may include recognition with the behavioral health center (in Maryvale)
- x. A gift of **\$10M or more** may include recognition with the new burn center
- xi. A gift of **\$15M or more** may include recognition with the new medical center
- xii. As a guideline, these facility recognition opportunities will be for no less than 20 years or the useful life of the facility. If there is a change in the space during that time, a comparable space will be found and named (in consultation with the donor if he/she is living or with the family or trustees if the donor(s) is deceased). At the end of the 20 years, if there is a change in the space, the Foundation is not obligated to find a naming opportunity for a comparable space.
- xiii. In addition, if at the end of 20 years the Foundation has an opportunity to offer the naming opportunity of the space for a new gift, the Foundation may do so. The Foundation will consult the donor or any known living relatives if the donor(s) is deceased to determine his/her/their interest in making an additional gift prior to the removal of the name.

B. Programs:

- i. Suitable gifts may name programs for operational support.
- ii. The total philanthropic commitment should equal at least 50% of the program's annual operating budget
- iii. Three-year minimum commitments are expected for this opportunity

4. **Dedication opportunities** offer recognition of a generous donation from a corporation, foundation or individual with signage/acknowledgement of the support, while not intended to fund the entire room, service area, or facility.

1.d.i. Medical Staff - Medical Staff Credentials December 2023

Recommended by Credentials Committee: December 5, 2023
 Recommended by Medical Executive Committee: December 12, 2023
 Submitted to MSHCDB: January 24, 2024

VALLEYWISE HEALTH CREDENTIALS AND ACTION ITEMS REPORT MEDICAL STAFF

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

| INITIAL MEDICAL STAFF APPOINTMENT | | | | |
|--|----------|--------------------------------------|--------------------------|----------|
| NAME | CATEGORY | SPECIALTY/PRIVILEGES | APPOINTMENT DATES | COMMENTS |
| Alyssa Michelle Bernardi, D.O. | Active | Pediatrics | 02/01/2024 to 01/31/2026 | |
| Anas Bitar, M.D. | Courtesy | Pediatrics (Gastroenterology) | 02/01/2024 to 01/31/2026 | |
| Lyndsay Ann Deeter, M.D. | Active | Surgery (Surgical Critical Care) | 02/01/2024 to 01/31/2026 | |
| Matthew William Earle, M.D. | Courtesy | Emergency Medicine | 02/01/2024 to 01/31/2026 | |
| Nneka Safiya Edwards-Jackson, M.D. | Active | Pediatrics | 02/01/2024 to 01/31/2026 | |
| Lauren Alyssa Engler, M.D. | Courtesy | Obstetrics & Gynecology | 02/01/2024 to 01/31/2026 | |
| Greg Lewis Epstein, M.D. | Courtesy | Obstetrics & Gynecology | 02/01/2024 to 01/31/2026 | |
| Denise Kathrine Gentles-Ford, M.D. | Courtesy | Obstetrics & Gynecology | 02/01/2024 to 01/31/2026 | |
| Ashesh H. Sanghvi, M.D. | Courtesy | Internal Medicine (Gastroenterology) | 02/01/2024 to 01/31/2026 | |

| INITIAL/FOCUSED PROFESSIONAL PRACTICE EVALUATION | | | |
|---|---|--|---|
| NAME | SPECIALTY/PRIVILEGES | RECOMMENDATION EXTEND or PROPOSED STATUS | COMMENTS |
| Santiago Garcia Ortiz, M.D. | Internal Medicine | FPPE successfully completed | FPPE reviewer has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Internal Medicine Core Privileges. |
| Mohammad Khatib, M.D. | Internal Medicine | FPPE successfully completed | FPPE reviewer has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Basic Critical Care Privileges. |
| Danlu Wang, D.O. | Internal Medicine (Gastroenterology) | FPPE successfully completed | FPPE reviewer has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Hemorrhoid Banding Privileges. |

Recommended by Credentials Committee: December 5, 2023
 Recommended by Medical Executive Committee: December 12, 2023
 Submitted to MSHCDB: January 24, 2024

| REAPPOINTMENTS/ONGOING PROFESSIONAL PRACTICE EVALUATION | | | | |
|---|----------|--------------------------------|--------------------------|----------|
| NAME | CATEGORY | SPECIALTY/PRIVILEGES | APPOINTMENT DATES | COMMENTS |
| Esad Boskailo, M.D. | Active | Psychiatry | 02/01/2024 to 01/31/2026 | |
| Lakshmi Jayaram, M.D. | Active | Pathology | 02/01/2024 to 01/31/2026 | |
| Paola Giulia Pieri, M.D., F.A.C.S. | Active | Surgery (Trauma) | 02/01/2024 to 01/31/2026 | |
| Mehrdad Saririan, M.D. | Active | Internal Medicine (Cardiology) | 02/01/2024 to 01/31/2026 | |
| Shelly Sood, M.D. | Active | Obstetrics & Gynecology | 02/01/2024 to 01/31/2026 | |
| Michael M. Wahbah, D.D.S. | Active | Dentistry | 02/01/2024 to 01/31/2026 | |

| CHANGE IN PRIVILEGES | | | |
|----------------------------------|----------------------|---|----------|
| NAME | DEPARTMENT/SPECIALTY | ADDITION / REDUCTION / WITHDRAWAL | COMMENTS |
| Danielle Christina Guthrie, D.O. | Psychiatry | <u>Addition</u> : Electroconvulsive Therapy (ECT) | FPPE |

| RESIGNATIONS | | | |
|---|-------------------------------|----------------------|---|
| <i>Information Only</i> | | | |
| NAME | DEPARTMENT/SPECIALTY | STATUS | REASON |
| Kevin Arthur Kearney, M.D. | Radiology | Courtesy to Inactive | Failure to reapply for privileges; lapsed effective November 30, 2023 |
| Felicita Koster, D.O. | Psychiatry | Active to Inactive | Resigned effective December 31, 2023 |
| Krishnapriya Marangattu Prathapan, M.D. | Pediatrics (Gastroenterology) | Active to Inactive | Resigned effective October 11, 2023 |

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.

1.d.i. Medical Staff - Medical Staff Credentials January 2024

Recommended by Credentials Committee: January 2, 2024

Recommended by Medical Executive Committee: January 9, 2029

Submitted to MSHCDB: January 24, 2024

VALLEYWISE HEALTH CREDENTIALS AND ACTION ITEMS REPORT MEDICAL STAFF

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

| INITIAL MEDICAL STAFF APPOINTMENT | | | | |
|--|----------|--|-----------------------|----------|
| NAME | CATEGORY | DEPARTMENT/SPECIALTY | APPOINTMENT DATES | COMMENTS |
| Jill Diane Gibson, M.D. | Courtesy | Obstetrics & Gynecology | 2/1/2024 to 1/31/2026 | |
| Jayson Andrew Luma, M.D. | Courtesy | Pediatrics (Emergency Medicine) | 2/1/2024 to 1/31/2026 | |
| Patrick Edward McGovern, M.D. | Courtesy | Surgery (Pediatric Surgery) | 2/1/2024 to 1/31/2026 | |
| Timothy Allen Schaub, M.D. | Active | Surgery (Plastic Surgery / Hand Surgery) | 2/1/2024 to 1/31/2026 | |
| Mimi T. Van, D.O. | Courtesy | Internal Medicine (Gastroenterology) | 2/1/2024 to 1/31/2026 | |

| INITIAL/FOCUSED PROFESSIONAL PRACTICE EVALUATION | | | |
|---|--|--|---|
| NAME | SPECIALTY/PRIVILEGES | RECOMMENDATION EXTEND or PROPOSED STATUS | COMMENTS |
| Lisa Michelle Boucek, M.D. | Pediatrics | FPPE successfully completed | FPPE reviewer has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Pediatric and Adolescent Core Privileges. |
| Michelle Elizabeth Da Costa, M.D. | Anesthesiology | FPPE successfully completed | FPPE reviewer has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Anesthesia Core Privileges. |
| Amelia Catherine Van Handel, M.D. | Surgery (Plastic Surgery / Advanced Hand Surgery) | FPPE successfully completed | FPPE reviewer has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Plastic Surgery Core Privileges and Advanced Hand Privileges. |
| Neil M. Vyas, M.D. | Internal Medicine (Gastroenterology) | FPPE successfully completed | FPPE reviewer has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Gastroenterology Core Privileges and Endoscopic Retrograde Cholangiopancreatography (ERCP) Privileges. |
| Kimberly P. Walters, D.M.D. | Dentistry | FPPE successfully completed | FPPE reviewer has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for General Dentistry Core Privileged and Pedodontics Privileges. |

Recommended by Credentials Committee: January 2, 2024

Recommended by Medical Executive Committee: January 9, 2029

Submitted to MSHCDB: January 24, 2024

| REAPPOINTMENTS/ONGOING PROFESSIONAL PRACTICE EVALUATION | | | | |
|--|-----------------|---|--------------------------|-----------------|
| NAME | CATEGORY | DEPARTMENT/SPECIALTY | APPOINTMENT DATES | COMMENTS |
| Rania Abdul Rahman, M.D. | Active | Internal Medicine (Critical Care/Pulmonary Disease) | 2/1/2024 to 1/31/2026 | |
| Lisa Michelle Boucek, M.D. | Active | Pediatrics | 2/1/2024 to 1/31/2026 | |
| John M. Brown, M.D. | Active | Pathology | 2/1/2024 to 1/31/2026 | |
| Vickie Pinder Clennon, M.D. | Courtesy | Obstetrics & Gynecology | 2/1/2024 to 1/31/2026 | |
| Lisa A. Cobourn, M.D. | Courtesy | Psychiatry | 2/1/2024 to 1/31/2026 | |
| Michelle Elizabeth Da Costa, M.D. | Active | Anesthesiology | 2/1/2024 to 1/31/2026 | |
| Kevin N. Foster, M.D. | Active | Surgery (Burn/Critical Care) | 2/1/2024 to 1/31/2026 | |
| Chirag R. Kapadia, M.D. | Courtesy | Pediatrics (Endocrinology) | 2/1/2024 to 1/31/2026 | |
| Suresh Lal, M.D. | Active | Pediatrics (Critical Care) | 2/1/2024 to 1/31/2026 | |
| Katrina Marie Lepthien, D.O. | Active | Psychiatry | 2/1/2024 to 1/31/2026 | |
| Kathleen M. Norman, M.D. | Active | Obstetrics & Gynecology | 2/1/2024 to 1/31/2026 | |
| Payal S. Patel, M.D. | Courtesy | Pediatrics (Endocrinology) | 2/1/2024 to 1/31/2026 | |
| Richard Ryan Rawlings, D.O. | Active | Internal Medicine (Neurology) | 2/1/2024 to 1/31/2026 | |
| Ranjini Raina Roy, M.D. | Active | Internal Medicine (Cardiology) | 2/1/2024 to 1/31/2026 | |
| Eugene John Sidoti, Jr., M.D. | Active | Surgery (Plastic Surgery) | 2/1/2024 to 1/31/2026 | |
| Christine Hope Galvero Umandap, M.D. | Courtesy | Pediatrics (Genetics) | 2/1/2024 to 1/31/2026 | |
| Neil M. Vyas, M.D. | Courtesy | Internal Medicine (Gastroenterology) | 2/1/2024 to 1/31/2026 | |

| CHANGE IN PRIVILEGES | | | |
|-------------------------------|-----------------------------|---|---|
| NAME | DEPARTMENT/SPECIALTY | ADDITION / REDUCTION / WITHDRAWAL | COMMENTS |
| Rex H. Ragsdale, M.D. | Family & Community Medicine | <u>Addition</u> : In-Patient Core Adult Cognitive and Adult Procedural Privileges | Unsupervised (10 proctored cases completed) |
| Eugene John Sidoti, Jr., M.D. | Surgery (Plastic Surgery) | <u>Withdrawal</u> : Advanced Hand Surgery Privileges | Voluntary Relinquishment of Privileges due to non-utilization of privileges; Dr. Sidoti will continue to perform Basic Hand Procedures under Plastic Surgery Core Privileges. |

Recommended by Credentials Committee: January 2, 2024

Recommended by Medical Executive Committee: January 9, 2029

Submitted to MSHCDB: January 24, 2024

RESIGNATIONS

Information Only

| NAME | DEPARTMENT/SPECIALTY | STATUS | REASON |
|----------------------------|--------------------------|----------------------|--------------------------------------|
| Claudia Dee Hart, M.D. | Pediatrics (Neonatology) | Courtesy to Inactive | Resigned effective December 13, 2023 |
| Scott David Swanson, M.D. | Surgery (Hand Surgery) | Active to Inactive | Resigned effective December 31, 2023 |
| Ethan Andrew Winkler, M.D. | Surgery (Neurosurgery) | Courtesy to Inactive | Resigned effective December 18, 2023 |

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.

1.d.ii. Medical Staff - APC/AHP Staff Credentials December 2023

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

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

| ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL – INITIAL APPOINTMENTS | | | | |
|--|-----------------------------|--|------------------------------|-----------------|
| NAME | DEPARTMENT | PRACTICE PRIVILEGES/ SCOPE OF SERVICE | APPOINTMENT DATES | COMMENTS |
| Kaisa Theresa Jacobsen, F.N.P. | Family & Community Medicine | Practice Prerogatives on file | 02/01/2024 to 01/31/2026 | |
| Stephanie Yu, O.D. | Surgery | Practice Prerogatives on file | 02/01/2024 to 01/31/2026 | |

| ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL – REAPPOINTMENTS | | | | |
|--|-------------------|--|------------------------------|-----------------|
| NAME | DEPARTMENT | PRACTICE PRIVILEGES/ SCOPE OF SERVICE | APPOINTMENT DATES | COMMENTS |
| Tara Leigh Krog, Ph.D. | Psychiatry | Practice Prerogatives on file | 02/01/2024 to 01/31/2026 | |

| RESIGNATION (Information Only) | | | |
|---------------------------------------|-----------------------------|--|--|
| NAME | DEPARTMENT/SPECIALTY | STATUS | REASON |
| Debra Boucaud, A.N.P. | Internal Medicine | Allied Health Professional to Inactive | Resigned effective September 29, 2023 |
| Jessica K. Fries, C.C.P. | Surgery | Allied Health Professional to Inactive | Not applying for reappointment; privileges will lapse on February 29, 2024 |
| Sarina Otero, L.C.S.W. | Psychiatry | Allied Health Professional to Inactive | No longer Allied Health staff member effective September 16, 2023 |

General Definitions:

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

Supervision Definitions:

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

1.d.ii. Medical Staff - APC/AHP Staff Credentials - January 2024

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

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

| ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL – INITIAL APPOINTMENTS | | | | |
|--|-------------------|--|------------------------------|-----------------|
| NAME | DEPARTMENT | PRACTICE PRIVILEGES/ SCOPE OF SERVICE | APPOINTMENT DATES | COMMENTS |
| Sara Nicole Slingerland, Au.D. | Surgery | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |
| Rachel Ellen Snyder, P.A.-C. | Internal Medicine | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |

| INITIAL/FOCUSED PROFESSIONAL PRACTICE EVALUATION | | | |
|---|-----------------------------|---|--|
| NAME | DEPARTMENT/SPECIALTY | RECOMMENDATION EXTEND or PROPOSED STATUS | COMMENTS |
| Ryan Michael Hook, C.R.N.A. | Anesthesiology | FPPE successfully completed | Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Certified Registered Nurse Anesthetist Core Privileges. |
| Sandra Grace Krissinger, P.A.-C. | Surgery | FPPE successfully completed | Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Physician Assistant Basic Core Privileges and Otolaryngology Advanced Core Procedural Privileges. |
| Casey Lynn Runkle, F.N.P. | Obstetrics & Gynecology | FPPE successfully completed | Chair has submitted documentation demonstrating practitioner has successfully completed FPPE requirement for Surgical Clinical Core Privileges. |

| ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL – REAPPOINTMENTS | | | | |
|--|-----------------------------|--|------------------------------|-----------------|
| NAME | DEPARTMENT | PRACTICE PRIVILEGES/ SCOPE OF SERVICE | APPOINTMENT DATES | COMMENTS |
| Diana Apolinar, L.C.S.W. | Psychiatry | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |
| Brian Stewart Arnett, C.R.N.A. | Anesthesiology | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |
| Brandie Nicole Burckhard, F.N.P. | Family & Community Medicine | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |
| Elizabeth Elise Crane, C.R.N.A. | Anesthesiology | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |
| Ann Marie Dike, C.R.N.A. | Anesthesiology | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |
| Ryan Michael Hook, C.R.N.A. | Anesthesiology | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |
| Sandra Grace Krissinger, P.A.-C. | Surgery | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |
| Alexandra Kae Lueders, P.A.-C. | Surgery | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |
| Casey Lynn Runkle, F.N.P. | Surgery | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |

Recommended by Credentials Committee: January 2, 2024

Recommended by Medical Executive Committee: January 9, 2024

Submitted to MSHCDB: January 24, 2024

ADVANCED PRACTICE CLINICIAN / ALLIED HEALTH PROFESSIONAL – REAPPOINTMENTS

| | | | | |
|-------------------------------|------------|-------------------------------|-----------------------|--|
| Lynn Sorenson, L.C.S.W. | Psychiatry | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |
| Natella Zaslavsky, P.M.H.N.P. | Psychiatry | Practice Prerogatives on file | 2/1/2024 to 1/31/2026 | |

RESIGNATION (Information Only)

| NAME | DEPARTMENT/SPECIALTY | STATUS | REASON |
|-----------------------------|-----------------------------|--|--------------------------------------|
| Karen Karrar-Pine, L.C.S.W. | Psychiatry | Allied Health Professional to Inactive | Resigned effective November 28, 2023 |
| Kay Anne Rutledge, F.N.P. | Internal Medicine | Allied Health Professional to Inactive | Resigned effective January 31, 2024 |

General Definitions:

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

Supervision Definitions:

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

1.d.iii. Medical Staff - Certified Nurse Mid-Wife Privileges Practice Prerogatives



**VALLEYWISE HEALTH
DEPARTMENT OF OBSTETRICS, GYNECOLOGY AND WOMEN'S HEALTH CARE
CERTIFIED NURSE MIDWIFE (CNM) PRACTICE PREROGATIVES AND PRIVILEGES**

APPLICANT'S NAME: _____ **DATE** _____

RESPONSIBLE PARTY: Department Chair, or his/her designee

The CNM provides inpatient and outpatient services under the direction of an Attending OB/GYN physician, who is present 24 hours per day, 7 days per week.

DEFINITION(S): A Certified Nurse-Midwife ("CNM"), a Category II Practitioner, is a provider of medical services educated in the disciplines of nursing and midwifery and certified by the American College of Nurse-Midwives (ACNM). Nurse Midwifery Practice is the independent care of uncomplicated labor and delivery and gynecologic services. This occurs within a health care system providing medical consultation, collaborative management, and referral and is in accordance with the "Functions, Standards and Qualification of Nurse-Midwifery Practice" as defined by ACNM, and in accordance with the Arizona Administrative Code.

"COLLABORATION" means the collaboration with (or supervision of) a Category II practitioner by a Collaborating Physician, that may or may not require the actual presence of the Collaborating Physician, but that does require, at a minimum, that the Collaborating Physician be readily available for consultation. The requisite level of supervision (general, direct, or personal) shall be determined at the time each Category II practitioner is credentialed.

SUPERVISION: First five (5) cases; actively supervised by OB/GYN Attending physician.

- PREROGATIVES:**
- Shall initiate a patient's entry into Valleywise Health, under the general care of an Attending OB/GYN physician.
 - Shall practice independently within his/her scope of practice, training and experience by using and adhering to departmental protocols governing patient management.
 - Shall provide primary care for prenatal/gynecologic patients
 - Shall provide maternity coverage in Labor and Delivery as needed
 - Shall be available to "first assist" on Labor & Delivery as needed
 - Shall seek appropriate consultation from Attending and Resident staff
 - Shall participate in teaching nurse-midwifery students, medical students, and interns.
 - Shall participate in CME and other OB/GYN educational conferences
 - Shall participate in departmental quality improvement and peer review activities.
 - May prescribe and dispense medications within guidelines approved by the State Board of Nursing and the Drug Enforcement Administration.
 - May assist in research activities within the Valleywise Health Department of OB/GYN
 - May not substitute for an attending or on-call physician for the [Adult](#) Emergency Department
 - May not have on the job training to enhance their competencies; **but** may enhance their competencies by learning additional skills/procedures within their scope of practice through additional didactic education and supervised clinical practice (achieved through clinical experience in a formalized education/training program) as specified in the Arizona Administrative Code (A.A.C.-Chapter 19-Arizona State Board of Nursing).



**VALLEYWISE HEALTH
DEPARTMENT OF OBSTETRICS, GYNECOLOGY AND WOMEN'S HEALTH CARE
CERTIFIED NURSE MIDWIFE (CNM) PRACTICE PREROGATIVES AND PRIVILEGES**

INITIAL APPLICANTS

| | |
|----------------------------|--|
| Licensure/Education | Current licensure as a certified nurse midwife in the state of Arizona in good standing; Graduation from an accredited school of nurse midwifery. |
| Board Certification | Certified by the American College of Nurse-Midwives |
| Insurance | Provide proof of general and professional liability insurance coverage at the standards specified by Valleywise Health. |
| Clinical Activity | Applicants for initial appointment must be able to demonstrate provision of midwifery procedures and skills for at least fifteen (15) patients, reflective of the scope of privileges requested, during the past 12 months in a setting similar in scope and complexity to Valleywise Health; OR demonstrate successful completion/graduation from an accredited school of nurse midwifery within the past 12 months. |

FOCUSED PROFESSIONAL PRACTICE EVALUATION

| | |
|---|---|
| Guidelines for Initial Appointment | Minimum of 5 representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) to include evaluation of chief complaint; history & physical; use of ancillary services; appropriateness of diagnosis; and discharge/instruction and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy. |
|---|---|

REAPPOINTMENT

Current demonstrated competence and current experience with acceptable results for thirty (30) patients reflective of the scope of privileges requested for the past 24 months as a result of ongoing professional practice evaluation activities and outcomes.

| CERTIFIED NURSE MIDWIFE CORE PRIVILEGES | Requested | Approved | Not Approved | Comment |
|--|------------------|-----------------|---------------------|----------------|
| Perform history and physical examination* | | | | |
| Normal Spontaneous Vaginal Delivery | | | | |
| Perineal Repairs 1 st degree- 3 rd degree | | | | |
| Fetal Scalp Electrode | | | | |
| Intrauterine Pressure Catheter Placement | | | | |
| Episiotomy | | | | |
| Prostaglandin gel insertion | | | | |
| Amniotomy | | | | |
| Non-Stress Test and Contraction Stress Test Interpretation | | | | |
| Vaginal Birth After Cesarean with Trial of Labor approval – in consultation with OB/GYN physician. | | | | |
| Pitocin augmentation, induction - in consultation with OB/GYN physician | | | | |
| Vacuum extraction - in consultation with OB/GYN physician | | | | |
| Intrauterine Device Insertion/Removal | | | | |
| Subdermal Contraceptive Capsule (Insertion/Removal) | | | | |
| Educate, counsel and prescribe contraception | | | | |
| Perform interval women's health surveillance examination & procedures | | | | |
| Prescriptive Privileges for non-controlled substances and devices within scope of practice (Prescribing & Dispensing Authority required) | | | | |
| Prescriptive Privileges for controlled substances (DEA registration required) | | | | |
| Perform history and physical examination* | | | | |
| Normal Spontaneous Vaginal Delivery | | | | |

***Inpatient history and physical examinations are the responsibility of and require review and countersignature by a member of the Valleywise Health medical staff.**



**VALLEYWISE HEALTH
DEPARTMENT OF OBSTETRICS, GYNECOLOGY AND WOMEN'S HEALTH CARE
CERTIFIED NURSE MIDWIFE (CNM) PRACTICE PREROGATIVES AND PRIVILEGES**

| CERTIFIED NURSE MIDWIFE -SPECIAL PROCEDURES (Requires additional training beyond ACNM Core Competencies) | Requested | Approved | Not Approved | Comment |
|---|-----------|----------|-----------------|--|
| <p>4th degree vaginal laceration repair under the supervision of OB/GYN physician</p> <p>Initial Appointment:</p> <ul style="list-style-type: none"> • Successful completion of an educational program accredited by the ACNM that included training in fourth-degree laceration repair; and • Demonstrated current competence and evidence of the performance of at least two (2) repairs of fourth degree lacerations in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment: Demonstrated current competence and evidence of the performance of at least four (4) repairs of the fourth-degree lacerations in the past twenty-four (24) months based on the results of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 3* Unless otherwise noted:____ |
| <p>Colposcopy</p> <p>Initial Appointment:</p> <ul style="list-style-type: none"> • Successful completion of an educational program accredited by the ACNM that included training in colposcopy procedures; and • Demonstrated current competence and evidence of the performance of at least two (2) colposcopy procedures in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment: Demonstrated current competence and evidence of the performance of at least four (4) colposcopy procedures in the past twenty-four (24) months based on the results of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 3* Unless otherwise noted:____ |
| <p>Endometrial Biopsy under the supervision of OB/GYN physician</p> <p>Initial Appointment:</p> <ul style="list-style-type: none"> • Successful completion of an educational program accredited by the ACNM that included training the performance of endometrial biopsy procedures; and • Demonstrated current competence and evidence of the performance endometrial biopsy procedures for at least two (2) cases in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment: Demonstrated current competence and evidence of the performance of endometrial biopsy procedures for at least four (4) cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 3* Unless otherwise noted:____ |



**VALLEYWISE HEALTH
DEPARTMENT OF OBSTETRICS, GYNECOLOGY AND WOMEN'S HEALTH CARE
CERTIFIED NURSE MIDWIFE (CNM) PRACTICE PREROGATIVES AND PRIVILEGES**

| CERTIFIED NURSE MIDWIFE -SPRECIAL PROCEDURES (Requires additional training beyond ACNM Core Competencies) | Requested | Approved | Not Approved | Comment |
|--|-----------|----------|-----------------|--|
| <p>1st Assist: Cesarean Section, bilateral tubal ligation, hysterectomy</p> <p>Initial Appointment:</p> <ul style="list-style-type: none"> • Successful completion of an educational program accredited by the ACNM that included training as a first assistant at surgery (i.e., Cesarean section, bilateral tubal ligation, hysterectomy); and • Demonstrated current competence and evidence of the performance as a first assistant at surgery for at least two (2) cases in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment: Demonstrated current competence and evidence of the performance as a first assistant at surgery (i.e., Cesarean section, bilateral tubal ligation, hysterectomy) for at least four (4) cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 3* Unless otherwise noted:____ |
| <p>Insulin Start, Adjustments</p> <p>Initial Appointment:</p> <ul style="list-style-type: none"> • Successful completion of an educational program accredited by the ACNM that included training in insulin start and adjustments; and • Demonstrated current competence and evidence of the performance of insulin start and adjustments for at least two (2) cases in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment: Demonstrated current competence and evidence of the performance of insulin start and adjustments for at least four (4) cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 3* Unless otherwise noted:____ |
| <p>Ultrasound: Amniotic Fluid Index (AFI), Level I</p> <p>Initial Appointment:</p> <ul style="list-style-type: none"> • Successful completion of an educational program accredited by the ACNM that included training in Ultrasound: Amniotic Fluid Index (AFI), Level I; and • Demonstrated current competence and evidence of the performance of Ultrasound: Amniotic Fluid Index (AFI), Level 1 for at least two (2) cases in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment: Demonstrated current competence and evidence of the performance in Ultrasound: Amniotic Fluid Index (AFI), Level I) for at least four (4) cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 3* Unless otherwise noted:____ |



**VALLEYWISE HEALTH
DEPARTMENT OF OBSTETRICS, GYNECOLOGY AND WOMEN'S HEALTH CARE
CERTIFIED NURSE MIDWIFE (CNM) PRACTICE PREROGATIVES AND PRIVILEGES**

| CERTIFIED NURSE MIDWIFE -SPECIAL PROCEDURES (Requires additional training beyond ACNM Core Competencies) | Requested | Approved | Not Approved | Comment |
|--|-----------|----------|-----------------|---|
| <p>Drainage of Vulvar and Vaginal Cysts and/or Placement of Word Catheter</p> <p>Initial Appointment:</p> <ul style="list-style-type: none"> • Successful completion of an educational program accredited by the ACNM that included training in the performance of drainage of vulvar and vaginal cysts and/or placement of Word Catheter when appropriate; and • Demonstrated current competence and evidence of the performance of drainage of vulvar and vaginal cysts and/or placement of Word Catheter when appropriate for at least two (2) cases in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment: Demonstrated current competence and evidence of the performance of Bartholin's Cyst Removal for at least four (4) cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> | | | | <p><input type="checkbox"/> 3*</p> <p>Unless otherwise noted: _____</p> |

*Comments:

- 1) Under Personal Supervision only (A physician must be in the room during the performance of the procedures.)
- 2) Must consult with attending physician prior to procedure
- 3) General Supervision

Acknowledgement of Applicant

I have requested authorization to perform only those privileges which my education, training, current experience and competency qualifies me to perform and for which I wish to exercise at Valleywise Health.

Practitioner's Signature

Date

At this time, the Department of OB/GYN and/or Family and Community Medicine is of the opinion that the applicant's competency, professional performance, judgment, technical skill and health status is satisfactory and falls within the limits of the clinical privileges requested, and there are sufficient resources to perform the approved privilege(s).

Department of OB/GYN Chairman/Designee

Date

CMS Levels of Supervision:

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

1.d.iv. Medical Staff - Nurse Practitioner – Women's Health Privileges Practice Prerogatives

**VALLEYWISE HEALTH
ADVANCED PRACTICE CLINICIAN**

WOMEN'S HEALTH NURSE PRACTITIONER PRACTICE PREROGATIVES AND PRIVILEGES

RESPONSIBLE PARTY: Department Chair, or his/her designee

DEFINITION: A Registered Nurse Practitioner (RNP) is an advanced practice nurse, who provides primary health care and specialized health services to individuals and families within the scope of his/her license and consistent with the clinical privileges granted. The Nurse Practitioner is employed or contracted to provide services to inpatients and outpatients within Valleywise Health.

- PREROGATIVES:**
- Shall practice within his/her scope of practice, training, and experience to independently assess, diagnose, plan, and treat illnesses by using and adhering to departmental protocols governing patient management, in accordance with Arizona Nursing Board, Arizona Statutes and Arizona Administrative Code.
 - Shall practice in collaboration with an Attending Physician who has unrestricted privileges and medical staff membership in good standing at the Valleywise Health and seek appropriate consultation when necessary.
 - Shall participate in quality assurance review on a periodic basis, including systematic review of records and treatment plans
 - Shall make appropriate referrals to other health professionals and community agencies.
 - Shall participate in CME and other Department educational conferences.
 - [Shall participate in discharge planning.](#)
 - May write admitting orders on behalf of an attending physician to initiate a patient's entry into a Valleywise Health inpatient facility. All admitting orders must be authenticated by the designated attending physician.
 - May prescribe and dispense medications within guidelines approved by the Arizona State Board of Nursing and the Drug Enforcement Administration and Arizona State Board of Pharmacy.
 - May assist in research activities within their respective Valleywise Health Department.
 - May write 'Do Not Resuscitate or Discontinue Life Support' orders after goals of care discussion with patient and/or patient's medical decision-making surrogate and an attending physician.
 - May not have on the job training to enhance their competencies; **but** may enhance their competencies by learning additional skills/procedures within their scope of practice through additional didactic education and supervised clinical practice (achieved through clinical experience in a formalized education/training program) as specified in the Arizona Administrative Code (A.A.C.-Chapter 19-Arizona State Board of Nursing).

INITIAL APPLICANTS

To be eligible to apply for privileges as a nurse practitioner, the applicant must meet the following criteria:

- Completion of a master's, post-master's, or doctorate from a nurse practitioner program accredited by the Commission on the Collegiate of Nursing Education (CCNE) or the National League for Nursing Accrediting Commission (NLNAC) with emphasis on the NP's specialty area (specifically satisfy the qualification requirements for acute care nurse practitioner); **AND**
- Current certification by the American Nurses Credentialing Center, the American Academy of Nurse Practitioners or an equivalent body as determined by the Rules of the Arizona State Board of Nursing.
- Current active licensure to practice as an advanced practice registered nurse in the practitioner category in the state of Arizona (As per the Arizona State Board of Nursing, national certification prior to July 1, 2004 was not requirement for licensure); **AND**
- Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the Valleywise Health Allied Health Professionals Policy/Medical Staff Bylaws, **AND**
- Demonstrate Current Clinical Activity: Applicants for initial appointment must be able to demonstrate provision of services, for at least 50 patients, reflective of the scope of privileges requested, during the past 12 months in a setting similar in scope and complexity to Valleywise Health; or demonstrate successful completion of an accredited college or university formal masters program or a post-masters program in nursing with a concentration in an advanced practice registered nursing category and specialty (as defined under R4-19-501 of the "Rules of the State Board of Nursing") within the past 12 months.

**VALLEYWISE HEALTH
ADVANCED PRACTICE CLINICIAN
WOMEN'S HEALTH NURSE PRACTITIONER PRACTICE PREROGATIVES AND PRIVILEGES**

Name: _____
(PLEASE PRINT)

New Appointment

Reappointment

CHECK SPECIALTY AREA YOU ARE APPLYING FOR:

- Adult Nurse Practitioner
 Geriatric Nurse Practitioner
 Pediatric Nurse Practitioner

Women's Health Care-OB/GYN Practitioner

Other: _____

| CORE PROCEDURES | Requested | Approved | Not Approved | Comment |
|---|-----------|----------|--------------|---------|
| Perform history and physical examination* | | | | |
| Order, perform, and interpret laboratory studies. Order and apply results of radiographic and other diagnostic tests. | | | | |
| Develop, implement and evaluate a plan of care for a patient to promote, maintain, and restore health | | | | |
| Manage OB ED/Triage and Postpartum Patients: Familiarity with the rapid assessment, decision making, treatment, consultation from specialty services, and disposition of pregnant patients. | | | | |
| Pelvic / Rectal examinations | | | | |
| Prescriptive Privileges for non-controlled substances and devices within scope of specialty practice (Prescribing & Dispensing Authority required) | | | | |
| Prescriptive Privileges for controlled substances (DEA registration required) | | | | |
| Order electrocardiogram and perform preliminary interpretation | | | | |
| Order oxygen therapy and inhaled bronchodilator therapy | | | | |
| Order and/or administer intravenous and/or intramuscular medications | | | | |
| Order and/or administer topical medications | | | | |
| Provide appropriate follow-up referrals to the patient upon discharge | | | | |
| Eye: Perform fluorescein and Wood's lamp examination of the eye, Removal of foreign bodies | | | | |
| Ear: Irrigation external auditory canal, removal of foreign bodies | | | | |
| Nose: Removal of foreign bodies, nasal packing | | | | |
| GU: Insert Foley Catheter, Replace previously inserted suprapubic catheter, Removal of vaginal foreign bodies, Drainage of Bartholin's cyst abscess | | | | |
| Extremities: Nail trephination, Immobilization techniques, including splint applications | | | | |
| Wounds: Removal of subcutaneous foreign bodies, Incision and drainage of subcutaneous abscess, Debridement of wounds, Care of cutaneous burns, Repair of cutaneous lacerations | | | | |

*Inpatient history and physical examinations are the responsibility of and require review and countersignature by a member of the Valleywise Health medical staff.

FOCUSED PROFESSIONAL PRACTICE EVALUATION: Minimum of 5 representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.

REAPPOINTMENT REQUIREMENTS: To be eligible to renew core privileges as a NP the applicant must meet the following criteria:

- Current demonstrated competence and current experience with acceptable results for 30 patients reflective of the scope of privileges requested for the past 24 months as a result of ongoing professional practice evaluation activities and outcomes.; **AND**
- Current active licensure to practice as an advanced practice registered nurse in the practitioner category in the state of Arizona, **AND**
- Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the Valleywise Health Allied Health Professionals Policy/Medical Staff Bylaws

**VALLEYWISE HEALTH
ADVANCED PRACTICE CLINICIAN
WOMEN'S HEALTH NURSE PRACTITIONER PRACTICE PREROGATIVES AND PRIVILEGES**

NURSE PRACTITIONER ADVANCED/SPECIAL PROCEDURE PRIVILEGES (see specific criteria): Noncore privileges are requested individually in addition to requesting the core. Each individual requesting advanced privileges must meet the specific threshold criteria as applicable to the initial applicant or re-applicant. Each time a new privilege is requested, it may be requested by the Nurse Practitioner and recommended by the collaborating physician and forwarded to the Valleywise Health Medical Staff Office to be approved and appended to the advanced list of privileges. Where appropriate, procedures may be performed with, or without ultrasound guidance.

Nurse Practitioner Advanced Privileges – The applicant must provide written documentation of current competence (as noted below) for all procedures requested:

a) **Recent graduate (within the past two years)** – A list of requested procedures performed within the educational program, signed by a representative of the program, attesting to competence.

b) **All Others** – A list of requested procedures performed within the previous 2 years.

OR

A signed statement from the collaborating physician confirming that he/she has personally observed the applicant successfully perform the procedure(s) and can attest to his/her competence.

ADVANCED/SPECIAL PROCEDURES (Demonstrated competency must be documented and additional training may be required.)

| ADVANCED/SPECIAL PROCEDURES | Requested | Approved | Not Approved | Comment |
|--|-----------|----------|--------------|---------|
| <p>First Assist: Place retractor to provide exposure; provide hemostatshemostasis by applying hemostats or cautery, tie sutures</p> <p><input type="checkbox"/> Completion of the didactic portion of a recognized First Assist program is required.</p> | | | | |
| <p>MINOR SURGERY PROCEDURES: Mole removal; Biopsy; Incision and Drainage; Suture minor lacerations using local anesthetics; liquid nitrogen and cryotherapy</p> | | | | |
| <p>IUD Removal/Insertion</p> | | | | |
| <p>Endometrial Biopsy</p> | | | | |
| <p>Arterial puncture</p> <p>High Resolution Anoscopy (HRA) with biopsies, infrared coagulation and hyfrecation treatment</p> <p>◆ Applicants must have documentation of completion of training for high resolution anoscopy with biopsies, infrared coagulation and hyfrecation during an accredited residency training, or ASCCCP official continuing medical education course with practicum; AND</p> <p>◆ Demonstrated current competence and evidence of performance of at least five (5) anoscopies with biopsies, 3 IRC treatments and 3 hyfrecation treatments in the past 12 months with acceptable results.</p> | | | | |
| <p>Colposcopy</p> <p>Initial Appointment:</p> <ul style="list-style-type: none"> • Successful completion of an accredited nurse practitioner educational training program that included training in colposcopy procedures; and • Demonstrated current competence and evidence of the performance of at least two (2) colposcopy procedures in the past twelve (12) months OR direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment: Demonstrated current competence and evidence of the performance at least four (4) colposcopy procedures in the past twenty-four (24) months based on the results of ongoing professional practice evaluation and outcomes.</p> | | | | |

VALLEYWISE HEALTH
ADVANCED PRACTICE CLINICIAN
WOMEN'S HEALTH NURSE PRACTITIONER PRACTICE PREROGATIVES AND PRIVILEGES

ADVANCED/SPECIAL PROCEDURES (Demonstrated competency must be documented and additional training may be required.)

| ADVANCED/SPECIAL PROCEDURES | Requested | Approved | Not Approved | Comment |
|---|-----------|----------|--------------|---------|
| <p>Endometrial Biopsy under the supervision of OB/GYN physician <u>Initial Appointment:</u></p> <ul style="list-style-type: none"> • Successful completion of an accredited Nurse Practitioner educational program that included training the performance of endometrial biopsy procedures; and • Demonstrated current competence and evidence of the performance of endometrial biopsy procedures for at least two (2) cases in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p><u>Reappointment:</u> Demonstrated current competence and evidence of the performance of endometrial biopsy procedures for at least four (4) cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> <p>Insulin Start, Adjustments <u>Initial Appointment:</u></p> <ul style="list-style-type: none"> • Successful completion of an accredited Nurse Practitioner educational program that included training in insulin start and adjustments; and • Demonstrated current competence and evidence of the performance of insulin start and adjustments for at least two (2) cases in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p><u>Reappointment:</u> Demonstrated current competence and evidence of the performance of insulin start and adjustments for at least four (4) cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> <p>Ultrasound: Amniotic Fluid Index (AFI), Level I <u>Initial Appointment:</u></p> <ul style="list-style-type: none"> • Successful completion of an accredited Nurse Practitioner educational program that included training in Ultrasound: Amniotic Fluid Index (AFI), Level I; and • Demonstrated current competence and evidence of the performance of Ultrasound: Amniotic Fluid Index (AFI), Level 1 for at least two (2) cases in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p><u>Reappointment:</u> Demonstrated current competence and evidence of the performance in Ultrasound: Amniotic Fluid Index (AFI), Level I) for at least four (4) cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> | | | | |

**VALLEYWISE HEALTH
ADVANCED PRACTICE CLINICIAN
WOMEN'S HEALTH NURSE PRACTITIONER PRACTICE PREROGATIVES AND PRIVILEGES**

| ADVANCED/SPECIAL PROCEDURES | Requested | Approved | Not Approved | Comment |
|--|------------------|-----------------|---------------------|--|
| <p>Fetal Monitoring Initial Appointment:</p> <ul style="list-style-type: none"> • Successful completion of an educational program accredited by the AWHONN or Equivalent in advance fetal monitoring or current competence with at least ten (10) cases in the past 12 months (includes work or labor & delivery or fetal testing center) that included training in Ultrasound: Amniotic Fluid Index (AFI), Level I; and • Demonstrated current competence and evidence of the performance of Ultrasound: Amniotic Fluid Index (AFI), Level 1 for at least two (2) cases in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of two (2) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment: Demonstrated current competence and evidence of the performance in Ultrasound: Amniotic Fluid Index (AFI), Level I) for at least four (4) cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> | | | | <p style="text-align: center;"><input type="checkbox"/> 3* Unless otherwise noted: _____</p> |
| <p>Drainage of Vulvar and Vaginal Cysts and/or Placement of Word Catheter</p> <p>Initial Appointment:</p> <ul style="list-style-type: none"> • Successful completion of an accredited Nurse Practitioner educational program that included training in the performance of drainage of vulvar and vaginal cysts and/or placement of Word Catheter when appropriate; and • Demonstrated current competence and evidence of the performance of drainage of vulvar and vaginal cysts and/or placement of Word Catheter when appropriate for at least two (2) cases in the past twelve (12) months or direct supervision is required for the first procedure performed. <p>Focused Professional Practice Evaluation: Minimum of four (4) representative cases shall be reviewed (additional records may be reviewed to assess the scope of practice has been covered) and completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment: Demonstrated current competence and evidence of the performance of Bartholin's Cyst Removal for at least four (4) cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> | | | | <p style="text-align: center;"><input type="checkbox"/> 3* Unless otherwise noted: _____</p> |

Comments:

- 1) Under Personal Supervision only (A physician must be in the room during the performance of the procedures.)
- 2) Must consult with attending physician prior to procedure
- 3) [General Supervision](#)

**VALLEYWISE HEALTH
ADVANCED PRACTICE CLINICIAN
WOMEN'S HEALTH NURSE PRACTITIONER PRACTICE PREROGATIVES AND PRIVILEGES**

I have requested authorization to perform only those procedures which I am qualified to perform by education, training, current experience and competency and which I wish to exercise at Valleywise Health.

Practitioner's Signature

Date

At this time, the Department of _____ is of the opinion that the practitioner's competency, professional performance, judgment, technical skill and health status is satisfactory and falls within the limits of the practice prerogatives requested.

Department Chairman/Designee

Date

1.d.v. Medical Staff - Nurse Practitioner Family & Community Medicine Privileges Practice Prerogatives

Name of Nurse Practitioner (Print) _____

RESPONSIBLE PARTY: Department Chair, or his/her designee

DEFINITION: A Registered Nurse Practitioner (RNP), a Category II Practitioner, is an advanced practice nurse who provides primary health care and specialized health services to individuals and families. The Nurse Practitioner is employed or contracted to provide services to inpatients and outpatients within Valleywise Health.

"COLLABORATION" means the collaboration with (or supervision of) a Category II practitioner by a Collaborating Physician, that may or may not require the actual presence of the Collaborating Physician, but that does require, at a minimum, that the Collaborating Physician be readily available for consultation. The requisite level of supervision (general, direct, or personal) shall be determined at the time each Category II practitioner is credentialed.

"SUPERVISION" means under the general supervision of an attending physician unless otherwise instructed.

- PREROGATIVES:**
- Shall practice within his/her scope of practice, training and experience to independently assess, diagnose, plan, and treat illnesses by using and adhering to departmental protocols governing patient management, in accordance with Arizona Nursing Board, Arizona Statutes and Arizona Administrative Code.
 - Shall practice in collaboration with an Attending Physician who has unrestricted privileges and medical staff membership in good standing at the Maricopa Integrated Health System and seek appropriate consultation when necessary.
 - Shall participate in quality assurance review on a periodic basis, including systematic review of records and treatment plans
 - Shall make appropriate referrals to other health professionals and community agencies.
 - Shall participate in CME and other Department educational conferences.
 - May prescribe and dispense medications within guidelines approved by the Arizona State Board of Nursing and the Drug Enforcement Administration and Arizona State Board of Pharmacy.
 - May assist in research activities within their respective Valleywise Health Department.
 - May write 'Do Not Resuscitate or Discontinue Life Support' orders after goals of care discussion with patient and/or patient's medical decision-making surrogate and an attending physician.
 - May not have on the job training to enhance their competencies; **but** may enhance their competencies by learning additional skills/procedures within their scope of practice through additional didactic education and supervised clinical practice (achieved through clinical experience in a formalized education/training program) as specified in the Arizona Administrative Code (A.A.C.-Chapter 19-Arizona State Board of Nursing).

INITIAL APPLICANTS

To be eligible to apply for privileges as a NP in Family and Community Medicine Department, the applicant must meet the following criteria:

- Completion of a master's, post-master's, or doctorate from a nurse practitioner program accredited by the Commission on the Collegiate of Nursing Education or the National League for Nursing Accrediting Commission with emphasis on the NP's specialty area.; **AND**
- Current certification by the American Nurses Credentialing Center, the American Academy of Nurse Practitioners or an equivalent body as determined by the Rules of the Arizona State Board of Nursing.
- Current active licensure to practice as an advanced practice registered nurse in the practitioner category in the state of Arizona (As per the Arizona State Board of Nursing, national certification prior to July 1, 2004 was not requirement for licensure); **AND**
- Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the Valleywise Health Allied Health Professionals Policy/Medical Staff Bylaws.



DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
NURSE PRACTITIONER PRIVILEGES

FOCUSED PROFESSIONAL PRACTICE EVALUATION: Minimum of five (5) cases reflective of the scope of privileges practiced shall be reviewed in accordance with the Valleywise Health Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy (additional records may be reviewed to assess the scope of practice has been covered) to include evaluation of chief complaint; history & physical; use of ancillary services; appropriateness of diagnosis; and discharge/instruction.

REAPPOINTMENT REQUIREMENTS: To be eligible to renew core privileges as a NP in Family and Community Medicine, the applicant must meet the following criteria:

- An adequate volume of experience with acceptable results for the past 24 months and demonstrated current competence based on results of ongoing professional practice evaluation and outcomes. Experience must correlate to the privileges requested. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges; **AND**
- Current active licensure to practice as an advanced practice registered nurse in the practitioner category in the state of Arizona, **AND**
- Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the Valleywise Health Allied Health Professionals Policy/Medical Staff Bylaws

FAMILY AND COMMUNITY MEDICINE - NURSE PRACTITIONER CORE PRIVILEGES

Assess, evaluate, diagnose, consult, and treat in the ambulatory setting and provide care to pediatric, adolescent and adult patients with illnesses, diseases, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, and genitourinary systems. Perform outpatient pre-admission, history and physical, order non-invasive outpatient diagnostic tests and services for patients of all ages; review medical records, write in progress notes for patients referred for admission/services; consult with the inpatient attending physician, and observe diagnostic or surgical procedures. Make appropriate follow-up referrals. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills. ***If you wish to exclude any procedures, please strike through those procedures that you do not wish to request, initial, and date.***

| CORE COGNITIVE PRIVILEGES | Requested | Approved | Not Approved | Comment |
|--|-----------|----------|--------------|---------|
| Perform history and physical examination* | | | | |
| Order and interpret laboratory studies. Order and perform preliminary interpretations of simple plain x-ray films with second reading by supervising physician (or radiologist) and apply results. Order and perform other diagnostic tests. | | | | |
| Develop, implement and evaluate a plan of care for a patient to promote, maintain, and restore health | | | | |
| Order electrocardiogram and perform preliminary interpretation | | | | |
| Order cardiopulmonary monitoring and interpret rhythm strip and pulse oximetry | | | | |
| Order oxygen therapy and inhaled bronchodilator therapy | | | | |
| Order intravenous fluids to be administered in clinic | | | | |
| Order intravenous and/or intramuscular medications to be administered in clinic | | | | |
| Order and/or administer topical medications to be administered in the clinic | | | | |
| Prescriptive Privileges for non-controlled substances and devices within scope of specialty practice (Prescribing & Dispensing Authority required) | | | | |
| Prescriptive Privileges for controlled substances (DEA registration required) | | | | |
| Provide appropriate follow-up referrals to the patient upon discharge | | | | |

*A history and physical are the responsibility of and **require** review and countersignature by a member of the Valleywise Health Medical Staff.



**DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
NURSE PRACTITIONER PRIVILEGES**

FAMILY AND COMMUNITY MEDICINE - NURSE PRACTITIONER CORE PRIVILEGES-CONTINUED

| CORE PROCEDURAL PRIVILEGES | Requested | Approved | Not Approved | Comment |
|---|------------------|-----------------|---------------------|--|
| Eye: Perform fluorescein and Wood's lamp examination of the eye, Removal of foreign bodies | | | | 3* |
| Ear: Irrigation of external auditory canal, removal of foreign body | | | | 3* |
| Nose: Removal of foreign body, nasal packing | | | | <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| GU: Insert Foley catheter, Replace previously inserted suprapubic catheter, Removal of vaginal foreign body, Drainage of Bartholin's cyst abscess | | | | <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| Skin – Liquid nitrogen and cryotherapy | | | | |
| Extremities: Nail trephination, Immobilization techniques, including splint applications | | | | <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| Wounds: Removal of subcutaneous foreign bodies, Incision and drainage of subcutaneous abscess, Debridement of wounds, Care of cutaneous burns, Repair of cutaneous lacerations | | | | <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| Perform pelvic, Vaginal Wet Mount, Potassium hydroxide (KOH) and rectal examination | | | | 3* |

**FAMILY AND COMMUNITY MEDICINE NURSE PRACTITIONER ADVANCED NON-CORE PROCEDURES/PRIVILEGES
(See specific criteria)**

Noncore privileges are requested individually in addition to requesting the core. Each individual requesting advanced privileges must meet the specific threshold criteria as applicable to the initial applicant or re-applicant. Each time a new privilege is requested, it may be requested by the Nurse Practitioner and recommended by the collaborating physician and forwarded to the Valleywise Health Medical Staff Office to be approved and appended to the advanced list of privileges.

Focused Professional Practice Evaluation: Minimum of two (2) cases shall be reviewed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy (additional records may be reviewed to assess the scope of practice has been covered) for each advanced procedure/privilege requested with like/same scope of practice.

Family and Community Medicine Nurse Practitioner Advanced Privileges – The applicant must provide written documentation of current competence (as noted below) for all procedures requested:

a) **Recent graduate (within the past two years)** – A list of requested procedures performed within the educational program, signed by a representative of the program, attesting to competence.

b) **All Others** – The applicant must provide written documentation of completion of an approved, accredited training course for advanced procedures to include didactic and hands on skills training within the previous two (2) years **AND** Performance of the requisite number of procedures described below for the initial appointment within the previous two (2) years.

OR

The applicant may provide documentation of current credentialing for the requested advanced procedure(s) **AND** Documentation of performance of the requisite number of procedures below for reappointment within the previous two (2) years.



**DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
NURSE PRACTITIONER PRIVILEGES**

| ADVANCED NON-CORE PROCEDURAL PRIVILEGES | Requested | Approved | Not Approved | Comment |
|--|-----------|----------|--------------|--|
| <p>MINOR SURGERY PROCEDURES: Mole removal; Biopsy; Suture minor lacerations using local anesthetics; liquid nitrogen and cryotherapy</p> <p>Initial Appointment Criteria: Applicant must demonstrate current competence/experience with performance of at least (five) 5 cases for each procedure type named/requested above within the past twelve (12) months.</p> <p>(FPPE Required)</p> <p>Reappointment: Criteria: Current demonstrated competence and experience with acceptable results to demonstrate provision of care for at least ten (10) cases for each procedure type named/requested above within the past twenty-four (24) months as a result of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| <p>IUD Removal/Insertion</p> <p>Initial Appointment Criteria: Applicant must demonstrate current competence/experience with performance at of least five (5) IUD insertions and/or removals within the past twelve (12) months.</p> <p>(FPPE Required)</p> <p>Reappointment Criteria: Current demonstrated competence and current experience with acceptable results to demonstrate provision of care for at least ten (10) cases within the past twenty-four (24) months as a result of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| <p>Subdermal Contraceptive Capsule (insertion and removal)</p> <p>Initial Appointment Criteria: Applicant must achieve training and certification with a subdermal contraceptive manufacturer; AND first five (5) cases to be with direct supervision.</p> <p>(FPPE required)</p> <p>Reappointment Criteria: Current demonstrated competence and current experience with acceptable results to demonstrate provision of care for at least ten (10) cases within the past twenty-four (24) months as a result of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |

ADVANCED NON-CORE PROCEDURES/PRIVILEGES - CONTINUED

| ADVANCED NON-CORE PROCEDURAL PRIVILEGES | Requested | Approved | Not Approved | Comment |
|--|-----------|----------|--------------|---|
| <p>Toenail Removal Initial Appointment Criteria: Applicant must have received the necessary didactic training and clinical experience to demonstrate current competency/experience with the performance of at least two (2) cases within the past twelve (12) months.</p> <p>(FPPE Required) Reappointment Criteria: Current demonstrated competence and current experience with acceptable results to demonstrate provision of care for at least four (4) cases within the past twenty-four (24) months as a result of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| <p>Women’s Health Privileges (Uncomplicated Prenatal Care):</p> <ul style="list-style-type: none"> ◆ Applicant must have documentation of completion training in Women’s Health Care; AND ◆ Demonstrate current competence and evidence performance Women’s health services as noted below: <ul style="list-style-type: none"> ➢ Perform Prenatal/Gynecologic Patient Care ➢ Perform interval women’s health surveillance examination & procedures; ➢ Non-Stress Test and Contraction Stress Test Interpretation <p>(FPPE Required) Reappointment Criteria: Current demonstrated competence and current experience with acceptable results to demonstrate provision of care to at least ten (10) patients reflective of the scope of privileges requested for the past 24 months as a result of ongoing professional practice evaluation activities and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| <p>High Resolution Anoscopy (HRA) with biopsies, infrared coagulation and hyfrecation treatment</p> <ul style="list-style-type: none"> ◆ Applicants must have documentation of completion of training for high resolution anoscopy with biopsies, infrared coagulation and hyfrecation during an accredited residency training, or ASCCP official continuing medical education course with practicum; AND ◆ Demonstrated current competence and evidence of performance of at least five (5) anoscopies with biopsies, 3 IRC treatment and 3 hyfrecation treatments in the past 12 months with acceptable results. <p>(FPPE Required) Reappointment Criteria: Current demonstrated competence and performance of at least ten (10) procedures with acceptable results and reflective of the scope of privileges requested for the past twelve (12) months based on results of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |



**DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
NURSE PRACTITIONER PRIVILEGES**

ADVANCED NON-CORE PROCEDURES/PRIVILEGES - CONTINUED

| ADVANCED NON-CORE PROCEDURAL PRIVILEGES | Requested | Approved | Not Approved | Comment |
|--|-----------|----------|--------------|---|
| <p>Therapeutic Procedures to include Arthrocentesis/Joint Aspirations Injections of joints, tendons, bursa or trigger points (including the greater trochanter but excluding the hip and spine) Initial Criteria:</p> <ul style="list-style-type: none"> • Demonstrated current competence; AND • Personal/Concurrent Supervision of the first three (3) major* joint procedures (Letter from supervising physician documenting "Personal Supervision" occurred with favorable outcomes for the major* joint procedures performed) <p>Focused Professional Practice Evaluation: Ongoing review of competency and performance conducted by supervising physician(s).</p> <p>Reappointment Criteria: Demonstrated current competence and the performance of at least three (3) major* joint procedures in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> <p><i>*Major Joint: Defined as the shoulder, elbow, wrist, knee, and ankle.</i></p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |

*Comments:

- 1) Under Personal Supervision only (A physician must be in the room during the performance of the procedures.)
- 2) Must consult with attending physician prior to procedure
- 3) General Supervision

Acknowledgement of Applicant

I have requested only those practice prerogatives for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at The Maricopa Integrated Health System, and I understand that:

- a. In exercising any practice prerogatives granted, I am constrained by Hospital and Medical Staff/Allied Health Professional Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the practice prerogatives granted to me is waived in an emergent situation and in such situation; my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____ **Date** _____
Applicant «longname_of_providers»

- General Supervision (GS) 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.
- Direct Supervision (DS) 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.
- Personal Supervision (PS) A physician must be in the room during the performance of the procedure.



DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
NURSE PRACTITIONER PRIVILEGES

1.d.vi. Medical Staff - Physician Assistant Family & Community Medicine Privileges Practice Prerogatives



**DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
PHYSICIAN ASSISTANT PRIVILEGES**

Name of Physician Assistant (Print) _____

Date _____

| | |
|-------------------------------|--|
| RESPONSIBLE PARTY: | Department Chair/designee, or Sponsorship by physician(s) who is/are member(s) in good standing of the Valleywise Health. |
| DEFINITION: | Physician Assistant, a Category II Practitioner, who provides medical care under the guidance of a physician supervisor at the Valleywise Community Health Centers, Valleywise Comprehensive Health Centers, other Valleywise Health owned or operated ambulatory settings, and Valleywise Health Medical Center. |
| SUPERVISION: | Under direction and supervision of a sponsoring physician, in accordance with Arizona statutes and regulations. Direct Supervision: Physician on site that can intervene when necessary. |
| PRACTICE PREROGATIVES: | <ul style="list-style-type: none"> • Shall be members of the Allied Health Professional staff assigned to a Clinical Department. • Shall provide inpatient and/or outpatient medical care to patients, in accordance with Arizona statutes, rules and regulations, and guidelines. • Shall triage patients as well as assist nursing staff in triage. • Shall maintain accurate, complete and legible patient records. • Shall monitor the effectiveness of therapeutic interventions. • Shall initiate emergency care when needed. • Shall advise families and patients regarding types of services available and provide counseling in areas such as family planning, maternity care, child health, emotional stress, and general health problems. • Shall participate in the Department's peer review and QI processes. • May prescribe medications in accordance with the rules and regulations of the Arizona Regulatory Board of Physician Assistants, the Arizona State Board of Pharmacy and the Drug Enforcement Administration. • Shall agree to abide by applicable policies and procedures established by the Medical Staff and Valleywise Health • May participate on various committees within Valleywise Health or as designated by the Department Chairman. • May perform invasive procedures as delineated by the applicable clinical department based on demonstrated clinical competence and training and delegated by supervising physician. |

INITIAL APPLICANTS

To be eligible to apply for privileges as a Physician Assistant in Family and Community Medicine, the applicant must meet the following criteria:

- Graduate of an Accreditation Review Commission on Education for the Physician Assistant (ARC-PA)-approved program (prior to January 2001, completion of a Commission on Accreditation of Allied Health Education Programs-approved program); **AND**
- Current Arizona license issued by the State of Arizona's Joint Board on the Regulation of Physician Assistants; **AND** Drug Enforcement Administration (DEA) Certification, if applicable; **AND**
- Current National Certification (NCCPA) re-registration and re-certification required as specified by the National Commission on Certification of Physicians Assistants (*For those Physicians Assistants practicing at Valleywise Health prior to May 2001, current NCCPA certification is preferred, but not a condition for appointment to the AHP staff. Any non-certified Physician Assistant "grandfathered-in" will be required to attain certification in the ensuing two-year period.*); Current active licensure to practice as physician assistant in the state of Arizona; **AND**
- Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the Valleywise Health Allied Health Professionals Policy/Medical Staff Bylaws

FOCUSED PROFESSIONAL PRACTICE EVALUATION

Minimum of five (5) cases shall be reviewed in accordance with the Valleywise Health Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy (additional records may be reviewed to assess the scope of practice has been covered)- to include evaluation of chief complaint; history & physical; use of ancillary services; appropriateness of diagnosis; and discharge/instruction.



**DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
PHYSICIAN ASSISTANT PRIVILEGES**

REAPPOINTMENT REQUIREMENTS

To be eligible to renew core privileges as a physician assistant in Family and Community Medicine, the applicant must meet the following criteria:

- An adequate volume of experience with acceptable results for the past 24 months and demonstrated current competence based on results of ongoing professional practice evaluation and outcomes. Experience must correlate to the privileges requested. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges; **AND**
- Current active licensure to practice as a physician assistant in the state of Arizona, **AND**
- Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the Valleywise Health Allied Health Professionals Policy/Medical Staff Bylaws

FAMILY AND COMMUNITY MEDICINE – PHYSICIAN ASSISTANT CORE PRIVILEGES

Assess, evaluate, diagnose, consult, and treat in the ambulatory setting and provide care to pediatric, adolescent and adult patients with illnesses, diseases, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, and genitourinary systems. Perform outpatient pre-admission, history and physical, order non-invasive outpatient diagnostic tests and services for patients of all ages; review medical records, write in progress notes for patients referred for admission/services; consult with the inpatient attending physician, and observe diagnostic or surgical procedures. Make appropriate follow-up referrals. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills. ***If you wish to exclude any procedures, please strike through those procedures that you do not wish to request, initial, and date.***

| PHYSICIAN ASSISTANT CORE COGNITIVE PRIVILEGES | Requested | Approved | Not Approved | Comment |
|--|-----------|----------|--------------|---------|
| Perform history and physical examination* | | | | |
| Order and interpret laboratory studies. Order and perform preliminary interpretations of simple plain x-ray films with second reading by supervising physician (or radiologist) and apply results. Order and perform other diagnostic tests. | | | | |
| Develop, implement and evaluate a plan of care for a patient to promote, maintain, and restore health | | | | |
| Order electrocardiogram and perform preliminary interpretation | | | | |
| Order cardiopulmonary monitoring and interpret rhythm strip and pulse oximetry | | | | |
| Order oxygen therapy and inhaled bronchodilator therapy | | | | |
| Order intravenous fluids to be administered in clinic | | | | |
| Order intravenous and/or intramuscular medications to be administered in clinic | | | | |
| Order and/or administer topical medications to be administered in the clinic | | | | |
| Prescriptive Privileges for non-controlled substances and devices within scope of specialty practice (Prescribing & Dispensing Authority required) | | | | |
| Prescriptive Privileges for controlled substances (DEA registration required) | | | | |
| Provide appropriate follow-up referrals to the patient upon discharge | | | | |

*A history and physical are the responsibility of and **require** review and countersignature by a member of the Valleywise Health Medical Staff.



**DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
PHYSICIAN ASSISTANT PRIVILEGES**

FAMILY AND COMMUNITY MEDICINE – PHYSICIAN ASSISTANT CORE PRIVILEGES -CONTINUED

| CORE PROCEDURAL PRIVILEGES | Requested | Approved | Not Approved | Comment |
|---|-----------|----------|--------------|--|
| Eye: Perform fluorescein and Wood's lamp examination of the eye, Removal of foreign bodies | | | | 3* |
| Ear: Irrigation of external auditory canal, removal of foreign body | | | | <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| Nose: Removal of foreign body, nasal packing | | | | <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| GU: Insert Foley catheter, Replace previously inserted suprapubic catheter, Removal of vaginal foreign body, Drainage of Bartholin's cyst abscess | | | | <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| SKIN: <u>Liquid nitrogen and cryotherapy</u> | | | | |
| Extremities: Nail trephination, Immobilization techniques, including splint applications | | | | <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| Wounds: Removal of subcutaneous foreign bodies, Incision and drainage of subcutaneous abscess, Debridement of wounds, Care of cutaneous burns, Repair of cutaneous lacerations | | | | <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| Perform Pelvic, Vaginal Wet Mount, Potassium hydroxide (KOH) and rectal examination | | | | 3* |

FAMILY AND COMMUNITY MEDICINE PHYSICIAN ASSISTANT ADVANCED NON-CORE PRIVILEGES (see specific criteria)

Noncore privileges are requested individually in addition to requesting the core. Each individual requesting advanced privileges must meet the specific threshold criteria as applicable to the initial applicant or re-applicant. Each time a new privilege is requested, it may be requested by the physician assistant and recommended by the supervising physician and forwarded to the Valleywise Health Medical Staff Office to be approved and appended to the advanced list of privileges.

Focused Professional Practice Evaluation: Minimum of two (2) cases shall be reviewed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy (additional records may be reviewed to assess the scope of practice has been covered) for each advanced procedure/privilege requested with like/same scope of practice.

| ADVANCED NON-CORE PROCEDURAL PRIVILEGES | Requested | Approved | Not Approved | Comment |
|--|-----------|----------|--------------|--|
| <p>MINOR SURGERY PROCEDURES: Mole removal; Biopsy; Suture minor lacerations using local anesthetics; <u>liquid nitrogen and cryotherapy</u></p> <p>Initial Appointment Criteria: Applicant must demonstrate current competence/experience with performance of at least ten (10) cases for each procedure type named/requested above within the previous 2 years; OR Be directly supervised by supervising physician of each procedure type</p> <p>(FPPE Required)</p> <p>Reappointment: Criteria: Current demonstrated competence and experience with acceptable results to demonstrate provision of care for at least ten (10) cases for each procedure type named/requested above within the past twenty-four (24) months as a result of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |



**DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
PHYSICIAN ASSISTANT PRIVILEGES**

| ADVANCED NON-CORE PROCEDURAL PRIVILEGES | Requested | Approved | Not Approved | Comment |
|---|-----------|----------|--------------|--|
| <p>IUD Removal/Insertion</p> <p>Initial Appointment Criteria: Applicant must demonstrate current competence/experience with performance at of least ten (10) IUD insertions and/or removals within the previous 2 years; OR Be directly supervised by supervising physician.</p> <p>(FPPE Required)</p> <p>Reappointment Criteria: Current demonstrated competence and current experience with acceptable results to demonstrate provision of care for at least ten (10) cases within the past twenty-four (24) months as a result of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| <p>Subdermal Contraceptive Capsule (insertion and removal)</p> <p>Initial Appointment Criteria: Applicant must achieve training and certification with a subdermal contraceptive manufacturer; AND first five (5) cases to be with direct supervision.</p> <p>(FPPE required)</p> <p>Reappointment Criteria: Current demonstrated competence and current experience with acceptable results to demonstrate provision of care for at least ten (10) cases within the past twenty-four (24) months as a result of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| <p>High Resolution Anoscopy (HRA) with biopsies, infrared coagulation and hyfrecation treatment</p> <ul style="list-style-type: none"> ◆ Applicants must have documentation of completion of training for high resolution anoscopy with biopsies, infrared coagulation and hyfrecation during an accredited residency training, or ASCCCP official continuing medical education course with practicum; AND ◆ Demonstrated current competence and evidence of performance of at least five (5) anoscopies with biopsies, 3 IRC treatments and 3 hyfrecation treatments in the past 12 months with acceptable results; OR ◆ First five (5) cases under Personal Supervision/Concurrent review with a physician with like/unsupervised privileges. <p>(FPPE Required)</p> <p>Reappointment Criteria: Current demonstrated competence and current experience with acceptable results to demonstrate provision of care to at least ten (10) patients reflective of the scope of privileges requested for the past 24 months as a result of ongoing professional practice evaluation activities and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |



**DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
PHYSICIAN ASSISTANT PRIVILEGES**

| ADVANCED NON-CORE PROCEDURAL PRIVILEGES | Requested | Approved | Not Approved | Comment |
|--|-----------|----------|--------------|--|
| <p>Therapeutic Procedures to include Arthrocentesis/Joint Aspirations and Injections of joints, tendons, bursa or trigger points (including the greater trochanter but excluding the hip and spine)</p> <p>Initial Criteria:</p> <ul style="list-style-type: none"> • Applicant with previous training and experience must demonstrate current competence; AND • Personal/Concurrent Supervision of the first three (3) major* joint procedures (Letter from supervising physician documenting “Personal Supervision” occurred with favorable outcomes for the major* joint procedures performed); OR • Applicant with no previous training and experience will be under Personal/Concurrent Supervision of at least the first three (3) major* joint procedures (Letter from supervising physician documenting “Personal Supervision” occurred with favorable outcomes for the major* joint procedures performed). <p>Focused Professional Practice Evaluation: Ongoing review of competency and performance conducted by supervising physician(s).</p> <p>Reappointment Criteria: Demonstrated current competence and the performance of at least three (3) major* joint procedures in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> <p><i>*Major Joint: Defined as the shoulder, elbow, wrist, knee, and ankle.</i></p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |
| <p>Toenail Removal</p> <p>Initial Appointment Criteria: Applicant must have received the necessary didactic training and clinical experience to demonstrate current competency/experience with the performance of at least two (2) cases within the past twelve (12) months; OR Applicant with no previous training and experience will be under Personal/Concurrent Supervision.</p> <p>(FPPE Required)</p> <p>Reappointment Criteria: Current demonstrated competence and current experience with acceptable results to demonstrate provision of care for at least four (4) cases within the past twenty-four (24) months as a result of ongoing professional practice evaluation and outcomes.</p> | | | | <input type="checkbox"/> 1* OR <input type="checkbox"/> 2* OR <input type="checkbox"/> 3* |

*Comments:

- 1) Under Personal Supervision only (A physician must be in the room during the performance of the procedures.)
- 2) Must consult with attending physician prior to procedure
- 3) General Supervision



**DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
PHYSICIAN ASSISTANT PRIVILEGES**

Acknowledgement of Applicant

I have requested only those practice prerogatives 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 practice prerogatives granted, I am constrained by Hospital and Medical Staff/Allied Health Professional Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the practice prerogatives granted to me is waived in an emergent situation and in such situation; my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____ **Date** _____
Applicant

SPONSORING/SUPERVISING PHYSICIAN

As sponsoring/supervising physician of the applicant, I understand it is my responsibility to ensure the applicant abides by the Medical Staff Bylaws, Rules & Regulations, Department Rules & Regulations, any policies and procedures established by the Valleywise Health, and practices within the scope of his/her license/certification/registration and practice prerogatives. Furthermore, I understand that it is my responsibility to provide support, supervision, and oversight as may be required, depending on the skills of the Physician's Assistant and the patient population being treated.

Signature of Sponsoring Physician

Sponsoring Physician Specialty

Date

- General Supervision (GS) 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.
- Direct Supervision (DS) 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.
- Personal Supervision (PS) A physician must be in the room during the performance of the procedure.

1.d.vii. Medical Staff - Department of Family & Community Medicine Privileges

Valleywise Health Family and Community Medicine

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.]

RECOGNIZED BOARDS: American Board of Medical Specialties ("ABMS") **AND** The National Board of Physicians and Surgeons ("NBPAS")

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.

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
FAMILY AND COMMUNITY MEDICINE
Valleywise Health
FAMILY AND COMMUNITY MEDICINE**

Criteria-Based Core Privileges: Family and Community Medicine

To be eligible to apply for core privileges in family and community medicine, the applicant must meet Valleywise Health medical staff membership requirements as outlined in the Medical Staff Bylaws, Credentials Policy, and the following privileging criteria: Additional non-core special privileges may be requested in this specialty by those practitioners who qualify for core privileges and meet the respective criteria of the non-core privilege requested.

INITIAL APPLICANTS

| | |
|----------------------------|--|
| Education | Successful completion of a residency training program in family medicine accredited by the Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) equivalent. |
| Board Certification | Current certification or board eligibility with achievement of certification within the time frame designated by the American Board of Family Medicine, or American Osteopathic Association (AOA) equivalent. |
| Clinical Activity | Applicants for initial appointment must be able to demonstrate provision of services, reflective of the scope of privileges requested, during the past 12 months in a family medicine department similar in scope and complexity to Valleywise Health, or demonstrate successful completion of an accredited residency, clinical fellowship within the past 12 months. |

FOCUSED PROFESSIONAL PRACTICE EVALUATION

| | |
|---|--|
| Guidelines for Initial Appointment | For newly granted privileges, FPPE shall consist of a retrospective review of the first five procedures/cases that are representative of a cross-section of the privileges granted. It is expected that the FPPE for initially granted privileges will be completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy. |
|---|--|

REAPPOINTMENT

Current demonstrated competence and current experience of 50 outpatients [performance of, or direct supervision of performance] with acceptable results reflective of the scope [clinical representation from each core] of privileges requested for the past 24 months as a result of ongoing professional practice evaluation activities and outcomes.

The core privileges include procedures and such other procedures that are extensions of the same techniques and skills. ***If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.***

| | |
|--|--|
| <input type="checkbox"/> Requested | Ambulatory Pediatrics, Adolescent and Adult Core (Cognitive) Privileges |
| <p>Evaluate, diagnose, consult, and treat in the ambulatory setting and provide care to pediatric, adolescent and adult patients with illnesses, diseases, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, and genitourinary systems. Perform outpatient pre-admission, history and physical, order non-invasive outpatient diagnostic tests and services for patients of all ages; visit patients in hospital, review medical records, write in progress notes for patients referred for admission/services; consult with the inpatient attending physician, and observe diagnostic or surgical procedures. <i>Where appropriate, procedures may be performed with, or without ultrasound guidance.</i></p> <p>Cognitive Skills:</p> <ol style="list-style-type: none"> a. Perform history and physical examination b. Order medical imaging studies and perform preliminary interpretation c. Order laboratory tests and analyze results d. Order electrocardiogram and perform preliminary interpretation e. Order cardiopulmonary monitoring and interpret rhythm strip and pulse oximetry f. Order oxygen therapy and inhaled bronchodilator therapy g. Order intravenous fluids to be administered in clinic h. Order intravenous and/or intramuscular medications to be administered in clinic i. Order and/or administer topical medications to be administered in the clinic j. Prescribe medications to the patient upon discharge k. Provide appropriate follow-up referrals to the patient upon discharge | |

Valleywise Health
FAMILY AND COMMUNITY MEDICINE

| <input type="checkbox"/> Requested | Ambulatory Pediatrics, Adolescent and Adult (Procedural) Core Privileges |
|---|--|
| <p>Evaluate, diagnose, consult, and treat in the ambulatory setting and provide care to pediatric, adolescent and adult patients with illnesses, diseases, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, and genitourinary systems. Perform outpatient pre-admission, history and physical, order non-invasive outpatient diagnostic tests and services for patients of all ages; visit patients in hospital, review medical records, write in progress notes for patients referred for admission/services; consult with the inpatient attending physician, and observe diagnostic or surgical procedures. <i>Where appropriate, procedures may be performed with, or without ultrasound guidance.</i></p> <p>Procedural Skills:</p> <ul style="list-style-type: none"> • Arthrocentesis and joint injection • Burns, superficial and partial thickness • I & D abscess • Immobilization techniques, including splint applications, and reduction of simple dislocations Irrigation of external auditory canal, removal of foreign body • Local anesthetic techniques • Manage uncomplicated minor closed fractures and uncomplicated dislocations • Perform history and physical examination • Pre-natal care and Postpartum care • Perform fluorescein and Wood's lamp examination of the eye, removal of ocular foreign bodies using cotton swab • Perform simple skin biopsy or excision • Placement of anterior and posterior nasal hemostatic packing • Remove non-penetrating foreign body from the eye, nose, or ear • Endometrial Biopsy • IUD placement • Suture uncomplicated lacerations • Perform pelvic and rectal examination, Pap smears, Removal of vaginal foreign body, Insertion and removal of intrauterine devices. Vaginal wet mount, Potassium hydroxide (KOH) • Drainage of Bartholin's cyst abscess • Insert Foley catheter/Replace established suprapubic catheter • Nail trephine techniques • EKG interpretation • Cryosurgery/cautery for benign disease • Removal of subcutaneous foreign bodies, incision and drainage of subcutaneous abscess, debridement of wounds, care of cutaneous burns, repair of cutaneous lacerations • Toenail removal • Tympanometry • Subcutaneous contraceptive implant placement (with certificate) | |

| <input type="checkbox"/> Requested | In-Patient Core Adult Cognitive and Adult Procedural Privileges |
|--|---|
| <p>Initial Clinical Activity Requirement: Demonstrated current competency in the provision of services, reflective of the scope of the privileges requested for at least twenty (20) adult patients during the past twelve (12) months in a family medicine department similar in scope and complexity to Valleywise Health, OR demonstrate successful completion of an accredited residency, clinical fellowship within the past twelve (12) months.</p> <p>Cognitive Privileges: Admit, evaluate, perform history and physical, evaluate, diagnose, treat and provide consultation to outpatients and inpatients, with common and complex illnesses, diseases, and functional disorders not requiring ICU/Critical Care of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, and genitourinary systems. The core privileges in this specialty include those procedures listed and such other procedures that are extensions of the same techniques and skills.</p> <p>Procedural Privileges: Abscess I & D, Arterial Puncture, Arthrocentesis, Insertion of Central venous catheter, Insertion of Cryotherapy, ECG Interpretation (basic), GYN (basic) procedures (e.g., screening examination, vaginal cytology, wet mount), Joint Aspiration & Periarticular Injection, Lumbar Puncture, insertion of Nasogastric tube, insertion of Paracentesis, Uncomplicated Sutures (not involving nerves, tendons, bones, joints, eyes), Skin Biopsy, and Thoracentesis.</p> <p>Focused Professional Practice Evaluation: Shall consist of a retrospective review of five (5) procedures/cases that are representative of a cross-section of the privileges granted. It is expected that the FPPE for initially granted privileges will be completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Current demonstrated competence and current experience of forty (40) inpatients [performance of, or direct supervision of performance] with acceptable results reflective of the scope [clinical representation from each core] of privileges requested for the past 24 months as a result of ongoing professional practice evaluation activities and outcomes.</p> | |

Valleywise Health
FAMILY AND COMMUNITY MEDICINE

| <input type="checkbox"/> Requested | In-Patient Newborn Care Cognitive and Procedural Privileges |
|--|--|
| <p>Additional Initial Criteria: <u>Demonstrated current competency in the provision of services, reflective of the scope of the privileges requested in the care of healthy newborn infants for at least five (5) during the past twelve (12) months in a family medicine department similar in scope and complexity to Valleywise Health, OR demonstrate successful completion of an accredited residency, clinical fellowship within the past 12 months.</u></p> <p>Cognitive Privileges: <u>Admit, evaluate, perform a history and physical, treat and perform consultation on newborn patients on the regular hospital floors and outpatients treated in outpatient clinics within Valleywise Health who present with common and complex illnesses, which carry a significant threat to life, including pre-term and low birth weight infants. This includes the treatment of illnesses, injuries, functional disorders of, or conditions not requiring critical care/inpatient care outside of the normal newborn nursery (e.g., The treatment of undiagnosed anemia, reactive airway disease, routine preoperative and postoperative care, infections, feeding difficulties, congenital abnormalities, and fluid management) common to neonates, and infants.</u></p> <p>Procedural Privileges: <u>Fluids, Antibiotics, and Electrolytes (management of); Endotracheal Intubations (emergent only-NRP certification); Intraosseous line (emergent only); Insertion of Nasogastric tube.</u></p> <p>Focused Professional Practice Evaluation: <u>Shall consist of a retrospective review of five (5) procedures/cases that are representative of a cross-section of the privileges granted. It is expected that the FPPE for initially granted privileges will be completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</u></p> <p>Reappointment Criteria: <u>Current demonstrated competence and current experience of ten (10) newborns [performance of, or direct supervision of performance] with acceptable results reflective of the scope [clinical representation from each core] of privileges requested for the past 24 months as a result of ongoing professional practice evaluation activities and outcomes.</u></p> | |

| <input type="checkbox"/> Requested | In-Patient Neonate, Infant, Children- Pediatric Cognitive and Procedural Privileges |
|---|--|
| <p>Additional Initial Criteria: Demonstrated current competency in the provision of services, reflective of the scope of the privileges requested in the care of neonates, infants, children for at least twenty (20) patients in a combination of ages treated during the past twelve (12) months in a family medicine department similar in scope and complexity to Valleywise Health, OR demonstrate successful completion of an accredited residency, clinical fellowship within the past 12 months.</p> <p>Cognitive Privileges: Admit, evaluate, perform a history and physical, treat and perform consultation on general pediatric patients 18 years of age or under including the care of the newborn patients on the regular hospital floors and special care units and outpatients treated in outpatient clinics within Valleywise Health who present with common and complex illnesses, which carry a significant threat to life, including pre-term and low birth weight infants. This includes the treatment of illnesses, injuries, functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, genitourinary systems, or conditions posing no significant risk of life (e.g., The treatment of undiagnosed anemia, reactive airway disease, routine preoperative and postoperative care, infections, feeding difficulties, congenital abnormalities, and fluid management) common to pediatric patients including neonates, and infants.</p> <p>Procedural Privileges: Anesthesia (local infiltration, topical, minor nerve blocks); Arterial puncture, Arterial line insertion; Arthrocentesis (≥12 years of age); EKG interpretation; Electrocardioversion (emergent only); I&D of Superficial Abscesses; Fluids and electrolytes (management of); Manage uncomplicated closed fractures and uncomplicated dislocations, splinting, and immobilization techniques; Pelvic examinations; Endotracheal Intubations (emergent only); Intraosseous line (emergent only); Insertion of Nasogastric tube; Lumbar puncture; Repair of lacerations; Removal of non-penetrating foreign body from eye, nose, or ear; Perform simple skin biopsy/excision; and Venipuncture and peripheral intravenous line placement.</p> <p>Focused Professional Practice Evaluation: Shall consist of a retrospective review of five (5) procedures/cases that are representative of a cross-section of the privileges granted. It is expected that the FPPE for initially granted privileges will be completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Current demonstrated competence and current experience of forty (40) inpatients [performance of, or direct supervision of performance] with acceptable results reflective of the scope [clinical representation from each core] of privileges requested for the past 24 months as a result of ongoing professional practice evaluation activities and outcomes.</p> | |

Valleywise Health
FAMILY AND COMMUNITY MEDICINE

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| <input type="checkbox"/> Requested | In-Patient Obstetric – Delivery Related Cognitive and Procedural Privileges |
| <p>Additional Initial Criteria: Applicant must provide documentation of a three (3) to four (4) months obstetrical rotation during an accredited family medicine residency training program with evidence of performance of at least ten (10) deliveries; OR documentation of successful completion of an accredited family medicine residency training program which included a 3–4-month obstetrical rotation AND performance of at least ten (10) deliveries in the past twelve (12) months.</p> <p>Cognitive Privileges: Admit, evaluate and manage female patients with normal term pregnancy, with an expectation of non-complicated vaginal delivery, management of labor and delivery, and procedures related to normal delivery including medical diseases that are complicating factors in pregnancy.</p> <p>Procedural Privileges: Amniotomy; Augmentation of labor and postpartum care; Excision of vulvar lesions at delivery; External and internal fetal monitoring; First assistant – C-Section; Induction of labor with consultation and Pitocin management; Management of uncomplicated labor; Management of Pre-eclampsia, excluding severe disease; Manual removal of placenta, post- delivery; Normal spontaneous vaginal delivery ≥34 weeks gestation; Oxytocin challenge test; Perform history/physical examination; Management of post-partum hemorrhage (PPH); Management of post-partum endometritis; Pudendal anesthesia; Repair of episiotomy – 1st, 2nd, and 3rd degree; Repair of vaginal and cervical lacerations; Vacuum assisted delivery; Ultrasound AFT, BPP and position determination.</p> <p>Focused Professional Practice Evaluation: Shall consist of a retrospective review of five (5) procedures/cases that are representative of a cross-section of the privileges granted. It is expected that the FPPE for initially granted privileges will be completed in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Current demonstrated competence and current experience of twenty (20) inpatients [performance of, or direct supervision of performance] with acceptable results reflective of the scope [clinical representation from each core] of privileges requested for the past 24 months as a result of ongoing professional practice evaluation activities and outcomes.</p> | |

Special Non-Core Privileges or Procedures

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| <input type="checkbox"/> Requested | <u>Paracentesis</u> |
| <p><u>Initial Criteria:</u></p> <ul style="list-style-type: none"> ◆ <u>Applicants must have documentation of completion of training for paracentesis during an accredited residency training; AND</u> ◆ <u>Demonstrated current competence and evidence of performance of at least five (5) paracenteses in the past 12 months with acceptable results.</u> <p><u>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</u></p> <p><u>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (5 paracentesis) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</u></p> | |

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|---|----------------------------|
| <input type="checkbox"/> Requested | <u>Central Line</u> |
| <p><u>Initial Criteria:</u></p> <ul style="list-style-type: none"> ◆ <u>Applicants must have documentation of completion of training for central line during an accredited residency training; AND</u> ◆ <u>Demonstrated current competence and evidence of performance of at least five (5) central lines in the past 12 months with acceptable results.</u> <p><u>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</u></p> <p><u>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (5 central lines) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</u></p> | |

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|--|-----------------------------|
| <input type="checkbox"/> Requested | <u>Thoracentesis</u> |
| <p><u>Initial Criteria:</u></p> <ul style="list-style-type: none"> ◆ <u>Applicants must have documentation of completion of training for thoracentesis during an accredited residency training; AND</u> ◆ <u>Demonstrated current competence and evidence of performance of at least five (5) thoracenteses in the past 12 months with acceptable results.</u> <p><u>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</u></p> <p><u>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (5 thoracenteses) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</u></p> | |

Valleywise Health
FAMILY AND COMMUNITY MEDICINE
Special Non-Core Privileges or Procedures

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| <input type="checkbox"/> Requested | Colposcopy |
| <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Applicants must have documentation of completion of training for colposcopy during an accredited residency training; AND ◆ Demonstrated current competence and evidence of performance of at least five (5) colposcopies in the past 12 months with acceptable results. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (5 colposcopies) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

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| <input type="checkbox"/> Requested | Colonoscopy |
| <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Applicants must have documentation of completion of training for colonoscopy during an accredited residency training; AND ◆ Demonstrated current competence and evidence of performance of at least five (5) colonoscopies in the past 12 months with acceptable results. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (12 colonoscopies) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

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| <input type="checkbox"/> Requested | High Resolution Anoscopy (HRA) with biopsies, infrared coagulation and hyfrecation treatment |
| <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Applicants must have documentation of completion of training for high resolution anoscopy with biopsies, infrared coagulation and hyfrecation during an accredited residency training, or ASCCP official continuing medical education course with practicum; AND ◆ Demonstrated current competence and evidence of performance of at least five (5) anoscopies with biopsies, 3 IRC treatments and 3 hyfrecation treatments in the past 12 months with acceptable results. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (5 anoscopies with biopsies, 3 IRC treatments and 3 hyfrecation treatments) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

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| <input type="checkbox"/> Requested | Subdermal Contraceptive Capsule (insertion and removal) |
| <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Received training during an accredited residency and/or fellowship program or equivalent verifiable training from a qualified physician; AND ◆ Current demonstrated competence and an adequate volume of experience five (5) cases with acceptable results in the privileges requested for the past 12 months based on results of ongoing professional practice evaluation and outcomes. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience five (5) cases with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

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| <input type="checkbox"/> Requested | Subdermal Contraceptive Capsule (insertion and removal) |
| <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Received training during an accredited residency and/or fellowship program or equivalent verifiable training from a qualified physician; OR ◆ Completion of CME in subdermal contraceptive capsule (insertion and removal); AND ◆ Current demonstrated competence and an adequate volume of experience five (5) cases with acceptable results in the privileges requested for the past 12 months based on results of ongoing professional practice evaluation and outcomes. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience five (5) cases with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

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| <input type="checkbox"/> Requested | Newborn Circumcision (<31 days) |
| <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Received training during an accredited residency and/or fellowship program or equivalent verifiable training from a qualified physician; AND ◆ Current demonstrated competence and an adequate volume of experience five (5) cases with acceptable results in the privileges requested for the past 12 months based on results of ongoing professional practice evaluation and outcomes. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</p> | |

Valleywise Health
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Reappointment Criteria: Current demonstrated competence and an adequate volume of experience five (5) cases with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

**Valleywise Health
FAMILY AND COMMUNITY MEDICINE**

Special Non-Core Privileges or Procedures

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| <input type="checkbox"/> Requested | Vasectomy |
| <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Received training during residency and/or fellowship program or equivalent verifiable training from a qualified physician; AND ◆ Current demonstrated competence and an adequate volume of experience (10 vasectomies) with acceptable results in the privileges requested for the past 12 months based on results of ongoing professional practice evaluation and outcomes. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (5 vasectomies) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

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| <input type="checkbox"/> Requested | Full Body Acupuncture |
| <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Training in an American Academy of Medical Acupuncture (AAMA) recommended course with a minimum of 200 hours of formal training in medical acupuncture, AND 20 hours annually of acupuncture related continuing medical education; AND ◆ Current demonstrated competence and an adequate volume of experience (10 representative cases) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (5 representative cases) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

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| <input type="checkbox"/> Requested | Auricular Acupuncture |
| <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Training and certification by Helms institute or equivalent ◆ Current demonstrated competence and an adequate volume of experience (5 representative cases) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (5 representative cases) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

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| <input type="checkbox"/> Requested | Homeopathic Medicine (Homeopathy)-Outpatient |
| <p>Administer remedies based on patients' history on an acute, or chronic basis.</p> <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Current license issued by the Arizona Board of homeopathic Medical Examiners AND Current license to dispense medication issued by the Arizona Board of Homeopathic Medical Examiners; AND ◆ Current demonstrated competence and an adequate volume of experience 10 representative cases with acceptable results in the privileges requested for the past 12 months based on results of ongoing professional practice evaluation and outcomes. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience 5 representative cases with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

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| <input type="checkbox"/> Requested | ADDICTION MEDICINE PRIVILEGES |
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Valleywise Health
FAMILY AND COMMUNITY MEDICINE

Evaluation and treatment of substance abuse and addictions.

Initial Criteria to apply for Privileges:

- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in one of the following specialties: emergency medicine, family & community medicine, internal medicine, OB/GYN, or pediatrics; **AND**
- Certification by the American Board of Preventive Medicine, American Board of Addiction Medicine, *American Osteopathic Academy of Addiction Medicine or American Board of Psychiatry and Neurology-Addiction Psychiatry; **AND**
- Minimum of one year of experience in identification, evaluation and treatment of alcoholism, drug addiction and detoxification through submitting clinical activity for at least ten (10) cases in the past twelve (12) months.

Focus Professional Practice Evaluation: Retrospective review of at least 5 cases in performed in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.

Reappointment Criteria: Current demonstrated competence and an adequate volume of experience with at least five (5) cases with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (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
FAMILY AND COMMUNITY MEDICINE
Special Non-Core Privileges or Procedures

| <input type="checkbox"/> Requested | POINT – OF – CARE ULTRASOUND – COMPREHENSIVE |
|--|--|
| <p>Initial Appointment Criteria: Requesting practitioner will be required to submit documentation to support general competency by providing one of the following:</p> <ul style="list-style-type: none"> (a) Successful completion of a didactic ultrasound training curriculum during Family Medicine residency or fellowship within the past twenty-four months (24) AND successful performance of 150 exams, of which at least 100 must have been clinically indicated, and either supervised or over-read by a physician credentialed for point-of-care ultrasound, OR (b) If more than twenty-four (24) months out of residency/fellowship training, applicant must provide documentation of completion of a didactic course (16 hours or longer) in point-of-care ultrasound AND successful performance of 150 examinations, either supervised or over-read by physician credentialed for point-of-care ultrasound, within the past twenty-four (24) months, OR (c) Any combination of (a) or (b) above which adds to a total of 150 exams, either supervised or over-read by a physician credentialed in point-of-care ultrasound within the last twenty-four (24) months, OR (d) If more than twenty-four (24) months out of residency/fellowship training, applicant may provide documentation of current point-of-care ultrasound credentialing AND performance of twenty-five (25) Point-Of-Care Ultrasound performed within the past twenty-four (24) months. <p>Focus Professional Practice Evaluation: Retrospective review of ten (10) cases to confirm the indications and the accuracy and in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Performance or supervision of twenty-five (25) procedures performed within the two (2) year reappointment period. Reciprocal hospital activity will be accepted.</p> | |

| <input type="checkbox"/> Requested | POINT- OF – CARE ULTRASOUND - LIMITED |
|--|---------------------------------------|
| <p>Ultrasound performed as a focused bedside examination, in conjunction with the clinical exam to aid in diagnosis and facilitate patient management and disposition.</p> <p>Diagnostic Applications:</p> <ul style="list-style-type: none"> • <input type="checkbox"/> Requested: Obstetrics and gynecology (transabdominal assessment for intrauterine pregnancy and viability, fetal presentation, placenta position, amniotic fluid volume) • <input type="checkbox"/> Requested: Cardiac (assessment for pericardial effusion, left ventricle function/ejection fraction, right heart strain) • <input type="checkbox"/> Requested: Aorta (assessment for AAA screening) • <input type="checkbox"/> Requested: Biliary (assessment for cholelithiasis, cholecystitis) • <input type="checkbox"/> Requested: Renal/Bladder (assessment for hydronephrosis, renal calculi, post void residual) • <input type="checkbox"/> Requested: Deep venous thrombosis (assessment for DVT in lower extremities) • <input type="checkbox"/> Requested: Soft tissue (assessment for cellulitis complication, foreign body) • <input type="checkbox"/> Requested: Musculoskeletal (assessment for joint effusions/bursitis, tendon tears) • <input type="checkbox"/> Requested: Thoracic/Pulmonary (assessment for pulmonary edema, pleural effusion, pneumothorax) • <input type="checkbox"/> Requested: Ocular (assessment for detached retina, vitreous detachment, vitreous hemorrhage) <p>Initial Appointment Criteria: Requesting practitioner will be required to submit documentation to support competency for the requested diagnostic application by providing one of the following:</p> <ul style="list-style-type: none"> (a) Successful completion of a didactic ultrasound training curriculum during Family Medicine residency or fellowship within the past twenty-four months (24) AND successful performance of 25 exams of each requested application, either supervised or over-read by a physician credentialed for point-of-care ultrasound, OR (b) If more than twenty-four (24) months out of residency/fellowship training, applicant must provide documentation of completion of a didactic course (16 hours or longer) in point-of-care ultrasound AND successful performance of 25 exams of each requested application, either supervised or over-read by a physician credentialed for point-of-care ultrasound, OR (c) Any combination of (a) or (b) above which adds to a total of 25 exams of each requested application, either supervised or over-read by a physician credentialed in point-of-care ultrasound within the last twenty-four (24) months, OR (d) If more than twenty-four (24) months out of residency/fellowship training, applicant may provide documentation of current point-of-care ultrasound credentialing AND performance of 25 exams of each requested application performed within the past twenty-four (24) months. <p>Focus Professional Practice Evaluation: Retrospective review of at least of two (2) cases of each requested application to confirm the indications and in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Performance or supervision of five (5) exams of each requested application within the past two (2) year reappointment period. Reciprocal hospital activity will be accepted.</p> | |

Valleywise Health
FAMILY AND COMMUNITY MEDICINE

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 are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____

Date _____

Applicant

1.d.viii. Medical Staff - Global Advanced Hand Surgery Privileges

GLOBAL REVISIONS TO ADVANCED HAND SURGERY FOR: GENERAL, ORTHOPEDIC, AND PLASTIC SURGERY

| <input type="checkbox"/> Requested | ADVANCED HAND SURGERY (LIMITED TO THE UPPER EXTREMITY ONLY) | | |
|---|--|--|--|
| <p>Admit, evaluate, diagnose, treat, and provide consultation to patients of all ages, presenting with injuries and disorders of all structures of the upper extremity directly affecting the form and function of the hand and wrist by medical, surgical and rehabilitative means.</p> <p>Includes:</p> | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <ol style="list-style-type: none"> 1. Perform history and physical exam 2. Amputation of finger, hand, upper extremity (to include revision) 3.2. Arthroplasty of large and small joints, wrist or hand, including implants 4. Bone graft pertaining to the hand and wrist 5. Carpal tunnel decompression 6. Fasciotomy and fasciectomy 7.3. Vascular repair of the finger, hand and upper extremity 8. Nerve graft 9. Neuroorrhaphy (to include graft harvest) 10. Open and closed fracture reductions 11. Fracture fixation plates or wires 12. Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc </td> <td style="width: 50%; vertical-align: top;"> <ol style="list-style-type: none"> 12.4. Treatment of all malignant and complex tumors of the hand and wrist tumors 13. Repair of lacerations 14.5. Repair of rheumatoid arthritis deformity 15.6. Replantation 16. Skin grafts, local flap and regional (to include groin flap) 17. Tendon reconstruction 18. Tendon release and repair 19.7. Tendon transfers 20.8. Thumb reconstruction, including pollicization and thumb metacarpal lengthening 21. Treatment of infections </td> </tr> </table> | | <ol style="list-style-type: none"> 1. Perform history and physical exam 2. Amputation of finger, hand, upper extremity (to include revision) 3.2. Arthroplasty of large and small joints, wrist or hand, including implants 4. Bone graft pertaining to the hand and wrist 5. Carpal tunnel decompression 6. Fasciotomy and fasciectomy 7.3. Vascular repair of the finger, hand and upper extremity 8. Nerve graft 9. Neuroorrhaphy (to include graft harvest) 10. Open and closed fracture reductions 11. Fracture fixation plates or wires 12. Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc | <ol style="list-style-type: none"> 12.4. Treatment of all malignant and complex tumors of the hand and wrist tumors 13. Repair of lacerations 14.5. Repair of rheumatoid arthritis deformity 15.6. Replantation 16. Skin grafts, local flap and regional (to include groin flap) 17. Tendon reconstruction 18. Tendon release and repair 19.7. Tendon transfers 20.8. Thumb reconstruction, including pollicization and thumb metacarpal lengthening 21. Treatment of infections |
| <ol style="list-style-type: none"> 1. Perform history and physical exam 2. Amputation of finger, hand, upper extremity (to include revision) 3.2. Arthroplasty of large and small joints, wrist or hand, including implants 4. Bone graft pertaining to the hand and wrist 5. Carpal tunnel decompression 6. Fasciotomy and fasciectomy 7.3. Vascular repair of the finger, hand and upper extremity 8. Nerve graft 9. Neuroorrhaphy (to include graft harvest) 10. Open and closed fracture reductions 11. Fracture fixation plates or wires 12. Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc | <ol style="list-style-type: none"> 12.4. Treatment of all malignant and complex tumors of the hand and wrist tumors 13. Repair of lacerations 14.5. Repair of rheumatoid arthritis deformity 15.6. Replantation 16. Skin grafts, local flap and regional (to include groin flap) 17. Tendon reconstruction 18. Tendon release and repair 19.7. Tendon transfers 20.8. Thumb reconstruction, including pollicization and thumb metacarpal lengthening 21. Treatment of infections | | |
| <p>Initial Criteria to apply for Privileges:</p> <ul style="list-style-type: none"> • Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in general surgery, orthopedic surgery, or plastic surgery; AND • Successful completion of an accredited fellowship in surgery of the hand or current subspecialty certification in surgery of the hand or active participation in the examination process [with achievement of certification within five (5) years] leading to subspecialty certification in surgery of the hand by the American Board of Surgery, or Plastic Surgery; or Certificate of Added Qualifications in Surgery of the Hand by the American Board of Orthopedic Surgery; or Certificate of Added Qualifications in Hand Surgery by the American Osteopathic Board of Orthopedic Surgery; AND • Demonstrate performance of surgery on the internal structures of the hand and related structures, reflective of the scope of privileges requested, at least 20 times during the last 12 months, or demonstrate successful completion of an ACGME or AOA accredited residency and clinical hand fellowship within the past 12 months. <p>Focus Professional Practice Evaluation: Retrospective review of at least five (5) hand surgery procedures performed in accordance with the MIHS Professional Practice Evaluation Policy.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (40 surgical procedures) with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (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.</p> | | | |

Revised: 06/2012, Approved by the MIHS District Board 11/2017

Pending Approval by District Board 01/2024

1.d.ix. Medical Staff - Department of Surgery-Plastic Surgery Privileges

Valleywise Health Surgery - Plastic Surgery

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.]

RECOGNIZED BOARDS: American Board of Medical Specialties (“ABMS”) **AND** The National Board of Physicians and Surgeons (“NBPAS”)

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. See specific documents:

- Moderate Sedation for Procedures Policy for the Non-Ventilated Patient for Non-Anesthesiology Providers

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 Surgery - Plastic Surgery

Criteria-Based Core Privileges: Plastic Surgery

To be eligible to apply for core privileges in Plastic Surgery, 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 of a fellowship-training program in Plastic Surgery accredited by the Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) equivalent. |
| Board Certification | Current certification or board eligibility with achievement of certification within the time frame designated by the American Board of Plastic Surgery, or American Osteopathic Association (AOA) equivalent. |
| Clinical Activity | Applicants for initial appointment must be able to demonstrate sufficient performance of plastic surgery procedures (at least 100 procedures) reflective of the scope of privileges requested, during the past 24 months in an accredited hospital or healthcare facility similar in scope and complexity to Valleywise Health or demonstrate successful completion of an accredited residency, clinical fellowship within the past twenty-four (24) months. |
| FOCUSED PROFESSIONAL PRACTICE EVALUATION | |
| Guidelines for Initial Appointment | Minimum of five (5) cases to be retrospectively reviewed in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation to Confirm Practitioner Competence Policy. |
| REAPPOINTMENT | |
| Current demonstrated competence and an adequate volume of experience of 100 plastic surgery procedures 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. | |

If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

| <input type="checkbox"/> Requested | PLASTIC SURGERY CORE PRIVILEGES |
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| Admit (perform history & physical), evaluate, consult, order diagnostic studies/procedures, and/or provide consultation to outpatients and inpatients treated within Valleywise Health who present with complex problems related to congenital or acquired defects of the body's soft tissue including functional and aesthetic management. The core privileges in this specialty include those procedures listed and such other procedures that are extensions of the same techniques and skills | |
| <ul style="list-style-type: none"> Abdominoplasty <u>Basic Hand Surgery Procedures:</u> <ol style="list-style-type: none"> 1. <u>Amputation of finger, hand, upper extremity (to include revision);</u> 2. <u>Bone graft pertaining to the hand and wrist;</u> 3. <u>Carpal tunnel decompression;</u> 4. <u>Fasciotomy and fasciectomy;</u> 5. <u>Nerve graft;</u> 6. <u>Neurorrhaphy (to include graft harvest);</u> 7. <u>Open and closed fracture reductions;</u> 8. <u>Fracture fixation plates or wires;</u> 9. <u>Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc;</u> 10. <u>Treatment of all benign hand tumors and simple skin malignancies;</u> 11. <u>Repair of lacerations;</u> 12. <u>Skin grafts, local flap and regional (to include groin flap);</u> 13. <u>Tendon reconstruction;</u> 14. <u>Tendon release and repair;</u> 15. <u>Treatment of infections</u> Blepharoplasty, soft tissue and lacrimal oculoplastic procedures Botox injection Browlift Burns (Immediate & delayed or secondary treatment), Decubitus ulcers, excision and flap coverage Dermabrasion Excision of skin tumors (benign or malignant) Treatment of facial fractures (open & closed) Ear (reconstruction of acquired and congenital deformity) | <ul style="list-style-type: none"> Facial paralysis (correction of) Non-microvascular flaps, including hand Genito-urinary tract defects (external) Treatment of, vascular malformations Intranasal tumors (excision of) Intraoral tumors (excision of) Tracheostomy (to include submental intubation) Lymphadenectomy (axilla and/or groin) Lymphadenectomy of neck and neck dissection Mastectomy & post mastectomy reconstruction Treatment of neck lesions, acquired and congenital Osteotomy (mandibular and maxillary) Otoplasty, Prep of tube or pedicle flaps Surgery for tumors of salivary gland Scar revisions Repair of nerves, tendons and vessels Neurotoxin injection Injection of fat, artificial fillers Hernia repair Grafts (bone, cartilage, dermis, fat, fascia, nerve, skin, tendon) Hair transplantation, free graft or vascularized Liposuction (excluding ultrasonic-assisted liposuction), Mammoplasty (Augmentation or reduction of breast), mastopexy Rhinoplasty Rhytidectomy, Submucous resection of nose Cleft lip and palate repair, and treatment of complex congenital deformities Craniofacial reconstruction |

Valleywise Health Surgery - Plastic Surgery

Special Non-Core Privileges

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|---|------------------------------|
| <input type="checkbox"/> Requested | MICROVASCULAR SURGERY |
| <p>Includes: Free flaps of omentum, bowel, bone, fascia, skin, toe to thumb transfer, application of non-orthopedic external fixator frame (e.g., after free tissue transfer)</p> <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> ➤ Evidence of microvascular surgery training during Plastic Surgery residency or fellowship training that included microvascular surgery training, OR ➤ If more than two years out of training, evidence of performance of ten (10) previous microvascular cases performed in the last two years. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Performance of ten (10) 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.</p> | |

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| <input type="checkbox"/> Requested | ADVANCED HAND SURGERY (LIMITED TO THE UPPER EXTREMITY ONLY) | | |
| <p>Admit, evaluate, diagnose, treat, and provide consultation to patients of all ages, presenting with injuries and disorders of all structures of the upper extremity directly affecting the form and function of the hand and wrist by medical, surgical and rehabilitative means.</p> <p>Includes:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <ol style="list-style-type: none"> 1. Perform history and physical exam 2. Amputation of finger, hand, upper extremity (to include revision) 3.2. Arthroplasty of large and small joints, wrist or hand, including implants 4. Bone graft pertaining to the hand and wrist 5. Carpal tunnel decompression 6. Fasciotomy and fasciectomy 7.3. Vascular repair of the finger, hand and upper extremity 8. Nerve graft 9. Neurorrhaphy (to include graft harvest) 10. Open and closed fracture reductions 11. Fracture fixation plates or wires </td> <td style="width: 50%; vertical-align: top;"> <ol style="list-style-type: none"> 13. Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc 14.4. Treatment of all <u>malignant and complex tumors of the hand and wrist tumors</u> 15. Repair of lacerations 16.5. Repair of rheumatoid arthritis deformity 17.6. Replantation 18. Skin grafts, local flap and regional (to include groin flap) 19. Tendon reconstruction 20. Tendon release and repair 21.7. Tendon transfers 22.8. Thumb reconstruction, including pollicization and thumb metacarpal lengthening 23. Treatment of infections </td> </tr> </table> | | <ol style="list-style-type: none"> 1. Perform history and physical exam 2. Amputation of finger, hand, upper extremity (to include revision) 3.2. Arthroplasty of large and small joints, wrist or hand, including implants 4. Bone graft pertaining to the hand and wrist 5. Carpal tunnel decompression 6. Fasciotomy and fasciectomy 7.3. Vascular repair of the finger, hand and upper extremity 8. Nerve graft 9. Neurorrhaphy (to include graft harvest) 10. Open and closed fracture reductions 11. Fracture fixation plates or wires | <ol style="list-style-type: none"> 13. Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc 14.4. Treatment of all <u>malignant and complex tumors of the hand and wrist tumors</u> 15. Repair of lacerations 16.5. Repair of rheumatoid arthritis deformity 17.6. Replantation 18. Skin grafts, local flap and regional (to include groin flap) 19. Tendon reconstruction 20. Tendon release and repair 21.7. Tendon transfers 22.8. Thumb reconstruction, including pollicization and thumb metacarpal lengthening 23. Treatment of infections |
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| <p>Initial Criteria to apply for Privileges:</p> <ul style="list-style-type: none"> • Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in general surgery, orthopedic surgery, or plastic surgery; AND • Successful completion of an accredited fellowship in surgery of the hand or current subspecialty certification in surgery of the hand or active participation in the examination process [with achievement of certification within five (5) years] leading to subspecialty certification in surgery of the hand by the American Board of Surgery, or Plastic Surgery; or Certificate of Added Qualifications in Surgery of the Hand by the American Board of Orthopedic Surgery; or Certificate of Added Qualifications in Hand Surgery by the American Osteopathic Board of Orthopedic Surgery; AND • Demonstrate performance of surgery on the internal structures of the hand and related structures, reflective of the scope of privileges requested, at least 20 times during the last 12 months, or demonstrate successful completion of an ACGME or AOA accredited residency and clinical hand fellowship within the past 12 months. <p>Focus Professional Practice Evaluation: Retrospective review of at least five (5) hand surgery procedures performed in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (100 surgical procedures) with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (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.</p> | | | |

Valleywise Health Surgery - Plastic Surgery

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| <input type="checkbox"/> Requested | PROCEDURAL SEDATION |
| Initial Appointment Criteria: | |
| <ul style="list-style-type: none"> • Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) residency or fellowship training program that included training in procedural sedation and patient airway rescue or completion of formal training in procedural sedation and patient airway rescue within the past twenty-four (24) months, OR • If more than twenty-four (24) months out of residency or fellowship training, applicant must demonstrate satisfactory performance of 10 procedural sedation cases within the past twenty-four (24) months; AND • Current Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), (as appropriate to the age of the patient) or a comparable advanced life support curriculum; AND successful completion of “Hands On” Basic Airway Management Training course within the past two (2) years; OR Board Certified/Qualified in emergency medicine, pediatric emergency medicine, neonatology, or critical care; AND • Must successfully complete a knowledge-based test to demonstrate competency in procedural sedation prior to the granting of the privilege. | |
| Focus Professional Practice Evaluation: Retrospective review of at least 2 procedural sedation cases. | |
| Reappointment Criteria: | |
| <ul style="list-style-type: none"> • Performance of ten (10) procedural sedation cases during the past 24 months; OR Documentation of completion of a “Hands On” Basic Airway Management Training course within the past two (2) years; AND • Current Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), or Neonatology Resuscitation Program (NRP) (as appropriate to the age of the patient), or a comparable advanced life support curriculum, or Board Certified/Qualified in emergency medicine, pediatric emergency medicine, neonatology, or critical care. (The advanced life support course must be approved/designated by an American Heart Association training center/program or other training with verified comparable “hands on” basic airway training as part of recertification) OR practitioner must demonstrate successful completion of “Hands On” Basic Airway Training course within the past two (2) years.) | |

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 are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____ **Date** _____
Applicant

1.d.x. Medical Staff - Department of Orthopedic Surgery Privileges

**Valleywise Health
Orthopedic Surgery**

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. See specific documents:

- Moderate Sedation for Procedures Policy for the Non-Ventilated Patient for Non-Anesthesiology Providers

Applicant Attestation: Applicants for initial and reappointment agree that they understand 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
Orthopedic Surgery
Criteria-Based Core Privileges
GENERAL ORTHOPEDICS**

To be eligible to apply for core privileges in orthopedic surgery, the applicant must meet Valleywise Health medical staff membership requirements outlined in the Medical Staff Bylaws and the following privileging criteria. Additional non-core special privileges may be requested in this specialty by those practitioners who qualify for core privileges and meet the respective criteria of the non-core privilege requested.

| INITIAL APPLICANTS | |
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| Education | Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency or fellowship in Orthopedic Surgery; AND applicants who have completed a training program within the past five (5) years must submit a letter from the residency program director confirming training/experience in procedures requested. |
| Board Certification | Current certification or board eligibility with achievement of certification within the time frame designated by the American Board of Orthopedic Surgery or American Osteopathic Board of Orthopedic Surgery certification. |
| Clinical Activity | Applicants for initial appointment must be able to demonstrate performance of 100 procedures, reflective of the scope of privileges requested, during the past 12 months in an accredited hospital or healthcare facility similar in scope and complexity to Valleywise Health OR demonstrate successful completion of residency or fellowship within the past 12 months. |
| FOCUSED PROFESSIONAL PRACTICE EVALUATION | |
| Guidelines for Initial Appointment | Retrospective review of the first 5 cases with acceptable results reflective of the scope of privileges requested in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy. |
| REAPPOINTMENT | |
| Performance or supervision of 10 procedures reflective of the scope of privileges requested for the past 24 months as a results of ongoing professional practice evaluation activities and outcomes. | |

| <input type="checkbox"/> Requested | ORTHOPEDIC OUTPATIENT CORE PRIVILEGES |
|--|---------------------------------------|
| <p>Limited to non-operative care, outpatient examination, history and physical, interpretation of laboratory data, diagnose and establish treatment. The core privileges include those procedures listed. <i>If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.</i></p> <ol style="list-style-type: none"> 1. Prescriptive Privileges (DEA required for control substances) 2. Injections (joint and tendon bursi) 3. Manage uncomplicated minor closed fractures and uncomplicated dislocations 4. Refer for further consultation and treatment <p>NOTE: Orthopedic outpatient core do not include admitting privileges.</p> | |

**Valleywise Health
Orthopedic Surgery**

Criteria-Based Core Privileges - General Orthopedics

Admit (perform history & physical), evaluate, consult, order diagnostic studies/procedures, and/or provide consultation to outpatients and inpatients treated within Valleywise Health. The core privileges in this specialty include those procedures listed and such other procedures that are extensions of the same techniques and skills. ***If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.***

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|--|------------------------------------|
| <input type="checkbox"/> Requested | GENERAL ORTHOPEDIC CORE PROCEDURES |
| JOINT PROCEDURES | |
| Includes: Arthroscopy; Arthroplasty; Primary Total Joint Revision; Arthrotomy; Arthrodesis; Joint Injection; Joint Aspiration, Ligament Repair | |
| JOINT RECONSTRUCTION | |
| Includes: Use of Allograft, Xenograft or Synthetic Ligaments or Bone; Total Joint Reconstruction; Capsulectomy; Tendon Transfers/Repairs; Upper/Lower Extremity Reimplantation; Synovectomy; Peri-prosthetic fractures. | |
| FRACTURE TREATMENTS: ALL | |
| Includes: Closed Reduction Fractures; Open Reduction Fractures; Internal or External Fixation Fractures | |
| BASIC HAND SURGERY PROCEDURES | |
| <ol style="list-style-type: none"> 1. Includes: Repair of Acute Hands Injuries; 2. <u>Hand Fracture (Closed/Open);</u> 3. <u>Hand Infections;</u> 4. <u>Amputation of finger, hand, upper extremity (to include revision);</u> 5. <u>Bone graft pertaining to the hand and wrist;</u> 6. <u>Carpal tunnel decompression;</u> 7. <u>Fasciotomy and fasciectomy;</u> 8. <u>Nerve graft;</u> 9. <u>Neuroorrhaphy (to include graft harvest);</u> 10. <u>Open and closed fracture reductions;</u> 11. <u>Fracture fixation plates or wires;</u> 12. <u>Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc;</u> 13. <u>Treatment of all benign hand tumors and simple skin malignancies;</u> 14. <u>Repair of lacerations;</u> 15. <u>Skin grafts, local flap and regional (to include groin flap);</u> 16. <u>Tendon reconstruction;</u> 17. <u>Tendon release and repair</u> | |
| FOOT AND ANKLE PROCEDURES | |
| Includes: All procedures from the distal third of the tibia/fibula region | |
| OTHER PROCEDURES | |
| Includes: Bone Grafting (including obtaining Graft); Diskogram; Excision or Saucerization of bone (Bursae/Soft or Bony Tumors); Fasciotomy; Nerve Decompression/Peripheral; Osteotomy; Epiphysiodesis; Leg Lengthening or Shortening; Amputation | |
| REGIONAL ANESTHESIA | |
| Includes: Axillary Blocks; Bier Blocks; Peripheral Nerve Blocks | |

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**Valleywise Health
Orthopedic Surgery**

NON-CORE ORTHOPEDIC SPECIAL PROCEDURES

| <input type="checkbox"/> Requested | LASER PRIVILEGES [Refer to Laser Privileges Form] |
|---|---|
| <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> ◆ Physician must provide documentation showing certification from a laser course which includes didactic material on safety, application, and clinical experience with specialized laser surgery and hands-on laboratory experience for each type of laser that will be used, or demonstrate successful completion of a residency or fellowship training program which included laser training; AND ◆ Physician must have performed a sufficient number of procedures during the past 12 months; AND ◆ Physician must agree to comply with the Hospital Laser Policy and any laser safety requirements of the Laser Safety Committee. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of one (1) case in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Demonstrated current competence and evidence of the performance of at least 1 laser procedure in the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

| <input type="checkbox"/> Requested | PEDIATRIC ORTHOPEDIC |
|---|----------------------|
| <p>Pediatric Orthopedic core privileges include the following:</p> <ul style="list-style-type: none"> • Complex Congenital Deformities • Scoliosis • Cerebral Palsy • Pelvic Osteotomy <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> • Provide documentation of successful completion of a pediatric orthopedic training program approved by the American Board of Orthopedic Surgery or the American Osteopathic Board of Orthopedic Surgery; OR • Applicants who have recently completed training must provide documentation of training in pediatric orthopedics with a letter from the residency program director confirming training & experience; OR • Provide documentation of experience, including dates and numbers of procedures, which will be reviewed and approved by the Chair of Orthopedic Surgery. <p>Focus Professional Practice Evaluation: Must have performed five (5) pediatric orthopedic procedures in accordance with Valleywise Health Medical Staff Focused Professional Practice Evaluation to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Performance or supervision of three (3) pediatric orthopedic procedures with acceptable results, reflective of the scope of privileges requested, within the twenty-four (24) months reappointment period.</p> | |

| <input type="checkbox"/> Requested | ADVANCED HAND SURGERY (LIMITED TO THE UPPER EXTREMITY ONLY) | | |
|---|--|---|--|
| <p>Admit, evaluate, diagnose, treat, and provide consultation to patients of all ages, presenting with injuries and disorders of all structures of the upper extremity directly affecting the form and function of the hand and wrist by medical, surgical and rehabilitative means.</p> <p>Includes:</p> <table style="width: 100%; border: none;"> <tr> <td style="vertical-align: top;"> <ol style="list-style-type: none"> 1. Perform history and physical exam 2. Amputation of finger, hand, upper extremity (to include revision) 3. 2. Arthroplasty of large and small joints, wrist or hand, including implants 4. Bone graft pertaining to the hand and wrist 5. Carpal tunnel decompression 6. Fasciotomy and fasciectomy 7. 3. Vascular repair of the finger, hand and upper extremity 8. Nerve graft 9. Neurorrhaphy (to include graft harvest) 10. Open and closed fracture reductions 11. Fracture fixation plates or wires 12. Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc </td> <td style="vertical-align: top;"> <ol style="list-style-type: none"> 13. 4. Treatment of all malignant and complex tumors of the hand and wrist tumors 14. Repair of lacerations 15. 5. Repair of rheumatoid arthritis deformity 16. 6. Replantation 17. 7. Skin grafts, local flap and regional (to include groin flap) 18. Tendon reconstruction 19. Tendon release and repair 20. 7. Tendon transfers 21. 8. Thumb reconstruction, including pollicization and thumb metacarpal lengthening 22. Treatment of infections </td> </tr> </table> <p>Initial Criteria to apply for Privileges:</p> <ul style="list-style-type: none"> • Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in general surgery, orthopedic surgery, or plastic surgery; AND • Successful completion of an accredited fellowship in surgery of the hand or current subspecialty certification in surgery of the hand or active participation in the examination process [with achievement of certification within five (5) years] leading to subspecialty certification in surgery of the hand by the American Board of Surgery, or Plastic Surgery; or Certificate of Added Qualifications in Surgery of the Hand by the | | <ol style="list-style-type: none"> 1. Perform history and physical exam 2. Amputation of finger, hand, upper extremity (to include revision) 3. 2. Arthroplasty of large and small joints, wrist or hand, including implants 4. Bone graft pertaining to the hand and wrist 5. Carpal tunnel decompression 6. Fasciotomy and fasciectomy 7. 3. Vascular repair of the finger, hand and upper extremity 8. Nerve graft 9. Neurorrhaphy (to include graft harvest) 10. Open and closed fracture reductions 11. Fracture fixation plates or wires 12. Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc | <ol style="list-style-type: none"> 13. 4. Treatment of all malignant and complex tumors of the hand and wrist tumors 14. Repair of lacerations 15. 5. Repair of rheumatoid arthritis deformity 16. 6. Replantation 17. 7. Skin grafts, local flap and regional (to include groin flap) 18. Tendon reconstruction 19. Tendon release and repair 20. 7. Tendon transfers 21. 8. Thumb reconstruction, including pollicization and thumb metacarpal lengthening 22. Treatment of infections |
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Valleywise Health Orthopedic Surgery

American Board of Orthopedic Surgery; or Certificate of Added Qualifications in Hand Surgery by the American Osteopathic Board of Orthopedic Surgery; **AND**

- Demonstrate performance of surgery on the internal structures of the hand and related structures, reflective of the scope of privileges requested, at least 20 times during the last 12 months, or demonstrate successful completion of an ACGME or AOA accredited residency and clinical hand fellowship within the past 12 months.

Focus Professional Practice Evaluation: Retrospective review of at least five (5) hand surgery procedures performed in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.

Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (100 surgical procedures) with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (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
Orthopedic Surgery**

NON-CORE ORTHOPEDIC SPECIAL PROCEDURES

| | |
|---|----------------------------------|
| <input type="checkbox"/> Requested | SPINAL SURGERY PROCEDURES |
| <p>Spinal Surgery core privileges include the following:</p> <ul style="list-style-type: none"> • Spine Surgery • Spinal Fractures • Disc Excision • Laminotomy or Laminectomy • Percutaneous Disc Procedure • Scoliosis • Arthroscopic Disc Excision • Anterior/Posterior Spinal Fusions • Anterior/Posterior Spinal Fusions with Spinal Instrumentation • Synovectomy <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> • Provide documentation of successful completion of an orthopedic spinal surgery training program approved by the American Board of Orthopedic Surgery or the American Osteopathic Board of Orthopedic Surgery; OR • Applicants who have recently completed training must provide documentation of training in spinal surgery with a letter from the residency program director confirming training & experience; OR • Provide documentation of experience, including dates and numbers of procedures, which will be reviewed and approved by the Chair of Orthopedic Surgery. <p>Focus Professional Practice Evaluation: Retrospective review of five (5) spinal procedures.</p> <p>Reappointment Criteria: Performance or supervision of three (3) spinal procedures with acceptable results, reflective of the scope of privileges requested, within the twenty-four (24) months reappointment period.</p> | |

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 are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____ Date _____
Applicant

1.d.xi. Medical Staff - Department of Surgery Privileges

**Valleywise Health
General Surgery**

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. The applicant agrees to review applicable policies every two years. See specific documents:

- Moderate Sedation for Procedures Policy for the Non-Ventilated Patient for Non-Anesthesiology Providers

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
General Surgery
Criteria-Based Core Privileges: General Surgery**

To be eligible to apply for core privileges in General Surgery, 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

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| Education | Successful completion of a residency training program in General Surgery accredited by the Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) equivalent. |
| Board Certification | Current certification or board eligibility with achievement of certification within the time frame designated by the American Board of Surgery, or American Osteopathic Board of Surgery. |
| Clinical Activity | Applicants for initial appointment must be able to demonstrate sufficient performance of general surgery procedures (at least 100 procedures) reflective of the scope of privileges requested, during the past 24 months or demonstrate successful completion of an accredited residency, clinical fellowship within the past 24 months. |

FOCUSED PROFESSIONAL PRACTICE EVALUATION

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| Guidelines for Initial Appointment | Minimum of five (5) cases to be retrospectively reviewed in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy. |
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REAPPOINTMENT

Current demonstrated competence and an adequate volume of experience (25 general surgery procedures) 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.

GENERAL SURGERY CLINICAL PRIVILEGES

| <input type="checkbox"/> Requested | GENERAL SURGERY PROCEDURAL PRIVILEGES |
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| | <p>Admit (perform history & physical), evaluate, consult, order diagnostic studies/procedures, and/or provide consultation to outpatients and inpatients treated within Valleywise Health. The core privileges general surgery includes those procedures listed and such other procedures that are extensions of the same techniques and skills. <i>Where appropriate, procedures may be performed with, or without ultrasound guidance. If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.</i></p> <p>ABDOMINAL SURGERY: Appendectomy; Colostomy; Enterostomy; Open and Endoscopic Gastrostomy; Intra-Abdominal Abscesses, Tumor or Foreign Body; Small & Large Intestinal Surgery including resection; Hernia (includes inguinal & femoral, hiatus, trans-abdominal); Gastroduodenal Surgery (includes Vagotomy) and Antireflux Procedures; Biliary Tract Surgery (all procedures including Cholecystectomy, Choledochenterostomy); Hepatic Resection & Repair; Pancreas (all procedures); Spleen (all procedures); Paracentesis; Liver Biopsy (Open/Needle); Implantable Arterial Perfusion Devices (Infusaid Pump); Open Nephrectomy; Bladder Resection; Malignancy including Staging Laparotomy, Multi-organ Operation, Oophorectomy (in consultation with OB/GYN)</p> <p>AMPUTATIONS: Lower Extremity (BKA/AKA); Minor Amputations</p> <p>BREAST SURGERY: Biopsies; Incision & Drainage of Abscess; Mastectomy; Axillary Node Dissection; Debridement of Wounds with Anesthesia; Repair of Complex Wounds: Scar Revision, (Does not include Breast Reconstruction)</p> <p>COLORECTAL SURGERY (BASIC): Colostomy; Enterostomy; Proctoscopy (w/instrumental excisions); Small and Large Intestinal Surgery; Hemorrhoidectomy; Pilonidal Surgery; Fissure and Fistula in Ano; Anorectal Abscess; Fissure Fistula; Rectal Prolapse; Anorectal Reconstructive Procedures: and Flexible/Rigid Sigmoidoscopy.</p> <p>ENDOCRINE: Adrenalectomy, Parathyroidectomy, Thyroidectomy</p> <p>HEAD AND NECK (BASIC): Thyroid, Salivary, Radical Neck Dissection; Salivary Gland Surgery; Partial/Total Thyroid and Parathyroid Surgery (all procedures); Open and Percutaneous Tracheostomy, Neck Dissection</p> <p>LAPAROSCOPY (BASIC): Appendectomy, Biliary Tract, All Biopsies, Diagnostic Laparoscopy; Hernia repair, Laparoscopic Gastrostomy</p> <p>LINE PLACEMENT: Swan-Ganz, Arterial, Central venous (includes dialysis catheters), Subcutaneous Venous Access Ports, Implant Infusion Device</p> <p>LYMPHATIC/HEMATOLOGIC SURGERY: Lymph Node Dissection; Radical Resection of Lymph Nodes (axillary, inguinal), Sentinel Node Biopsy, Splenectomy</p> <p>MINOR SURGICAL PROCEDURES: Closed Tube Thoracostomy; Abscess Drainage Superficial; Aspiration of body Cavities; Biopsy (Skin, Muscle, Cervix); Debridement of Wounds Without Anesthesia; Circumcision (Adult); Hand Infections (Minor); Meatotomy (Adult); Removal Foreign Body (Non-Cavity); Removal Superficial Benign Tumors; Repair, Lacerations (No Complicating Nerve Or Tendon Injury)</p> <p>PEDIATRIC SURGERY (BASIC): Appendectomy. Repair of Complex Wounds, Foreign Body Removal Incision & Drainage of Abscess, Debridement & Excision of Cutaneous/Subcutaneous Necrotizing Wounds</p> <p>SKIN & SOFT TISSUE: Skin grafting, Upper and Lower Fasciotomy, Repair of Complex Wounds, Incision & Drainage of Abscess, Debridement & Excision of Cutaneous/Subcutaneous Necrotizing Wounds, Foreign Body Removal</p> <p>THORACIC (BASIC): Exploratory Thoracotomy, Video Assisted Thorascopic Surgery, Decortication, Wedge Biopsy, Segmentectomy, Lobectomy, Pneumoectomy, Esophagectomy, Pericardial window</p> <p>UROLOGY (BASIC): Cystostomy, Cystectomy (partial), Ureteral repair, Nephrectomy</p> <p>VASCULAR (BASIC): Amputations and those vascular procedures not listed in the Advanced Vascular Procedures</p> <p>CRITICAL CARE PROCEDURES (BASIC): Venous Cutdown, Swan Ganz, Chest Tube, Paracentesis, Pericardiocentesis. Lumbar Tap, Temporary Transvenous Pacemaker Insertion</p> <p>LIMITED VENTILATOR MANAGEMENT (less than 24 hours) Includes: Uncomplicated care for patients requiring brief, uncomplicated ventilatory support</p> |

Special Non-Core Privileges

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| <input type="checkbox"/> Requested | LAPAROSCOPY (ADVANCED) |
| <p>Includes: Splenectomy, Adrenalectomy, Esophageal/Gastric procedures, Bowel Resections, Nephrectomy</p> <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Applicant must have documentation of laparoscopic training during an accredited residency/fellowship training program within the past two (2) years: OR • If more than two years out of training, applicant must have documentation of successful performance ten (10) representative cases of laparoscopic procedures in the past 24 -month period including case logs and outcomes to be evaluated by the Department Chair; OR • Applicant must have documentation of completion of CME in a recognized course in laparoscopic training with performance of at least five (5) laparoscopic procedures as first assist, AND supervision of at least the first three (3) procedures by a member of the medical staff with unsupervised advanced laparoscopic privileges. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment Criteria: Performance of five (5) laparoscopic procedures 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.</p> | |

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| <input type="checkbox"/> Requested | STEREOTACTIC BREAST BIOPSY |
| <p>Criteria to apply for privileges:</p> <p>Applicants must have documentation of completion of training for stereotactic breast biopsy either during an accredited residency/fellowship training program within the past two (2) years (i.e., case log and letter of recommendation from the Program Director, Department Chair or Supervising Attending Physician) OR</p> <ul style="list-style-type: none"> • If more than two years out of training, applicant must have documentation of successful performance of ten (10) stereotactic breast biopsies per year for the last two years including case logs and outcomes to be evaluated by the Department Chair; OR • Applicant must have documentation of completion of 3 hours of category 1 CME in a recognized course in stereotactic breast biopsies with performance of at least 12 (twelve) stereotactic breast biopsies per year for the last two years, AND supervision of at least the first three (3) procedures by a member of the medical staff with unsupervised stereotactic breast biopsy privileges. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment: Performance of five (5) stereotactic breast biopsy procedures 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.</p> | |

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| <input type="checkbox"/> Requested | BASIC TRAUMA SURGERY |
| <p>Includes: Privileges for pediatric and adult trauma patients to admit, evaluate, diagnose, consult, provide pre-operative, intra-operative and post-operative surgical care, perform surgical intervention when necessary after the diagnosis is made and comprehensively coordinate the care performed by various subspecialty consultants. General Surgeons may provide treatment of the trauma patient within the adult ICU setting for the first 24 hours under the direction/consultation of the Advanced Surgical Critical Care attending physician,</p> <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Applicant must be Board Certified in General Surgery, or attain board certification within five (5) years of completion of primary/subspecialty training, AND • Applicant must maintain ATLS certification, AND • Applicant must adhere to written guidelines set by the Director of Trauma Surgery <p>Focus Professional Practice Evaluation: Immediate review, under the Trauma Peer Review Process, of trauma cases as performed.</p> <p>Reappointment: To maintain ATLS certification and have current unrestricted General Surgery Core Privileges based on ongoing professional practice evaluation and outcomes.</p> | |

Special Non-Core Privileges-CONTINUED

| <input type="checkbox"/> Requested | ADVANCED TRAUMA SURGERY |
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| <p>Includes:</p> <p>1. Privileges for pediatric and adult trauma patients to admit, evaluate, diagnose, consult, provide pre-operative, intra-operative and post-operative surgical care, perform surgical intervention when necessary after the diagnosis is made and comprehensively coordinate the care performed by various subspecialty consultants. Privileges include performance of focused assessment with sonography for trauma. Treatment of the trauma patient may include both short and long-term direction of care within the pediatric and/or adult ICU setting for the patient's entire hospitalization; AND</p> <p>2. Neurocritical Care ("NCC") Privileges: Admission, diagnosis, consultation, and management for patients suffering Neurotrauma: traumatically acquired brain injury and spinal cord injuries. Provide emergency neurocritical care including but not limited hyperosmolar therapy, ICP management, medically induced coma in conjunction with neurosurgical consultation as appropriate. Additionally includes post operative and perioperative neurocritical care management for non-emergent cranial and spinal neurosurgical patients.</p> <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Applicant must be Board Certified in General Surgery, or attain board certification within five (5) years of completion of primary/subspecialty training, AND • Applicant must maintain ATLS certification, AND • Applicant must have completed either a Trauma Surgery Fellowship or a Surgical Critical Care Fellowship with Trauma Surgery emphasis, AND • Applicant must demonstrate experience/expertise in the management of twenty-five (25) trauma cases based upon submission of documented experience, of which fifteen (15) of those cases must be with an Injury Severity Score (ISS) of 15 or greater; AND • Applicant must adhere to written guidelines set by the Director of Trauma Surgery <p>Focus Professional Practice Evaluation: Retrospective review of five (5) operative and non-operative patient care management cases and Retrospective review of four (4) NCC cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy and under the Trauma Peer Review Process.</p> <p>Reappointment: Management of fifteen (15) trauma patients 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.</p> | |

| <input type="checkbox"/> Requested | ADVANCED SURGICAL CRITICAL CARE |
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| <p>Includes: Full Ventilator Management (greater than 24 hours), Intubation, and Bronchoscopy. Treatment of the Surgical Intensive Care Unit (SICU) patient may include both short and long-term direction of care within the pediatric and/or adult ICU setting for the patient's entire hospitalization.</p> <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Applicant must be Board Certified or attain board certification within five (5) years of completion in Surgical Critical Care, or Board Certified or attain board certification within five (5) years of completion in General Surgery with successful completion of an accredited Burn Fellowship, AND • Applicants for initial appointment must be able to demonstrate provision of services for 50 surgical critical care patients reflective of the scope of privileges requested, during the past 12 months in an accredited hospital or healthcare facility similar in scope and complexity to Valleywise Health. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment: Management of fifty (50) surgical critical care patients 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.</p> | |

Special Non-Core Privileges-CONTINUED

| <input type="checkbox"/> Requested | BURN SURGERY |
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| <p>Includes: Surgical Critical Care Privileges, Debridement/ Excision, Skin Grafting, Bronchoscopy, Contracture Release, Placement of skin substitutes, Upper and Lower Extremity: Escharotomy, Fasciotomy, Amputation debridement, grafting, incision, drainage, pinning, tendon and nerve repair, and amputation of both the hand and/or digits.</p> <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Applicant must be Board Certified in General Surgery with successful completion of an accredited Burn Fellowship, OR Board Certified in Surgical Critical Care AND • Applicants for initial appointment must be able to demonstrate provision of services for 50 burn surgery patients reflective of the scope of privileges requested, during the past 12 months in an accredited hospital or healthcare facility similar in scope and complexity to Valleywise Health. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment: Management of fifty (50) burn patients with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> | |

| <input type="checkbox"/> Requested | ENDOSCOPY |
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| <p>Includes: Diagnostic and/or Therapeutic Esophagogastroduodenoscopy, Colonoscopy, Bronchoscopy, Percutaneous Endoscopic Gastrostomy (PEG), Endoscopic removal of foreign bodies and injection of dye</p> <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Applicant must have documentation of successful completion of endoscopic training during an accredited residency/fellowship within the past two (2) years (i.e. case log and letter of recommendation from the Program Director, Department Chair or Supervising Attending Physician); OR • If more than 24 months out of training, documentation of performance of ten (10) representative endoscopic cases in the previous 24 months, including case logs to be evaluated by the Department Chair. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment: Performance of five (5) endoscopy procedures 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.</p> | |

| <input type="checkbox"/> Requested | NONCORONARY ENDOVASCULAR PROCEDURES (excluding carotid arteries) |
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| <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Applicant must have full unsupervised advanced vascular privileges, AND • Applicant must have documentation from a fellowship Program Director of at least ten (10) supervised non-coronary endovascular interventional angiograms; OR • If applicant is more than two (2) years out of training, documentation of experience during other affiliations that meet reappointment criteria delineated below; OR • Applicant must have documentation of approved CME in endovascular intervention within the past eighteen (18) months and supervision of the first five (5) procedures by a member of the medical staff with full unsupervised non-coronary endovascular interventional privileges. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment: Performance of ten (10) non-coronary endovascular intervention procedures with acceptable results for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

Special Non-Core Privileges-CONTINUED

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| <input type="checkbox"/> Requested | CAROTID ARTERY & PERIPHERAL VASCULAR ULTRASOUND INTERPRETATION |
| <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Applicant must have documentation of the successful completion of an approved residency/fellowship training program with at least three (3) months of supervised diagnostic ultrasound training OR procurement of the American Registry of Diagnostic Medical Sonographers (ARDMS)'s registered vascular technologist credential, AND evidence of involvement in the evaluation and interpretation of at least one hundred and fifty (150) documented and supervised vascular ultrasound examinations within three (3) years OR fifty (50) ultrasound interpretations performed in the past year; OR • Applicant must have evidence of sixteen (16) hours of American Medical Association (AMA) Category I CME activity dedicated to diagnostic ultrasound, AND evidence of involvement in the evaluation and interpretation of at least one hundred fifty (150) ultrasound examinations within three (3) years, OR fifty (50) ultrasound interpretations performed in the past year. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment: Performance of twenty-five (25) carotid artery & peripheral vascular ultrasound interpretation procedures 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.</p> | |

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| <input type="checkbox"/> Requested | ADVANCED THORACIC PROCEDURES |
| <p>Includes: Pulmonary Lobectomy, Pneumonectomy, Tracheal Resection, Mediastinal Tumor Resection, Bronchoscopy, Mediastinoscopy</p> <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Applicant must have documentation of successful completion of advanced thoracic surgery training during an accredited residency/fellowship, or at an accredited course or institution within the past two (2) years (i.e. case log and letter of recommendation from the Program Director, Department Chair or Supervising Attending Physician); OR • If applicant more than two (2) years out of training, documentation of ten (10) thoracic procedures successfully performed in the previous two (2) years, including case logs to be evaluated by the Department Chair <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment: Performance of five (5) advanced thoracic procedures 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.</p> | |

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| <input type="checkbox"/> Requested | ADVANCED COLON AND RECTAL SURGERY |
| <p>Includes: Rectal Reconstruction; Repair of Rectal Prolapse; Complex anal rectal repairs, Rectal Incontinence Surgery</p> <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Successful completion of Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in general surgery, followed by successful completion of an accredited fellowship in colon and rectal surgery; AND/OR • Current certification or active participation in the examination process [with achievement of certification within 5 years] leading to certification in colon and rectal surgery by the American Board of Colon and Rectal Surgery; AND • Applicants for initial appointment must be able to demonstrate the performance of and ten (10) colon and rectal surgery procedures, reflective of the scope of privileges requested, in the past 12 months or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment Requirements: Performance of five (5) colon and rectal procedures 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.</p> | |

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| <input type="checkbox"/> Requested | Diagnostic/Therapeutic Endoscopic Retrograde Cholangiopancreatography (ERCP) |
| <p>Criteria to apply for Privileges:</p> <ul style="list-style-type: none"> • Documentation of successful completion of ERCP training during an accredited residency/fellowship, or at an accredited course or institution, within the past two (2) years (i.e., case log and letter of recommendation from Program Director, Department Chair, or Supervising Attending Physician); OR • If more than two years out of residency, documentation of successful performance of a minimum of three (3) ERCP procedures (including sphincterotomy and stent placements) within the past two (2) years, including case log to be evaluated by Department Chair <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment: Performance of three (3) ERCP procedures with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation.</p> | |

Special Non-Core Privileges-CONTINUED

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| <input type="checkbox"/> Requested | ENDOSCOPIC ULTRASOUND (EUS) With or Without Fine Needle Aspiration (FNA) |
| <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> • Documentation of successful completion of a residency/fellowship that included training in the performance of Endoscopic Ultrasound procedures and letter from the residency/fellowship director that the applicant is competent to perform EUS; OR • Documentation of equivalent training in a program that is recognized by the American Society for Gastrointestinal endoscopy (ASGE); AND • Documentation of a minimum of one hundred fifty (150) EUS procedures as the Primary Operator to include a minimum of twenty-five (25) fine needle aspirations and a minimum of seventy-five (75) pancreaticobiliary procedures in the past twenty-four (24) months. <p>Focus Professional Practice Evaluation: Retrospective review of at least two (2) Endoscopic Ultrasound cases.</p> <p>Reappointment Criteria: Demonstrated current competence and evidence of the satisfactory performance of at least fifty (50) Endoscopic Ultrasound cases in the past twenty-four (24) months based on results of ongoing professional practice evaluation.</p> | |

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| <input type="checkbox"/> Requested | DIALYSIS: CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) |
| <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> • Documentation of successful completion of Internal Medicine Critical Care; Pediatrics Critical Care; Surgical Critical Care/ Trauma or Surgical Burn subspecialty training during an accredited residency/fellowship, which included the management of dialysis patients and CRRT techniques in its curriculum; OR • If more than two (2) years out of training, documentation of completion of CME in a recognized training course in CRRT techniques and management and successful performance of two (2) CRRT procedures in the previous two (2) years, including documentation of performance of CRRT (i.e., case logs or verification from Department Chair/Division Chief) from outside facility; OR • Documentation of successful completion of CME in a recognized training course in dialysis and CRRT techniques and management AND supervision of at least the first two (2) CRRT procedures by a member of the medical staff with full unsupervised dialysis privileges. <p>Focus Professional Practice Evaluation: Retrospective review of at least 2 cases with satisfactory performance and in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy, or direct supervision of the first three CRRT procedures, if applicable.</p> <p>Reappointment Criteria: Demonstrated current competence and evidence of the satisfactory performance of at least two (2) cases in the past 24 months based on results of ongoing professional practice evaluation.</p> | |

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| <input type="checkbox"/> Requested | USE OF LASER |
| <p>LASER PRIVILEGES [Refer to Laser Privileges Form]</p> <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> • Physician must provide documentation showing certification from a laser course which includes didactic material on safety, application, and clinical experience with specialized laser surgery and hands-on laboratory experience for each type of laser that will be used, or demonstrate successful completion of a residency or fellowship training program which included laser training; AND • Physician must have performed a sufficient number of procedures during the past 12 months; AND • Physician must agree to comply with the Hospital Laser Policy and any laser safety requirements of the Laser Safety Committee. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of one (1) case in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment Criteria: Demonstrated current competence and evidence of the performance of at least 1 laser procedure in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.</p> | |

Special Non-Core Privileges-CONTINUED

Requested

BASIC HAND SURGERY (LIMITED TO THE UPPER EXTREMITY ONLY)

Admit, evaluate, diagnose, treat, and provide consultation to patients of all ages, presenting with injuries and disorders of all structures of the upper extremity directly affecting the form and function of the hand and wrist by medical, surgical and rehabilitative means.

Includes:

1. Amputation of finger, hand, upper extremity (to include revision);
2. Bone graft pertaining to the hand and wrist;
3. Carpal tunnel decompression;
4. Fasciotomy and fasciectomy;
5. Nerve graft;
6. Neuroorrhaphy (to include graft harvest);
7. Open and closed fracture reductions;
8. Fracture fixation plates or wires;
9. Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc;
10. Treatment of all benign hand tumors and simple skin malignancies;
11. Repair of lacerations;
12. Skin grafts, local flap and regional (to include groin flap);
13. Tendon reconstruction;
14. Tendon release and repair;
15. Treatment of infections

Initial Criteria to apply for Privileges:

- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in general surgery; **AND**
- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited hand fellowship training program; **AND**
- Demonstrate performance of surgery on the internal structures of the hand and related structures, reflective of the scope of privileges requested, at least 20 times during the last 12 months, or demonstrate successful completion of an ACGME or AOA accredited residency that included basic hand surgery training within the past 12 months.

Focus Professional Practice Evaluation: Retrospective review of at least five (5) basic hand surgery procedures performed in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.

Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (100 surgical procedures) with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (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.

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| <input type="checkbox"/> Requested | ADVANCED HAND SURGERY (LIMITED TO THE UPPER EXTREMITY ONLY) |
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Admit, evaluate, diagnose, treat, and provide consultation to patients of all ages, presenting with injuries and disorders of all structures of the upper extremity directly affecting the form and function of the hand and wrist by medical, surgical and rehabilitative means.

Includes:

Initial Criteria to apply for Privileges:

- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in general surgery, orthopedic surgery, or plastic surgery; **AND**
- Successful completion of an accredited fellowship in surgery of the hand or current subspecialty certification in surgery of the hand or active participation in the examination process with achievement of certification within the time frame designated by a practitioner’s respective primary specialty/subspecialty certification in surgery of the hand by the American Board of Surgery, or Plastic Surgery; or Certificate of Added Qualifications in Surgery of the Hand by the American Board of Orthopedic Surgery; or Certificate of Added Qualifications in Hand Surgery by the American Osteopathic Board of Orthopedic Surgery; **AND**
- Demonstrate performance of surgery on the internal structures of the hand and related structures, reflective of the scope of privileges requested, at least 20 times during the last 12 months, or demonstrate successful completion of an ACGME or AOA accredited residency and clinical hand fellowship within the past 12 months.

Focus Professional Practice Evaluation: Retrospective review of at least five (5) hand surgery procedures performed in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.

Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (100 surgical procedures) with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (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.

- | | |
|--|--|
| <ol style="list-style-type: none"> 1. Perform history and physical exam 2. Amputation of finger, hand, upper extremity (to include revision) 3-2. Arthroplasty of large and small joints, wrist or hand, including implants 4. Bone graft pertaining to the hand and wrist 5. Carpal tunnel decompression 6. Fasciotomy and fasciectomy 7-3. Vascular repair of the finger, hand and upper extremity 8. Nerve graft 9. Neurorrhaphy (to include graft harvest) 10. Open and closed fracture reductions 11. Fracture fixation plates or wires Removal of soft tissue mass, ganglion palm or wrist, flexor sheath, etc. | <ol style="list-style-type: none"> 12-4. Treatment of all malignant and complex tumors of the hand and wrist tumors 13. Repair of lacerations 14-5. Repair of rheumatoid arthritis deformity 15-6. Replantation 16. Skin grafts, local flap and regional (to include groin flap) 17. Tendon reconstruction 18. Tendon release and repair 19-7. Tendon transfers 20-8. Thumb reconstruction, including pollicization and thumb metacarpal lengthening Treatment of infections |
|--|--|

| | |
|------------------------------------|------------------------------|
| <input type="checkbox"/> Requested | MICROVASCULAR SURGERY |
|------------------------------------|------------------------------|

Includes: Free flaps of omentum, bowel, bone, fascia, skin, toe to thumb transfers

Initial Appointment Criteria:

- Evidence of microvascular surgery training during Plastic Surgery residency or fellowship training that included microvascular surgery, **OR**
- If more than two years out of training, evidence of performance of ten (10) previous microvascular cases performed in the last two years.

Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.

Reappointment Criteria: Performance of ten (10) 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.

Special Non-Core Privileges-CONTINUED

| | |
|---|------------------|
| <input type="checkbox"/> Requested | VASECTOMY |
| <p>Initial Criteria:</p> <ul style="list-style-type: none"> ◆ Applicant must have documentation of vasectomy training during residency and/or fellowship program within the past two (2) years; OR ◆ If more than two years out post-graduate training, applicant must provide documentation of performing at least three (3) vasectomies; OR ◆ Applicant must have documentation of completion of CME in a recognized course in the performance vasectomy procedures with performance of at least three (3) vasectomies as first assist. <p>Focus Professional Practice Evaluation: First three (3) vasectomy cases to be with Concurrent Review/Proctor and post-operative follow-up reviews.</p> <p>Reappointment Criteria: Current demonstrated competence and an adequate volume of experience (5 vasectomies) with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.</p> | |

| | |
|---|--|
| <input type="checkbox"/> Requested | RESUSCITATIVE ENDOVASCULAR BALLOON OCCLUSION OF THE AORTA (REBOA) |
| <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> • Completion of an approved residency/fellowship training program that included training in the performance of Resuscitative Endovascular Balloon Occlusion of the Aorta (REBOA); OR • Documentation of an approved training course that provided training in the performance of Resuscitative Endovascular Balloon Occlusion of the Aorta (REBOA) that includes at least two (2) procedures performed on a cadaver in the past twenty-four (24) months. <p>Focus Professional Practice Evaluation: Immediate review, under the Trauma Peer Review Process, of REBOA cases as performed.</p> <p>Reappointment Criteria: Performance of one (1) Resuscitative Endovascular Balloon Occlusion of the Aorta (REBOA) case during the past twenty-four (24) months with acceptable results based on results of ongoing professional practice evaluation or submission of CME that provided simulation training in the performance of REBOA procedures in the past twenty-four (24) months.</p> | |

| | |
|---|--|
| <input type="checkbox"/> Requested | INTRAVASCULAR VENA CAVA (IVC) FILTER PROCEDURES |
| <p><input type="checkbox"/> Ultrasound Guided Intravascular Vena Cava (IVCUS) Filter Procedure</p> <p><input type="checkbox"/> Fluoroscopy Guided Intravascular Vena Cava (IVC) Filter Procedure</p> <p>Criteria to apply for privileges:</p> <ul style="list-style-type: none"> • Applicants must have documentation of completion of training in either Ultrasound Guided VC Filter procedures or Fluoroscopy Guided VC Filter procedures during an accredited residency, or fellowship training program within the past two (2) years (i.e., letter verifying training from the Program Director, Department Chair or Supervising Attending Physician), OR • Completion of an approved course that includes “hands on” training with at least three (3) patients, OR • If more than two years out of training, applicant must have documentation of successful performance of five (5) ultrasound guided VC filter procedures in the past two years including case logs and outcomes to be evaluated by the Department Chair. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of three (3) cases in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation (FPPE) to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Performance of five (5) ultrasound guided IVC filter procedures 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.</p> | |

Special Non-Core Privileges-CONTINUED

| | |
|--|--------------------|
| <input type="checkbox"/> Requested | LIPOSUCTION |
| <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> • Applicants must have documentation of completion of liposuction training during an accredited residency/fellowship training program within the past two (2) years; OR • Documentation of an approved training course that provided a didactic course and clinical training in the performance of liposuction and will be proctored by a member of the Valleywise Health medical staff with unsupervised liposuction privileges for a minimum of five (5) liposuction procedures. <p>Focus Professional Practice Evaluation: Retrospective review of a minimum of two (2) cases in accordance with the Valleywise Health Medical Staff Focused Professional Practice Evaluation (FPPE) to Confirm Practitioner Competence Policy.</p> <p>Reappointment Criteria: Performance of five (5) liposuction procedures 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.</p> | |

Criteria to apply for privileges:

Must have unsupervised Basic laparoscopy and/or Advance Laparoscopy Privileges

Pathway #1

Applicants must have documentation of completion of training in robotically assisted laparoscopic surgery during residency or fellowship with provision of a case log detailing number and type of procedures performed, a letter of attestation from training program director affirming competence in performance of requested privileges and that residency or fellowship was completed within the last 24 months prior to applying for privileges; **AND** three (3) cases

*concurrently observed by a robotic surgeon from their field of practice:

- Low complexity
- Non-obese (BMI <40)
- No previous intra-abdominal surgeries
- With Port placement and docking time documented
- With Console start and end times documented

*Exception -If the applicant was trained at Valleywise Health, they do not need to undergo the concurrent observed cases.

Pathway #2

If more than two years out of training and did not receive formal didactic and “hands on” training in robotically assisted laparoscopic surgery, applicant must show documentation of the completion of the Intuitive da Vinci Surgical System Off Site Training Program; **AND**

- Si Modules for Surgeons (Certificate of Completion required); **AND**
- dV System Modules for First Assistants (Certificate of Completion required)
- Observation of another surgeon performing at least two (2) cases within the relevant specialty or subspecialty; **AND WHEN THE ABOVE ARE COMPLETE, MUST THEN HAVE**
- Three (3) cases concurrently observed by a robotic surgeon from their field of practice:
 - Low complexity
 - Non-obese (BMI <40)
 - No previous intra-abdominal surgeries
 - With Port placement and docking time documented
 - With Console start and end times documented

Pathway #3

For applicants who maintain current unsupervised robotically assisted laparoscopic surgery privileges in another institution, only a case log demonstrating at least twenty (20) completed cases within the last two (2) years of practice is required and letter from the Chair/Chief documenting successful performance of Robotic Surgery Privileges

Focus Professional Practice Evaluation: Retrospective review by a surgeon within the relevant specialty or subspecialty with robotic privileges of a minimum of five (5) video recorded robotically assisted laparoscopic surgery procedures.

Reappointment Criteria: Successful performance of ten (10) robotically assisted laparoscopic surgery procedures reflective of the scope of privileges requested, for the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.

Note: To be considered as eligible for observer status for robotic surgery, practitioner must have completed a minimum of thirty (30) robotically assisted laparoscopic cases within the past twelve (12) months.

Special Non-Core Privileges-CONTINUED

| | |
|--|------------------------------------|
| <input type="checkbox"/> Requested | POINT- OF – CARE ULTRASOUND |
| <p>Ultrasound performed in the critical care setting as a focused bedside examination, in conjunction with the clinical exam to aid in diagnosis and facilitate patient management and disposition.</p> <p>Diagnostic:</p> <ul style="list-style-type: none"> • Focused Cardiovascular Ultrasound (e.g., Hemodynamic measurements/Intravascular volume assessment; Assessment of left ventricular function and cardiac output to include systolic and diastolic function; Assessment of right ventricular function; Assessment of Cardiac valvular disease; Pulmonary embolism: Diagnosis and Physiology; Assessment of cardiac tamponade; Echocardiographic approach to shock; Hemodynamic measurements/Intravascular volume assessment, evaluation of fluid responsiveness by ultrasound; • Focused Pulmonary Ultrasound (e.g., Diagnosis of pleural effusion, Diagnosis of pneumothorax, Diagnosis of pulmonary edema, Diagnosis of pneumonia) <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> • Documentation of successful completion of General Surgery, Trauma Surgery, or Surgical Critical Care subspecialty training, which included as a portion training and education in Ultrasound within the past two (2) years; OR • If more than two (2) years out of residency/fellowship training that also included training and education in ultrasound, the applicant must submit a case log/clinical activity report demonstrating the performance, OR, if case logs are unavailable, a letter from the Chair/Chief attesting to the successful performance, of Ultrasound examinations in the past two (2) years that include twenty-five (25) Cardiac Studies and six (6) Lung/Pleural Studies; OR • If ultrasound training was not included in residency/fellowship, the applicant must submit documentation demonstrating successful completion of approved CME in critical care ultrasound that includes five (5) hours of didactic training, five (5) hours of self-study, AND, a case log/clinical activity report demonstrating the performance, OR, if case logs are unavailable, a letter from the Chair/Chief attesting to the successful performance, of Ultrasound examinations that include fifty (50) Cardiac Studies and twelve (12) Lung/Pleural Studies. <p>Focus Professional Practice Evaluation: Retrospective review of at least of five (5) cases to confirm the indications and in accordance with the Valleywise Health Medical Staff Professional Practice Evaluation Policy.</p> <p>Reappointment Criteria: Performance or supervision of thirty (30) procedures within the past two (2) year reappointment period. Reciprocal hospital activity will be accepted.</p> | |

| | |
|--|----------------------------|
| <input type="checkbox"/> Requested | PROCEDURAL SEDATION |
| <p>Initial Appointment Criteria:</p> <ul style="list-style-type: none"> • Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) residency or fellowship training program that included training in procedural sedation and patient airway rescue or completion of formal training in procedural sedation and patient airway rescue within the past twenty-four (24) months, OR • If more than twenty-four (24) months out of residency or fellowship training, applicant must demonstrate satisfactory performance of 10 procedural sedation cases within the past twenty-four (24) months; AND • Current completion in Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), (as appropriate to the age of the patient) or a comparable advanced life support curriculum; AND successful completion of “Hands On” Basic Airway Management Training course within the past two (2) years; OR Board Certified/Qualified in emergency medicine, pediatric emergency medicine, neonatology, or critical care; AND • Must successfully complete a knowledge-based test to demonstrate competency in procedural sedation prior to the granting of the privilege. <p>Focus Professional Practice Evaluation: Retrospective review of at least 2 procedural sedation cases.</p> <p>Reappointment Criteria:</p> <ul style="list-style-type: none"> • Performance of ten (10) procedural sedation cases during the past 24 months; OR Documentation of completion of a “Hands On” Basic Airway Management Training course within the past two (2) years; AND • Current Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), or Neonatology Resuscitation Program (NRP) (as appropriate to the age of the patient), or a comparable advanced life support curriculum, or Board Certified/Qualified in emergency medicine, pediatric emergency medicine, neonatology, or critical care. (The advanced life support course must be approved/designated by an American Heart Association training center/program or other training with verified comparable “hands on” basic airway training as part of recertification) OR practitioner must demonstrate successful completion of “Hands On” Basic Airway Training course within the past two (2) years.) | |

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 are governed by the applicable Section of the Medical Staff Bylaws or related documents.

Signed _____ **Date** _____

Applicant «longname_of_providers»

2. Valleywise Health Foundation's 2024 Organizational and Budget Goals



DATE: January 8, 2024

TO: Steve Purves, President & CEO, Valleywise Health

FROM: Nicole Rivet, President & CEO, Valleywise Health Foundation

SUBJECT: Cooperative Service Agreement Operational Plan and Budget

In accordance with the Cooperative Service Agreement (CSA) signed July 1, 2023, please find the attached written update of the Valleywise Health Foundation's annual 2024 Operational Plan outlining strategies, activities and financial projections as well as a 2024 Budget reflecting the intended use of funds to be provided by the District.



Valleywise Health Foundation 2024 Operational Plan

Submitted by Nicole Rivet, President & CEO, Valleywise Health Foundation

January 8, 2024

ALL IN Campaign and Support to Valleywise Health

After the formation and ratification of a Cooperative Service Agreement with Valleywise Health, Valleywise Health Foundation began our ALL IN Campaign in 2019. We are thrilled to report that we have successfully surpassed our \$50 million fundraising goal – a goal that was increased twice during the campaign’s four-year period due to the enormous response from and support of our community. In partnership with the Valleywise Health Foundation Board of Directors and Valleywise Health leadership, we are actively working to close campaign requests that remain pending, with the goal of formally closing the campaign by the end of Q1. The Foundation team is proud that we have been able to provide \$33 million in direct support to Valleywise Health for Care Reimagined and many essential programs for the community we serve.

We are grateful to the Health District Board of Directors for your support of our efforts and for your dedication to the Valleywise Health mission. We could not have achieved this incredible milestone without your steadfast advocacy.

Operational Strategies for 2024

Operations:

Valleywise Health Foundation will continue to create and expand operational processes that maximize efficiencies, standardize our systems, and strategically leverage our resources. Our goal is to ensure our work reflects best practices in health care philanthropy. Areas of focus include: 1) human resources materials and support; 2) IT support and infrastructure; 3) increased alignment of our Blackbaud CRM system (database) with financial projections and reporting; and 4) creating structures to better promote diversity, equity, and inclusion.

Fundraising and Engagement:

In addition to securing any remaining ALL IN Campaign requests during Q1, the Foundation will continue to build on this momentum by actively engaging current donors and identifying new donors who will support the Valleywise Health mission. Areas of strategic focus include: 1) raising funds to build a hybrid operating room in the new acute care tower; 2) securing matching operating support for the First Episode Centers; 3) increasing the amount of annual unrestricted support; 4) establishing the infrastructure and investment policies to manage endowments; 5) segmenting our communication to personalize the donor experience; and 6) finetuning and implementing a cause-related marketing strategy that will target smaller, Latino-owned businesses.

Leadership Development:

The Valleywise Health Foundation team has grown significantly during the past few years, evolving from a team of three to a current team of 13. The team has achieved remarkable results, providing \$10 for each \$1 allocated by the Cooperative Service Agreement (CSA). During the second half of 2023, we began efforts to reassess staffing to ensure roles maximized the team's respective talents and aligned with our strategic priorities. Several job descriptions were revised and, in some positions, duties were elevated and/or expanded. Reporting lines were also realigned to reflect emerging needs. This work will continue in 2024, particularly in the areas of finance, database management and cause-related marketing. In addition, all team members will receive coaching in leadership development and will have opportunities to pursue continuing education. The goal is to build the team's collective skill set to enable a greater return on the health system's investment.

Activities

The Foundation's mission is to raise money for Valleywise Health. That goal will continue to drive our efforts to engage our community. We have two signature events scheduled for 2024: our Women's Luncheon (February) and A Night in the Valley (December). We will offer additional smaller events that will focus on cultivating and acquiring new donors, stewarding current donors, and generating additional "buzz" around Valleywise Health.

While events tend to be in the spotlight, we also will be actively working to secure grants from private foundations, corporations, and other institutional entities. We will continue to build our annual donor base through targeted, higher touch outreach. Our goal is to increase unrestricted giving while also building a robust pipeline of major donor prospects. Annual donors frequently become major donors over time with cultivation and engagement. We also will focus more efforts on planned giving, an area that previously has been relatively untapped.

Our marketing and communications efforts will have a greater focus on impactful storytelling, with an emphasis on quality over quantity. This is an exciting area for the

team to re-envision, as they began more actively collaborating with the health system marketing team in 2023 to share ideas and create new material. We want to ensure our work aligns with the health system and are sharing content to maximize its impact.

We also gratefully acknowledge the efforts of Valleywise Health leadership, clinicians, and staff in serving as trusted partners and passionate advocates in support of our fundraising efforts. Thank you for all that you do to make our work possible!

Financial Projections

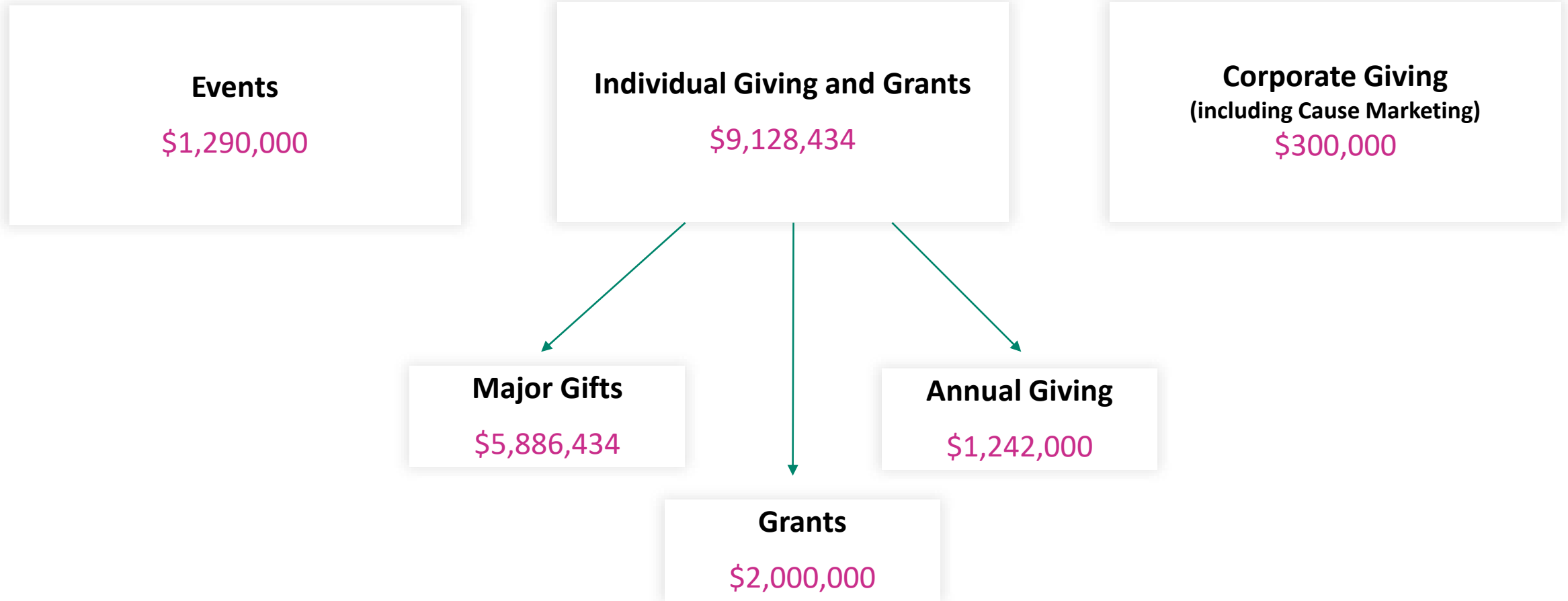
Given the success of our ALL IN Campaign and the extraordinary support our community has provided, we anticipate an annual “steady state” of \$13 million. For 2024, we project \$13.9 million in contributed revenue, of which \$10.7 million will be “new” revenue and \$3.2 million will be previously pledged gift payments. This will result in \$11.2 million in projected support to the health system. We anticipate meeting all CSA requirements, with a Cost Per Dollar Raised of \$0.27 and an ROI of \$10 for every dollar invested in Valleywise Health Foundation.



Valleywise Health Foundation

| 2024 Budget | |
|--|----------------------|
| Operating Revenue | \$ 13,921,368 |
| Support to Valleywise Health (VH) | \$ 11,184,834 |
| VHF Operations Expenses: | |
| Administration | 1,050,320 |
| Fundraising | 2,645,484 |
| Total VHF Operations Expenses | 3,695,804 |
| Total: Support to VH and VHF Operations Expenses | \$ 14,880,638 |
| Increase (Decrease) in Net Assets from Operations | \$ (959,270) |
| Non operating - Valleywise Health Support to VHF | \$ 1,000,000 |
| Increase (Decrease) in Net Assets | \$ 40,730 |
| Cost Per Dollar Raised | \$ 0.27 |
| Return on Investment to Valleywise Health | 1018% |
| Program Support as a % of Total Expenses | 75% |
| Admin % of Total Expense | 7% |
| Fundraising % of Total Expense | 18% |

2024 Fundraising Goals



Events

Fundraising Events

Golf, A Night in the Valley

Cultivation Events

A Bridge to Hope Women’s Luncheon, Salons

Acquisition/ Cause Marketing Engagement

Salons, Paint the Valley Green, Backpack Campaign, Holiday Angel

Stewardship Events

Grand Opening, Taste of the Valley, Doc Talks

Storytelling

- An Inspiring and Impactful Communications Strategy

Impactful, Engaging Content

Inspire meaningful connections to the mission that cuts through the noise

Translating seamlessly through multiple channels

Direct mail, events, signage, collateral, digital

Personalized Messaging

Segmenting donor audiences with engaging messaging that makes it personal

Diversity in our stories

Diversify service lines, patients, languages

Strategic partnerships

VHMC, Lane Terralever, community influencers

2023-2024 Philanthropic and Operations Overview

*Valleywise Health Foundation –
Philanthropy fueling the mission of Valleywise Health*

ALL IN for a healthier Arizona

Patti Gentry

Valleywise Health Foundation
Board Chair

Nicole Rivet

Valleywise Health Foundation
President & CEO



2023 Wins

- \$3M to support First Episode Centers
- \$2.1M CVS Health Zone grant
- \$1M to establish The Herbert Johnson Louis, M.D. Faculty and Resident Education Endowment
- A Night in the Valley raised \$1M+
- 2023 Revenue will exceed \$15M
- \$10.8M provided in support to you
- Surpassed all CSA Benchmarks
- ALL IN Campaign: \$54.2M



Valleywise Rocks Support at 'A Night in the Valley' and Raises over \$1M



Goal 1: Philanthropy

Create thoughtful impact for Valleywise Health and the community by growing and leveraging relationships with key stakeholders.

- Secure at least \$10.7M in revenue.
- Increase Legacy Circle annual giving participation/ membership by 10% .
- Establish infrastructure to manage endowment funds.

Goal 2: People

Continue growing a high-performance culture and results-focused philanthropy through a strong volunteer/staff partnership.

- Provide additional professional development opportunities for the team.
- Strategic staffing realignments or additions to build capacity and increase efficiencies.
- Thoughtfully engage Valleywise Health Foundation Board of Directors to expand our fundraising capacity and extend our network.

Goal 3: Engagement

To increase the profile of Valleywise Health Foundation within the community to increase engagement of time, talent and treasure.

- Strategic focus on unrestricted fundraising.
- Strategically segment communication to personalize the donor experience.
- Finetune and implement a cause-related marketing strategy.

2024 Organizational & Budget Goals

Continue to build operational processes that reflect industry best practices

Increased alignment and collaboration with health system

\$13.9M Total Revenue

- \$10.7M in new commitments
- \$3.2M in previous pledges

\$11.2M In Support to You

- Hybrid Operating Room (OR) capital support
- First Episode Center operating support

Cost Per Dollar Raised: \$0.27

ROI for CSA: For every \$1 you invest in us, you will receive \$10 in return

Thank You



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

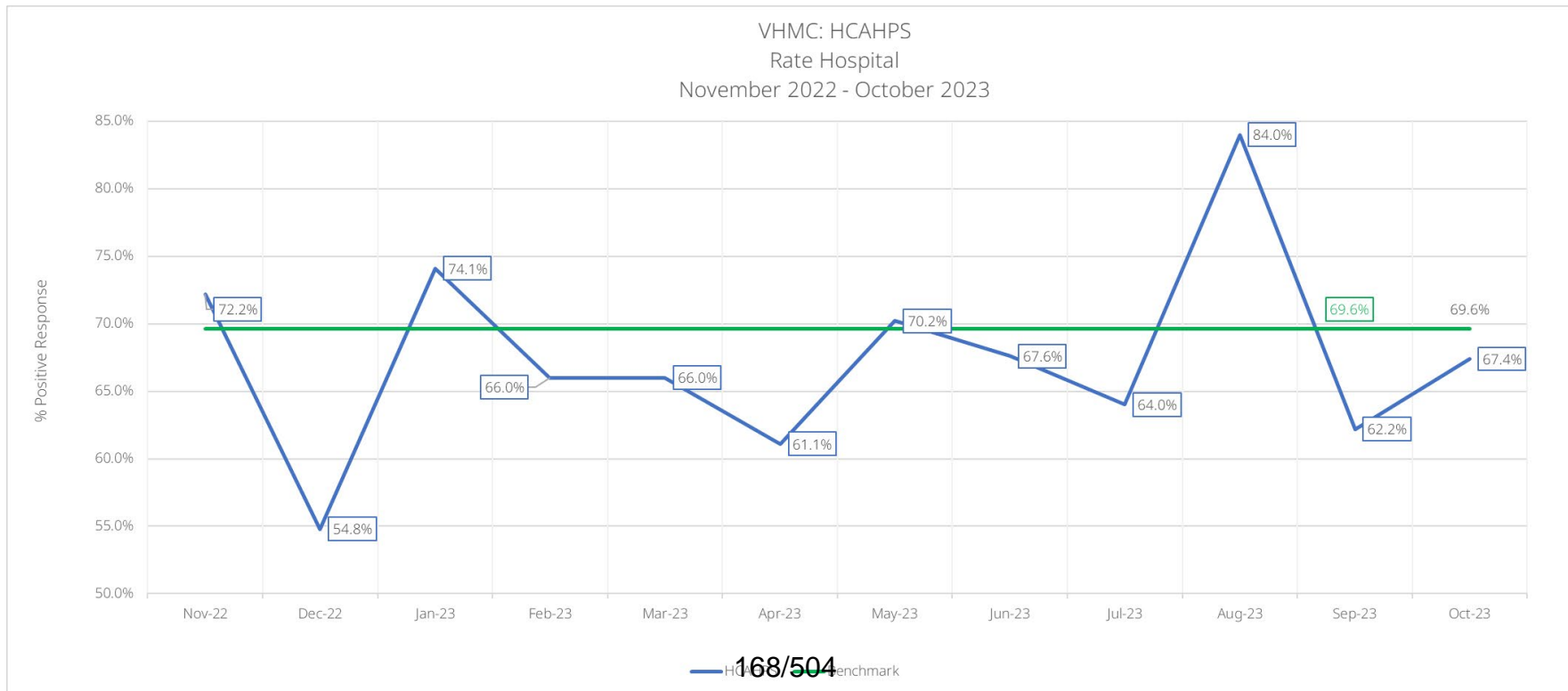
January 24, 2024

Patient Experience Data Review and Action Items

Report by: Crystal Garcia, MBA/HCM, RN
VP of Quality and Patient Safety

Measures Not Meeting Benchmark with Ongoing Action Items

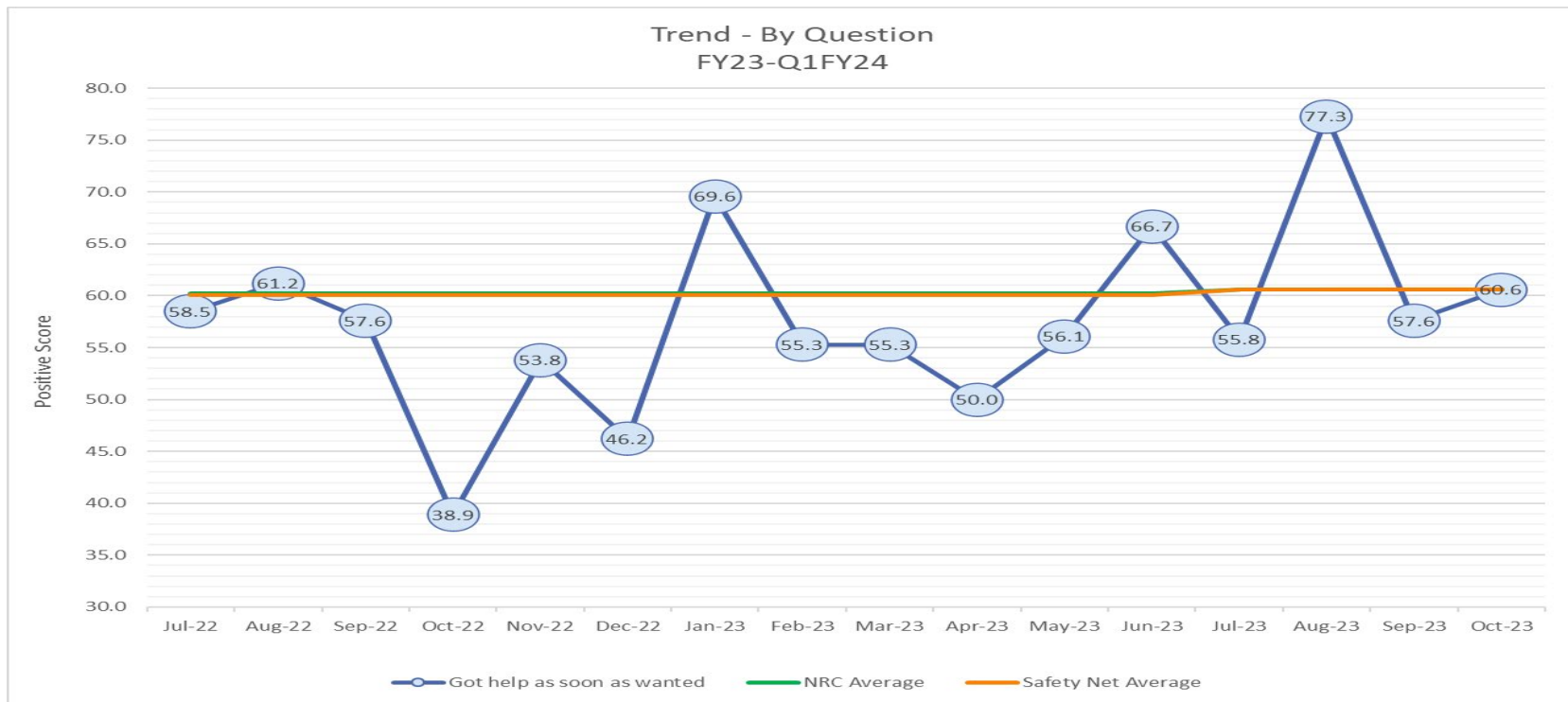
| Measure | Valleywise Benchmark | Oct 23 | Sep 23 | FY24 Q1 |
|---|----------------------|--------|--------|---------|
| HCAHPS Reportable: Overall Rating of Hospital | > 69.6% | 67.4% | 62.2% | 69.4% |



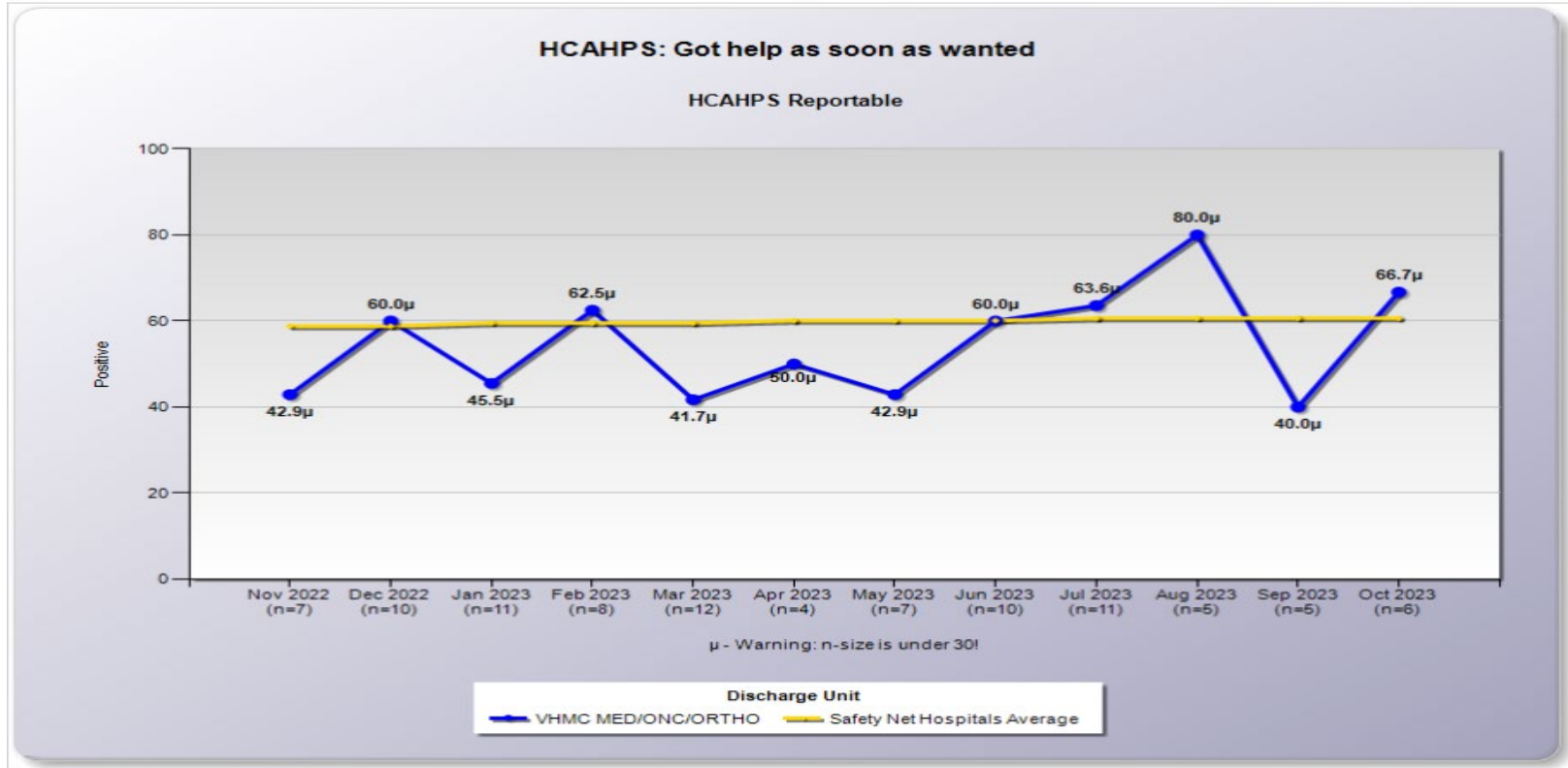
HCAHPS – Priority Matrix Table FY23-Q1 FY24

| | Question | Positive Score | n Size | Correlation Coefficient |
|----|--|----------------|--------|-------------------------|
| 1 | HCAHPS: Received info re: symptoms to look for | 89.0 | 600 | 0.35 |
| 2 | HCAHPS: Talked about help you would need | 86.6 | 598 | 0.32 |
| 3 | HCAHPS: Treated w/courtesy/respect by Drs | 86.1 | 663 | 0.46 |
| 4 | HCAHPS: Treated w/courtesy/respect by Nurses | 81.7 | 660 | 0.53 |
| 5 | HCAHPS: Drs listened carefully to you | 79.1 | 664 | 0.54 |
| 6 | HCAHPS: Drs explained things understandably | 77.1 | 664 | 0.49 |
| 7 | HCAHPS: Nurses listened carefully to you | 74.5 | 659 | 0.56 |
| 8 | HCAHPS: Told what medicine was for | 73.5 | 392 | 0.49 |
| 9 | HCAHPS: Nurses explained things understandably | 73.4 | 658 | 0.49 |
| 10 | HCAHPS: Understood purpose of medications | 62.2 | 595 | 0.41 |
| 11 | HCAHPS: Help going to bathroom as soon as wanted | 61.9 | 323 | 0.47 |
| 12 | HCAHPS: Got help as soon as wanted | 57.1 | 560 | 0.50 |
| 13 | HCAHPS: Understood managing of health | 56.7 | 663 | 0.49 |
| 14 | HCAHPS: Room kept clean during stay | 54.2 | 660 | 0.42 |
| 15 | HCAHPS: Staff described med side effects | 53.6 | 394 | 0.54 |
| 16 | HCAHPS: Staff took preferences into account | 50.8 | 648 | 0.55 |
| 17 | HCAHPS: Quiet around room at night | 48.8 | 658 | 0.44 |

Trend – FY23-Q1FY24 – “Got Help as Soon as Wanted”



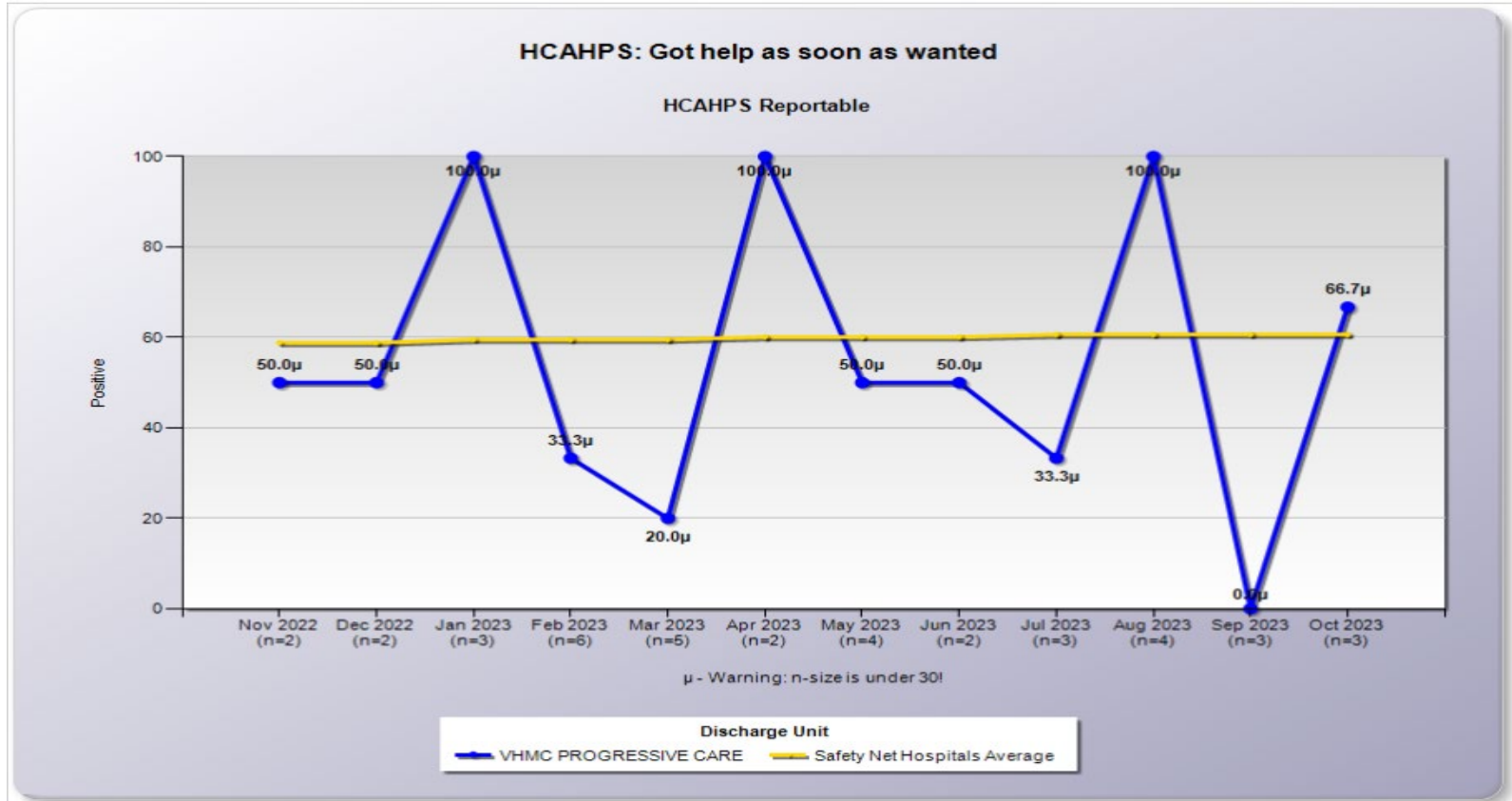
Trend by Discharge Unit – Med/Onc/Ortho



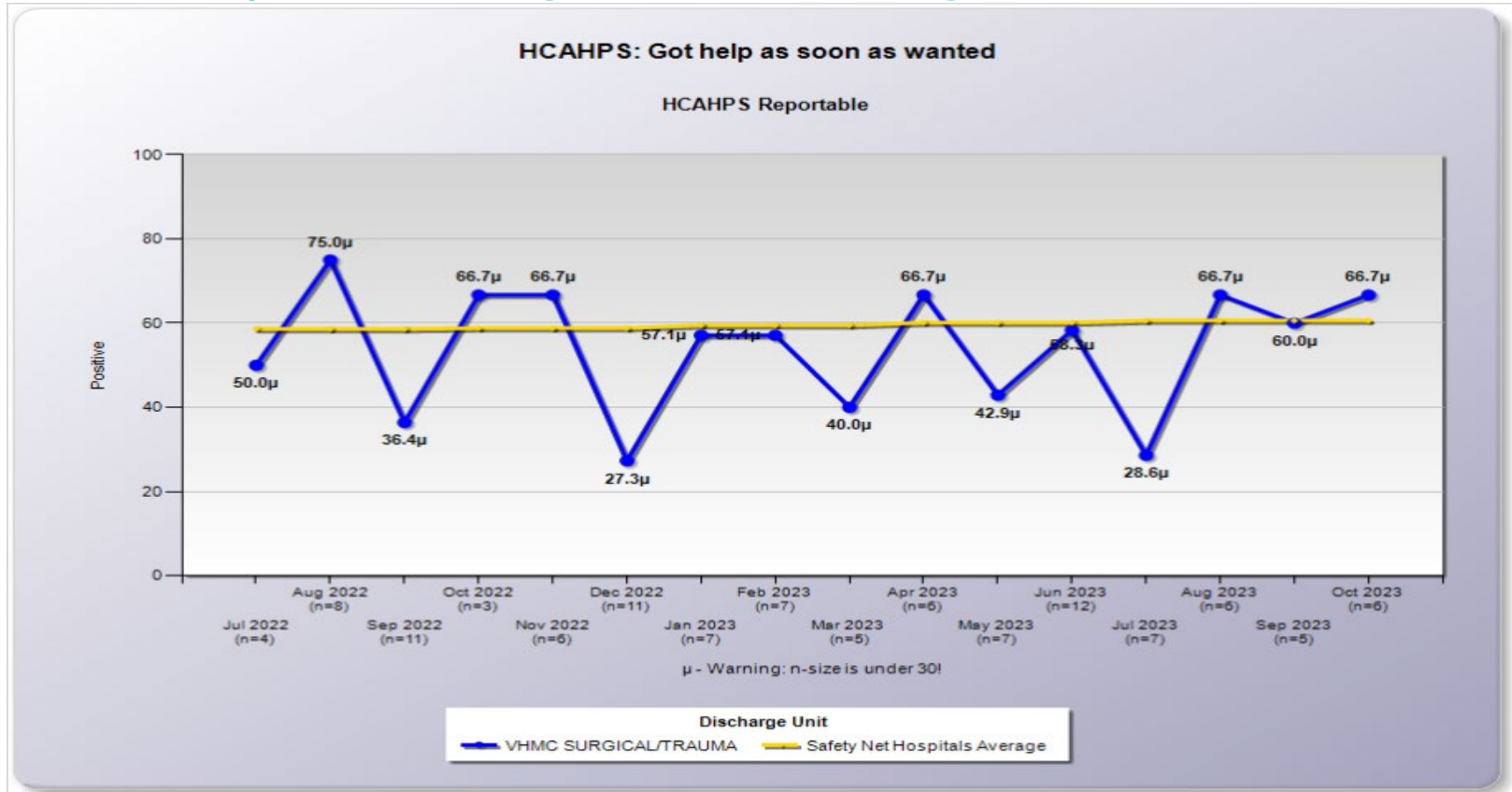
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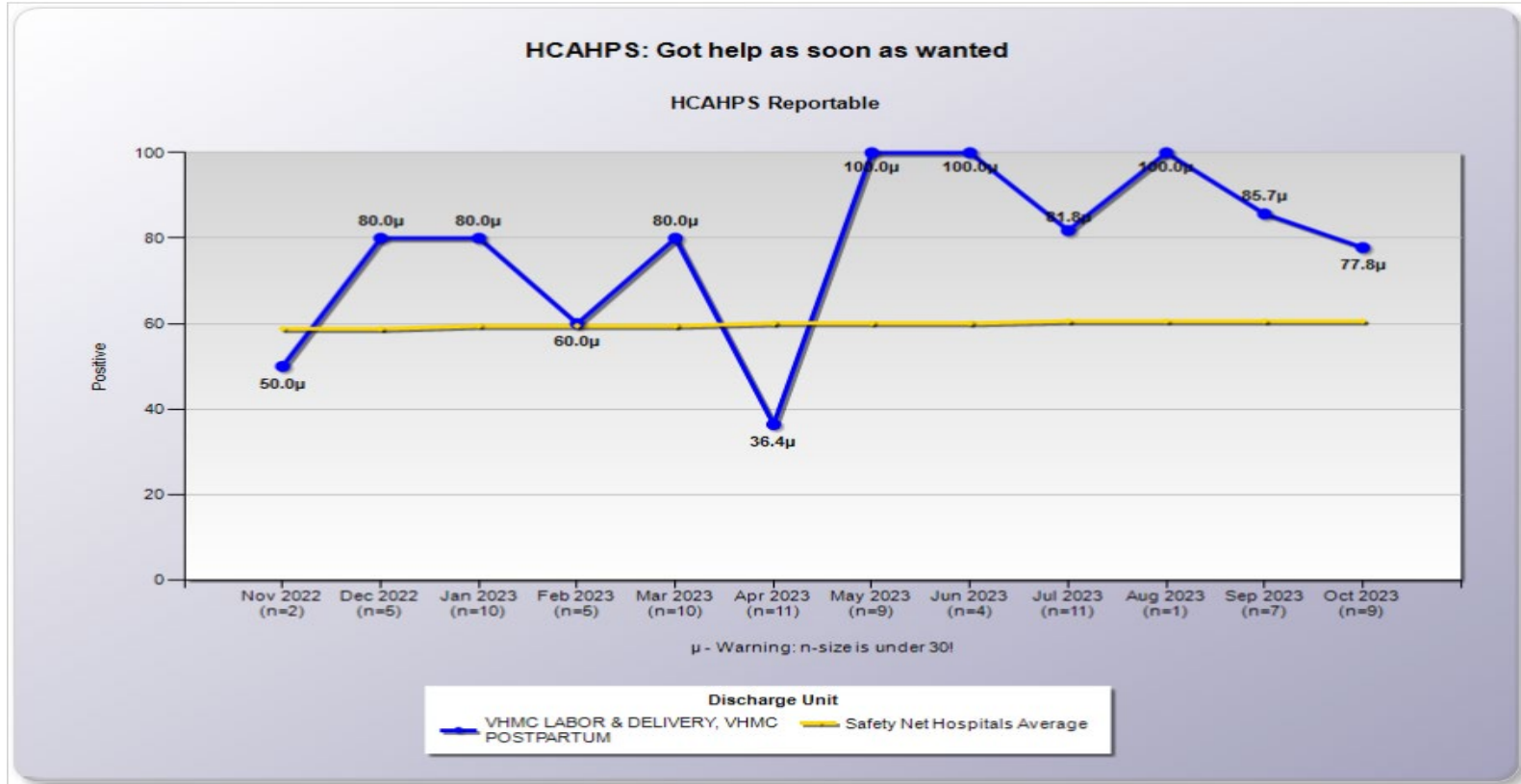
Trend by Discharge Unit – Progressive Care



Trend by Discharge Unit – Surg/Trauma



Trend by Discharge Unit – L&D-Post Partum



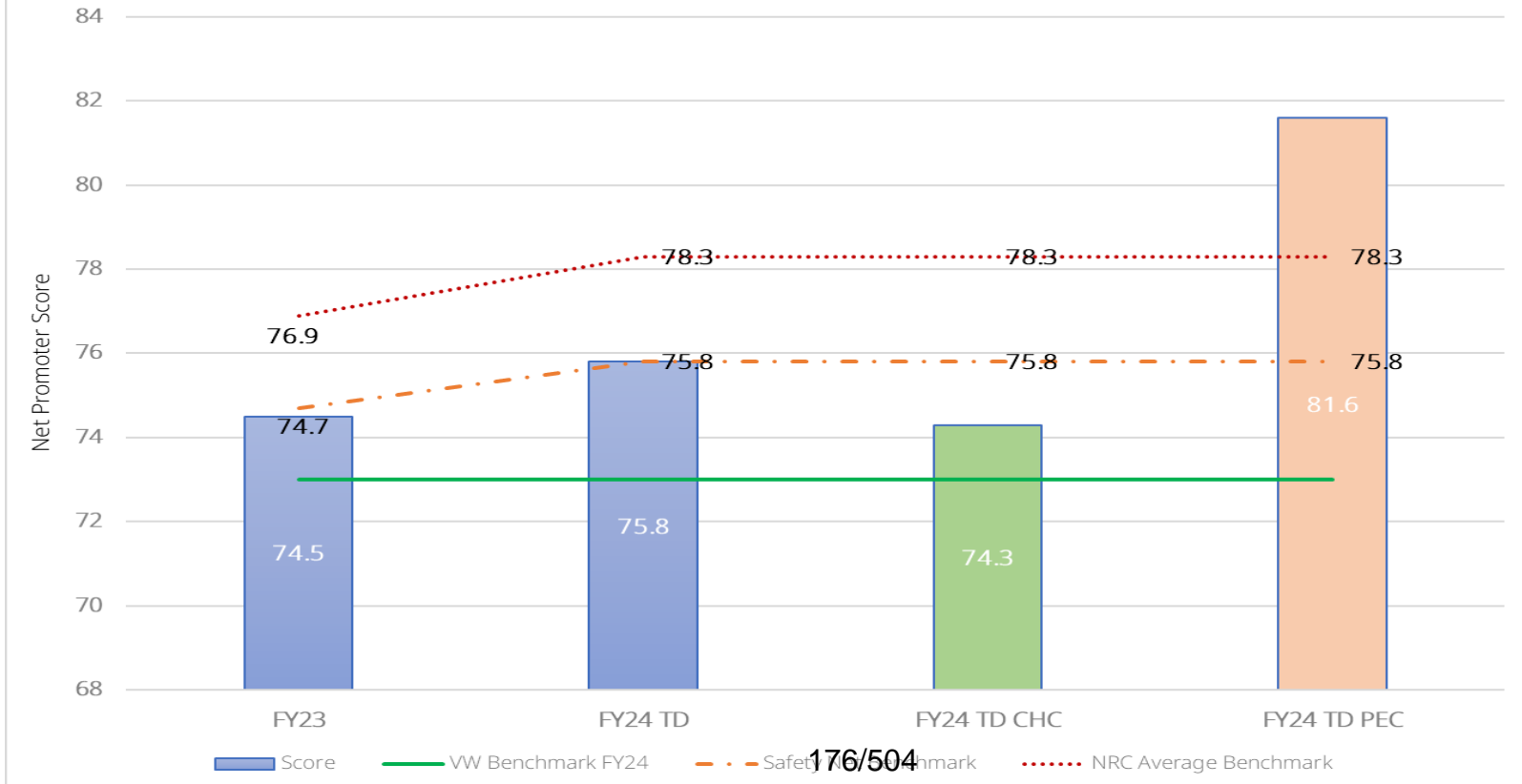
Specialty - Priority Matrix – FY23-FYTD24

Facility Locations by Question Pods:

| Dialysis | Medical Practice | | |
|----------------------|------------------------|----------------------|-----------------------|
| PEC Dialysis | PEC EYE SCREENING | PXC GI | PXC PLASTICS |
| Outpatient Oncology | PEC GI | PXC GLAUCOMA | PXC PODIATRY |
| PXC HEMA/ONCOLOGY | PEC Interv Pain Clinic | PXC HAND/PLASTICS | PXC PRE ADMIT TESTING |
| Outpatient Rehab | PEC NEPHROLOGY | PXC INFECT DISEASE | PXC PULMONARY |
| PXC REHAB | PEC ORTHO | PXC MED SPEC PROC | PXC RENAL |
| Outpatient Surgery | PEC PODIATRY | PXC NEUROLOGY | PXC RETINA |
| PEC PERI-OP SURGERY | PEC PRE ADMIT TESTING | PXC NEUROSURGERY | PXC RHEUMATOLOGY |
| Outpatient Testing | PEC SURGERY | PXC OPHTHALMOLOGY | PXC SURGERY |
| PEC AUDIOLOGY | PXC BREAST CENTER | PXC OPTOMETRY | PXC UROLOGY |
| PEC ENDOSCOPY | PXC CARDIAC CLINIC | PXC ORTHO | PXC VASCULAR |
| PXC AUDIOLOGY | PXC EAR/NOSE/THROAT | PXC ORTHO SPORTS MED | |
| PXC EYE SPECIAL PROC | PXC ENDOCRINE | PXC ORTHO TRAUMA | |

Specialty – Would Recommend FYTD-24

NPS: Facility Would Recommend
FY23 Versus FY24TD



176/504

Specialty - Priority Matrix – FY23-FYTD24

Priority Matrix

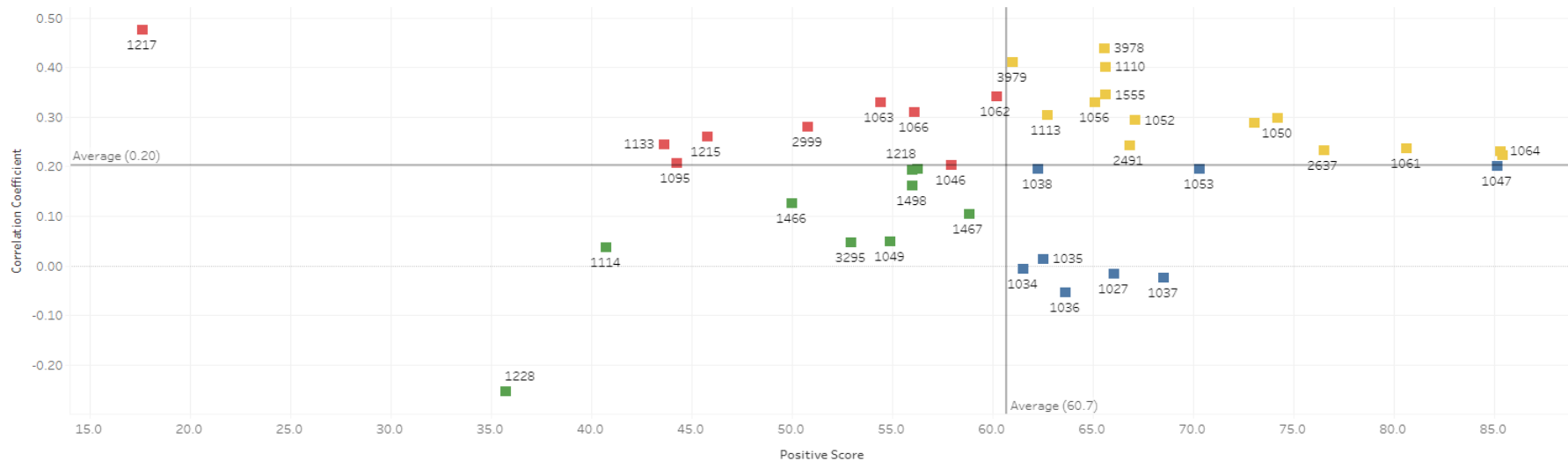
Subscribe Export

Priority Matrix Priority Table

Priority Matrix Report

Start Date: 7/1/2022 End Date: 12/31/2023 Question Pod Name: (All) Question Friendly Text: (All) Service Line: (All)

Select Hierarchy Level: Location Name Location Name: (Multiple values) Provider: (All) Age Group: (All) Gender: (All) Language: (All) Race: (All)



■ High Positive Score and High Correlation
 ■ High Positive Score and Low Correlation
 ■ Low Positive Score and High Correlation
 ■ Low Positive Score and Low Correlation

*Correlation is based on the relationship to your Key Metric. Improvement on questions most highly correlated to the Key Metric is most likely to result in a corresponding improvement in global measures. Correlations with less than 30 responses may produce spurious relationships and are subject to change.

Specialty – Priority Matrix Table FY23-FYTD24

Priority Matrix

Subscribe Export

Priority Matrix Priority Table

Priority Matrix Report

Start Date: 7/1/2022 End Date: 12/31/2023 Question Pod Name: (All) Question Friendly Text: (All) Service Line: (All)

Select Hierarchy Level: Location Name: (Multiple values) Provider: (All) Age Group: (All) Gender: (All) Language: (All) Race: (All)

| Priority | Question ID | Question Friendly Text | Positive Score | Respondent n-size | Correlation Coefficient |
|---|--|--------------------------------|----------------|-------------------|-------------------------|
| Low Positive Score and High Correlation | 1217 | Did care provider listen | 17.6 | 17 | 0.47 |
| | 1062 | Enough info about treatment | 60.2 | 19,143 | 0.34 |
| | 1063 | Providers knew medical history | 54.4 | 18,901 | 0.33 |
| | 1066 | Seen in timely manner | 56.1 | 20,322 | 0.31 |
| | 2999 | Comfort w/ online interaction | 50.8 | 3,579 | 0.28 |
| | 1215 | Method of connecting was easy | 45.8 | 3,769 | 0.26 |
| | 1133 | Easy to get appt | 43.6 | 21,075 | 0.24 |
| | 1095 | Discussed illness prevention | 44.2 | 52 | 0.21 |
| | 1046 | Procedure began on time | 57.9 | 321 | 0.20 |
| | High Positive Score and High Correlation | 3978 | PN listened | 65.6 | 433 |
| 3979 | | PN valuable services | 61.0 | 441 | 0.41 |
| 1110 | | Clerks/receptionists helpful | 65.6 | 32 | 0.40 |
| 1555 | | Clerks courtesy & respect | 65.6 | 32 | 0.34 |
| 1056 | | Care providers explain things | 65.1 | 22,079 | 0.33 |
| 1113 | | Reg. staff helpful | 62.7 | 15,924 | 0.30 |
| 1050 | | Staff listened | 74.2 | 1,803 | 0.30 |
| 1052 | | Facility was clean | 67.1 | 14,570 | 0.29 |
| 1118 | | Staff listen | 73.0 | 63 | 0.29 |
| 2491 | | Appt start on time | 66.8 | 1,778 | 0.24 |

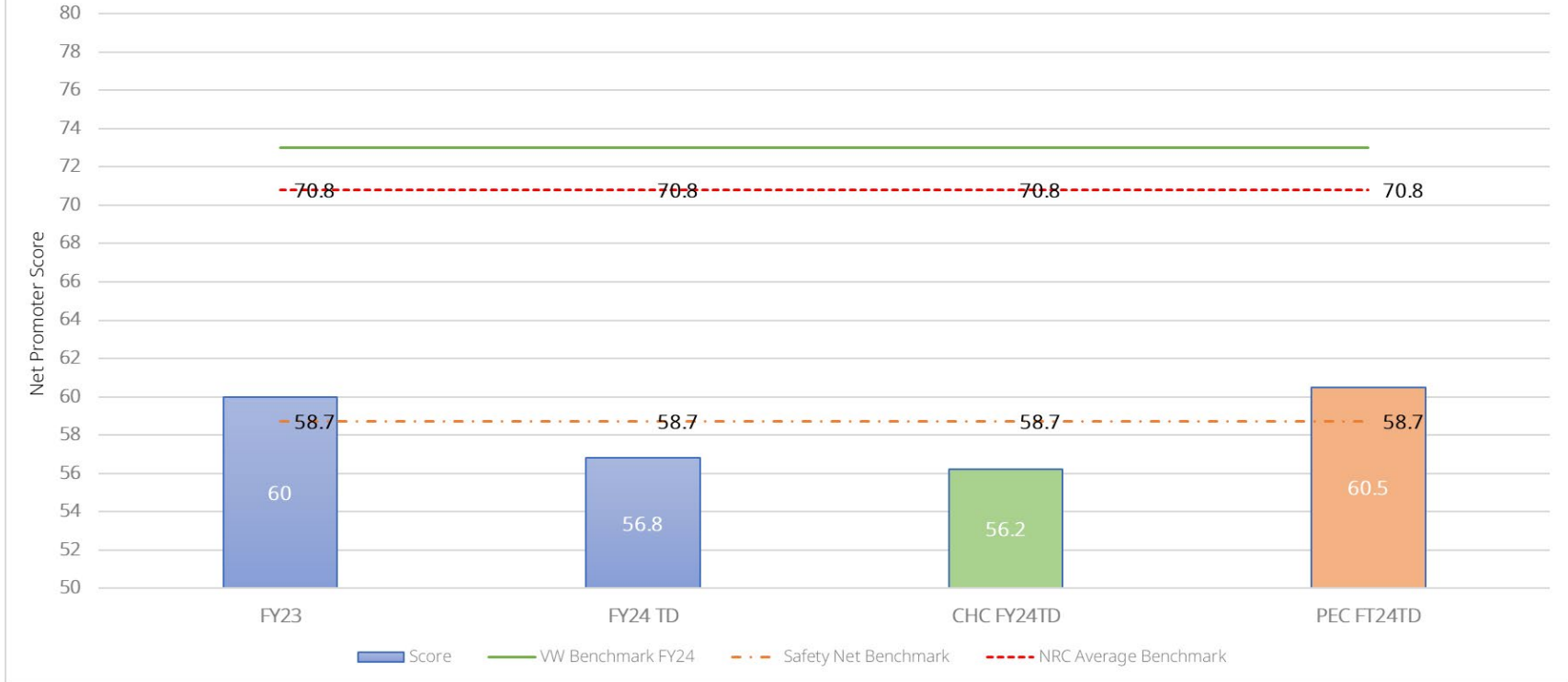
■ Low Positive Score and High Correlation
 ■ High Positive Score and High Correlation
 ■ Low Positive Score and Low Correlation
 ■ High Positive Score and Low Correlation

178/504

*Correlation is based on the relationship to your Key Metric. Improvement on questions most highly correlated to the Key Metric is associated with a corresponding improvement in global measures. Correlations with less than 30 responses may produce spurious relationships and are subject to change.

Specialty – Seen In A Timely Manner

NPS: Seen in a Timely Manner
FY23 Versus FY24TD With Separation By Clinic

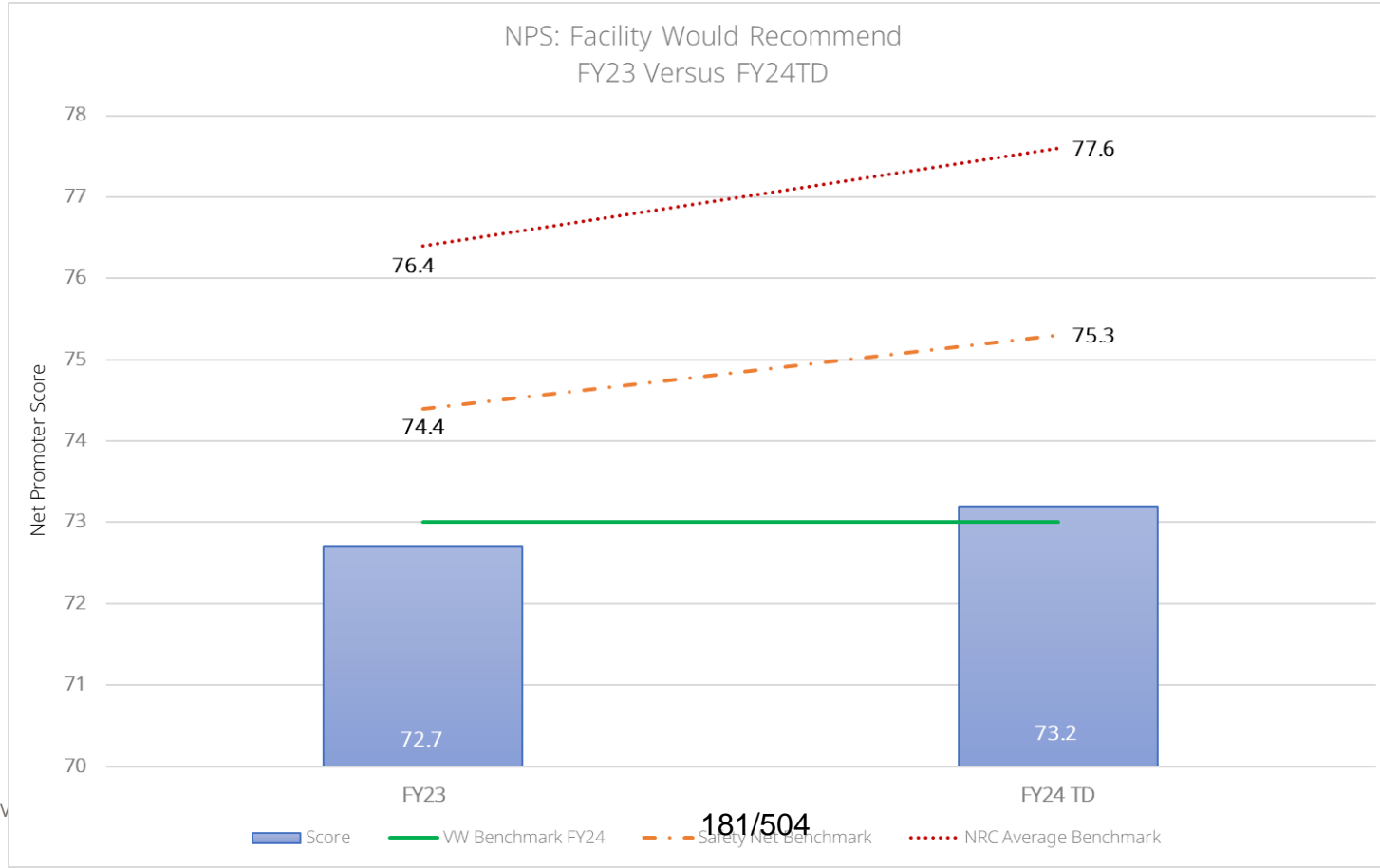


FQHC Priority Matrix

Facility Locations by Question Pods:

| Medical Practice | | Outpatient Behavioral Health | Outpatient Testing |
|------------------------|------------------------|------------------------------|---------------------|
| AVD FAMILY PRACTICE | PEC INTERNAL MEDICINE | AVD INTEGRATED BH | PXC ANTEPARTUM TEST |
| CHD FAMILY PRACTICE | PEC OB/GYN | CHD INTEGRATED BH | PXC COLPOSCOPY |
| CHD INTERNAL MEDICINE | PEC PEDIATRICS | GDL INTEGRATED BH | PXC PEDS PROCEDURE |
| CHD OB/GYN | PXC ADOLESCENT | MESA INTEGRATED BH | |
| GDL FAMILY PRACTICE | PXC GYN TUMOR | MESA PREVENTION PSYCH | |
| GDL OB/GYN | PXC INTERNAL MEDICINE | MESA SPECIALTY BH | |
| MCD FAMILY PRACTICE | PXC OB/GYN | MSA INTEGRATED BH | |
| MCD INTERNAL MEDICINE | PXC OB/GYN INFER (REI) | NPX INTEGRATED BH | |
| MESA FAMILY PRACTICE | PXC OBSTETRICS COMP | PEC INTEGRATED BH | |
| MESA IMM CLINIC | PXC PEDS | SPL INTEGRATED BH | |
| MESA INTERNAL MEDICINE | PXC UROGYNECOLOGY | SPX INTEGRATED BH | |
| MESA OB/GYN | SPL FAMILY PRACTICE | PXC Peds Integrated BH | |
| MESA PEDIATRICS | SPL INTERNAL MEDICINE | | |
| MESA PREVENTION | SPL OB/GYN | | |
| NPX FAMILY PRACTICE | SPL PEDIATRICS | | |
| NPX INTERNAL MEDICINE | SPX FAMILY PRACTICE | | |
| NPX OB/GYN | WMV Family Practice | | |
| NPX PEDIATRICS | WMV OB/GYN | | |
| PEC FAMILY PRACTICE | WMV PEDIATRICS | | |

NPS: Facility Would Recommend - Scores



FQHC Priority Matrix FY23-FY24TD

Priority Matrix

Subscribe

Export

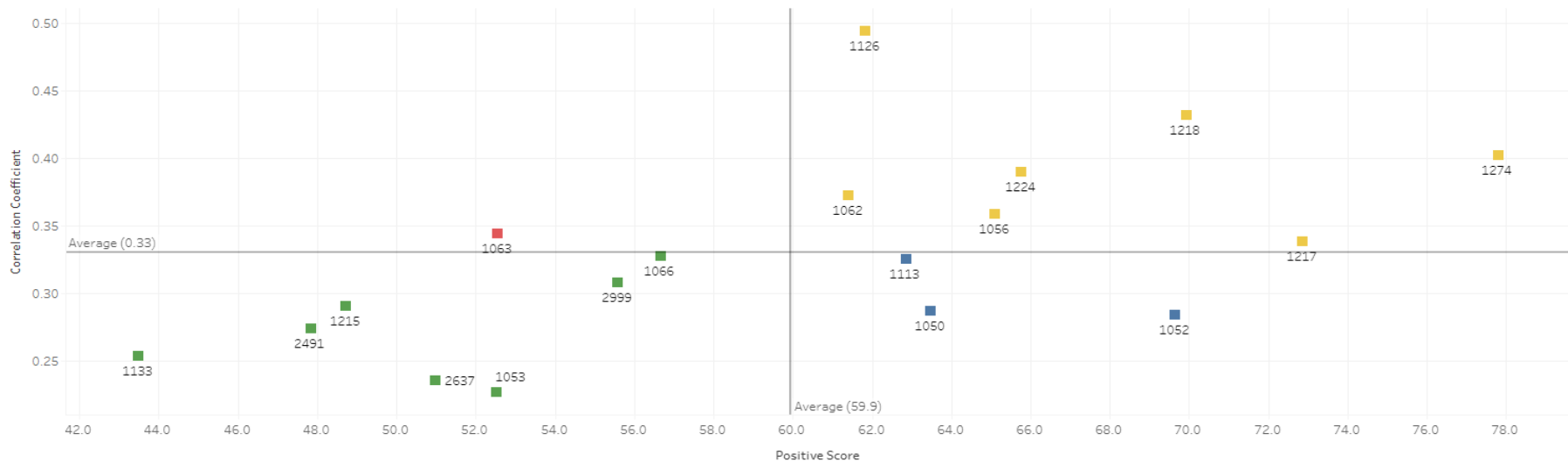
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Priority Table

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■ High Positive Score and High Correlation
 ■ High Positive Score and Low Correlation
 ■ Low Positive Score and High Correlation
 ■ Low Positive Score and Low Correlation

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FQHC Priority Matrix FY23-FY24TD

Priority Matrix

Subscribe

Export

Priority Matrix

Priority Table

Priority Matrix Report

Start Date: 7/1/2022 | End Date: 12/31/2023 | Question Pod Name: (All) | Question Friendly Text: (All) | Service Line: (All)

Select Hierarchy Level: Location Name | Location Name: (Multiple values) | Provider: (All) | Age Group: (All) | Gender: (All) | Language: (All) | Race: (All)

| Priority | Question ID | Question Friendly Text | Positive Score | Respondent n-size | Correlation Coefficient |
|--|-------------|--------------------------------|----------------|-------------------|-------------------------|
| Low Positive Score and High Correlation | 1063 | Providers knew medical history | 52.5 | 47,155 | 0.34 |
| High Positive Score and High Correlation | 1126 | Got info re; managing health | 61.8 | 917 | 0.49 |
| | 1218 | Care provider knew history | 69.9 | 133 | 0.43 |
| | 1274 | Care provider courtesy/respect | 77.8 | 905 | 0.40 |
| | 1224 | What to do if more questions | 65.8 | 894 | 0.39 |
| | 1062 | Enough info about treatment | 61.4 | 48,032 | 0.37 |
| | 1056 | Care providers explain things | 65.1 | 52,246 | 0.36 |
| | 1217 | Did care provider listen | 72.9 | 140 | 0.34 |
| Low Positive Score and Low Correlation | 1066 | Seen in timely manner | 56.7 | 51,624 | 0.33 |
| | 2999 | Comfort w/ online interaction | 55.6 | 10,758 | 0.31 |
| | 1215 | Method of connecting was easy | 48.7 | 11,314 | 0.29 |
| | 2491 | Appt start on time | 47.8 | 901 | 0.27 |
| | 1133 | Easy to get appt | 43.5 | 54,845 | 0.25 |
| | 2637 | Got instructions to prepare | 51.0 | 814 | 0.24 |
| | 1053 | Told when to expect results | 52.5 | 851 | 0.23 |
| High Positive Score and Low Correlation | 1113 | Reg. staff helpful | 62.9 | 35,329 | 0.33 |
| | 1050 | Staff listened | 63.5 | 920 | 0.29 |
| | 1052 | Facility was clean | 69.7 | 33,203 | 0.28 |

Low Positive Score and High Correlation

High Positive Score and High Correlation

Low Positive Score and Low Correlation

High Positive Score and Low Correlation

*Correlation is based on the relationship to your Key Metric. Improvement on questions most highly correlated to the Key Metric may result in a corresponding improvement in global measures. Correlations with less than 30 responses may produce spurious relationships and are subject to change.

FQHC Positive Responses – Reg Staff Helpful

PEIC FQHC

☆ Favorite

📄 Subscribe

📄 Export

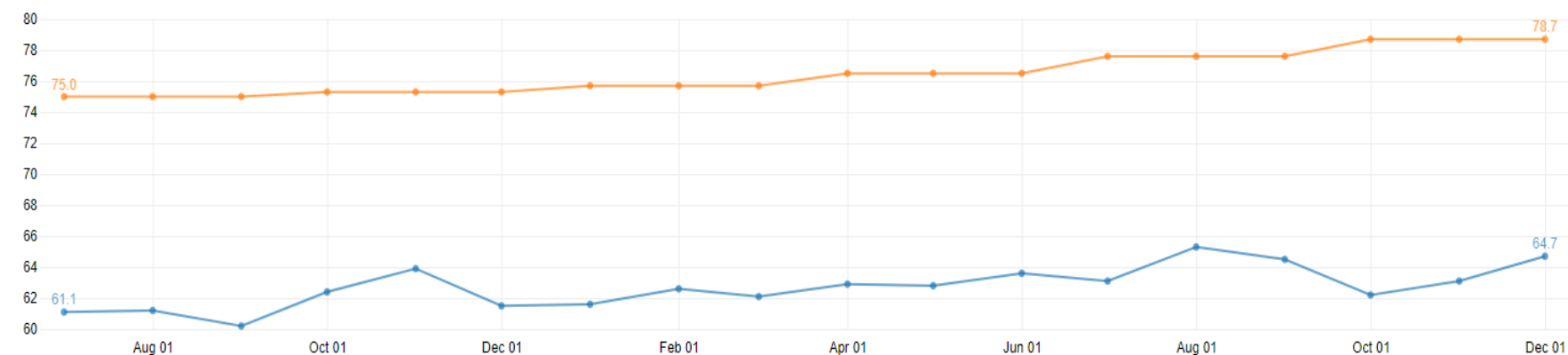
Jul 01, 2022 - Dec 31, 2023

Respondents

34,56

■ Benchmark ■ % of Positive

Reg. staff helpful

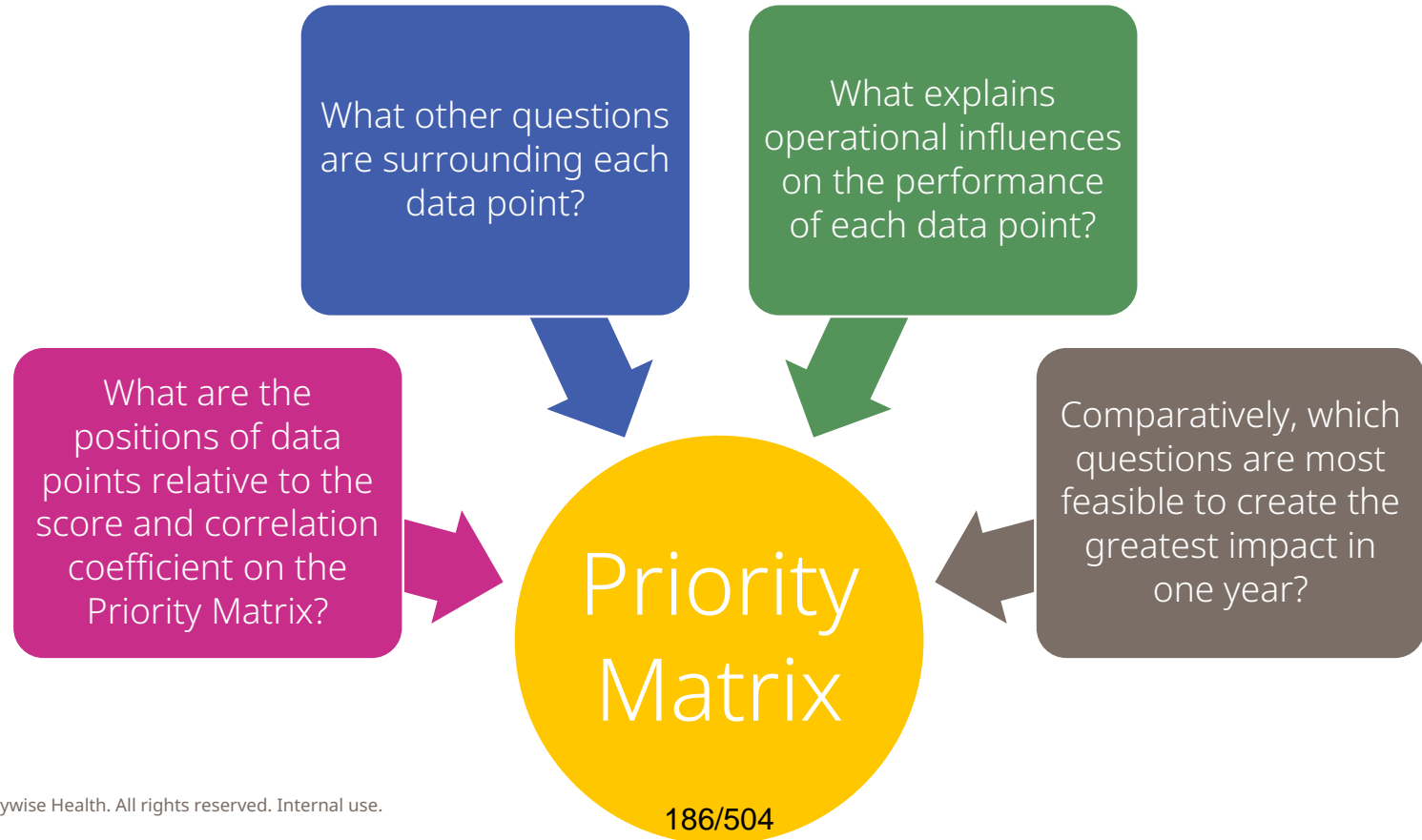


% of Positive

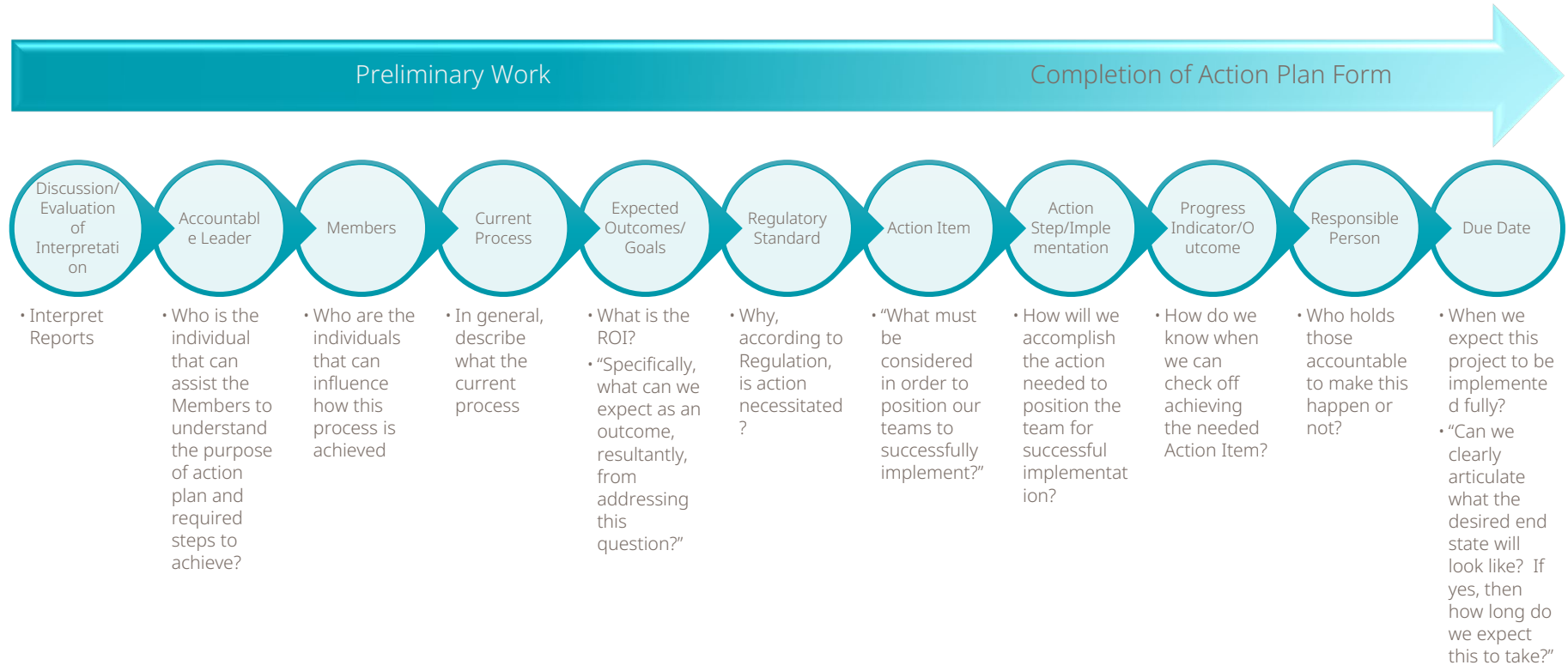
| | Jul 01 | Aug 01 | Sep 01 | Oct 01 | Nov 01 | Dec 01 | Jan 01 | Feb 01 | Mar 01 | Apr 01 | May 01 | Jun 01 | Jul 01 | Aug 01 | Sep 01 | Oct 01 | Nov 01 | Dec 01 |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| | 61.1 | 61.2 | 60.2 | 62.4 | 63.9 | 61.5 | 61.6 | 62.6 | 62.1 | 62.9 | 62.8 | 63.6 | 63.1 | 65.3 | 64.5 | 62.2 | 63.1 | 64.7 |
| | n = 1,523 | n = 1,778 | n = 1,693 | n = 1,652 | n = 1,614 | n = 1,419 | n = 1,679 | n = 1,506 | n = 1,923 | n = 1,797 | n = 1,730 | n = 1,917 | n = 2,195 | n = 2,568 | n = 2,261 | n = 2,619 | n = 2,344 | n = 2,347 |

Action Plans

Interpreting the Priority Matrix



Committing to Action Planning



Action Items:

- Created smaller, collaborative groups that are working towards measurable improvements (Inpatient, Specialty Clinics, FQHCs)
 - **Inpatient Specific Items:**
 - Reviewed the configuration of call light system in each department
 - Rounded on units to review the call light system in use
 - The utilization of hourly rounding on each unit
 - **Specialty Clinics:**
 - Managing perceptions of patients by education
 - Communication board
 - Touchpoint wait times via Epic
 - **FQHCs:**
 - Reviewing comments on a regular basis
 - Ensuring Registration Leadership are receiving the correct information
 - Work with registration leadership



End slide is Noto Sans Light 15pt, two lines max

4. Legislative Update

January 24, 2024

Legislative & Governmental Relations

Michael Fronske
Director of Legislative and Government Affairs

Current Statistics of Session

| | |
|--------------------|-----|
| Day | 17 |
| Bills posted | 890 |
| Bills passed | 0 |
| Bills vetoed | 0 |
| Bills signed | 0 |
| Resolutions passed | 0 |

Legislative Deadlines

JANUARY 2024

Monday 1/8 Session Begins

~~Thursday 1/11 House 7-bill Introduction Limit Begins at (5:00 p.m.)~~

~~Tuesday 1/16 Senate Bill Request Deadline (5:00 p.m.)~~

~~Monday 1/22 Senate Bill Intro Set Preparation Deadline (5:00 p.m.)~~

Monday 1/29 Senate Bill Introduction Deadline (5:00 p.m.)

FEBRUARY 2024

Friday 2/2 House Bill Request Deadline (5:00 p.m.)

Monday 2/5 House Bill Introduction Deadline (5:00 p.m.)

Friday 2/16 Last Day to Hear SBs in Senate Committees

Friday 2/16 Last Day to Hear HBs in House Committees

MARCH 2024

Friday 3/22 Last Day to Hear SBs in House Committees

Friday 3/22 Last Day to Hear HBs in Senate Committees

APRIL 2024

Friday 4/12 Last Day for Conference Committees (By Senate and House Rule)

Tuesday 4/16 100th Day of Session

State Legislation and Issues

Budget Process

The Executive predicts a \$900M deficit, JLBC predicts a \$1.7B deficit

The Governor's \$16B Budget was released on January 12th

Key health related issues include:

- \$24M to improve health care licensing systems
- Establish a Prescription Drug Affordability Division in ADOI
- \$24M for medical school initiatives in all three state universities

The Legislature is Currently Working from a Baseline Budget

State Legislation and Issues

27 Bills Sent Out for Comment

34 Bills on Monitor List

Bills We Are Tracking Closely:

- HB 2139 Medical records; minors; confidentiality; consent
- HB 2066 Behavioral health transportation; providers; technicians
- HB 2067 Involuntary evaluation; service of process
- SB 1037 AHCCCS; comprehensive dental care

Action Items

Request to Support or Oppose Bills and Amendments with Timely Feedback to the Board

Request to Support:

HB 2290 Certificates of operation; interfacility transfers

HB 2035 Insurance; claims; appeals; provider credentialing

HB2078 Advisory committee; subcommittee; exemption

Federal Issues

Continue to work with our Congressional Delegation on these key issues:

- Continued support for an emergency funding pathway to address the essential workforce needs of hospitals and appropriate at least \$20 billion to fund this effort, targeting resources to essential hospitals
- Continue to advocate for essential hospital designation, 340B funding, and protect against hospital site-neutral payment cut proposals



5. Compliance and Conflict of Interest Training and Education

FY2024 Board of Directors Compliance Training

Reporting Group: Compliance and Internal Audit

Person Reporting:

L.T. Slaughter, Jr., CPA, CGMA, CHC, CISSP, CISA, MBA

Reporting period: FY2024

Chief Compliance Officer/Privacy Officer

Two Compliance Words for 2024:

- Push: a vigorous effort to do or obtain something.

- Excellence (see the next slide).

What is Excellence?

Definition: “the quality of being outstanding or extremely good”

Our Excellence Value:

We are committed to delivering breakthrough quality and service that exceeds expectations, improves outcomes and provides exceptional patient care.





What is Compliance?

- Compliance is adhering to the laws, rules, regulations, policies and procedures that govern the job we perform.
- It is the responsibility of ***all the employees*** of the organization.



Excellence and Compliance produce the best results!

Healthcare companies with an effective compliance program, effective quality program and strong internal controls have these attributes:

- Significantly less errors;
- Significantly less rework;
- Higher patient quality scores;
- Higher employee and patient satisfactions; and
- Are more profitable!



Expectations for Board Oversight of Compliance Program Functions

- A Board must act in good faith in the exercise of its oversight responsibility for its organization, including making inquiries to ensure: (1) a corporate information and reporting system exists and (2) the reporting system is adequate to assure the Board that appropriate information relating to compliance with applicable laws will come to its attention timely and as a matter of course.

Expectations for Board Oversight of Compliance Program Functions

- The existence of a corporate reporting system is a key compliance program element, which not only keeps the Board informed of the activities of the organization, but also enables an organization to evaluate and respond to issues of potentially illegal or otherwise inappropriate activity.

OBJECTIVES

In this training, you will learn about our approach:

- ❑ Understand the Your Business - Overview of Valleywise Health (including the FQHC Structure)
- ❑ Understand the Healthcare Environment - Key Regulations and Trends
- ❑ Risk Assessment Process - Identification and Prioritization of Risks
- ❑ Risk Mitigation Process - Board Oversight, Conflict of Interest, Management Oversight, FAC Committee, Compliance Program, Internal Audit, Revenue Cycle, Performance Excellence, etc.

METHODOLOGY AND APPROACH

Our Methodology and Approach



1 *Understand the Business*

- Conducted interviews with various members of Valleywise Health Management and Healthcare Industry leaders;
- Considered whether any key initiatives or changes to Valleywise Health' strategic plan may impact the risk profile of the organization;
- Reviewed the audit and compliance work plans and priorities of other health systems to determine current areas of focus by others in the industry.

2 *Risk Assessment*

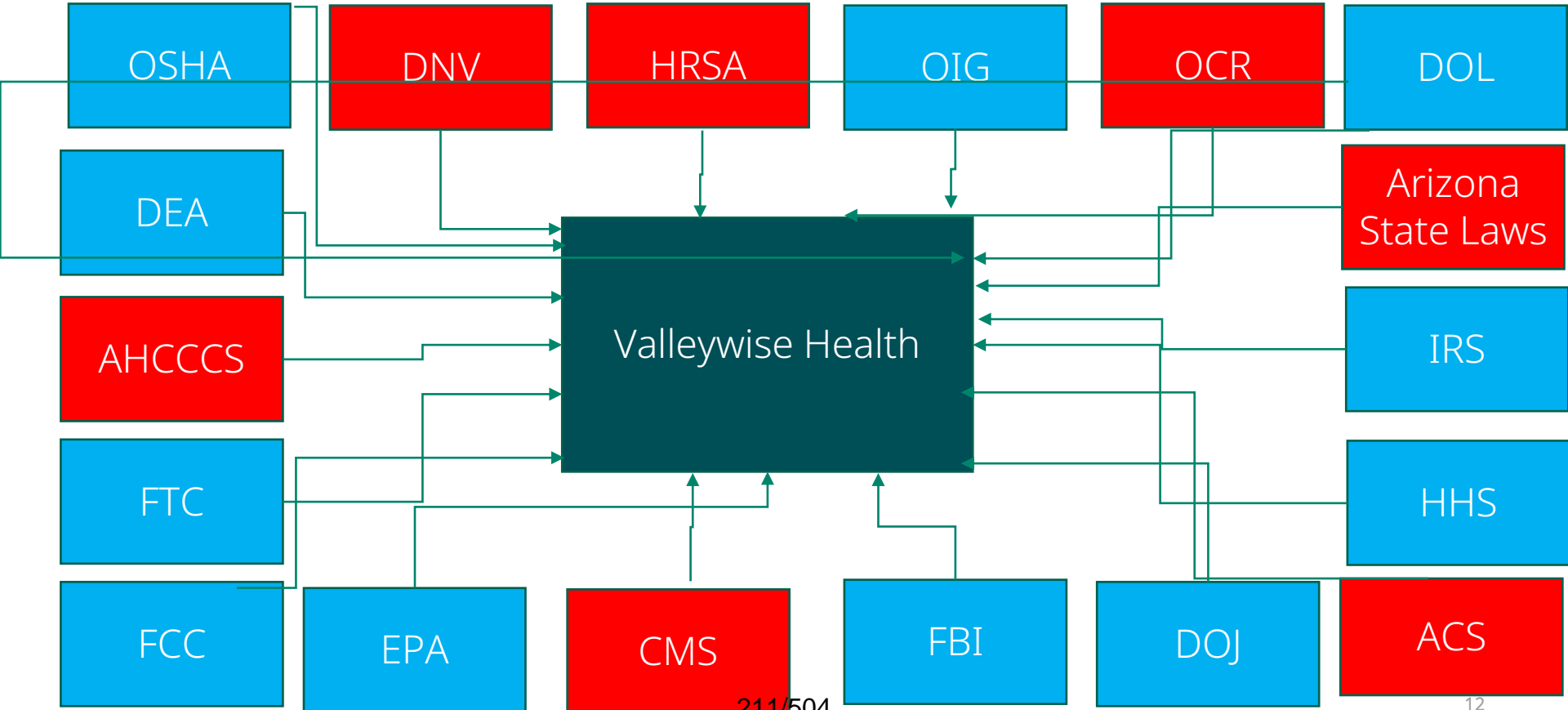
- Prioritized risks and areas of concern based on the importance to business performance, impact to the organization and the likelihood of control /process issues;
- Considered the prior year risk assessments and work completed in FY20 & FY21 and the findings from previous internal audit and compliance activities.

3 *Prioritized Internal Audit and Compliance Plan*

- Proposed a list of compliance and internal audit projects focused on the risks identified and areas of concern to be completed in FY2022. These will be reassessed quarterly.

UNDERSTAND THE HEALTHCARE ENVIRONMENT

Healthcare Regulation/Quality Oversight Bodies



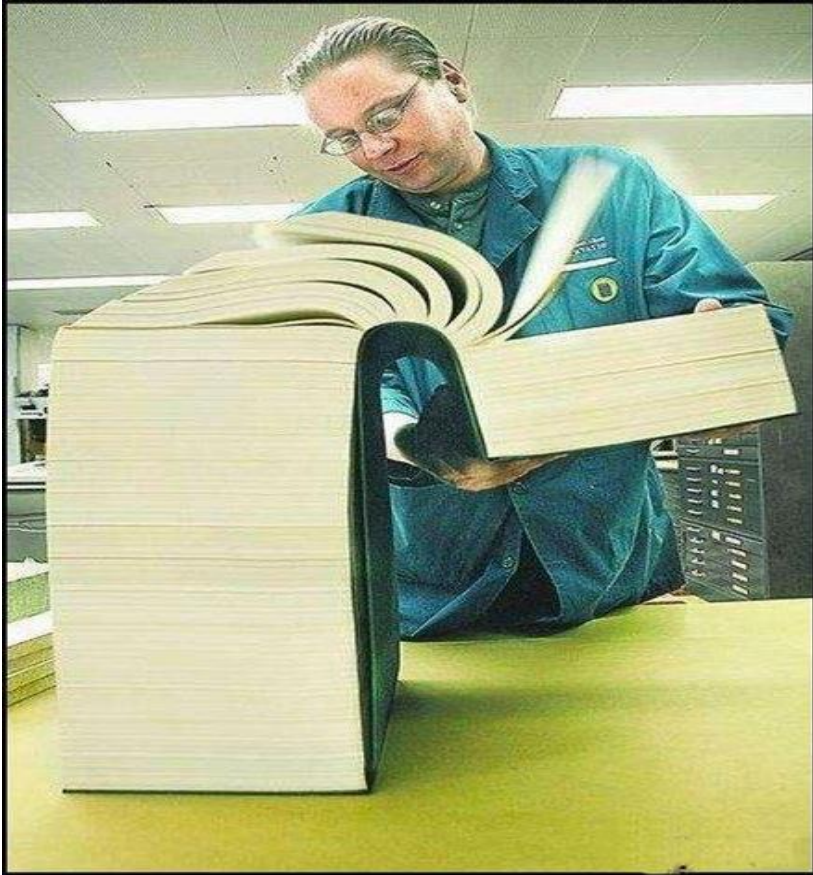
Healthcare Regulation Oversight Bodies

- Arizona Healthcare Cost Containment System (AHCCCS)
- Center for Medicare and Medicaid Services (CMS)
- Health Resources and Services Administration (HRSA)
- United States Department of Justice (DOJ)
- Office of Inspector General (OIG)
- Office for Civil Rights (OCR)
- Valleywise Health District policies
- Internal Revenue Service (IRS)
- Food and Drug Administration (FDA)
- Many Others (OSHA, FCC, DEA, etc.)

Top Risks Changes for Valleywise Health in 2024

- 1.Hospital Move (Increased)
- 2.Pandemic Hangover (Burnout, vacancy rates, etc.) (Increased)
- 3.Cybersecurity (Increased)
- 4.Kronos to ADP Implementation (Increased)
- 5.DMG Contracting (Increased)
- 6.Trauma ACS Verification (Increased)
- 7.Grant Audits (Increased)
- 8.Price Transparency/Machine Readable Information (Increased)
- 9.Emergency Preparedness (Increased)
- 10.Behavioral Health Services (Increased)
- 11.Patient Violence (Increased)
- 12.Speed of Data Being Sent to Patients (Increased)
- 13.Patient Safety (Increased)
- 14.Third-party Vendor Management (Increased)
- 15.Case Management (Increased)

And many more!



Changes to current healthcare regulations

Below are some risks that may affect how you do your oversight



1. AHCCCS State Medicaid Plan
2. HRSA (Regulates Federally Qualified Health Center (FQHC))
3. Affordable Care Act (MACRA)
4. Anti-Kickback Statutes
5. Emergency Medical Treatment and Active Labor Act (EMTALA)
6. HIPAA (Health Insurance Portability and Accountability Act) and HITECH.
7. Medicare Rules – Condition of Participation
8. Care Re-imagined
9. False Claims Act and the Federal Sentencing Guidelines
10. Deficit Reduction Act of 2005
11. OSHA, FDA, and EPA Laws (DNV, Occupational Safety and Health Administration, Food and Drug Administration, Environmental Protection Agency).
12. Others (Arizona State Regulations, LEP 1557, Payment Suspensions, 60 Day Rule, etc.)

UNDERSTAND THE BUSINESS

Understand the Business – Valleywise Health's Main Business Units



Valleywise Health

A - Acute
Care
Hospital

B – Creighton
Alliance
(Residency
Program)

C - FQHC

D -
CHC

E -
Behavioral
Health

F - DMG
(District Medical
Group)

G - ACO
(ACN)

H – Grants
and
Research

I – Care Re-
imagined

Understand the Business – Valleywise Health's Major Payers/Revenue

Valleywise Health

1 – AHCCCS
(60%)

2 – Ad Valorem
Tax

3 -
Commercial

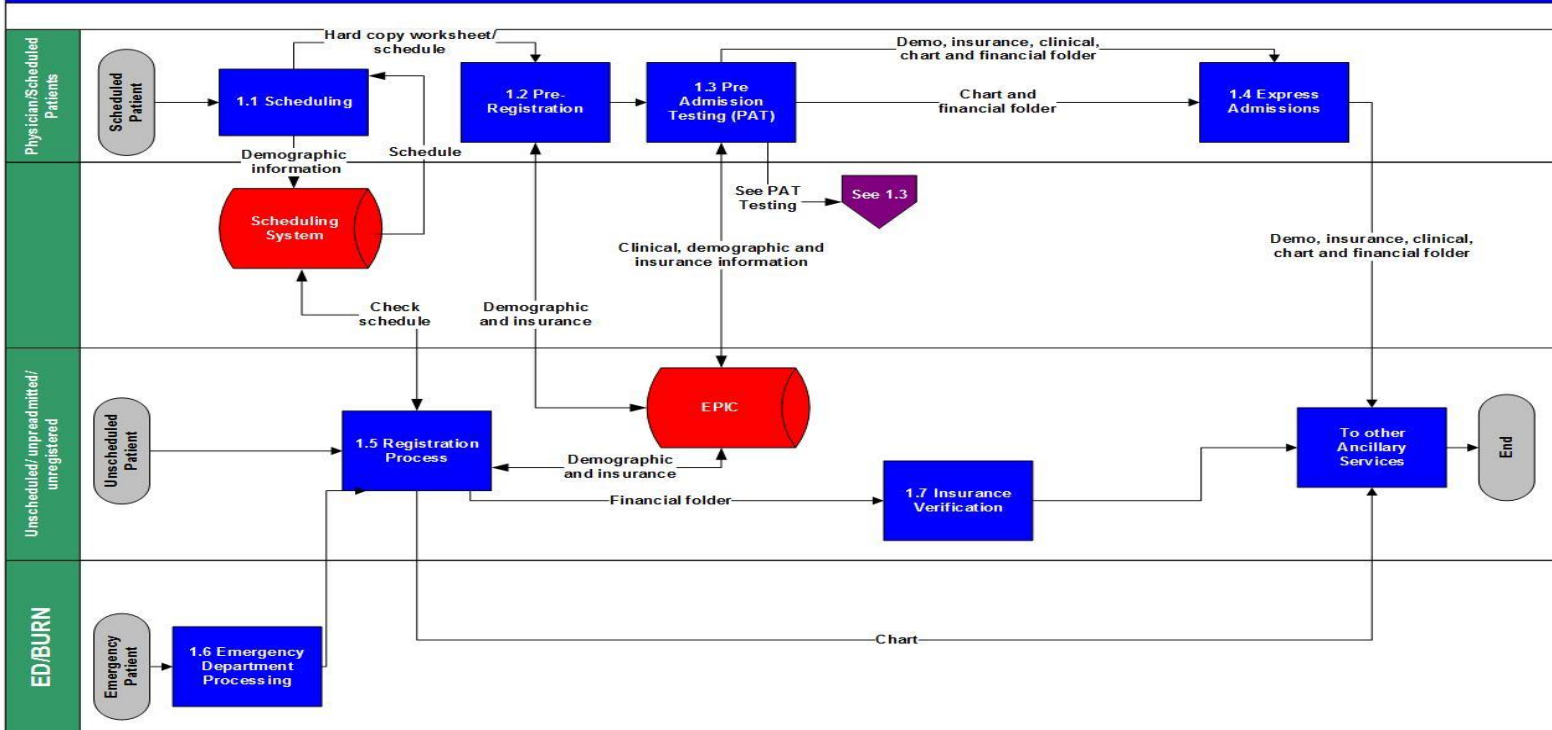
4 - Medicare

5 - Grants

6 - Self
Pay

Overview of the Revenue Cycle: EXAMPLE

1.0 Admissions



HRSA 330 guidelines and Compliance Manual

Heath Center (three required parts)

I. Public Center (Valleywise Health District Board
(5 members))

II. Co-Applicant Arrangement and By Laws

III. Co-Applicant (Governing Council)

21.0 Valleywise Health Management

District 1

**Director
Harden**

District 2

**Director
Dewane**

District 3

**Director
McGee**

District 4

**Director
Thomas**

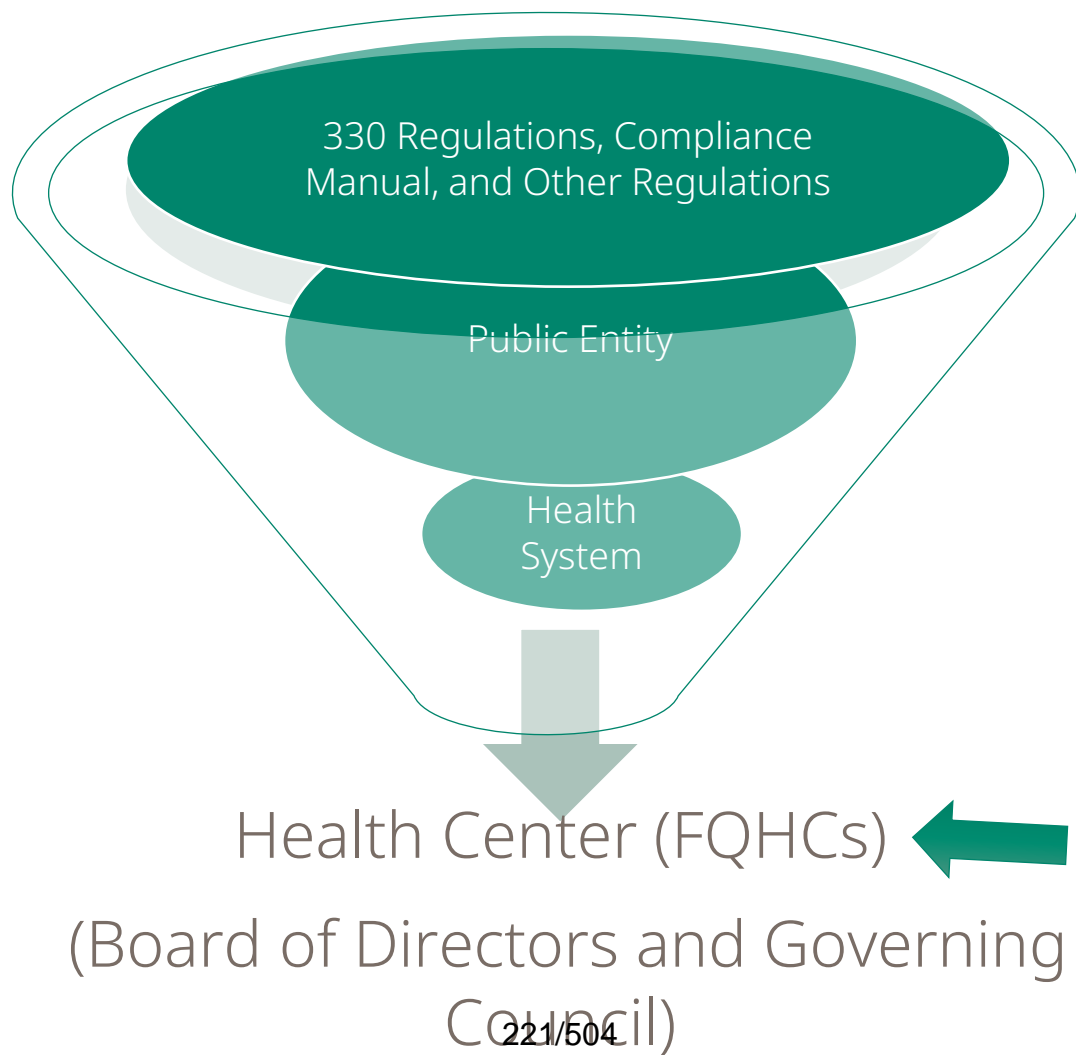
District 5

**Director
Wilcox**

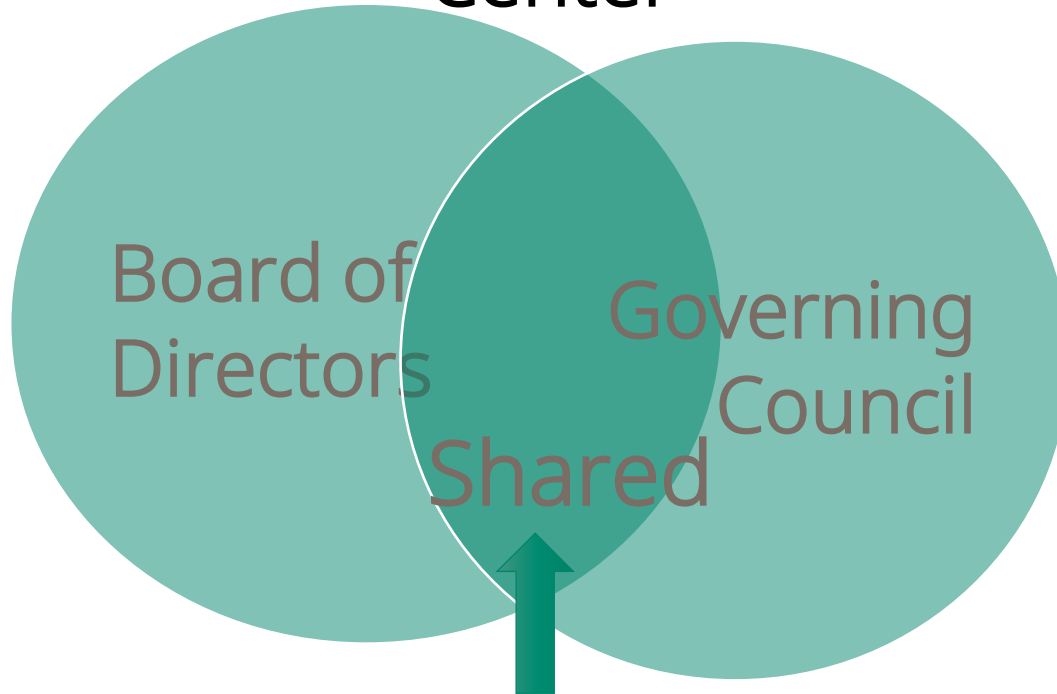
DMG

Human Resource, Finance, and Procurement

Information Systems Department



Responsibilities of the Health Center



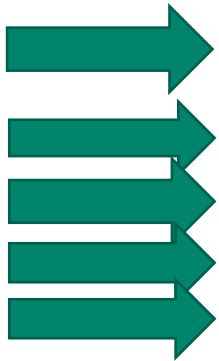
CO-APPLICANT OPERATIONAL ARRANGEMENT
Between the
MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
and the
VALLEYWISE COMMUNITY HEALTH CENTERS GOVERNING COUNCIL

See Co-Applicant Arrangement

Health Center Program Compliance Manual Overview and Operational Site Visit (OSV) Guidance

The Health Resources and Services Administration's (HRSA) Bureau of Primary Health Care (BPHC) is responsible for effective and efficient oversight of the Health Center Program. This includes ensuring that health centers comply with applicable statutory and regulatory requirements for the Health Center Program. The Health Center Program Compliance Manual serves as a streamlined and consolidated resource to assist health centers in understanding and demonstrating compliance with Health Center Program and Federal Torts Claims Act program requirements.

FQHC TIMELINE:



10/2018 - **First** site visit in nine years was a successful...
achieving 90/93 Elements (97%)

9/2019 - We received full FQHC status in September 2019.

2/2020 - Technical Assistance Review

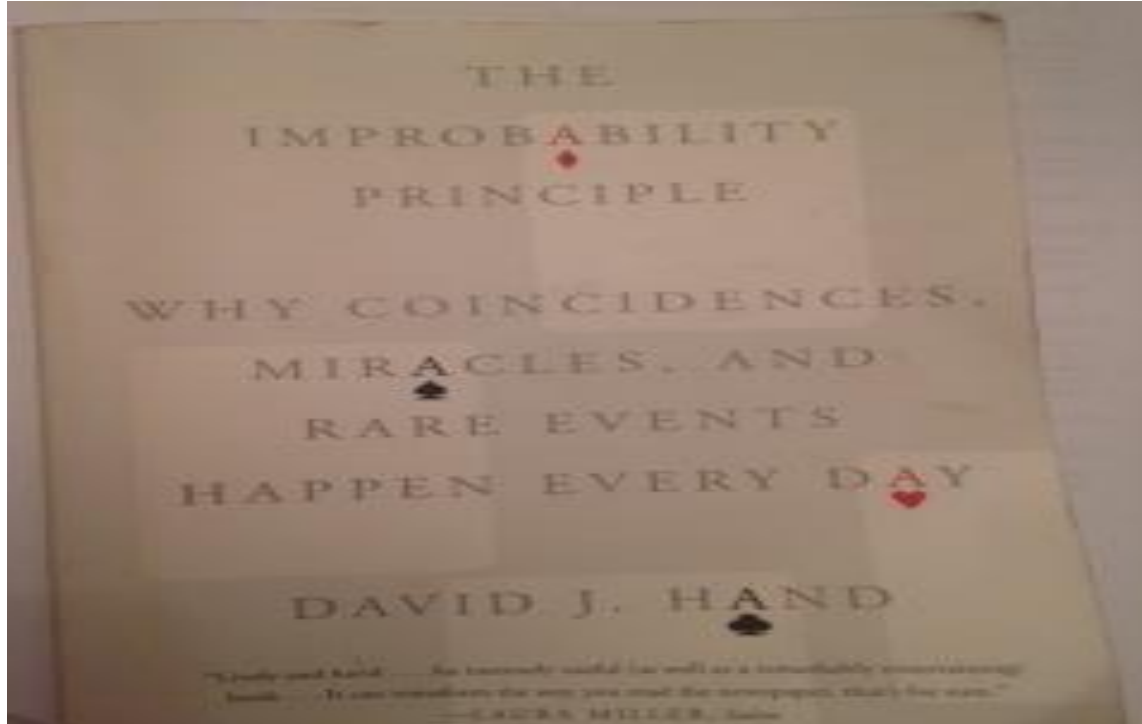
8/2021 – Operational Site Visit (OSV) – 100%!!

11/2023 – Operational Site Visit (OSV) – 100%!!

****Next OSV is in 2026. OSVs are conducted every three years.**

RISK ASSESSMENT

The Improbability Principle

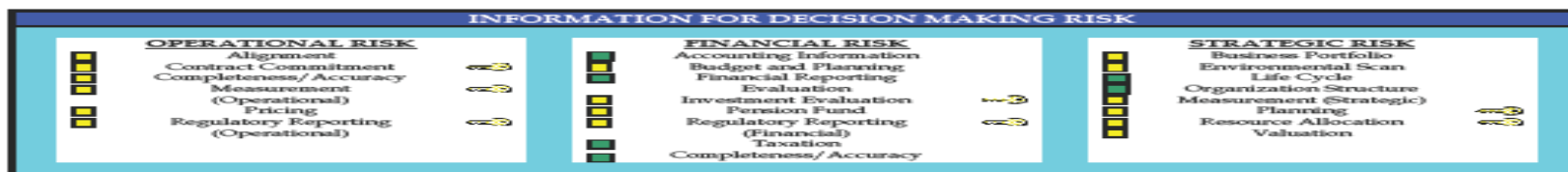
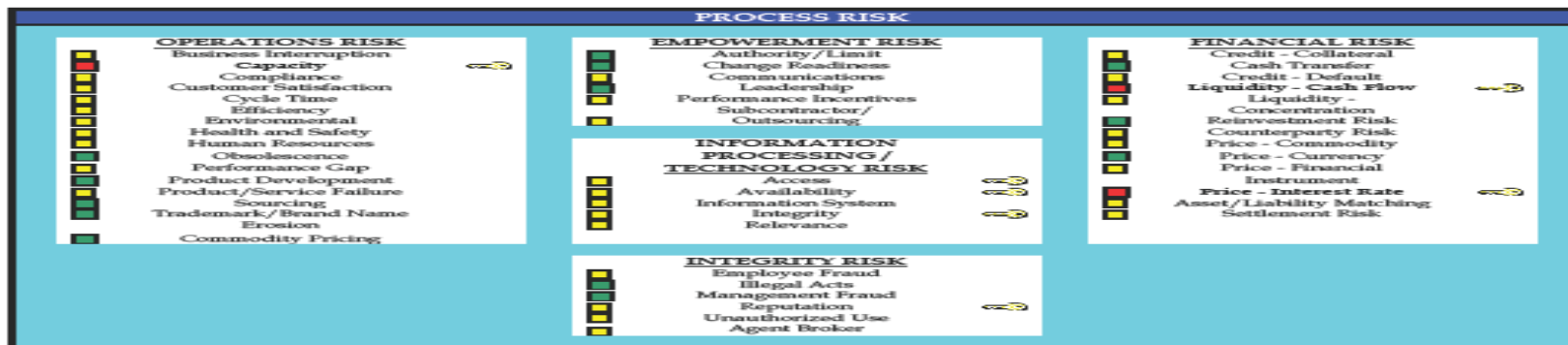


The Enterprise Risk Management Process

The ERM process includes the following major components:

- Risk identification
- Prioritization and scoring of risks
- Risk response - This involves developing and implementing an action plan to avoid, accept, reduce or finance risks

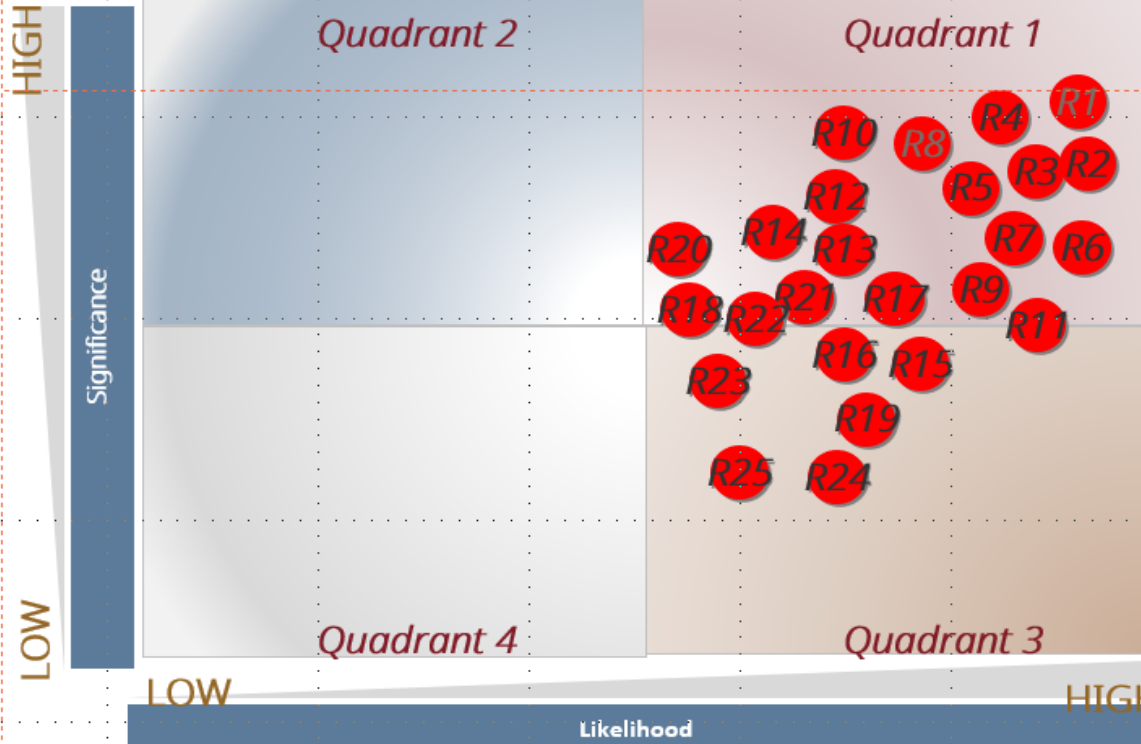
Enterprise Risk Management Prepared By L.T. Slaughter



Enterprise Risk: ■ High ■ Medium ■ Low Key Enterprise Risk

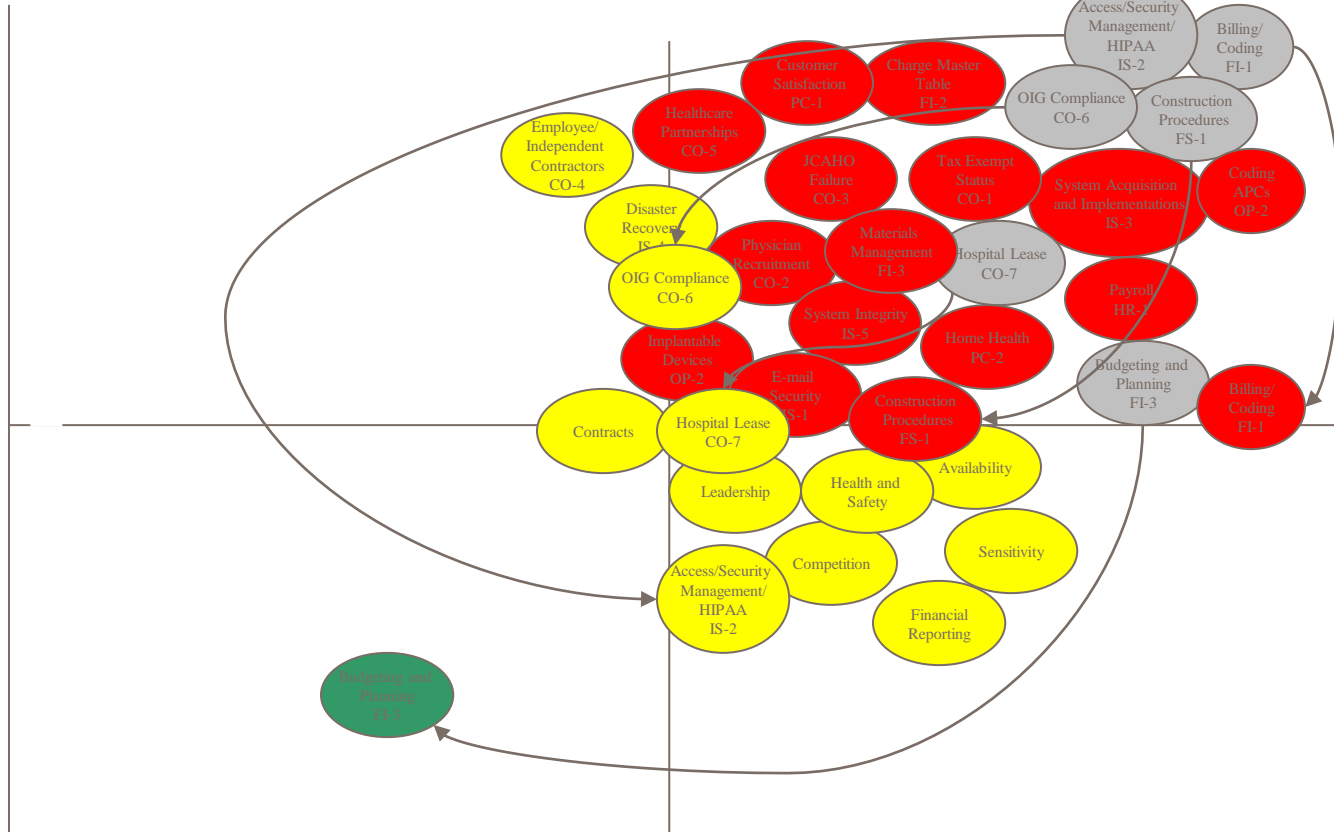
Risk Assessment Process— Prioritization Map

The map below depicts the highest rated risks based on feedback from interviews and other data gathering. The risks are plotted based on their individual significance to the business along with the likelihood that issues and / or improvement opportunities currently exist. The highest risk areas are shown in Quadrant 1 and generally include those risks that are inherently high for the industry or are a known concern to Valleywise Health.



- FY2024 Top 25 Risk Factors
- R1 Workforce/Physician Recruitment and Retention
 - R2 Behavioral Health (BH) – Title 36 – Timed-Out Patients/Monitoring of BH Patients (Observe Smart Implementation)/IMD Exclusion Compliance
 - R3 Kronos to ADP Payroll Implementation
 - R4 Care-Reimagined Projects (Prop 480)/Hospital Re-location/Future Operating Costs.
 - R5 Trauma – ACS Verification/AZ State Certification/Process Improvement Activities
 - R6 Revenue Cycle - (A/R Valuation, Burn Cases, COVID, Telemedicine, Patient Access Center (PAC), External Referrals, Leakage of Patients)
 - R7 DMG Contract Compliance/New Agreement
 - R8 Patient Violence/Active Shooter/Infant Abduction/SDI Office/(Physician Security Controls)
 - R9 Privacy (Media/External Provider) and IT Security (Cyber Threats) of Protected Health Information/ Hospital Move/Information Blocking (Cure's Act)
 - R10 IT Disaster Recovery and Business Continuity (SAFER Guidelines)
 - R11 Grant and Research Department (uniform guidance).
 - R12 COVID Resurgence/Ending of the Public Health Emergency
 - R13 EMTALA/Dedicated Emergency Departments/New Tower
 - R14 Public Information Requests
 - R15 Hospital Accreditation (DNV) and FQHC Licensure (HRSA)
 - R16 Clinical Validation/Documentation Accuracy and Coding
 - R17 GME and Resident Supervision/Medical Students and Controls (Creighton Alliance)
 - R18 EPIC Implementation Process of Quarterly Updates/New Tower/IT Staffing
 - R19 Compliance with Medicare and AHCCCS Medicaid Regulations
 - R20 Charge Master/Charge Capture/Work Queues
 - R21 Pharmacy 340b and 797 Compliance
 - R22 Supply Chain - Procurement Process/Value Analysis/Supply Interface/ Vendor and Contract Management
 - R23 Quality and Internal and External Score Rating/Patient Harm Events
 - R24 Managed Care Contracts/Differential Adjustment Payments (DAP)/Payer Contract Management/ Denied Reimbursement/Credentiaing Physicians
 - R25 Information Blocking/Price Transparency/No Surprise Act

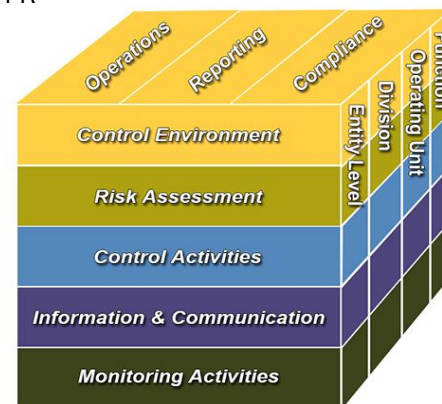
Example Residual “Net” Risk Map



Internal Audit

Internal Control

- In 2013, the **Committee of Sponsoring Organizations of the Treadway Commission (COSO)** updated their model for evaluating internal controls.
- This model has been adopted as the generally accepted framework for internal control.
- The COSO model defines internal control as: a process, effected by an entity's board of directors, management and other personnel, designed to provide "reasonable assurance" regarding the achievement of objectives in the following categories:
 - Effectiveness and efficiency of operations
 - Reliability of financial reporting
 - Compliance with applicable laws and regulations



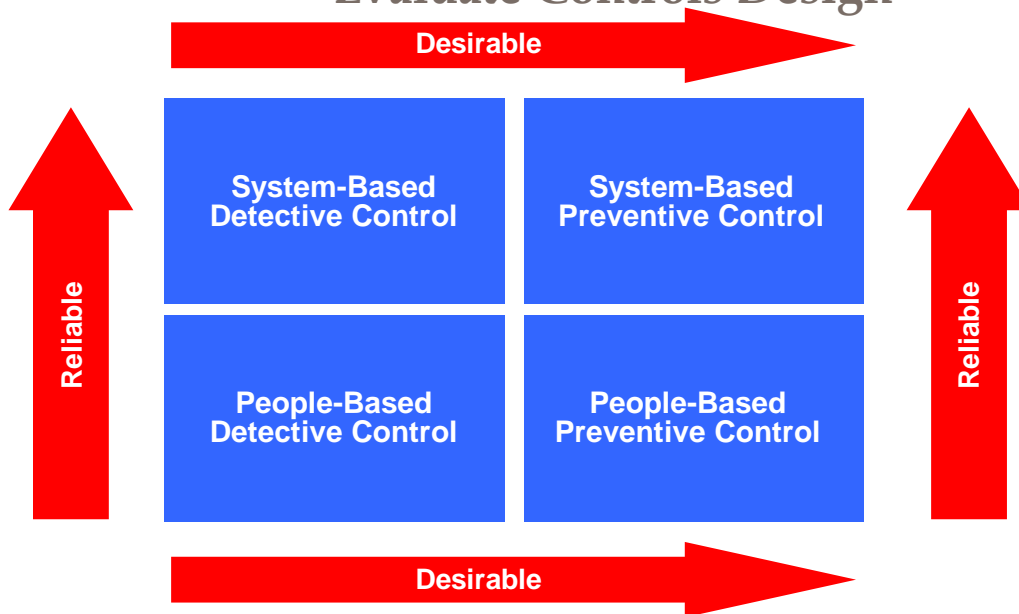
Types of Internal Controls

- **Preventive** - controls that prevent the loss or harmful event from occurring.
 - Segregation of duties minimizes the chance an employee can issue fraudulent payments (i.e. one person submits a payment request, but a second person must authorize it).
- **Detective** - controls that monitor activity to identify instances where practices or procedures were not followed.
 - An exception report that detects and lists incorrect or invalid entries or transactions.
- **Corrective** - controls that restore the system or process back to the state prior to a harmful event.
 - A full restoration of a system from backup tapes after evidence is found that someone has improperly altered the payment data.

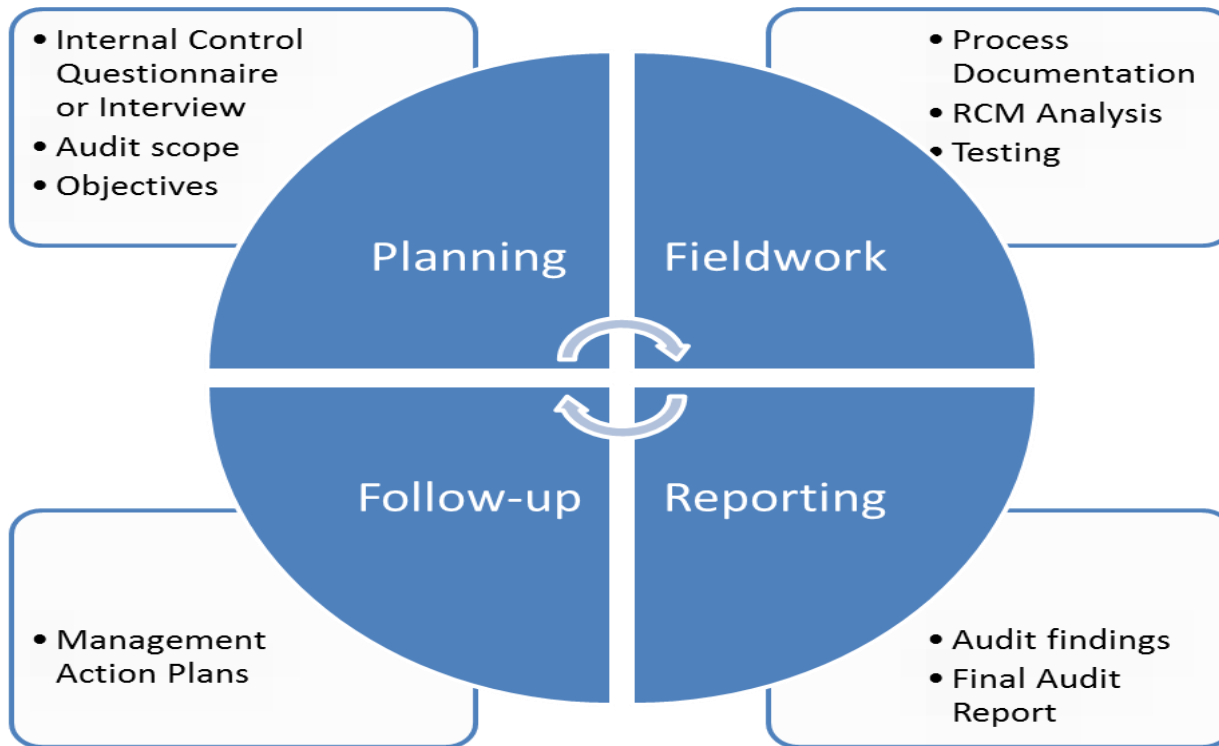
Determine Controls that Mitigate Risks

CONTROL / kun-'trol (*noun*): to reduce the incidence or severity of, especially to innocuous levels.

Control Types Evaluate Controls Design



The Internal Audit Process



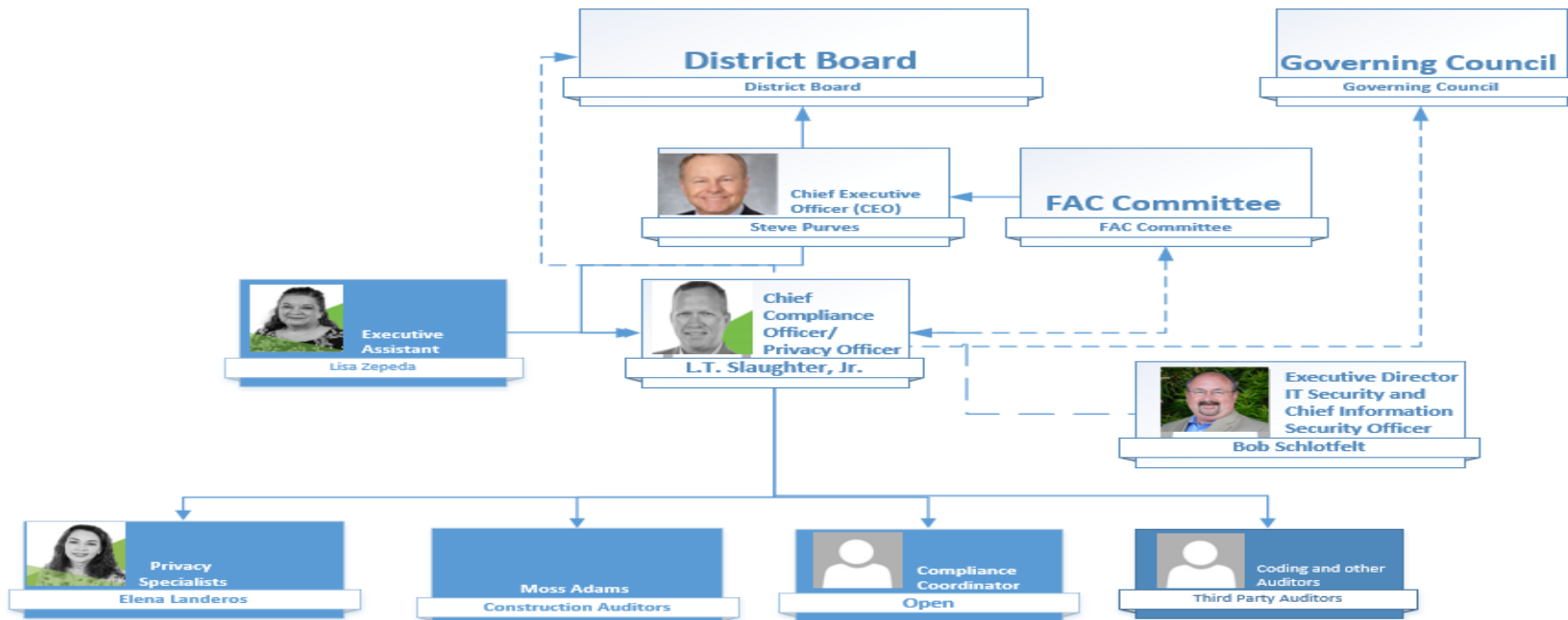
Compliance Program and Code of Conduct and Ethics

Valleywise Health's Compliance Plan

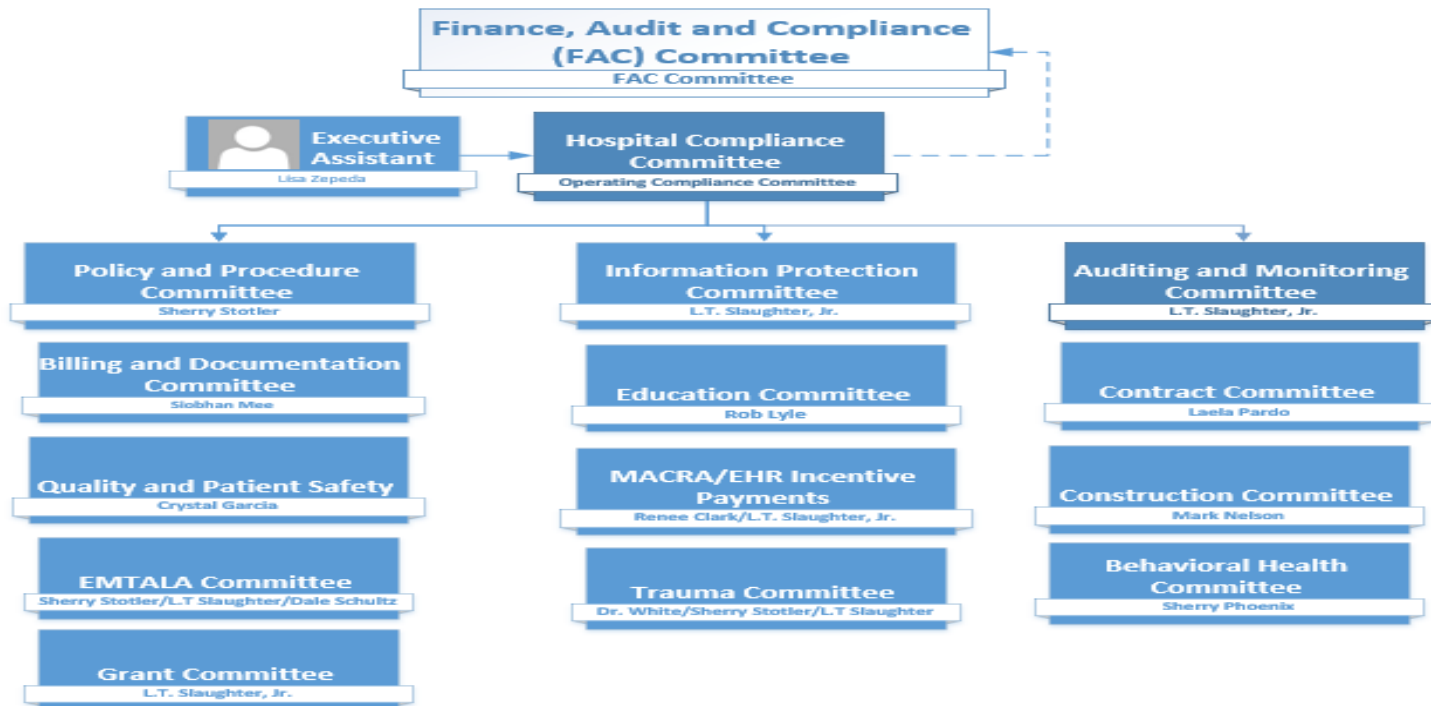
To help the organization follow rules and be ethical, the Office of Inspector General (OIG) has listed seven elements that facilities should include in their corporate compliance plan. Valleywise Health has used the OIG's guideline as a model, and it is the responsibility of all employees to understand ours



Valleywise Health Compliance Department Organization Chart and Reporting Structure



Valleywise Health Compliance Committee Structure



Element One: Code of Conduct and Ethics (“The Code”) and Policies and Procedures

THE CODE

This Code of Conduct and Ethics (“The Code”) has been adopted by the Maricopa County Special Health Care District, d/b/a Valleywise Health (“Valleywise Health”), Board of Directors (“District Board”) to provide standards by which the District Board, Valleywise Community Health Centers Governing Council (“Governing Council”), Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members will conduct themselves to protect and promote organization-wide integrity and to enhance Valleywise Health’s ability to achieve its organizational mission.

Policies and Procedures

All policies and procedures are located on the Vine and are our online policy and procedure management system).

Compliance **360°** **Policies/Forms**



Maricopa County Special Health Care District
Code of Conduct and Ethics
November 21, 2023

Please sign here: _____ Date: _____

Please print your name: _____ Dept. _____

*We are requesting that you sign this today

Standards of Conduct and Ethics – “THE CODE”



T - Treat all Patients with respect and dignity – Providing High Quality Services

H - Healthcare Legal and Regulatory Compliance – Full Compliance with applicable laws.

E - Evaluate Conflict of Interests – See Policy 99305 G.

C - Relationships with Payers and Government - Satisfy the **Conditions** of Payment Required to Payers

O – Oversight of Relationships with Physicians and other Providers

D - Respect for Our Culture – Recognize our **Diverse** workforce

E – Electronic Information Systems – Information is used appropriately and safeguarded zealously.

E EVALUATE CONFLICT OF INTERESTS

The Board of Directors has adopted the Board Member Conflict of Interest and Gift Policy – 99305 G.



Board Conflict of Interest



Valleywise Health Administrative Policy & Procedure

Effective Date: 08/23

Reviewed Dates: 00/00

Revision Dates: 00/00

Policy #: 99305 G

Policy Title: Board Member Conflict of Interest and Gift Policy

Scope: **District Governance (G)**
 System-Wide (S)
 Division (D)
 Multi-Division (MD)
 Department (T)
 Multi-Department (MT)
 FQHC (F)

Board Conflict of Interest



Purpose:

The purpose of this policy is to provide guidance to District Board Members in order to avoid actions that might result in, or create the appearance of:

- Using public office or employment for private gain;
- Giving preferential treatment to any organization or person;
- Impairing independence or impartiality of action; and
- Adversely affecting the confidence of the public in the integrity of Valleywise Health governance.

Board Conflict of Interest



CONFLICT OF INTEREST

Arizona conflict of interest laws are set forth in A.R.S. §38-501 through §38-511. Under these laws, any public officer (a term that includes the District Board of Directors) who has, or whose relative has, a substantial interest in any contract, sale, purchase, service or decision regarding Valleywise Health, must formally declare the existence of the interest by filing a disclosure statement with the Clerk of the Board and agree to refrain from acting upon that interest in any capacity or manner in the matter. The Clerk shall maintain such disclosure in the official records of the District. The Board member declaring a conflict shall refrain from participating in any manner in the contract, sale, purchase, service or decision.

A substantial interest means a pecuniary (money) or proprietary (ownership) interest by which a person will gain or lose something as contrasted to general sympathy, feeling or bias. A substantial interest does not include a number of interests that the conflict of interest statutes define as "remote interests." These remote interests are allowed and include categories such as being a non-salaried officer of a nonprofit corporation that has a contract with Valleywise Health; being a member of a nonprofit marketing association involved with Valleywise Health; or owning less than three percent of a shares of a corporation under contract with Valleywise Health. The entire list of "remote interests" is set forth at ARS §38-502(10) <http://www.azleg.state.az.us/ars/>. If a matter falls under the definition of a "remote interest" a Board member may remain involved in Valleywise Health discussions and action regarding the matter.

If a Board member has any questions regarding a possible conflict, the Board member may consult with Board Counsel and the Chief Compliance Officer to address any possible conflict of interest question.

Element Two: Oversight & Accountability - Chief Compliance Officer



Valleywise Health has designated **L.T. Slaughter, Jr.** to be the **Chief Compliance Officer**. You can reach him directly at (602) 344-5915 or submit a questions through the Vine at “ask the Compliance Officer”.



Element Three: Effective Training

We provide all new hires and existing employees as well as medical staff, residents, contractor and other agents APEX computerized training for the annual requirement. We will also be issuing awareness trainings that will cover compliance, privacy and IT security topics. Lastly, we have developed specific resources, tools and reference materials that are available in the Compliance page of the Vine.

What if training is not completed?

If the required training is not completed by year-end, then there are disciplinary policies and procedures for employees, medical staff, residents, contractor and other agents.

We achieved 99% (rounded) completion rate in FY2017 through FY2023 (all physicians, courtesy, residents, agents and employees ...over 4,100 individuals)



248/504

Element Four: Lines of Communication

The Compliance Hot Line (Ethics Line) is intended to supplement existing internal communication channels. It is not intended to replace your management team, senior management or other corporate resources. The Compliance Hot Line (Ethics Line) is available when you believe that you have exhausted normal Valleywise Health channels or feel uncomfortable about bringing an issue to your supervisor or a higher-level supervisor.

The Compliance Hot Line (Ethics Line) is available 24 hours a day, seven days a week.

1-866-333-6447



Element Five: Policies, Procedures and Disciplinary Guidelines



We have a progressive disciplinary policy provided by Human Resources. This policy is available on the Vine and in Compliance 360 our online policy and procedure portal.

"We have a zero tolerance for non-compliance".

Steve Purves President and CEO

L.T. Slaughter, Jr., Chief Compliance Officer

Compliance **360**^o

Element Six: Auditing and Monitoring

We utilize a risk-based auditing and monitoring approach. We focus on the highest risks and also implement monitoring tools throughout the organization to provide a span on controls and to identify issues as quickly as possible.



Element Seven: Corrective Actions

When an issue has been identified, the Compliance Department will work closely with management to recommend corrective action and may assist with the implementation of the plan and future monitoring for effectiveness.



Element Eight: Monitoring Effectiveness of the Plan

The Finance, Audit and Compliance (FAC) Committee monitors the effectiveness of the internal audit and compliance program. They report their findings to the CEO quarterly and this get reported to the Board of Directors.



Audit and Compliance Plan Examples

FY2024 Compliance Work Plan – Example



The FY2024 compliance projects are listed below with proposed timing and estimated hours. Each project will, at a minimum, include a focus on the adequacy of compliance with regulations, as well as the identification of value-added recommendations. The FY 2024 compliance work plan represents compliance activities based on the results of the risk assessment and may be subject to change based on changes in risk, priorities and Valleywise Health initiatives throughout the fiscal year.

| Project Name | Audit Timing | Est. Audit Hours | Current Status | Completion Status | Initial Risk Rating | Post Review Ranking |
|--|--------------|------------------|----------------|-------------------|---------------------|---------------------|
| Risk Assessment and Selection Q1 | | | | | | |
| CQ1.1 Hospital Accreditation (DNV) and FQHC structure (HRSA) (R15) (R23) | Q1 | 100 Hours | | | 5 | |
| CQ1.2 Behavioral Health - Timed Out Patients/Monitoring of Patients (OBSERV Smart Post-Implementation)/Electronic Filing (R2)(R16) | Q1 | 150 Hours | | | 5 | |
| CQ1.3 Pharmacy 340b and 797 Compliance (R21) | Q1 | 100 Hours | | | 5 | |
| CQ1.4 Public Information Requests (R14) | Q1 | 75 Hours | | | 5 | |
| Risk Re-assessment and Selection Q2 | | | | | | |
| CQ2.1 New Tower - EPIC Updates/Supply Chain/Audio Visual Controls/Accreditation DNV (R9)(R15)(R18) (R22) | Q2 | 150 Hours | | | 5 | |
| CQ2.2 Ending of the Public Health Emergency (PHE) (R12)(R19) | Q2 | 100 Hours | | | 5 | |
| CQ2.3 Revenue Cycle/External Referrals/Information Blocking/Price Transparency/No Surprise Act (R6)(R19)(R20) (R25) (R24) | Q2 | 100 Hours | | | 5 | |
| | | | 255/504 | | | |

Data Dictionary for the Compliance and Internal Audit Work Plan



ACS – American College of Surgeons - Entity that verifies level one trauma center's processes and quality.

AHCCCS – Arizona Healthcare Cost Containment System – State of Arizona's name for the Medicaid state plan.

DNV – (Det Norske Veritas, Inc.) Acute care Medicare accreditation organization.

EMTALA – Emergency Medical Treatment and Labor Act – Log, Screen and Stabilize patients that present to a dedicated emergency department.

EPIC – Electronic medical record system used by Valleywise.

FQHC – Federally Qualified Health Centers – Primary care entities that are granted this status by HRSA.

GME – Graduate Medical Education – is a formal hospital-based training program for individuals that have completed medical school.

HRSA – Health Resources & Services Administration – Governmental entity that regulates 340b, Ryan White and FQHCs.

Information Blocking – Cures Act regulation requiring medical information systems to communicate with other systems.

Medicare PPS – Medicare Prospective Payment System – A fixed based Medicare payment model.

No Surprise Act – Regulation that establishes federal prohibitions against certain surprise medical bills.

Observe Smart – Behavioral health patient rounding monitoring system.

Price Transparency Rules – Rules that help Americans know the cost of covered medical services.

Prop 480 (Care-Reimagined) – Referendum passed by the voters of Maricopa County to fund the re-construction of Maricopa County Special Health Care District d/b/a Valleywise Health.

PHE - Public Health Emergency – U.S. Department of Health and Human Services can declare a public health emergency under Section 319 of the Public Services Act.

SAFER Guidelines – A set of self-assessment tools aimed at helping healthcare organizations evaluate their electronic health record safety practices, identify potential risks and mitigate those risks.

Uniform Guidance – A government-wide framework for grant management, rules and requirements.

340b – A HRSA sponsored discount drug program (797 is compounding regulations).

FY2024 Internal Audit Work Plan - Example



The FY2024 internal audit projects are listed below with proposed timing and estimated hours. Each project will, at a minimum, include a focus on the adequacy of internal controls as well as the identification of value-added recommendations. The FY2024 audit plan represents audits based on the results of the risk assessment and may be subject to change based on changes in risk, priorities and Valleywise Health initiatives throughout the fiscal year.

| Project Name | Audit Timing | Est. Audit Hours | Current Status | Completion Status | Initial Risk Rating | Post Review Ranking |
|--|--------------|------------------|----------------|-------------------|---------------------|---------------------|
| Risk Assessment and Selection Q1 (Current State Assessment) | | | | | | |
| IQ1.1 Care Re-Imagined (Prop 480) Controls and Monitoring Review (R4) | Q1 | 100 Hours | | | 5 | |
| IQ1.2 Grants (Uniform Guidance) and Research Reviews (R11) | Q1 | 200 Hours | | | 5 | |
| IQ1.3 DMG Contract Review (R7) | Q1 | 100 Hours | | | 5 | |
| Risk Re-assessment and Selection Q2 | | | | | | |
| IQ2.1 Kronos to ADP Payroll Controls (R3) | Q2 | 150 Hours | | | 5 | |
| IQ2.2 Care Re-Imagined (Prop 480) Controls and Monitoring Review (R4) | Q2 | 100 Hours | | | 5 | |
| IQ2.3 Trauma/EMTALA/Dedicated Emergency Department/New Tower (R5) (R13) | Q2 | 100 Hours | | | 5 | |
| IQ2.4 IT Disaster Recovery/Business Continuity Assessment and SAFER Guidelines (R10) | Q2 | 100 Hours | | | 5 | |

Compliance Regulations and Other Key Issues

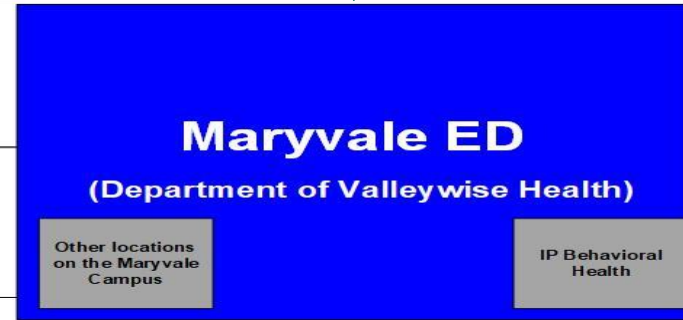
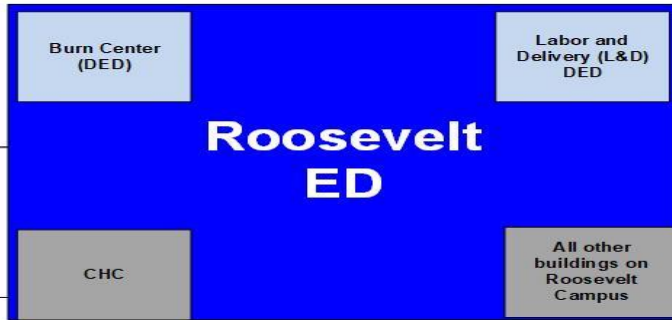
The Emergency Medical Treatment and Labor Act (EMTALA), is also known as the Patient Anti-Dumping Law.






- All clinical facilities must meet or exceed the requirements of the Emergency Medical Treatment and Labor Act (EMTALA) in providing emergency medical treatment to all patients
- When an individual arrives alone or with another person at a clinical facility, and a request is made on the individual's behalf for a medical examination or for treatment, a clinical facility must provide for an appropriate medical screening examination within the capability of the facility's emergency department, to determine whether an emergency medical condition exists, or with respect to a pregnant woman having contractions, whether the woman is in labor.
- The facility must not delay an examination or treatment to inquire about the method of payment or the individual's insurance status
- If a medical emergency exists, or a woman is in labor, the clinical facility must treat and stabilize the patient before transferring to another facility.

The Emergency Medical Treatment And Labor Act (EMTALA), is also known as the Patient Anti-Dumping



20.0 Valleywise Health EMTALA Responsibilities



-  Dedicated Emergency Department (DED) with EMTALA Responsibilities
-  EMTALA Responsibilities
-  250 Yard Rule on Presenting to the ED

Emergency Medical Treatment and Labor Act (EMTALA)

- **The Emergency Medical Treatment and Labor Act (EMTALA) is triggered when one of two events occur:**

1. **Patient Presents:** Individual comes to the 1) **Maryvale ED** 2) **Roosevelt ED** or to our **Dedicated Emergency Departments (DED) at Roosevelt Campus (i.e., Burn and Labor & Delivery)** or 3) **on the either campus/property** and a request is made for examination/treatment for an emergency medical condition ("EMC") (or based on appearance, prudent layperson observer would believe individual needs an exam); or 
2. **Transfer Requested:** A transfer request is made for an unstable ED patient where the transferring hospital lacks specialized capability or capacity to treat individual at the time of the request and the recipient hospital has capability and capacity to treat at the time of the request. 

Emergency Medical Treatment and Labor Act (EMTALA)

- **1) INDIVIDUAL PRESENTS:**

- **1.1) LOG**

- **1.2) SCREEN**

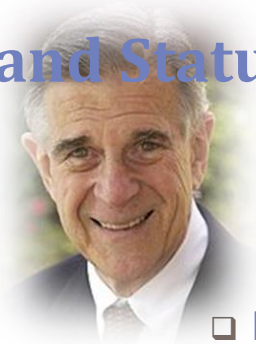
- **1.3) STABILIZE**

- **(EVERY INDIVIDUAL EVERY TIME)**



Fraud, Waste and Abuse:





*Pete Stark –
CA Congressman*

Stark Law – known as “Physician Self Referral Law”

Enacted 1992

- ❑ Physician may not make a referral to an entity for which Medicare payment may be made if the physician or an immediate family member that has a financial relationship with the entity
- ❑ Can be liable for civil penalties of up to **\$15,000**
- ❑ **3 X, the amount of improper payment** received from the Medicare program;
- ❑ Exclusion from the Medicare / Medicaid programs
- ❑ Payment of civil penalties of up to **\$100,000** for each circumvention scheme.

Laws and Statutes

The Anti-Kickback Statute – Enacted 1987

- ❑ Prohibits making or accepting payment to induce or reward for referring, recommending or arranging for the purchase of any item for which payment may be made under a federally-funded health care program.
- ❑ Prohibits outright bribes, offering inurement or remuneration when its purpose is the inducement of a physician to refer patients for services or Research Studies that will be reimbursed by a federal healthcare program.
- ❑ Both sides of an impermissible kickback relationship are liable
- ❑ Violations can lead to criminal and civil penalties.



False Claims Act (Lincoln's Law)



Enforcement

Imposes liability on persons and companies who defraud government programs

- ❑ Results in both criminal and civil liabilities
- ❑ 7 types of misconduct
- ❑ Knowledge requirement
- ❑ **“Deliberate Ignorance”**, and **“Reckless Disregard”**, increased civil fines, increased rewards for whistleblowers, employment protection.

Examples of False Claims

- ❑ Billing for a service that was not medically necessary
- ❑ Billing and inflating costs in order to be reimbursed
- ❑ Billing for services that are research-only services
- ❑ Billing Medicare or Medicaid for services that are paid for by the Study Sponsor

FCA Implications

What could be the impact on the hospital?

- ❑ Criminal & Civil Liability*
- ❑ Cost associated with investigating the alleged fraud
- ❑ Impact to revenue
- ❑ Damaged reputation
- ❑ Corporate Integrity Agreement

An agreement usually for 5 years with strict audit, reporting and compliance program activities must be conducted – strictly monitored by Office of Inspector General

***Any person knowingly submits false claims is liable for treble damages and penalties per claim from \$5,000 to \$11,000**



Deficit Reduction Act (DRA)

Deficit Reduction Act of 2005 (signed 2006) and the Employee Whistleblower Protection 2013

- Requires we teach about whistleblowing, includes employees may not be demoted, discriminated against or discharged for disclosing information.
- The DRA is driven by amount of Medicaid dollars.
- 5 million dollars** or more in a given period in a calendar year
- Requires whistleblower to have followed internal reporting process
- NOTE: We were audited by AHCCCS in FY 2019 and they found we were 100% compliant.



Deficit Reduction Act Policy 0111S



We were audited by AHCCCS in 2019 and 2021 and achieved a 100% compliance rating.

Effective Date: 10/06

Reviewed Dates: 11/11, 11/17, 09/18

Revision Dates: 02/08, 01/10, 06/15, 09/15, 11/17

Policy #: 0111 S

Policy Title: Compliance: False Claims Act

Scope: District Governance (G)
 System-Wide (S)
 Division (D)
 Multi-Division (MD)
 Department (T)
 Multi-Department (MT)

Purpose:

The purpose of this policy is to provide guidance to personnel, including employees, Medical Staff, contractors, and agents ("Personnel"), on the False Claims Act; the Administrative Remedies under the Act; and the legal protection under Federal/State law(s) given to personnel who report incidents of false claims to regulatory agencies ("whistleblower protection"), as required by the Deficit Reduction Act of 2005.

HIPAA Privacy and Security

Privacy vs Security

The **privacy** rules identify **what information** is protected. They also define **when and how** that information may be used or disclosed. The **security** rules identify **steps to take to secure PHI** that is in **electronic** format. These rules help to make sure processes are in place to protect the information covered by the privacy rules.

Respect of the Patient's Health Information (PHI)

Eight main areas to watch out for at Valleywise Health:

1. **E-MAILS and TEXTING** – E-mailing or texting unencrypted PHI or clicking inappropriate links.
2. **PHI ON DEVICES** - Unencrypted Devices with PHI – Loss of thumb drives, computers, cell phones, etc.
3. **PICTURES AND VIDEOS**- Taking Pictures of PHI with a non-Valleywise Health camera.
4. **SOCIAL NETWORKS** – Posting information on social networks.
5. **FAXES** (make sure you verify the number).
6. **TRASH** (do not throw away IV bags, stickers, etc. with patient identifiers on them).
7. **DISCUSSION WITH PEERS or PATIENTS** (Peers - Dining Room, elevators, home, etc. – Patients - Inappropriate Setting.)
8. **MAILING/PROVIDING CORRESPONDENCE** - Providing patients with paperwork related to their care.



Breach and Obligations

Where a covered entity knows of a material breach or violation by the business associate of the contract or agreement, the covered entity is required to take reasonable steps to cure the breach or end the violation, and if such steps are unsuccessful, to terminate the contract or arrangement.

If termination of the contract or agreement is not feasible, a covered entity is required to report the problem to the Department of Health and Human Services (HHS) Office for Civil Rights (OCR)



VALLEYWISE HEALTH'S PROACTIVE RESPONSE:

- ✓ **Implemented a Compliance Program (Seven Elements)**
- ✓ **Push!**
- ✓ **Risk Management Plan (Risk Assessment)**
- ✓ **Compliance and Internal Audits**
- ✓ **Policies and Procedures Reviews**
- ✓ **Education Training General and Specific**
- ✓ **Designate a Compliance Officer, Privacy Officer and Information Security Officer**
- ✓ **Discipline and Corrective Actions**
- ✓ **Communication and Team Work**
- ✓ **Expect to be Excellent!**

Questions?






**5. Reference: Code of Conduct and Ethics Board
approved 112123 executed**



Maricopa County Special Health Care District
Code of Conduct and Ethics
November 21, 2023

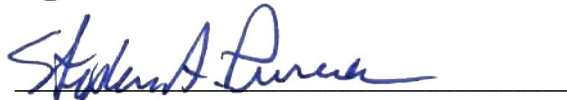
Summary of Approvals

Approval Signatures:



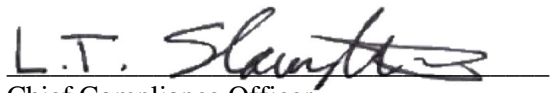
Chairman, District Board
Maricopa County Special Health Care District

November 21, 2023
Date



President and Chief Executive Officer
Valleywise Health

November 21, 2023
Date



Chief Compliance Officer
Valleywise Health

November 21, 2023
Date

Code of Conduct and Ethics Effective November, 21 2023

I. PURPOSE

This Code of Conduct and Ethics (“Code”) has been adopted by the Maricopa County Special Health Care District, d/b/a Valleywise Health (“Valleywise Health”), Board of Directors (“District Board”) to provide standards by which the District Board, Valleywise Community Health Centers Governing Council (“Governing Council”), Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members will conduct themselves to protect and promote organization-wide integrity and to enhance Valleywise Health’s ability to achieve its organizational mission. The Code is intended to serve as a guide to assist the District Board, Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members to make sound decisions in carrying out their day-to-day responsibilities.

II. RESPONSIBILITIES UNDER THE CODE OF CONDUCT and ETHICS

Who must comply with the District’s Code of Conduct and Ethics?

The Code applies to *all* members of the District Board, Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors, and other Valleywise Health committee members. Valleywise Health recognizes the different missions and services that each of these entities provide in developing policies and procedures to achieve the standards and goals set forth in the Code while maintaining each of their unique missions and services.

Definitions:

Administration: Executive leadership (including President and Chief Executive Officer, Executive Vice Presidents, and Senior Leadership including Senior Vice Presidents and Vice Presidents, and Chief Compliance Officer) of Valleywise Health.

Advanced Practice Clinicians (APCs): Individuals other than Medical Staff members or AHPs who are licensed healthcare professionals who are board certified and have at least a master’s degree. APCs are trained to practice medicine and prescribe within the scope of their training as outlined by their specific scope of practice and are authorized by law and by the Hospital to provide patient care services.

Allied Health Professionals (AHPs): Individuals other than Medical Staff members or APCs who are qualified by training, experience, and current competence in a discipline permitted to practice in the hospital and are authorized by law and by the Hospital to provide patient care services.

Board of Directors – The five publicly elected officials that serve on the Maricopa County Special Health Care District, d/b/a Valleywise Health, for Maricopa County, Arizona.

Clinical Privileges or Privileges: The authorization granted by the District Board to render specific patient care services, for which the Medical Staff leaders and the District Board have developed eligibility and other privileging criteria and focused and ongoing professional practice evaluation standards.

Contractors: A person or entity who is not employed by Valleywise Health and who is performing specific services as defined in their contract.

Finance, Audit and Compliance Committee (FACC): An advisory committee to assist Valleywise Health’s President and Chief Executive Officer (“CEO”) with oversight responsibilities related to compliance and financial matters, and internal and external audit functions.

Governing Council: Governing body that maintains oversight of the Federal Qualified Health Center (FQHC).

House Staff: Includes residents, fellows, and individuals licensed as appropriate, who are graduates of medical, allopathic and osteopathic, dental, or podiatric schools; who are appointed to a hospital’s professional graduate training program that is approved by a nationally recognized accrediting body; and who participate in patient care under the direction of a member of the Medical Staff of the pertinent clinical disciplines with appropriate clinical privileges in the hospital.

Management – Valleywise Health Employees who provide supervision to other Valleywise Health Employees.

Medical Staff: All physicians, dentists, oral surgeons, and podiatrists who have been appointed to the Medical Staff by the District Board.

Provider: A Medical Staff member with Clinical Privileges, a House Staff member, an Advanced Practice Clinician, or an Allied Health Professional.

Vendor: Any person or entity under contract with Valleywise Health to provide goods.

Workforce Member: Governing Council members, Valleywise Health Employees, Providers, Agents, and other Valleywise Health committee members whether or not they are paid by Valleywise Health.

What are your responsibilities as a Valleywise Health employee with regard to the Code?

Foster and support an atmosphere of compliance by:

- Reading the Standards of Conduct and Ethics contained in the Code and think about their application to your work. You should have a basic understanding of issues covered by each Standard and the supplemental compliance policies that apply to your job function.
- Seeking guidance from your supervisor(s), Administration, Management, the Chief Compliance Officer or other Valleywise Health leadership resources when you have questions about the application of the standards and other Valleywise Health policies related to your work.
- Understanding the options that Valleywise Health makes available to you for conduct or ethical concerns and promptly raise such concerns with your immediate supervisor or Valleywise Health’s Chief Compliance Officer or General Counsel. If you prefer to raise your concerns anonymously, call the Valleywise Health Compliance Hotline Line 1-866-333-6447 and/or you can file a concern on the Valleywise Health internal website (i.e., The Vine) under “Report a Compliance Concern”.
- Cooperating in Valleywise Health’s investigations concerning potential violations of the law, government payer regulations and rules, the Code, the Valleywise Health Compliance Program and Valleywise Health’s policies and procedures.
- Completing all required compliance training.

- Understanding that accessing a patient’s personal health information (PHI), where you are not involved in their care, would be a violation of Valleywise Health’s privacy policies. Employees should only use MyChart to access their own PHI. Additionally, Employees should not access their relatives or anyone else’s PHI where they are not involved in their care (See Policy 01261 S). Taking pictures with a personal camera or cell phone (especially in a treatment area) is a violation of Valleywise Health’s policies and will result in immediate disciplinary actions.

What are your responsibilities as Valleywise Health’s Administration and Management?

Build and maintain a culture of compliance by:

- Leading by example, using your own behavior as a model for all Employees.
- Knowing, understanding, and following the federal, state, and local statutes, rules and regulations that govern your area(s) of responsibility.
- Encouraging Employees to raise conduct and ethical questions and concerns.
- Ensuring that all Workforce Members (within your areas of responsibility) complete all required annual compliance training.

Prevent compliance problems by:

- Identifying potential compliance risks and proposing appropriate policies, procedures, and actions to address such risks.
- Identifying Workforce Member’s whose activities have compliance risks and that are covered by Valleywise Health’s policies and procedures.
- Providing education, role playing and counseling to assist Workforce Members to understand the Code, Valleywise Health policies and procedures, applicable laws, and government payer regulations and rules.

Detect compliance problems by:

- Maintaining appropriate controls to monitor compliance and mechanisms that foster the effective reporting of potential compliance issues.
- Promoting an environment that permits Workforce Members to raise concerns without fear of retaliation.
- Arranging periodic compliance reviews that are conducted with the assistance of Valleywise Health’s Chief Compliance Officer to assess the effectiveness of Valleywise Health’s Compliance Program and related policies and procedures, and to identify methods of improving them.

Respond to compliance problems by:

- Pursuing prompt corrective action to address weaknesses in internal controls.

- Applying corrective action(s) and disciplinary plans when necessary.
- Consulting with Valleywise Health's Chief Compliance Officer to ensure compliance issues are promptly and effectively addressed.

What are your responsibilities as the District's Board of Directors

Build and maintain a culture of compliance by:

- Reading the Standards of Conduct and Ethics contained in the Code, thinking about them and their application to your role.
- Leading by example, using your own behavior as a model for others.
- Making decisions that are in the best interest of Valleywise Health and that are not affected by conflicts of interest (See the District Board Conflicts of Interest and Gift Policy - 99305 G).
- Being knowledgeable about the Valleywise Health Compliance Program (as taught in the new District Board member training and in the annual compliance training) and exercise governance and oversight over it.
- Requiring appropriate reports from Administration concerning the status of the Valleywise Health Compliance Program, the resources required to maintain its vitality and Valleywise Health's response to identified compliance deficiencies.
- Receiving and acting on compliance issues, upon advice from Valleywise Health's President and Chief Executive Officer, District Board Counsel, General Counsel, and/or Chief Compliance Officer.
- Assuring that the Compliance Program is free from undue restraints and influences through direct reporting by the Chief Compliance Officer regarding compliance issues that promote the integrity of the Compliance Program and raising any concerns with the Chief Compliance Officer, District Board Counsel and General Counsel.
- Maintaining the confidentiality of all compliance-related information provided to you, subject to the requirements of applicable law.
- Complete required compliance training.

What are your responsibilities as Provider?

Assist Valleywise Health to foster an atmosphere of compliance by:

- Reading the Standards of Conduct and Ethics contained in the Code and think about their application to your work. You should have a basic understanding of issues covered by each Standard and the supplemental compliance policies that apply to the services you furnish to Valleywise Health and our patients.
- Actively participating in compliance activities as requested by Valleywise Health.

- Maintaining the confidentiality of information provided to you relating to compliance issues subject to applicable laws.
- Assisting Valleywise Health in identifying potential compliance issues and in developing possible solutions to address issues identified.
- Understanding the options that Valleywise Health makes available for you to report ethical concerns and to promptly raise such concerns with Valleywise Health’s Chief Compliance Officer or General Counsel. If you prefer to raise your concerns anonymously, call the Valleywise Health Compliance Hotline 1-866- 333-6447 and/or you can file a concern on the Valleywise Health’s internal website (i.e., The Vine) under “Report a Compliance Concern”.
- Cooperating in Valleywise Health investigations concerning potential violations of the law, government payer regulations and rules, the Code, the Valleywise Health Compliance Program and Valleywise Health’s policies and procedures.
- Completing required compliance training.
- Understanding that accessing a patient’s personal health information (PHI), where you are not involved in their care, would be a violation of Valleywise Health’s privacy policies. Providers should only use MyChart to access their own PHI. Additionally, Providers should not access their relatives or anyone else’s PHI where they are not involved in their care (See Policy 01261 S). Taking pictures with a personal camera or cell phone (especially in a treatment area) is a violation of Valleywise Health’s policies and will result in immediate disciplinary action.

What are your responsibilities as Governing Council Member, Agents, Contractors, Vendors or other Valleywise Health committee member (e.g., FACC member)?

Governing Council Members, Agents, Contractors, Vendors and other Valleywise Health committee members are responsible to participate in the Valleywise Health compliance program by:

- Understanding and applying the Standards of Conduct and Ethics contained in the Code and think about their application to the services you furnish to Valleywise Health. You should have an understanding of issues covered by each Standard and the supplemental compliance policies that apply to the services you furnish to Valleywise Health.
- Actively participating in compliance activities, such as education, role playing and training, as requested by Valleywise Health or have equivalent requirements in their contract.
- Understanding the various options that Valleywise Health makes available for raising conduct or ethical concerns and promptly raise such concerns. You should raise such concerns with Valleywise Health’s Chief Compliance Officer or General Counsel. If you prefer to raise your concerns anonymously, call the Valleywise Health Compliance Hotline 1-866-333-6447 and/or you can file a concern on the Valleywise Health’s internal website (i.e., The Vine) under “Report a Compliance Concern”.
- Cooperating in Valleywise Health’s investigations concerning potential violations of law, government payer regulations and rules, the Code, the Valleywise Health Compliance Program and Valleywise Health’s policies and procedures.
- Completing required compliance training.

How May the Code Be Revised?

This Code may be amended, modified only after a review by the FACC, Chief Executive Officer and the approval of the District Board.

How Frequently will the Code and Compliance Program Be Reviewed?

The Code will be reviewed annually by the FACC and District Board to foster its effectiveness and at such times when changes to it are necessitated by changes in laws and regulations applicable to Valleywise Health. Suggested changes to the Valleywise Health Compliance Program will be presented to the District Board for approval, as necessary.

III. STANDARDS OF CONDUCT AND ETHICS (THE STANDARDS)

Patient Relationships: Valleywise Health (We) through our Administration, Clinical Departments, Providers and Quality Department (and other departments as needed) are committed to providing a high quality of healthcare and services to our patients, their families, visitors, and the community. We treat all patients with respect and dignity and provide care that is necessary and appropriate.

Principles:

- We will recognize the right of our patients to receive quality and appropriate services provided by competent individuals in an efficient, cost effective and safe manner.
- We will continually monitor the clinical quality of the services we provide and will endeavor to improve the quality of the services provided.
- We will support every patient's right to be free from all types of abuse and will not tolerate patient abuse in any form.
- We will apply our admission, treatment, transfer, and discharge policies equally to all patients based upon identified patient needs and regardless of a patient's ability to pay.
- We will listen to our patients, families, and visitors to understand any concerns or complaints and will involve patients in the decision-making process about their care.
- We will demonstrate our commitment to patient safety by continuously reviewing systems, processes and policies to detect and prevent medical errors.
- We will provide treatment and medical services in accordance with the state and federal laws which provide that an individual shall not be excluded from participation in, be denied the benefits of, or subjected to discrimination on prohibited grounds, such as age, disability, genetic information, national origin, pregnancy, race/color, religion, sex, sexual orientation and gender identity.
- We will remain sensitive to our position as a regional leader in tertiary and specialty care and research, and to our consequent obligation as a health care leader to all segments of our community.

- We will maintain policies and procedures (e.g., Emergency Medical Treatment and Labor Act (EMTALA) policies) to complete logging in the central log, performing a medical screening exam and stabilizing all patients presenting to our Emergency Department (ED) [e.g., Roosevelt Campus (including trauma) and Maryvale Campus] and at our Dedicated Emergency Departments (DED) [e.g., Burn, Labor and Delivery].
- We will fully and fairly evaluate requests to transfer patients to our care from our colleagues and providers in outlying areas and will accept such transfers as clinically appropriate (i.e., EMTALA transfers-in). Additionally, we will fully and fairly transfer patients to external entities (i.e., EMTALA transfers-out) as clinically appropriate as directed by our Medical Staff.
- We will maintain licensure and credentialing standards to further the provision of clinical services by properly trained and experienced practitioners.
- We will perform background checks of existing and potential Governing Council members, other Valleywise Health committee members (as appropriate), Employees, Providers, Agents, and Contractors. We will also assess whether such individuals and entities (including Vendors) have ever been excluded from participation in any of the federal or state health care programs, including the Medicare, Medicaid, and Arizona Health Care Cost Containment System (AHCCCS) programs.
- We will respect the privacy of our patients, and we will treat all patient information with confidentiality, in accordance with all applicable laws, regulations and professional standards.

General Legal and Regulatory Compliance: Valleywise Health (We) through our Legal Department, Regulatory Department, Compliance Department and Administration (and other departments as needed) will continuously and vigorously promote full compliance with applicable laws.

Principles:

- We will continuously study our legal obligations and create policies and procedures that facilitate compliance by educating the District Board, Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members of their legal obligations.
- We will recognize the critical role of research in improving the health status of our community, and we are committed to conducting all research activities in compliance with the highest ethical, moral, and legal standards.
- We will engage in open and fair competition and marketing practices, based on the needs of our community and consistent with the furtherance of our mission.
- We will treat our Employees with respect and will engage in human relations practices that promote the personal and professional advancement of each employee.
- We will recognize that our Employees work in a variety of situations and with a variety of materials, some of which may pose a risk of injury. We are committed to providing a safe work environment and will maintain and monitor policies and procedures for workplace safety that are designed to comply with federal and state safety laws, regulations, and workplace safety directives.

- We will recognize that the provision of health care may in some instances produce hazardous waste products or other risks involving environmental impact. We are committed to compliance with applicable environmental laws and regulations and will follow proper procedures with respect to handling and disposing of hazardous and bio-hazardous waste.
- We will assist our District Board, Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors, and other Valleywise Health Committee members with understanding the basic legal obligations that pertain to their individual job functions or services they furnish to Valleywise Health and our patients. We will also encourage them to make certain that their decisions and actions are conducted in conformity with such laws, regulations, policies, and procedures.
- We will support educational and other training sessions to teach the District Board, Governing Council members, Employees, Administration, Agents, and Providers and, as warranted, Contractors and Vendors, about the impact of the law on their duties and to promote compliance with our collective legal obligations.
- We will support and maintain multiple resources for the District Board, Governing Council members, Employees, Administration, Providers, Agents, Contractors, and Vendors to voice any questions about the proper interpretation of a particular law, regulation, policy, or procedure while performing services for Valleywise Health.

Avoidance of Conflicts of Interest for the Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members.

Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members maintain a duty of loyalty to Valleywise Health and to all of the citizens of Maricopa County and, as a result, must avoid any activities that may involve (or may appear to involve) a conflict of interest or that may influence or appear to influence the ability of the, Governing Council member, employee, Administration, Providers, agent, Contractors, Vendors and other Valleywise Health committee members to render objective decisions in the course of their job responsibilities, or other services they furnish to Valleywise Health (See the Valleywise Health Conflict of Interest and Gift Policy (See 01291 S).

Principles:

Valleywise Health (We) through Administration and the Compliance Department (and other departments as needed) will maintain policies and procedures that make clear when an individual's private interests may inappropriately interfere with Valleywise Health's interests; and will provide support through which the Governing Council members, Employees, Administration, Providers, Agents, Contractors, and Vendors, and other Valleywise Health committee members (See the Valleywise Health Conflict of Interest and Gift Policy (See 01291 S) may disclose and have an evaluation about whether a particular activity or relationship could be construed as a conflict of interest or otherwise improper.

- We will provide examples of the conduct that must be demonstrated by the Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members (See 01291 S) in the performance of services for Valleywise Health and will require that such individuals to evaluate and report conflicts of interest in the performance of their responsibilities and services to Valleywise Health.

- We will educate the Governing Council members, Employees, management, Administration, Providers, Agents, Contractors, Vendors, and other Valleywise Health committee members (See 01291 S about informing Valleywise Health of personal business ventures and other arrangements that could be perceived as conflicts of interest and will provide for policies and procedures for doing so.
- We will educate the Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members (See 01291 S) about the use any proprietary or non-public information acquired as a result of a relationship with Valleywise Health for person gain or for the benefit of another business opportunity.
- We will educate the Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members about the purchase of outside goods based on the Vendor’s ability to best satisfy Valleywise Health’s needs and not based on personal relationships.
- We will educate the Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members about the purchase of outside services based on the Contractor’s ability to best satisfy Valleywise Health’s needs and not based on personal relationships.
- The Governing Council members, Employees, Administration, Providers, Agents, Contractors, Vendors and other Valleywise Health committee members (See 01291 S) shall not use their official position for personal gain. Public influence and confidential or “inside” information must never be used for personal advantage. Conflict of interest laws, A.R.S. § 38-501 *et. seq.* must be scrupulously observed. The conflict-of-interest laws prohibit participation by public officers, elected officials, Management, Administration or Employees in a decision or contract in which they have a direct or indirect pecuniary or proprietary interest, as required by A.R.S. §38-502.

Avoidance of Conflicts of Interest for the District Board

Principles

Valleywise Health (We) through the District Clerk’s Office, the Legal Department and the Compliance Department (and other departments as needed), will maintain policies and procedures that make clear when a District Board members private interests may inappropriately interfere with Valleywise Health’s interests; and will provide support through which the District Board (See the District Board Conflicts of Interest and Gift Policy (See 99305 G),) may disclose and have an evaluation about whether a particular activity or relationship could be construed as a conflict of interest or otherwise improper.

- The District Board Conflicts of Interest and Gift Policy (See 99305 G) (hereafter “See 99305 G”) establishes the policy and procedure for the District Board and defines a Gift as well as District Board conflicts of interest and will require that District Board members to evaluate and report conflicts of interest in the performance of their responsibilities and services to Valleywise Health.
- We will educate the District Board (See 99305 G) about informing Valleywise Health of personal business ventures and other arrangements that could be perceived as conflicts of interest and will provide for policies and procedures for doing so.

- We will educate the District Board (See 99305 G) about the use any proprietary or non-public information acquired as a result of a relationship with Valleywise Health for person gain or for the benefit of another business opportunity.
- We will educate the District Board (See 99305 G) about the purchase of outside goods based on the Vendor's ability to best satisfy Valleywise Health's needs and not based on personal relationships.
- We will educate the District Board (See 99305 G) about the purchase of outside services based on the Contractor's ability to best satisfy Valleywise Health's needs and not based on personal relationships.
- The District Board (See 99305 G) shall not use their official position for personal gain. Public influence and confidential or "inside" information must never be used for personal advantage. Conflict of interest laws, A.R.S. § 38-501 *et. seq.* must be scrupulously observed. The conflict-of-interest laws prohibit participation by public officers, elected officials, Management, Administration or Employees in a decision or contract in which they have a direct or indirect pecuniary or proprietary interest, as required by A.R.S. §38-502.

Relationship with Payers: Valleywise Health (We) through our Health Management Information (HIM), Revenue Cycle, Compliance Providers and Clinical Departments (and other departments as needed) will consistently strive to satisfy the conditions of payment required by the payers with which Valleywise Health transacts business.

- We will promote compliance with laws governing the submission and review of bills for our services and will deal with billing inquiries in an honest and forthright manner.
- We will maintain reasonable measures to prevent the submission or filing of inaccurate, false, or fraudulent claims to payers.
- We will utilize systematic methods for analyzing the payments we receive and will reconcile inaccurate payments in a timely manner after discovery and review.
- We will investigate potential or reported inaccurate billings and payments to determine whether changes to current protocol or other remedial steps are necessary.
- We will maintain documentation systems sufficient to create and maintain complete and accurate documentation of services provided.
- We will review cost reports to be filed with the federal and state health care programs to determine whether such reports accurately and completely reflect the operations and services provided to beneficiaries and to confirm that such reports are completed in accordance with applicable federal and state regulations and Valleywise Health's policies and procedures.
- We will, as necessary, rely on internal and external sources to help improve Valleywise Health's billing and coding protocol and to identify potential areas of noncompliance.
- We will notify impacted plan administrators and third parties within a reasonable time (including but not limited to, Medicare Part C entities) of any detected fraud, waste or abuse activities or other violations (including HIPAA privacy or security, etc.), advise of actions taken, and will work with them if necessary to implement or adjust timely corrective actions.

- We will maintain all Medicare Part C documentation (including training, exclusion checks, and other compliance documentation for at least 10 years).
- We will compensate billing and coding staff and billing/coding consultants for services rendered, in a manner that is permitted under law and will not compensate such persons in any way related to collections or maximization of revenues.

Relationship with Providers: Valleywise Health (We) through our Administration, Management, Compliance and Legal Department (and other departments as needed) will monitor its business dealings to structure relationships in ways that satisfy the needs of the community.

- We will maintain relationships with Providers based only on the needs of our community and consistent with our mission.
- We will treat referral sources fairly and consistently, and will not provide remuneration that could be considered payment for referrals, including:
 - Free or below-market rents; Administrative or staff services at no- or below-cost;
 - Grants in excess of amounts for *bona fide* research or other services rendered;
 - Interest-free loans; or
 - Gifts (See 01291 S) or other payments intended to induce referrals.
- We will maintain policies, procedures and other protocol which require fair market value determinations for services rendered by referral sources and for services rendered by Valleywise Health. (See policies 01111 S False Claims and 01119 S Anti-Kickback Statue)
- We will maintain procedures to require all agreements with referral sources to be reduced to writing and reviewed and approved as appropriate under law and Valleywise Health's policies and procedures. (See policies 01111 S False Claims and 01119 S Anti-Kickback Statue)
- We will train the appropriate personnel on the primary laws and regulations governing the referral of patients and other legal restrictions on the manner in which Valleywise Health transacts business, including the penalties that may result for violations of such laws.

Respect for Our Culture: Valleywise Health (We) through our Human Resources Department, Administration, and Management (and other departments as needed) recognize that a diverse workforce enriches the life experience of all Employees and our community and will promote diversity.

- We will provide equal employment opportunities to Employees and applicants for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, marital status, political belief, age, veteran status, or disability, in accordance with applicable law.
- We will maintain policies and procedures that promote compliance with laws governing nondiscrimination in personnel actions, including recruiting, hiring, training, evaluation, transfer, workforce reduction, termination, compensation, counseling, discipline, and promotion of Employees.

- We will promote diversity with respect to individuals with disabilities and will make reasonable accommodations to any individual as required by law.
- We will recognize the right of our Employees to a workplace free of violence and harassment and will not tolerate any form of harassment or violence toward our Employees.
- We will maintain policies and procedures that promote appropriate conduct in the workplace and prohibit unwanted or hostile interaction, including degrading or humiliating jokes, physical or verbal intimidation, slurs, or other harassing conduct.
- We will not tolerate any form of sexual harassment, either overt, such as request for sexual favors in return for promotions, or less obvious forms of harassment, such as sexual comments.
- We will maintain policies and procedures prohibiting workplace violence, including robbery, stalking, assault, terrorism, hate crimes, or violence against any Employees.
- We will maintain policies, procedures, and practices prohibiting retaliation in any form for reporting.

Information Systems: Valleywise Health (We) recognize that the provision of healthcare services generates business, financial, and patient-related information that requires special protection. We will establish systems that ensure such information is used appropriately and safeguarded zealously.

- We are committed to the privacy, security and integrity of documents and records in our possession, and will develop systems, policies, and procedures sufficient to safeguard the privacy, security and integrity of our documents and records, including systems, policies, and procedures to:
 - Establish retention periods and protocols for business, financial, and patient records in the Valleywise Health system. We will maintain required documentation to meet all record retention standards, including but not limited to Medicare Parts A, B, C (i.e., ten years), D and Medicaid.
 - Prevent the altering, removal, or destruction of records or documents except according to Valleywise Health's records retention policy and applicable ethical and legal standards.
 - Promote the accurate, thorough, detailed, and complete documentation of all business, financial, and patient transactions.
 - Control and monitor access to Valleywise Health's information system, communications systems, electronic mail, internet access, and voicemail to ensure that such systems are accessed appropriately and used in accordance with Valleywise Health's policies and procedures.
 - Protect the privacy and security of patient medical, billing, and claims information by maintaining sufficient physical, systemic, and administrative measures to prevent unauthorized access to or use of patient information, and to track disclosures of such information as required by law.
 - Provide access to medical, billing, and claims information for our patients and their legal representatives as required by law.

- Safeguard the personal and human resources information of our Employees, including salary, benefits, medical, and other information retained within the human resources system as required by law.

IV. VIOLATIONS OF THE CODE OF CONDUCT AND ETHICS

Valleywise Health is committed to providing the District Board, Governing Council members, Employees, Administration, Providers, Contractors, Vendors, Agents, and other Valleywise Health committee members with a means of raising questions and concerns and reporting any conduct that is suspected to be in violation of this Code. District Board members, Governing Council members, Employees, management, Administration, Providers, Contractors, Vendors, Agents, and other Valleywise Health committee members are expected and required to communicate any suspected, detected or reported violations of the Code to a direct supervisor, the Chief Compliance Officer, Human Resources or General Counsel, as applicable. If you prefer, you can anonymously call the Valleywise Health Compliance Hotline 1-866-333-6447 and/or you can file a concern on the Valleywise Health's internal website (i.e., The Vine) under "Report a Compliance Concern". The Chief Compliance Officer will maintain primary responsibility for investigating reports received on this hotline.

The following list, while not exhaustive, describes the type of concerns and questions that you should raise with your supervisor, the Chief Compliance Officer, Human Resources, General Counsel or through the Valleywise Health Compliance Hotline:

- Allegations, discrimination, or retaliation.
- The possible submission of false, inaccurate, or questionable claims to Medicare, Medicaid, AHCCCS or any other payer.
- The provision or acceptance of payments, discounts, or gifts (See 01291 S) in exchange for referrals of patients.
- The utilization of improper physician recruitment techniques under applicable law.
- Situations that could raise conflict-of-interest concerns.
- Potential breaches of confidentiality or privacy.



CERTIFICATION

I acknowledge and certify that I have received and read the Maricopa County Special Health Care District d/b/a Valleywise Health’s Code of Conduct and Ethics.

I agree to comply with the Maricopa County Special Health Care District d/b/a Valleywise Health’s Code of Conduct and Ethics.

Maricopa County Special Health Care District - District Board

Initials: _____

Governing Council

Initials: _____

Administration, Management and Employees: I understand that compliance with this Code is a condition of my continued employment. I further understand that violation of the Code may result in disciplinary action up to and including termination.

Initials: _____

Providers: I understand that compliance with this Code is a condition to my ability to practice my profession at Valleywise Health. I further understand that violation of the Code may result in disciplinary action as provided in the Bylaws of the Medical Staff/Providers.

Initials: _____

Agents, Contractors, Vendors and Other Valleywise Health Committee Members (including FACC): I understand that compliance with this Code is a condition of my continued ability to furnish services to Valleywise Health. I further understand that violation of the Code may result in a termination by Valleywise Health of any relationship I have with Valleywise Health.

Initials: _____

Please sign here: _____

Date: _____

Please print your name: _____

Dept: _____

5. Reference: Policy 99305 G - Conduct - Board Member Conflict of Interest and Gift Policy 082323

Valleywise Health Administrative Policy & Procedure

Effective Date: 08/23

Reviewed Dates: 00/00

Revision Dates: 00/00

Policy #: 99305 G

Policy Title: Board Member Conflict of Interest and Gift Policy

Scope: **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 provide guidance to District Board Members in order to avoid actions that might result in, or create the appearance of:

- Using public office or employment for private gain;
- Giving preferential treatment to any organization or person;
- Impairing independence or impartiality of action; and
- Adversely affecting the confidence of the public in the integrity of Valleywise Health governance.

Definitions:

Gift: Any payment, distribution, expenditure, advance, deposit or donation of money, any intangible personal property or any kind of tangible personal or real property as defined in A.R.S. Section 41-1231, as may be amended.

Maricopa County Special Health Care District (District): A political subdivision of the State of Arizona empowered to operate a health system pursuant to A.R.S. Section 48-5501 *et seq.* that is dba Valleywise Health.

Maricopa County Special Health Care District Board of Directors (Board): The governing body of Maricopa County Special Health Care District.

Nominal Value: Less than twenty-five dollars.

Relative: A spouse, child, child's child, parent, grandparent, brother or sister of the whole or half blood and their spouses and the parent, brother, sister or child of a spouse, as defined in A.R.S. Section 38-502, as may be amended.

Vendor: Any person or entity either under contract with Valleywise Health to provide goods or services or subject to a competitive solicitation for the award of a contract with Valleywise Health to provide goods or services.

Policy:

CONFLICT OF INTEREST

Arizona conflict of interest laws are set forth in A.R.S. §38-501 through §38-511. Under these laws, any public officer (a term that includes the District Board of Directors) who has, or whose relative has, a substantial interest in any contract, sale, purchase, service or decision regarding Valleywise Health, must formally declare the existence of the interest by filing a disclosure statement with the Clerk of the Board and agree to refrain from acting upon that interest in any capacity or manner in the matter. The Clerk shall maintain such disclosure in the official records of the District. The Board member declaring a conflict shall refrain from participating in any manner in the contract, sale, purchase, service or decision.

A substantial interest means a pecuniary (money) or proprietary (ownership) interest by which a person will gain or lose something as contrasted to general sympathy, feeling or bias. A substantial interest does not include a number of interests that the conflict of interest statutes define as "remote interests." These remote interests are allowed and include categories such as being a non-salaried officer of a nonprofit corporation that has a contract with Valleywise Health; being a member of a nonprofit marketing association involved with Valleywise Health; or owning less than three percent of a shares of a corporation under contract with Valleywise Health. The entire list of "remote interests" is set forth at ARS §38-502(10) <http://www.azleg.state.az.us/ars/>. If a matter falls under the definition of a "remote interest" a Board member may remain involved in Valleywise Health discussions and action regarding the matter.

If a Board member has any questions regarding a possible conflict, the Board member may consult with Board Counsel and the Chief Compliance Officer to address any possible conflict of interest question.

GIFT POLICY

A. Solicitation: Board members shall not solicit any Gift from any Vendor.

B. Exception for Charitable Contributions: Solicitation and acceptance of charitable contributions to the Valleywise Health Foundation (hereinafter referred to as the Foundation) are governed in accordance with the Foundation's policies and procedures. Board members may solicit donations on behalf of the Foundation and the Arizona Burn Foundation.

C. Gifts: District Board members may accept Gifts of Nominal Value; however, District Board members may not accept any Gift in the form of cash or cash equivalents (including gift cards or gift certificates) from Vendors. The total value of Nominal Value Gifts accepted in any 12-month period from a single individual or entity may not exceed \$250. Occasionally, Vendors will send a small amount of cash or a gift card in the mail to a Board member. If it is impractical to return such gifts, they should be donated to the Foundation.

D. Promotional Items: Promotional items such as coffee mugs, pens and tchotchkes, may be accepted from a Vendor on an occasional basis if such items are of Nominal Value.

E. Meals, Travel and Entertainment Expenses:

1. Board members may accept a meal of Nominal Value from a Vendor during business meetings. Board members may attend Vendor paid social events in order to further develop business relationships where the cost or fair market value of the event does not exceed \$50 per person per event; however, Board members may not attend sporting events or accept payment or reimbursement of any travel related expenses, including overnight lodging, from Vendors. Board Members, however, may accept an invitation from the Foundation or the Arizona Burn Foundation to attend Foundation or Arizona Burn Foundation sponsored events, including travel and reimbursement to attend such events.
2. Board members may not accept payment or reimbursement of travel related expenses, including overnight lodging, associated with site visits or other travel related to reviewing and evaluating a Vendor's products.

References:

Arizona Revised Statutes 38-501 - 38-511
Form #44239 Valleywise Health Conflict of Interest Form

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

POLICY RESPONSIBLE PARTY: Melanie Talbot, Chief Governance Officer and Clerk of the Board

DEVELOPMENT TEAM(S): Board Counsel, Clerk's Office

Policy #: 99305 G

Policy Title: Board Member Conflict of Interest and Gift Policy

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

Place an X on the right side of applicable description:

New - X

Retire -

Reviewed -

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: | 00/00 |
| Committee: | 00/00 |
| Reviewed for HR: | 00/00 |
| Reviewed for EPIC: | 00/00 |
| Other: Maricopa County Special Health Care District Board of Directors | 08/23 |

6. Financial and Statistical Information - November 2023



Financial and Statistical Information

for the month ending
November 30, 2023



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Financial Highlights – November 2023

Patient Activity

Total admissions in November were 11.8% over budget and 2.6% lower than November of last year. Inpatient acute admissions for the month were 15.8% over budget and 10.1% lower than last November 2022. Behavioral health admissions were 2.1% over budget for the month and 25.6% higher than last November 2022. Emergency department visits were 1.3% over budget for the month and 4.5% lower than November of last year. Ambulatory visits were 0.7% over budget for the month and 2.5% higher than the same month in the prior year.

Operating Revenue

Net patient service revenues were 12.7% under budget for the month and were 1.7% lower on a year-to-date basis. Other revenues were 39.0% over budget for the month, primarily in revenues related to 340B pharmaceuticals, and a prior year reconciliation of Health II revenue. Overall total operating revenues were 0.2% under budget.

Operating Expense

Total operating expenses were 6.1% over budget for November. Labor expense, which includes salaries, benefits, and contract labor, were 5.2% over budget for the month. Majority of negative variances was due to the semi-annual payment of the SOAR program payments, and salary & wages in clinical areas: both acute and behavioral. Net medical service fees were 6.9% under budget for the month primarily due to a reconciliation of a prior APSI program year. Supplies were 23.6% over budget primarily in pharmaceuticals (specialty drugs), surgery related medical supplies (implants) due to increase surgery cases, and laboratory supplies. Purchased services were 3.1% over budget primarily in other services, management fees, advertising services, and attorney/legal fees. Lastly, all other expenses excluding depreciation were 19.8% over budget for the month primarily in repairs & maintenance expense, risk management related expenses, rent expense (including medical equipment), utilities, and organizational memberships.

Non-Operating Revenue (Expense)

In total, net non-operating revenues and expenses were 28.8% over budget for the month of November, primarily due to local match program true-ups, investment income, and operating related grant revenue.



Cash and Cash Equivalents (including investments)

| | November 23 | June 23 |
|---|-----------------|-----------------|
| Operating / General Fund | \$177.2M | \$241.2M |
| Bond related – Restricted | \$111.3M | \$166.5M |
| Total cash and cash equivalents (including investments) | <u>\$288.5M</u> | <u>\$407.7M</u> |

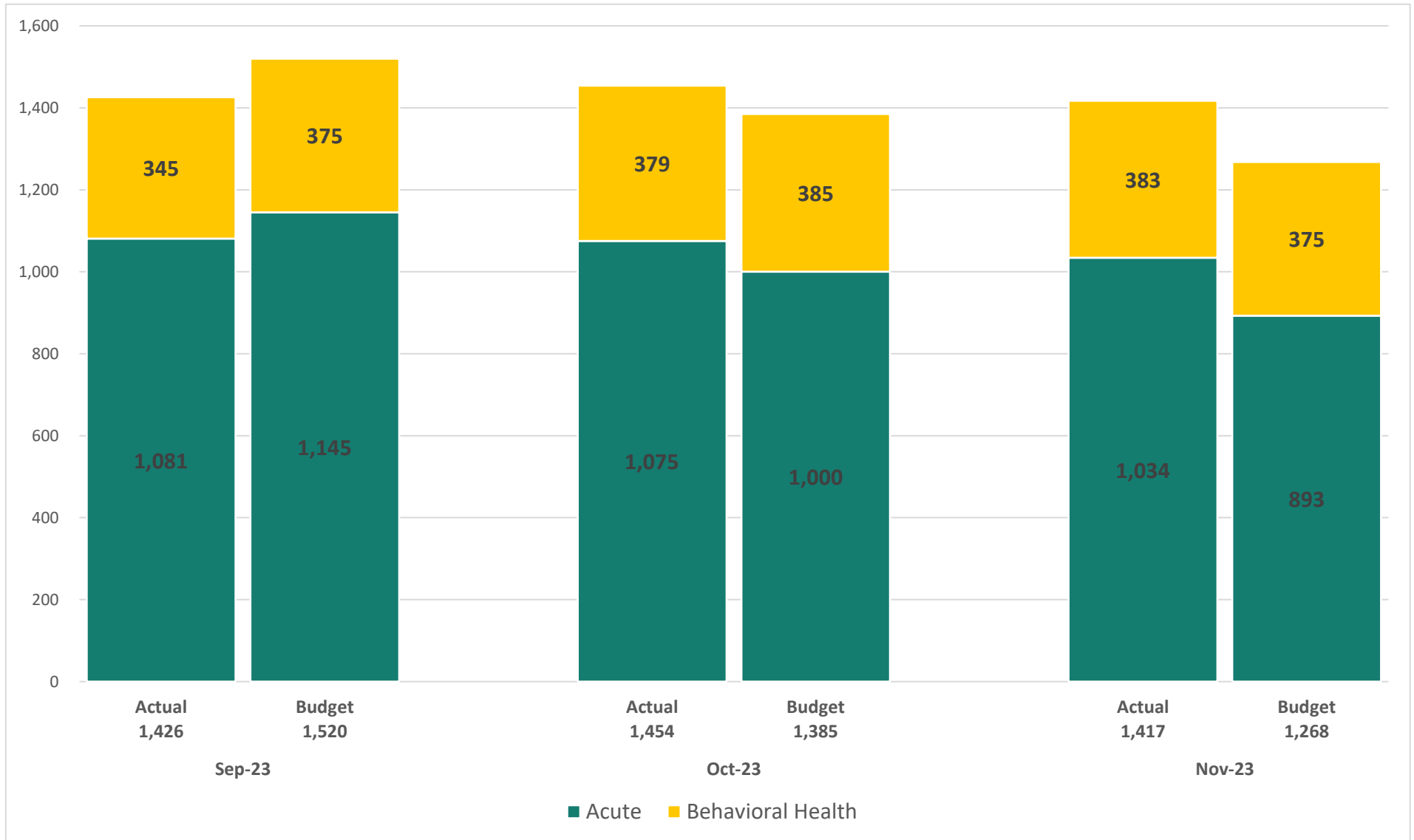
Select Ratios

| | YTD Actual | FY2024 YTD Budget |
|-------------------------------------|------------|----------------------|
| Liquidity | | |
| Days cash on hand (unrestricted) | 78.2 | 89.7 |
| Days in Accounts Receivable | 75.2 | 60.0 |
| Current Ratio (excludes Bond funds) | 2.2 | 3.7 |

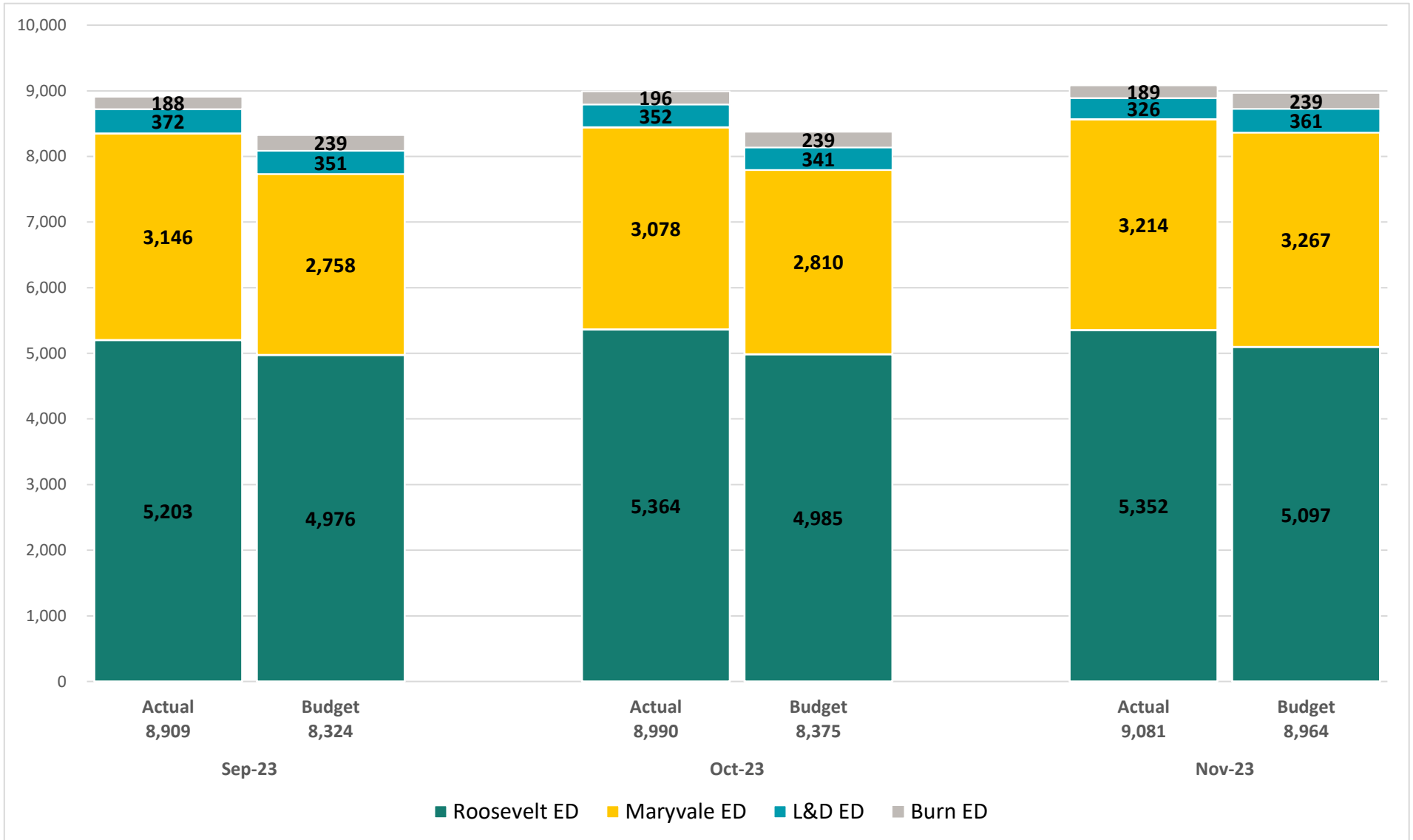
| | YTD Actual | FY2024 YTD Budget |
|--------------------------------|------------|----------------------|
| Profitability | | |
| Operating Margin (%) | (27.6) | (26.4) |
| Excess Margin – normalized (%) | (5.1) | (5.3) |
| Productivity | | |
| FTE/AOB w/o Residents | 4.17 | 4.21 |

If you have any questions, please do not hesitate to contact Melanie Talbot or Claire Agnew, CFO.

Fiscal Year 2024 Admissions



Fiscal Year 2024 Emergency Department Visits

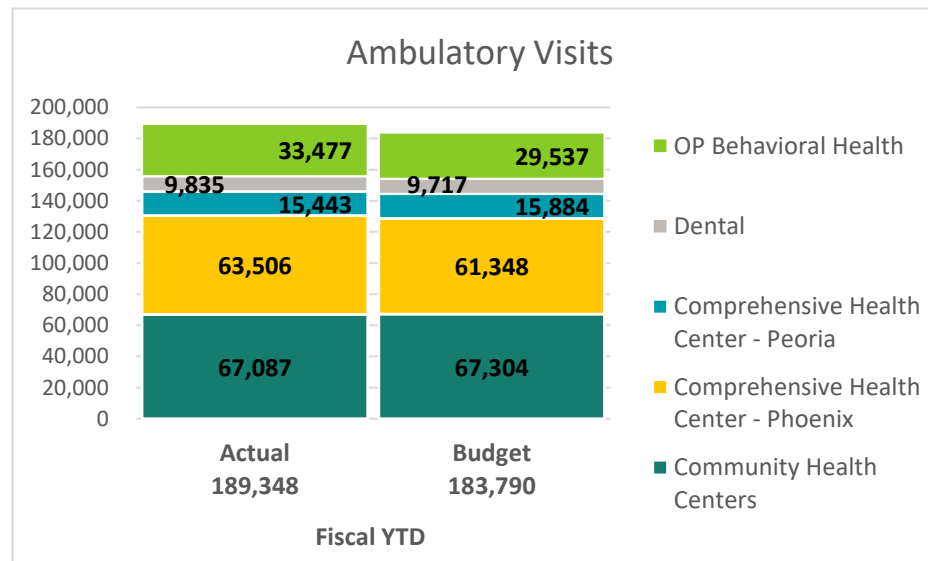
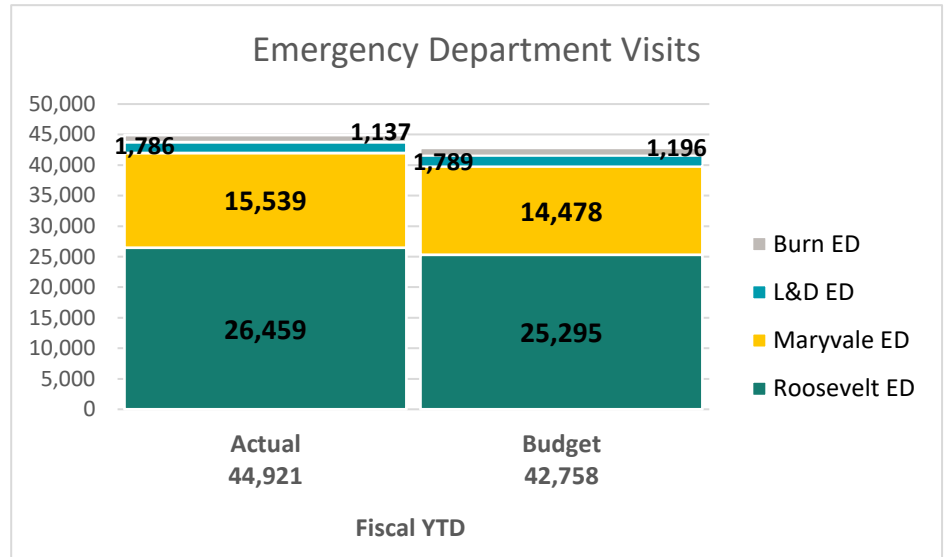
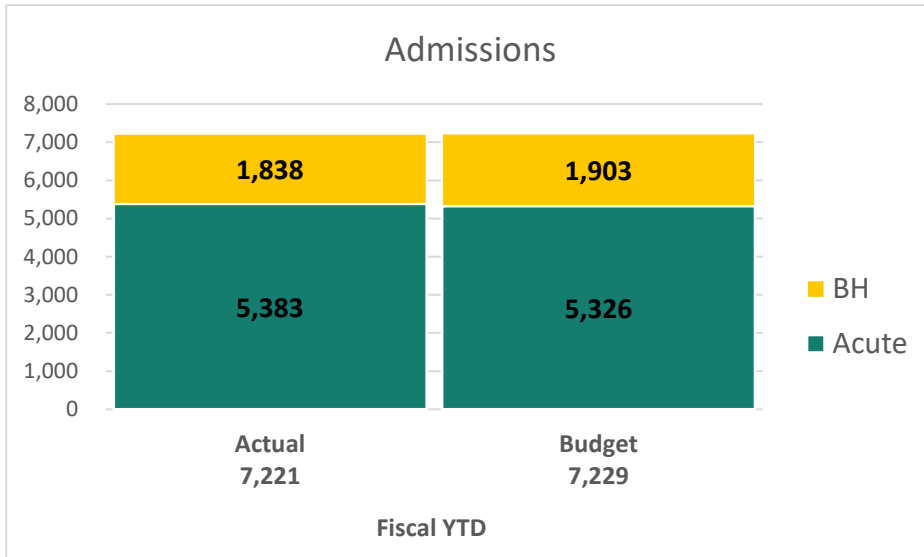


Fiscal Year 2024 Ambulatory Visits



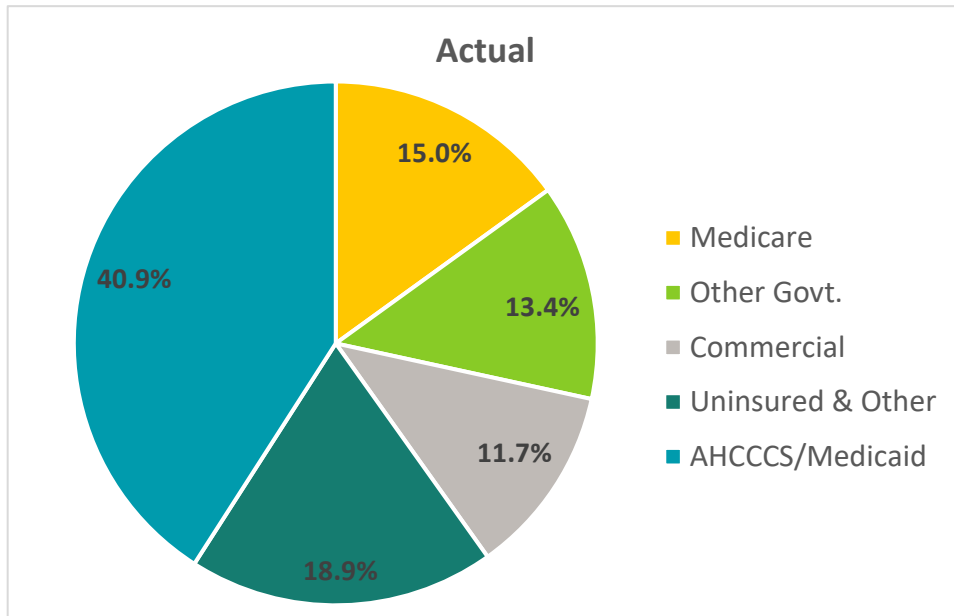
* Includes Telehealth visits -- 4,730 (September 2023) || 4,651 (October 2023) || 4,742 (November 2023)

Fiscal Year 2024 Year-to-Date Volume Summary

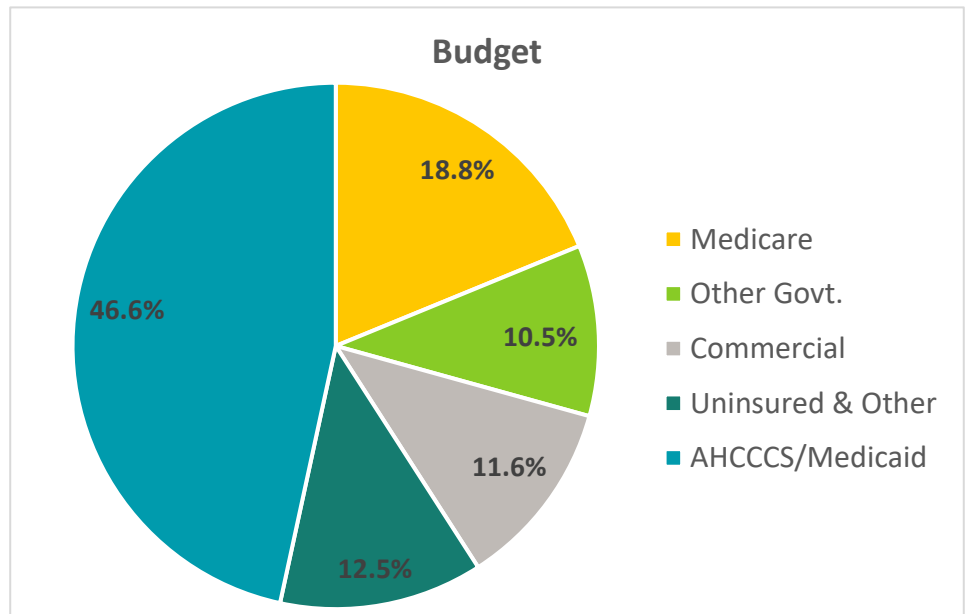


* Includes 23,362 Telehealth visits in FY 2024

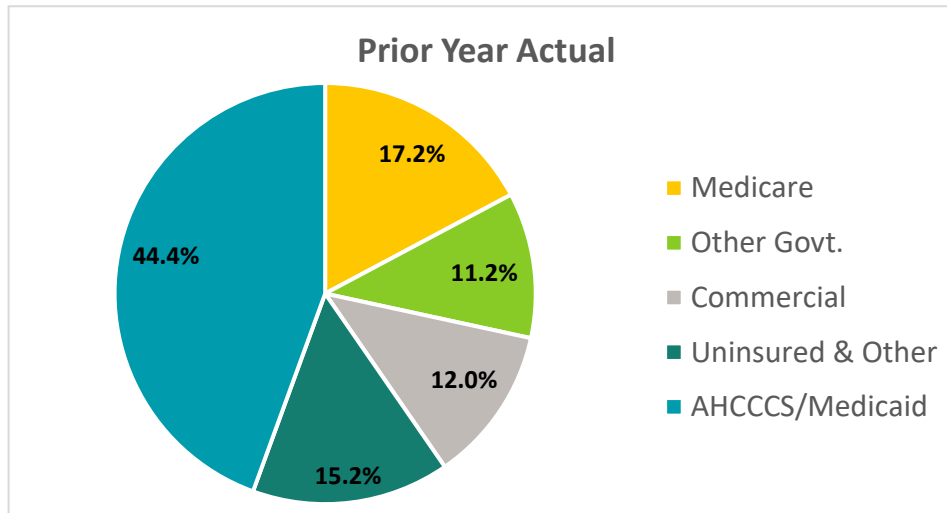
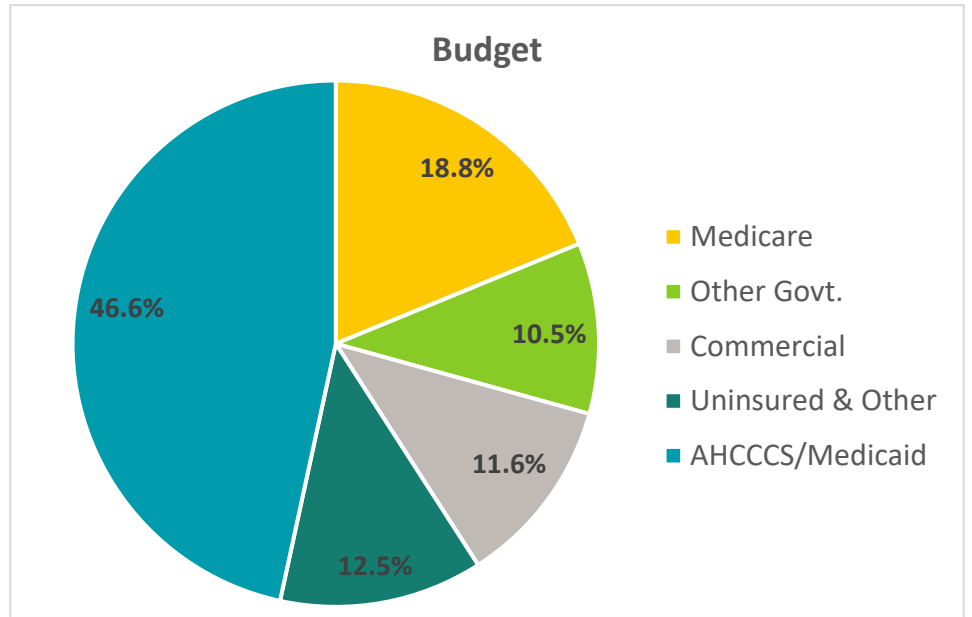
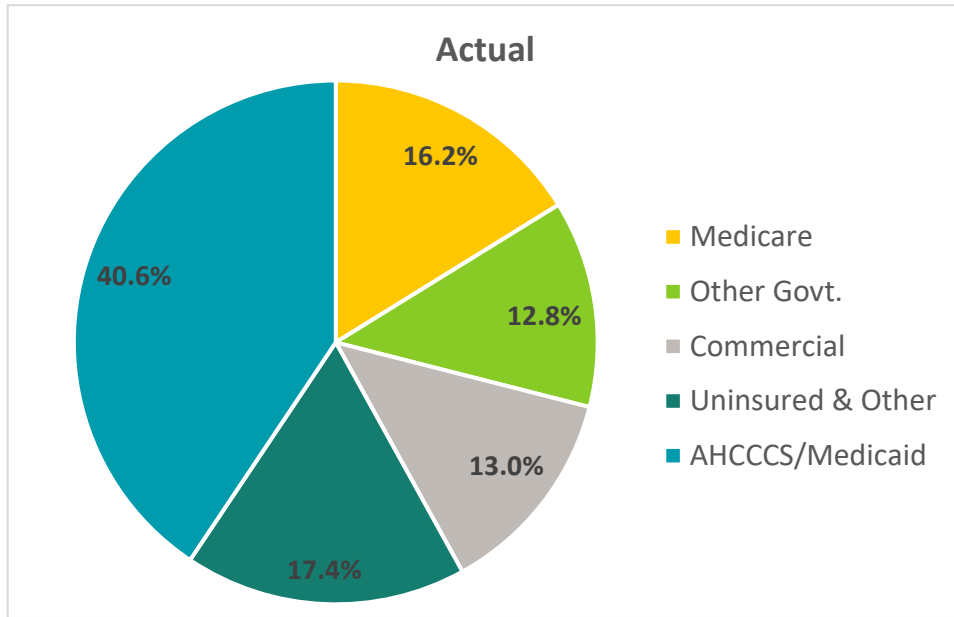
Fiscal Year 2024 Patient Revenue Source by Gross Revenue



Actual Gross Revenue is
month of November 30, 2023



Fiscal Year 2024 Patient Revenue Source by Gross Revenue



Actual Gross Revenue is
YTD as of November 30, 2023

Prior Year Gross Revenue is
all of fiscal year 2023



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF REVENUES AND EXPENSES

For the Period Ending November 30, 2023

| | Nov-23 Actual | Nov-23 Budget | Nov-23 Variance | Nov-23 % Change | Prior Year Same Month Nov-22 | Prior Year Same Month Variance | Prior Year Same Month % Change |
|---|---------------------|---------------------|--------------------|--------------------|------------------------------------|--------------------------------------|--------------------------------------|
| Net Patient Service Revenue | \$ 35,452,195 | \$ 40,598,075 | \$ (5,145,880) | (12.7 %) | \$ 38,382,368 | \$ (2,930,173) | (7.6 %) |
| Other Revenue | 18,036,771 | 12,978,555 | 5,058,216 | 39.0 % | 15,061,588 | 2,975,183 | 19.8 % |
| Total Operating Revenue | 53,488,965 | 53,576,629 | (87,664) | (0.2 %) | 53,443,956 | 45,009 | 0.1 % |
| OPERATING EXPENSES | | | | | | | |
| Salaries and Wages | 27,316,552 | 24,801,081 | (2,515,471) | (10.1 %) | 23,817,079 | (3,499,474) | (14.7 %) |
| Contract Labor | 5,794,415 | 6,045,863 | 251,448 | 4.2 % | 6,860,169 | 1,065,754 | 15.5 % |
| Employee Benefits | 7,050,395 | 7,340,467 | 290,072 | 4.0 % | 6,870,374 | (180,021) | (2.6 %) |
| Medical Service Fees | 9,007,030 | 9,670,925 | 663,895 | 6.9 % | 8,968,428 | (38,601) | (0.4 %) |
| Supplies | 9,481,045 | 7,669,396 | (1,811,648) | (23.6 %) | 9,181,739 | (299,306) | (3.3 %) |
| Purchased Services | 4,863,278 | 4,716,218 | (147,060) | (3.1 %) | 5,165,285 | 302,007 | 5.8 % |
| Repair and Maintenance | 2,680,085 | 1,825,835 | (854,250) | (46.8 %) | 1,887,897 | (792,188) | (42.0 %) |
| Utilities | 716,296 | 626,906 | (89,390) | (14.3 %) | 620,637 | (95,658) | (15.4 %) |
| Rent | 624,743 | 472,839 | (151,904) | (32.1 %) | 472,162 | (152,581) | (32.3 %) |
| Other Expenses | 2,101,580 | 2,186,492 | 84,912 | 3.9 % | 2,064,682 | (36,898) | (1.8 %) |
| Provider Assessment | 0 | 0 | 0 | 0.0 % | 0 | 0 | 0.0 % |
| Depreciation | 4,535,881 | 4,535,881 | (0) | (0.0 %) | 3,646,117 | (889,763) | (24.4 %) |
| Total Operating Expense | 74,171,300 | 69,891,904 | (4,279,396) | (6.1 %) | 69,554,569 | (4,616,731) | (6.6 %) |
| Operating Income (Loss) | (20,682,334) | (16,315,274) | (4,367,060) | (26.8 %) | (16,110,613) | (4,571,721) | (28.4 %) |
| NONOPERATING REVENUES (EXPENSES) | | | | | | | |
| NonCapital Grants | 529,888 | 474,853 | 55,035 | 11.6 % | 604,897 | (75,009) | (12.4 %) |
| NonCapital Transfers from County/State | 295,658 | 295,658 | 0 | 0.0 % | 295,658 | 0 | 0.0 % |
| Investment Income | 984,761 | 577,742 | 407,019 | 70.4 % | 459,853 | 524,908 | 114.1 % |
| Other NonOperating Revenues (Expenses) | 2,182,523 | (713,532) | 2,896,056 | 405.9 % | (1,291,487) | 3,474,011 | 269.0 % |
| Interest Expense | (1,424,492) | (1,424,492) | (0) | (0.0 %) | (2,453,383) | 1,028,891 | 41.9 % |
| Tax Levy | 12,452,350 | 12,452,350 | 0 | 0.0 % | 11,783,420 | 668,931 | 5.7 % |
| Total NonOperating Revenues (Expenses) | 15,020,689 | 11,662,580 | 3,358,109 | 28.8 % | 9,398,958 | 5,621,731 | 59.8 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF REVENUES AND EXPENSES

For the Period Ending November 30, 2023

| | Nov-23 Actual | Nov-23 Budget | Nov-23 Variance | Nov-23 % Change | Prior Year Same Month Nov-22 | Prior Year Same Month Variance | Prior Year Same Month % Change |
|--|--------------------------|--------------------------|----------------------------|----------------------------|---|---|---|
| Excess of Revenues over Expenses | \$ (5,661,645) | \$ (4,652,695) | \$ (1,008,951) | (21.7 %) | \$ (6,711,655) | \$ 1,050,010 | 15.6 % |
| Bond-Related Revenues and Expenses | (3,417,728) | (3,349,013) | (68,714) | (2.1 %) | (1,211,188) | (2,206,540) | (182.2 %) |
| Increase (Decrease) in Net Assets (normalized) | \$ (9,079,373) | \$ (8,001,708) | \$ (1,077,665) | (13.5 %) | \$ (7,922,843) | \$ (1,156,530) | (14.6 %) |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF REVENUES AND EXPENSES

For the Five Periods Ending November 30, 2023

| | Nov-23 YTD Actual | Nov-23 YTD Budget | Nov-23 YTD Variance | YTD Nov-23 % Change | YTD Prior Year Nov-22 | YTD Prior Year Variance | YTD Prior Year % Change |
|---|----------------------|----------------------|------------------------|---------------------------|-----------------------------|-------------------------------|-------------------------------|
| Net Patient Service Revenue | \$ 214,282,515 | \$ 218,061,862 | \$ (3,779,347) | (1.7 %) | \$ 206,906,863 | \$ 7,375,652 | 3.6 % |
| Other Revenue | 75,562,722 | 65,069,563 | 10,493,159 | 16.1 % | 58,876,754 | 16,685,968 | 28.3 % |
| Total Operating Revenue | 289,845,237 | 283,131,425 | 6,713,812 | 2.4 % | 265,783,617 | 24,061,620 | 9.1 % |
| OPERATING EXPENSES | | | | | | | |
| Salaries and Wages | 135,153,555 | 126,143,307 | (9,010,248) | (7.1 %) | 121,729,907 | (13,423,647) | (11.0 %) |
| Contract Labor | 31,270,636 | 33,414,249 | 2,143,613 | 6.4 % | 34,605,547 | 3,334,912 | 9.6 % |
| Employee Benefits | 40,568,965 | 37,435,107 | (3,133,858) | (8.4 %) | 35,747,869 | (4,821,096) | (13.5 %) |
| Medical Service Fees | 39,278,411 | 47,596,647 | 8,318,236 | 17.5 % | 42,973,410 | 3,694,998 | 8.6 % |
| Supplies | 48,436,001 | 40,644,014 | (7,791,987) | (19.2 %) | 39,674,859 | (8,761,142) | (22.1 %) |
| Purchased Services | 23,989,517 | 23,707,896 | (281,621) | (1.2 %) | 22,785,575 | (1,203,943) | (5.3 %) |
| Repair and Maintenance | 9,598,356 | 9,003,353 | (595,003) | (6.6 %) | 8,973,719 | (624,636) | (7.0 %) |
| Utilities | 3,981,854 | 3,658,945 | (322,909) | (8.8 %) | 3,782,241 | (199,613) | (5.3 %) |
| Rent | 2,794,373 | 2,364,197 | (430,175) | (18.2 %) | 2,557,163 | (237,210) | (9.3 %) |
| Other Expenses | 12,203,919 | 11,486,743 | (717,176) | (6.2 %) | 9,208,803 | (2,995,116) | (32.5 %) |
| Provider Assessment | 0 | 0 | 0 | 0.0 % | 5,891,876 | 5,891,876 | 100.0 % |
| Depreciation | 22,447,463 | 22,447,463 | 0 | 0.0 % | 17,878,513 | (4,568,950) | (25.6 %) |
| Total Operating Expense | 369,723,050 | 357,901,921 | (11,821,129) | (3.3 %) | 345,809,483 | (23,913,567) | (6.9 %) |
| Operating Income (Loss) | (79,877,812) | (74,770,495) | (5,107,317) | (6.8 %) | (80,025,865) | 148,053 | 0.2 % |
| NONOPERATING REVENUES (EXPENSES) | | | | | | | |
| NonCapital Grants | 5,575,911 | 4,352,186 | 1,223,725 | 28.1 % | 2,324,473 | 3,251,438 | 139.9 % |
| NonCapital Transfers from County/State | 1,478,290 | 1,478,290 | 0 | 0.0 % | 1,478,290 | 0 | 0.0 % |
| Investment Income | 4,020,318 | 2,888,711 | 1,131,606 | 39.2 % | 2,265,313 | 1,755,005 | 77.5 % |
| Other NonOperating Revenues (Expenses) | (1,109,670) | (4,016,901) | 2,907,231 | 72.4 % | (4,959,046) | 3,849,376 | 77.6 % |
| Interest Expense | (7,122,460) | (7,122,460) | (0) | (0.0 %) | (12,240,750) | 5,118,290 | 41.8 % |
| Tax Levy | 62,261,752 | 62,261,752 | 0 | 0.0 % | 54,854,772 | 7,406,981 | 13.5 % |
| Total NonOperating Revenues (Expenses) | 65,104,141 | 59,841,579 | 5,262,562 | 8.8 % | 43,723,051 | 21,381,090 | 48.9 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF REVENUES AND EXPENSES

For the Five Periods Ending November 30, 2023

| | Nov-23 YTD Actual | Nov-23 YTD Budget | Nov-23 YTD Variance | YTD Nov-23 % Change | YTD Prior Year Nov-22 | YTD Prior Year Variance | YTD Prior Year % Change |
|--|----------------------|----------------------|------------------------|---------------------------|-----------------------------|-------------------------------|-------------------------------|
| Excess of Revenues over Expenses | \$ (14,773,671) | \$ (14,928,917) | \$ 155,246 | 1.0 % | \$ (36,302,814) | \$ 21,529,143 | 59.3 % |
| Bond-Related Revenues and Expenses | (16,862,102) | (16,745,065) | (117,036) | (0.7 %) | (4,891,845) | (11,970,256) | (244.7 %) |
| Increase (Decrease) in Net Assets (normalized) | \$ (31,635,773) | \$ (31,673,982) | \$ 38,209 | 0.1 % | \$ (41,194,659) | \$ 9,558,887 | 23.2 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF NET POSITION

November 30, 2023

| | 11/30/2023 | 06/30/2023 |
|---|-------------------------|-------------------------|
| ASSETS | | |
| Current Assets | | |
| Cash and Cash Equivalents | | |
| Cash - Care System | \$ 177,211,699 | \$ 241,214,127 |
| Cash and Short-Term Investment | 177,211,699 | 241,214,127 |
| Cash - Bond | 111,252,371 | 166,504,192 |
| Cash and Short-Term Investment - Bond | 111,252,371 | 166,504,192 |
| Total Cash and Cash Equivalents | 288,464,070 | 407,718,319 |
| Patient A/R, Net of Allowances | 94,874,904 | 85,709,368 |
| Other Receivables and Prepaid Items | 58,230,977 | 42,225,086 |
| Estimated Amounts Due from Third-Party Payors | 74,047,472 | 50,640,640 |
| Due from Related Parties | 1,100,071 | 3,376,279 |
| Other Current Assets | 2,516,402 | 2,516,402 |
| Total Current Assets | 519,233,896 | 592,186,093 |
| Capital Assets, Net | 810,183,937 | 796,596,154 |
| Other Assets | | |
| Long-Term Portion - Right to use Assets | 5,005,017 | 5,005,017 |
| Total Other Assets | 5,005,017 | 5,005,017 |
| Total Assets | 1,334,422,851 | 1,393,787,264 |
| Deferred Outflows | 56,462,313 | 56,462,313 |
| Total Assets and Deferred Outflows | \$ 1,390,885,164 | \$ 1,450,249,577 |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF NET POSITION

November 30, 2023

| | 11/30/2023 | 06/30/2023 |
|--|-------------------------|-------------------------|
| LIABILITIES AND NET POSITION | | |
| Current Liabilities | | |
| Current Maturities of Long-Term Debt | \$ 44,183,944 | \$ 43,216,702 |
| Accounts Payable | 61,404,110 | 75,381,153 |
| Accrued Payroll and Expenses | 28,743,894 | 28,158,703 |
| Medical Claims Payable | 18,139,726 | 18,892,539 |
| Due to Related Parties | 14,342,824 | 1,434 |
| Other Current Liabilities | 69,639,643 | 80,724,270 |
| Total Current Liabilities | 236,454,141 | 246,374,801 |
| Long-Term Debt | | |
| Bonds Payable | 606,076,197 | 640,746,278 |
| Other Long-Term Debt | 5,005,017 | 5,005,017 |
| Total Long-Term Debt | 611,081,214 | 645,751,296 |
| Long-Term Liabilities | | |
| Total Liabilities | 356,444,644 | 356,444,644 |
| Total Liabilities | 1,203,979,999 | 1,248,570,741 |
| Deferred Inflows | | |
| Total Liabilities | 18,778,412 | 18,778,412 |
| Net Position | | |
| Invested in Capital Assets, Net of Related Debt | 760,994,976 | 748,374,435 |
| Temporarily Restricted | 49,806,568 | 49,521,120 |
| Unrestricted | (642,674,791) | (614,995,130) |
| Total Net Position | 168,126,753 | 182,900,424 |
| Total Liabilities, Deferred Inflows, and Net Position | \$ 1,390,885,164 | \$ 1,450,249,577 |



Supplemental Information

315/504

Valleywise Health
 Financial and Statistical Information
 30-Nov-23

| 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 Date | | | | Prior Fiscal Year to Date | | |
|---------------|--------|----------|-------|---------------------|--------|----------|-------|---------------------------|----------|-------|
| Actual | Budget | Variance | Var % | Actual | Budget | Variance | Var % | Actual | Variance | Var % |

| | | | | | | | | | | | | | | |
|---|---------------|---------------|------------|-------------|--|----------------|----------------|--------------|-------------|--|----------------|--------------|-------------|--|
| Acute | | | | | | | | | | | | | | |
| Admissions | 1,034 | 893 | 141 | 15.8% | | 5,383 | 5,326 | 57 | 1.1% | | 5,527 | (144) | (2.6%) | |
| Length of Stay (LOS) | 5.5 | 6.3 | 0.8 | 13.1% | | 5.3 | 5.4 | 0.0 | 0.9% | | 5.2 | (0.1) | (2.0%) | |
| Patient Days | 5,662 | 5,630 | 32 | 0.6% | | 28,791 | 28,742 | 49 | 0.2% | | 28,975 | (184) | (0.6%) | |
| Acute - Observation Days and Admits | | | | | | | | | | | | | | |
| Observation Days | 664 | 594 | 70 | 11.9% | | 3,594 | 2,992 | 602 | 20.1% | | 2,796 | 798 | 28.5% | |
| Observation Admission - Transfer to Inpatient | 190 | 221 | (31) | (14.0%) | | 1,046 | 1,105 | (59) | (5.3%) | | 1,095 | (49) | (4.5%) | |
| Observation Admission Only | 364 | 364 | - | 0.0% | | 1,928 | 1,820 | 108 | 5.9% | | 1,732 | 196 | 11.3% | |
| Total Admissions - Acute plus Observation Only | 1,398 | 1,257 | 141 | 11.2% | | 7,311 | 7,146 | 165 | 2.3% | | 7,259 | 52 | 0.7% | |
| Behavioral Health | | | | | | | | | | | | | | |
| Admissions | 383 | 375 | 8 | 2.1% | | 1,838 | 1,903 | (65) | (3.4%) | | 1,628 | 210 | 12.9% | |
| Length of Stay (LOS) | 22.3 | 23.4 | 1.1 | 4.7% | | 24.1 | 23.6 | (0.5) | (2.1%) | | 24.4 | 0.4 | 1.4% | |
| Patient Days | 8,536 | 8,772 | (236) | (2.7%) | | 44,281 | 44,884 | (603) | (1.3%) | | 39,798 | 4,483 | 11.3% | |
| Valleywise Behavioral Health Center-Phoenix | 2,406 | 2,066 | 340 | 16.5% | | 11,834 | 10,537 | 1,297 | 12.3% | | 8,519 | 3,315 | 38.9% | |
| Valleywise Behavioral Health Center-Mesa | 2,986 | 3,400 | (414) | (12.2%) | | 15,514 | 17,485 | (1,971) | (11.3%) | | 15,760 | (246) | (1.6%) | |
| Valleywise Behavioral Health Center-Maryvale | 3,144 | 3,306 | (162) | (4.9%) | | 16,933 | 16,862 | 71 | 0.4% | | 15,519 | 1,414 | 9.1% | |
| Combined (Acute + Behavioral Health) | | | | | | | | | | | | | | |
| Adjusted Admissions | 2,882 | 2,409 | 473 | 19.6% | | 14,448 | 13,578 | 870 | 6.4% | | 13,563 | 885 | 6.5% | |
| Adjusted Patient Days | 28,874 | 27,361 | 1,512 | 5.5% | | 146,203 | 138,290 | 7,913 | 5.7% | | 130,363 | 15,840 | 12.2% | |
| Case Mix Index | | | | | | | | | | | | | | |
| Total Hospital | 1.51 | 1.55 | (0.04) | (2.3%) | | 1.56 | 1.55 | 0.01 | 0.5% | | 1.58 | (0.02) | (1.4%) | |
| Acute (Excluding Newborns) | 1.58 | 1.75 | (0.17) | (9.5%) | | 1.70 | 1.75 | (0.05) | (2.9%) | | 1.80 | (0.10) | (5.6%) | |
| Behavioral Health | 1.32 | 1.26 | 0.06 | 4.9% | | 1.28 | 1.26 | 0.02 | 1.4% | | 1.24 | 0.04 | 3.0% | |
| Medicare | 1.90 | 2.10 | (0.20) | (9.4%) | | 2.05 | 2.10 | (0.05) | (2.3%) | | 2.13 | (0.08) | (3.7%) | |
| AHCCCS | 1.50 | 1.82 | (0.32) | (17.3%) | | 1.74 | 1.82 | (0.08) | (4.2%) | | 1.84 | (0.10) | (5.2%) | |
| Ambulatory | | | | | | | | | | | | | | |
| Valleywise Community Health Centers Visits | 13,191 | 14,135 | (944) | (6.7%) | | 67,087 | 67,304 | (217) | (0.3%) | | 72,385 | (5,298) | (7.3%) | |
| Valleywise Comprehensive Health Center-Phoenix Visits | 12,206 | 12,071 | 135 | 1.1% | | 63,506 | 61,348 | 2,158 | 3.5% | | 61,331 | 2,175 | 3.5% | |
| Valleywise Comprehensive Health Center-Peoria Visits | 3,252 | 3,073 | 179 | 5.8% | | 15,443 | 15,884 | (441) | (2.8%) | | 16,044 | (601) | (3.7%) | |
| Dental Clinics Visits | 1,969 | 1,874 | 95 | 5.1% | | 9,835 | 9,717 | 118 | 1.2% | | 9,550 | 285 | 3.0% | |
| OP Behavioral Health Visits | 6,561 | 5,899 | 662 | 11.2% | | 33,477 | 29,537 | 3,940 | 13.3% | | 28,178 | 5,299 | 18.8% | |
| Total Ambulatory Visits : | 37,179 | 37,052 | 127 | 0.3% | | 189,348 | 183,790 | 5,558 | 3.0% | | 187,488 | 1,860 | 1.0% | |

Valleywise Health
 Financial and Statistical Information
 30-Nov-23

| 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 Date | | | | Prior Fiscal Year to Date | | |
|---------------|--------|----------|-------|---------------------|--------|----------|-------|---------------------------|----------|-------|
| Actual | Budget | Variance | Var % | Actual | Budget | Variance | Var % | Actual | Variance | Var % |

| Other | | | | | | | | | | | | | | |
|--|--------------|--------------|-------------|---------------|--|---------------|---------------|--------------|---------------|--|---------------|--------------|---------------|--|
| Operating Room Utilization | 67% | 70% | (3.1%) | (4.4%) | | 71% | 70% | 0.8% | 1.1% | | 71% | (0.5%) | (0.7%) | |
| Total Main OR Surgical Minutes - Roosevelt | 73,140 | 53,952 | 19,188 | 35.6% | | 377,340 | 341,691 | 35,649 | 10.4% | | 369,405 | 7,935 | 2.1% | |
| Main OR Minutes per Case - Roosevelt | 125 | 115 | (10.4) | (9.1%) | | 117 | 115 | (1.6) | (1.4%) | | 113 | (4.0) | (3.6%) | |
| Total Main OR Surgeries - Roosevelt | 583 | 469 | 114 | 24.3% | | 3,238 | 2,972 | 266 | 9.0% | | 3,283 | (45) | (1.4%) | |
| OP Surgeries - Peoria | 80 | 85 | (5) | (5.9%) | | 378 | 445 | (67) | (15.1%) | | 186 | 192 | 103.2% | |
| Total Surgeries - Roosevelt (Main OR) and Peoria | 663 | 554 | 109 | 19.7% | | 3,616 | 3,417 | 199 | 5.8% | | 3,469 | 147 | 4.2% | |
| Endoscopy Procedures - Roosevelt | 248 | 308 | (60) | (19.6%) | | 1,357 | 1,542 | (185) | (12.0%) | | 1,438 | (81) | (5.6%) | |
| Endoscopy Procedures - Peoria | 115 | 76 | 39 | 50.4% | | 546 | 484 | 62 | 12.8% | | 604 | (58) | (9.6%) | |
| Total Endoscopy Procedures - Roosevelt and Peoria | 363 | 385 | (22) | (5.7%) | | 1,903 | 2,026 | (123) | (6.1%) | | 2,042 | (139) | (6.8%) | |
| Deliveries | 138 | 211 | (73) | (34.6%) | | 876 | 1,055 | (179) | (17.0%) | | 1,052 | (176) | (16.7%) | |
| Trauma Visits (subset of ED Visits) | 129 | 168 | (39) | (23.2%) | | 751 | 834 | (83) | (10.0%) | | 870 | (119) | (13.7%) | |
| Emergency Department (ED) | 9,081 | 8,964 | 117 | 1.3% | | 44,921 | 42,758 | 2,163 | 5.1% | | 43,151 | 1,770 | 4.1% | |
| Roosevelt ED | 5,352 | 5,097 | 255 | 5.0% | | 26,459 | 25,295 | 1,164 | 4.6% | | 25,281 | 1,178 | 4.7% | |
| Maryvale ED | 3,214 | 3,267 | (53) | (1.6%) | | 15,539 | 14,478 | 1,061 | 7.3% | | 14,879 | 660 | 4.4% | |
| L&D ED | 326 | 361 | (35) | (9.7%) | | 1,786 | 1,789 | (3) | (0.2%) | | 1,780 | 6 | 0.3% | |
| Burn ED | 189 | 239 | (50) | (20.9%) | | 1,137 | 1,196 | (59) | (4.9%) | | 1,211 | (74) | (6.1%) | |
| % of Total ED Visits Resulting in Admission Roosevelt | 12.0% | 12.7% | (0.6%) | (5.1%) | | 12.2% | 12.7% | (0.5%) | (4.0%) | | 12.4% | (0.3%) | (2.0%) | |
| % of Total ED Visits Resulting in Admission Maryvale | 4.5% | 4.6% | (0.0%) | (1.1%) | | 5.0% | 5.0% | 0.0% | 0.2% | | 4.9% | 0.1% | 2.4% | |
| % of Acute Patients Admitted Through the ED | 89.2% | 110.7% | (21.5%) | (19.4%) | | 90.4% | 91.9% | (1.5%) | (1.6%) | | 87.0% | 3.5% | 4.0% | |
| Left Without Treatment (LWOT) ROOSEVELT | 1.1% | <3% | 1.9% | 63.1% | | 1.3% | <3% | 1.7% | 57.3% | | 1.5% | 0.3% | 16.9% | |
| Left Without Treatment (LWOT) MARYVALE | 0.7% | <3% | 2.3% | 77.2% | | 0.9% | <3% | 2.1% | 70.7% | | 1.5% | 0.6% | (39.3%) | |
| Overall ED Median Length of Stay (minutes) ROOSEVELT | 214 | <240 | 26 | 10.8% | | 225 | <240 | 15 | 6.3% | | 223 | (2) | (0.9%) | |
| Overall ED Median Length of Stay (minutes) MARYVALE | 89 | <220 | 131 | 59.5% | | 162 | <220 | 58 | 26.4% | | 181 | 19 | (10.5%) | |
| PSYCH ED Median LOS (minutes) ROOSEVELT | 565 | <240 | (565) | (100.0%) | | 585 | <240 | (585) | (100.0%) | | 642 | 57 | 8.8% | |
| PSYCH ED Median LOS (minutes) MARYVALE | 880 | <240 | (880) | (100.0%) | | 784 | <240 | (784) | (100.0%) | | 553 | (231) | (41.8%) | |
| Median Time to Treatment (MTT) (minutes) ROOSEVELT | 25 | <30 | 5 | 16.7% | | 27 | <30 | 3 | 10.0% | | 29 | 2 | 6.9% | |
| Median Time to Treatment (MTT) (minutes) MARYVALE | 22 | <30 | 8 | 26.7% | | 26 | <30 | 4 | 13.3% | | 28 | 2 | (7.1%) | |
| Cath Lab Utilization - Room 1 | 17% | 45% | (28.2%) | (62.7%) | | 22% | 45% | (22.8%) | (50.6%) | | 19% | 3.3% | 17.6% | |
| Cath Lab Utilization - Room 2 | 22% | 45% | (23.2%) | (51.5%) | | 22% | 45% | (22.9%) | (50.9%) | | 24% | (1.6%) | (6.9%) | |
| Cath Lab Utilization - IR | 95% | 65% | 29.7% | 45.7% | | 95% | 65% | 29.6% | 45.6% | | 97% | (2.3%) | (2.4%) | |
| CCTA/Calcium Score | 15 | 15 | - | 0.0% | | 79 | 75 | 4 | 5.3% | | 75 | 4 | 5.3% | |
| Pediatric ED Visits at Maryvale (under age 18) | 718 | | | | | 2,769 | | | | | 2,932 | (163) | (5.6%) | |
| Adult ED Visits at Maryvale (age 18 and over) | 2,496 | | | | | 12,770 | | | | | 11,947 | 823 | 6.9% | |
| Maryvale ED to Inpatient OR (under age 18) | 1 | | | | | 17 | | | | | 13 | 4 | 30.8% | |
| Maryvale ED to Inpatient OR (Total) | 38 | | | | | 241 | | | | | 159 | 82 | 51.6% | |
| Pediatric ED Visits at Roosevelt (under age 18) | 858 | | | | | 3,550 | | | | | 4,294 | (744) | (17.3%) | |
| Adult ED Visits at Roosevelt (age 18 and over) | 4,494 | | | | | 22,909 | | | | | 20,987 | 1,922 | 9.2% | |

Valleywise Health
 Financial and Statistical Information
 30-Nov-23

| | |
|---|--|
| Greater than or equal to 100% of Budget | |
| Within 95% to 100% of Budget | |
| Less than 95% of Budget | |

| Current Month | | | | Fiscal Year to Date | | | | Prior Fiscal Year to Date | | |
|---------------|--------|----------|-------|---------------------|--------|----------|-------|---------------------------|----------|-------|
| Actual | Budget | Variance | Var % | Actual | Budget | Variance | Var % | Actual | Variance | Var % |

Operating Income / (Loss) in 000s

| | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|----|----------|----|----------|----|---------|---------|--|----|----------|----|----------|----|---------|--------|--|----|----------|----|-----|------|--|
| Valleywise Health | \$ | (20,682) | \$ | (16,315) | \$ | (4,367) | (26.8%) | | \$ | (79,878) | \$ | (74,770) | \$ | (5,107) | (6.8%) | | \$ | (80,026) | \$ | 148 | 0.2% | |
|-------------------|----|----------|----|----------|----|---------|---------|--|----|----------|----|----------|----|---------|--------|--|----|----------|----|-----|------|--|

Net Income / (Loss) in 000s

| | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|----|---------|----|---------|----|---------|---------|--|----|----------|----|----------|----|-----|------|--|----|----------|----|--------|-------|--|
| Valleywise Health | \$ | (5,662) | \$ | (4,653) | \$ | (1,009) | (21.7%) | | \$ | (14,774) | \$ | (14,929) | \$ | 155 | 1.0% | | \$ | (36,303) | \$ | 21,529 | 59.3% | |
|-------------------|----|---------|----|---------|----|---------|---------|--|----|----------|----|----------|----|-----|------|--|----|----------|----|--------|-------|--|

Net Income / (Loss) in 000s Normalized

| | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|----|---------|----|---------|----|---------|---------|--|----|----------|----|----------|----|----|------|--|----|----------|----|-------|-------|--|
| Valleywise Health | \$ | (9,079) | \$ | (8,002) | \$ | (1,078) | (13.5%) | | \$ | (31,636) | \$ | (31,674) | \$ | 38 | 0.1% | | \$ | (41,195) | \$ | 9,559 | 23.2% | |
|-------------------|----|---------|----|---------|----|---------|---------|--|----|----------|----|----------|----|----|------|--|----|----------|----|-------|-------|--|

RATIOS:

Liquidity

| | | | | | | | | | Prior Fiscal Year End | | | |
|---|----|-------|--|--|--|--|--|----|-----------------------|----------|--------|---------|
| | | | | | | | | | Actual | Variance | Var % | |
| Total Cash and Investments (000s) | \$ | 177.2 | | | | | | \$ | 241.9 | \$ | (64.7) | (26.7%) |
| Total Days Cash on Hand | | 78.5 | | | | | | | 109.2 | | (30.7) | (28.1%) |
| Current Ratio | | 2.2 | | | | | | | 2.6 | | (0.4) | (15.4%) |
| Current Ratio without Bond-related Assets & Liabilities | | 2.1 | | | | | | | 2.3 | | (0.2) | (8.7%) |
| Days in Accounts Receivable (Hospital only) | | 75.2 | | | | | | | 57.7 | | (17.5) | (30.3%) |

Capital Structure

| | | | | | | | | | | | | |
|-----------------------------|--|------|--|--|--|--|--|--|------|--|--------|---------|
| EBIDA Debt Service Coverage | | 0.08 | | | | | | | 0.70 | | (0.62) | (88.6%) |
|-----------------------------|--|------|--|--|--|--|--|--|------|--|--------|---------|

Profitability

| | | | | | | | | | | | | | | |
|------------------|---------|---------|------|-------|--|---------|---------|---------|--------|--|---------|---------|----------|--|
| Operating Margin | (27.5%) | (32.2%) | 4.7% | 14.6% | | (55.6%) | (25.5%) | (30.1%) | (118%) | | (24.3%) | (31.3%) | (128.8%) | |
|------------------|---------|---------|------|-------|--|---------|---------|---------|--------|--|---------|---------|----------|--|

Labor

| | | | | | | | | | | | | | | |
|----------------------|------|------|--------|--------|--|------|------|------|------|--|------|------|------|--|
| FTE/AOB WO Residents | 4.26 | 4.18 | (0.07) | (1.7%) | | 4.17 | 4.21 | 0.04 | 0.9% | | 4.40 | 0.23 | 5.2% | |
|----------------------|------|------|--------|--------|--|------|------|------|------|--|------|------|------|--|

| | Current Month | | | | Rolling Last Twelve Months | | | |
|--------------------------------|---------------|--------------|----------------|----------------|----------------------------|---------------|--------------|---------------|
| | Actual | Prior Year | Variance | Var % | Actual | Prior Year | Variance | Var % |
| Turnover Rate - Voluntary | 1.27% | 1.21% | (0.06%) | (4.96%) | 16.45% | 23.07% | 6.62% | 28.70% |
| Turnover Rate - Involuntary | 0.36% | 0.39% | 0.03% | 7.69% | 4.82% | 4.37% | (0.45%) | (10.30%) |
| Turnover Rate - Uncontrollable | 0.22% | 0.21% | (0.01%) | (4.76%) | 5.18% | 4.81% | (0.37%) | (7.69%) |
| Turnover Rate - Total | 1.85% | 1.82% | (0.03%) | (1.65%) | 26.45% | 32.24% | 5.79% | 17.96% |

Appendix A Definition of Financial Indicators

| Indicator | Definition | Desired Position Relative to | |
|---|--|---------------------------------|--------|
| | | Trend | Median |
| Total Days Cash on Hand | $= \frac{\text{Cash + Short-Term Investments}}{(\text{Operating Expenses Less - Depreciation}) / \text{YTD Days}}$ | Up | Above |
| Days in Accounts Receivable | $= \frac{\text{Net Patient Accounts Receivable (including Due/From)}}{\text{Net Patient Service Revenue / YTD Days}}$ | Down | Below |
| Cushion Ratio | $= \frac{\text{Cash + Short-Term Investments}}{\text{Principal + Interest Expenses}}$ | Up | Above |
| Cash to Debt | $= \frac{\text{Cash + Short-Term Investments}}{\text{Long Term Debt}} \times 100$ | Up | Above |
| EBITDA Debt Service Coverage | $= \frac{\text{EBITDA}}{\text{Principal + Interest Expenses}}$ | Up | Above |
| Debt to Net Assets | $= \frac{\text{Long Term Debt}}{\text{Long Term Debt + Unrestricted Assets}} \times 100$ | Down | Below |
| Operating Margin | $= \frac{\text{Operating Income (Loss)}}{\text{Operating Revenues}} \times 100$ | Up | Above |
| EBITDA Margin | $= \frac{\text{EBITDA}}{\text{Operating Revenues + Non Operating Revenues}} \times 100$ | Up | Above |
| Excess Margin | $= \frac{\text{Net Income}}{\text{Operating Revenues + Non Operating Revenues}} \times 100$ | Up | Above |
| Case Mix Index - Total Hospital | All discharged accounts. = Includes normal newborns (DRG 795). Includes discharges with a Behavioral Health patient type. | Up | Above |
| Case Mix Index - Acute (Excluding Newborns) | Discharged accounts. = 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 |
| Case Mix Index - Medicare | Discharged accounts with a financial class of Medicare or Medicare Managed Care. Excludes normal newborns (DRG 795). Excludes discharges with a Behavioral Health patient type. | Up | Above |
| Case Mix Index - AHCCCS | Discharged accounts with a financial class of AHCCCS or Maricopa Health Plan. Excludes normal newborns (DRG 795). Excludes discharges with a Behavioral Health patient type. | Up | Above |

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.



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

VOLUMES

For the Five Periods Ending November 30, 2023

| | Nov-23 Actual | Nov-23 Budget | Nov-23 Variance | Nov-23 % Change | Prior Year Same Month Nov-22 | Prior Year Same Month % Change | Nov-23 YTD Actual | Nov-23 YTD Budget | Nov-23 YTD Variance | YTD Nov-23 % Change | YTD Prior Year Nov-22 | YTD Prior Year % Change |
|--|------------------|------------------|--------------------|--------------------|------------------------------------|--------------------------------------|----------------------|----------------------|------------------------|---------------------------|-----------------------------|-------------------------------|
| ADMISSIONS | | | | | | | | | | | | |
| Acute | 1,034 | 893 | 141 | 15.8 % | 1,150 | (10.1 %) | 5,383 | 5,326 | 57 | 1.1 % | 5,527 | (2.6 %) |
| Behavioral Health | 383 | 375 | 8 | 2.1 % | 305 | 25.6 % | 1,838 | 1,903 | (65) | (3.4 %) | 1,628 | 12.9 % |
| Valleywise Behavioral Health Center-Phoenix | 67 | 86 | (19) | (22.1 %) | 45 | 48.9 % | 356 | 440 | (84) | (19.1 %) | 258 | 38.0 % |
| Valleywise Behavioral Health Center-Mesa | 172 | 148 | 24 | 16.2 % | 154 | 11.7 % | 747 | 746 | 1 | 0.1 % | 740 | 0.9 % |
| Valleywise Behavioral Health Center-Maryvale | 144 | 141 | 3 | 2.1 % | 106 | 35.8 % | 735 | 717 | 18 | 2.5 % | 630 | 16.7 % |
| Total | 1,417 | 1,268 | 149 | 11.8 % | 1,455 | (2.6 %) | 7,221 | 7,229 | (8) | (0.1 %) | 7,155 | 0.9 % |
| OBSERVATION ADMISSIONS | | | | | | | | | | | | |
| Transferred to Inpatient * | 190 | 221 | (31) | (14.0 %) | 241 | (21.2 %) | 1,046 | 1,105 | (59) | (5.3 %) | 1,095 | (4.5 %) |
| Observation Admission Only | 364 | 364 | 0 | 0.0 % | 370 | (1.6 %) | 1,928 | 1,820 | 108 | 5.9 % | 1,732 | 11.3 % |
| Total Observation Admissions | 554 | 585 | (31) | (5.3 %) | 611 | (9.3 %) | 2,974 | 2,925 | 49 | 1.7 % | 2,827 | 5.2 % |
| TOTAL ADMISSIONS AND OBSERVATION ONLY | | | | | | | | | | | | |
| Total | 1,781 | 1,632 | 149 | 9.1 % | 1,825 | (2.4 %) | 9,149 | 9,049 | 100 | 1.1 % | 8,887 | 2.9 % |
| ADJUSTED ADMISSIONS | | | | | | | | | | | | |
| Total | 2,882 | 2,409 | 473 | 19.6 % | 2,822 | 2.1 % | 14,448 | 13,578 | 870 | 6.4 % | 13,563 | 6.5 % |
| PATIENT DAYS | | | | | | | | | | | | |
| Acute | 5,662 | 5,630 | 32 | 0.6 % | 5,677 | (0.3 %) | 28,791 | 28,742 | 49 | 0.2 % | 28,975 | (0.6 %) |
| Behavioral Health | 8,536 | 8,772 | (236) | (2.7 %) | 7,740 | 10.3 % | 44,281 | 44,884 | (603) | (1.3 %) | 39,798 | 11.3 % |
| Valleywise Behavioral Health Center-Phoenix | 2,406 | 2,066 | 340 | 16.5 % | 1,691 | 42.3 % | 11,834 | 10,537 | 1,297 | 12.3 % | 8,519 | 38.9 % |
| Valleywise Behavioral Health Center-Mesa | 2,986 | 3,400 | (414) | (12.2 %) | 3,107 | (3.9 %) | 15,514 | 17,485 | (1,971) | (11.3 %) | 15,760 | (1.6 %) |
| Valleywise Behavioral Health Center-Maryvale | 3,144 | 3,306 | (162) | (4.9 %) | 2,942 | 6.9 % | 16,933 | 16,862 | 71 | 0.4 % | 15,519 | 9.1 % |
| Total | 14,198 | 14,402 | (204) | (1.4 %) | 13,417 | 5.8 % | 73,072 | 73,626 | (554) | (0.8 %) | 68,773 | 6.3 % |
| AVERAGE DAILY CENSUS | | | | | | | | | | | | |
| Acute | 189 | 188 | 1 | 0.6 % | 189 | (0.3 %) | 188 | 188 | 0 | 0.2 % | 189 | (0.6 %) |
| Behavioral Health | 285 | 292 | (8) | (2.7 %) | 258 | 10.3 % | 289 | 293 | (4) | (1.3 %) | 260 | 11.3 % |
| Valleywise Behavioral Health Center-Phoenix | 80 | 69 | 11 | 16.5 % | 56 | 42.3 % | 77 | 69 | 8 | 12.3 % | 56 | 38.9 % |
| Valleywise Behavioral Health Center-Mesa | 100 | 113 | (14) | (12.2 %) | 104 | (3.9 %) | 101 | 114 | (13) | (11.3 %) | 103 | (1.6 %) |
| Valleywise Behavioral Health Center-Maryvale | 105 | 110 | (5) | (4.9 %) | 98 | 6.9 % | 111 | 110 | 0 | 0.4 % | 101 | 9.1 % |
| Total | 473 | 480 | (7) | (1.4 %) | 447 | 5.8 % | 478 | 481 | (4) | (0.8 %) | 449 | 6.3 % |
| ADJUSTED PATIENT DAYS | | | | | | | | | | | | |
| Total | 28,874 | 27,361 | 1,512 | 5.5 % | 26,023 | 11.0 % | 146,203 | 138,290 | 7,913 | 5.7 % | 130,363 | 12.2 % |

* Already included in 'Acute Admissions'.



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

VOLUMES

For the Five Periods Ending November 30, 2023

| | Nov-23 Actual | Nov-23 Budget | Nov-23 Variance | Nov-23 % Change | Prior Year Same Month Nov-22 | Prior Year Same Month % Change | Nov-23 YTD Actual | Nov-23 YTD Budget | Nov-23 YTD Variance | Nov-23 YTD % Change | YTD Prior Year Nov-22 | YTD Prior Year % Change |
|--|------------------|------------------|--------------------|--------------------|------------------------------------|--------------------------------------|----------------------|----------------------|------------------------|------------------------|-----------------------------|-------------------------------|
| OPERATING ROOM SURGERIES - ROOSEVELT | | | | | | | | | | | | |
| Inpatient | 322 | 276 | 46 | 16.7 % | 356 | (9.6 %) | 1,772 | 1,746 | 26 | 1.5 % | 1,957 | (9.5 %) |
| Outpatient | 261 | 193 | 68 | 35.2 % | 250 | 4.4 % | 1,466 | 1,226 | 240 | 19.6 % | 1,326 | 10.6 % |
| Total | 583 | 469 | 114 | 24.3 % | 606 | (3.8 %) | 3,238 | 2,972 | 266 | 9.0 % | 3,283 | (1.4 %) |
| Inpatient Minutes | 43,980 | 33,977 | 10,003 | 29.4 % | 42,255 | 4.1 % | 225,090 | 215,186 | 9,904 | 4.6 % | 226,740 | (0.7 %) |
| Outpatient Minutes | 29,160 | 19,975 | 9,185 | 46.0 % | 26,820 | 8.7 % | 152,250 | 126,505 | 25,745 | 20.4 % | 142,665 | 6.7 % |
| Total | 73,140 | 53,952 | 19,188 | 35.6 % | 69,075 | 5.9 % | 377,340 | 341,691 | 35,649 | 10.4 % | 369,405 | 2.1 % |
| OPERATING ROOM SURGERIES - PEORIA | | | | | | | | | | | | |
| Outpatient | 80 | 85 | (5) | (5.9 %) | 43 | 86.0 % | 378 | 445 | (67) | (15.1 %) | 186 | 103.2 % |
| Outpatient Minutes | 4,965 | 3,898 | 1,067 | 27.4 % | 3,945 | 25.9 % | 28,155 | 23,647 | 4,508 | 19.1 % | 17,175 | 63.9 % |
| ENDOSCOPY PROCEDURES - ROOSEVELT | | | | | | | | | | | | |
| Inpatient | 88 | 96 | (8) | (8.1 %) | 81 | 8.6 % | 401 | 479 | (78) | (16.2 %) | 439 | (8.7 %) |
| Outpatient | 160 | 213 | (53) | (24.7 %) | 184 | (13.0 %) | 956 | 1,063 | (107) | (10.1 %) | 999 | (4.3 %) |
| Total | 248 | 308 | (60) | (19.6 %) | 265 | (6.4 %) | 1,357 | 1,542 | (185) | (12.0 %) | 1,438 | (5.6 %) |
| ENDOSCOPY PROCEDURES - PEORIA | | | | | | | | | | | | |
| Outpatient | 115 | 76 | 39 | 50.4 % | 129 | (10.9 %) | 546 | 484 | 62 | 12.8 % | 604 | (9.6 %) |
| DELIVERIES | | | | | | | | | | | | |
| Total | 138 | 211 | (73) | (34.6 %) | 231 | (40.3 %) | 876 | 1,055 | (179) | (17.0 %) | 1,052 | (16.7 %) |
| ED VISITS | | | | | | | | | | | | |
| Roosevelt | 5,352 | 5,097 | 255 | 5.0 % | 5,534 | (3.3 %) | 26,459 | 25,295 | 1,164 | 4.6 % | 25,281 | 4.7 % |
| Maryvale | 3,214 | 3,267 | (53) | (1.6 %) | 3,373 | (4.7 %) | 15,539 | 14,478 | 1,061 | 7.3 % | 14,879 | 4.4 % |
| Labor & Delivery | 326 | 361 | (35) | (9.7 %) | 394 | (17.3 %) | 1,786 | 1,789 | (3) | (0.2 %) | 1,780 | 0.3 % |
| Burn | 189 | 239 | (50) | (20.9 %) | 204 | (7.4 %) | 1,137 | 1,196 | (59) | (4.9 %) | 1,211 | (6.1 %) |
| Total | 9,081 | 8,964 | 117 | 1.3 % | 9,505 | (4.5 %) | 44,921 | 42,758 | 2,163 | 5.1 % | 43,151 | 4.1 % |
| AMBULATORY VISITS | | | | | | | | | | | | |
| Valleywise Community Health Centers | 13,191 | 14,135 | (944) | (6.7 %) | 13,804 | (4.4 %) | 67,087 | 67,304 | (217) | (0.3 %) | 72,385 | (7.3 %) |
| Valleywise Comprehensive Health Center-Phoenix | 12,206 | 12,071 | 135 | 1.1 % | 12,147 | 0.5 % | 63,506 | 61,348 | 2,158 | 3.5 % | 61,331 | 3.5 % |
| Valleywise Comprehensive Health Center-Peoria | 3,252 | 3,073 | 179 | 5.8 % | 3,286 | (1.0 %) | 15,443 | 15,884 | (441) | (2.8 %) | 16,044 | (3.7 %) |
| Outpatient Behavioral Health | 6,561 | 5,899 | 662 | 11.2 % | 5,190 | 26.4 % | 33,477 | 29,537 | 3,940 | 13.3 % | 28,178 | 18.8 % |
| Dental | 1,969 | 1,874 | 95 | 5.1 % | 1,834 | 7.4 % | 9,835 | 9,717 | 118 | 1.2 % | 9,550 | 3.0 % |
| Total | 37,179 | 37,052 | 127 | 0.3 % | 36,261 | 2.5 % | 189,348 | 183,790 | 5,558 | 3.0 % | 187,488 | 1.0 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

FINANCIAL INDICATORS

For the Period Ending November 30, 2023

| | Nov-23 Actual | Nov-23 Budget | Nov-23 Variance | Nov-23 % Change | Prior Year Same Month Nov-22 | Prior Year Same Month Variance | Prior Year Same Month % Change |
|--|--------------------------|--------------------------|----------------------------|----------------------------|---|---|---|
| Net Patient Service Revenue per APD | \$ 1,228 | \$ 1,484 | (\$ 256) | (17.2 %) | \$ 1,475 | (\$ 247) | (16.8 %) |
| Salaries | \$ 27,316,552 | \$ 24,801,081 | (\$ 2,515,471) | (10.1 %) | \$ 23,817,079 | (\$ 3,499,474) | (14.7 %) |
| Benefits | 7,050,395 | 7,340,467 | 290,072 | 4.0 % | 6,870,374 | (180,021) | (2.6 %) |
| Contract Labor | 5,794,415 | 6,045,863 | 251,448 | 4.2 % | 6,860,169 | 1,065,754 | 15.5 % |
| Total Labor Costs | \$ 40,161,362 | \$ 38,187,412 | (\$ 1,973,951) | (5.2 %) | \$ 37,547,621 | (\$ 2,613,741) | (7.0 %) |
| Supplies | \$ 9,481,045 | \$ 7,669,396 | (\$ 1,811,648) | (23.6 %) | \$ 9,181,739 | (\$ 299,306) | (3.3 %) |
| Medical Service Fees | 9,007,030 | 9,670,925 | 663,895 | 6.9 % | 8,968,428 | (38,601) | (0.4 %) |
| All Other * | 10,227,951 | 11,966,315 | 1,738,364 | 14.5 % | 13,955,534 | 3,727,583 | 26.7 % |
| Total | \$ 28,716,025 | \$ 29,306,636 | \$ 590,611 | 2.0 % | \$ 32,105,701 | \$ 3,389,676 | 10.6 % |
| Total Operating and Non-Operating Expenses * | \$ 68,877,388 | \$ 67,494,047 | (\$ 1,383,340) | (2.0 %) | \$ 69,653,323 | \$ 775,935 | 1.1 % |
| <small>* Excludes Depreciation</small> | | | | | | | |
| Tax Levy | | | | | | | |
| Property Tax | \$ 8,018,745 | \$ 8,018,745 | \$ 0 | 0.0 % | \$ 8,397,165 | (\$ 378,420) | (4.5 %) |
| Bonds | 4,433,605 | 4,433,605 | 0 | 0.0 % | 3,386,255 | 1,047,350 | 30.9 % |
| Total Tax Levy | \$ 12,452,350 | \$ 12,452,350 | \$ 0 | 0.0 % | \$ 11,783,420 | \$ 668,931 | 5.7 % |
| Patient Days - Acute | 5,662 | 5,630 | 32 | 0.6 % | 5,677 | (15) | (0.3 %) |
| Patient Days - Behavioral Health | 8,536 | 8,772 | (236) | (2.7 %) | 7,740 | 796 | 10.3 % |
| Patient Days - Total | 14,198 | 14,402 | (204) | (1.4 %) | 13,417 | 781 | 5.8 % |
| Adjusted Patient Days | 28,874 | 27,361 | 1,512 | 5.5 % | 26,023 | 2,851 | 11.0 % |
| APD Ratio | 2.03 | 1.90 | 0.13 | 7.0 % | 1.94 | 0.09 | 4.9 % |
| Admissions - Acute | 1,034 | 893 | 141 | 15.8 % | 1,150 | (116) | (10.1 %) |
| Admissions - Behavioral Health | 383 | 375 | 8 | 2.1 % | 305 | 78 | 25.6 % |
| Admissions - Total | 1,417 | 1,268 | 149 | 11.8 % | 1,455 | (38) | (2.6 %) |
| Adjusted Admissions | 2,882 | 2,409 | 473 | 19.6 % | 2,822 | 60 | 2.1 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

FINANCIAL INDICATORS

For the Period Ending November 30, 2023

| | Nov-23 Actual | Nov-23 Budget | Nov-23 Variance | Nov-23 % Change | Prior Year Same Month Nov-22 | Prior Year Same Month Variance | Prior Year Same Month % Change |
|--|--------------------------|--------------------------|----------------------------|----------------------------|---|---|---|
| Average Daily Census - Acute | 189 | 188 | 1 | 0.6 % | 189 | (1) | (0.3 %) |
| Average Daily Census - Behavioral Health | 285 | 292 | (8) | (2.7 %) | 258 | 27 | 10.3 % |
| Average Daily Census - Total | 473 | 480 | (7) | (1.4 %) | 447 | 26 | 5.8 % |
| Adjusted Occupied Beds - Acute | 384 | 357 | 27 | 7.7 % | 367 | 17 | 4.6 % |
| Adjusted Occupied Beds - Behavioral Health | 579 | 556 | 23 | 4.2 % | 500 | 78 | 15.6 % |
| Adjusted Occupied Beds - Total | 962 | 912 | 50 | 5.5 % | 867 | 95 | 11.0 % |
| Paid FTEs - Payroll | 3,832 | 3,553 | (279) | (7.9 %) | 3,523 | (310) | (8.8 %) |
| Paid FTEs - Contract Labor | 461 | 465 | 4 | 0.8 % | 518 | 56 | 10.9 % |
| Paid FTEs - Total | 4,294 | 4,018 | (275) | (6.9 %) | 4,040 | (253) | (6.3 %) |
| FTEs per AOB | 4.46 | 4.41 | (0.06) | (1.3 %) | 4.66 | 0.20 | 4.2 % |
| FTEs per AOB (w/o Residents) | 4.26 | 4.18 | (0.07) | (1.7 %) | 4.44 | 0.19 | 4.2 % |
| Benefits as a % of Salaries | 25.8 % | 29.6 % | 3.8 % | 12.8 % | 28.8 % | 3.0 % | 10.5 % |
| Labor Costs as a % of Net Patient Revenue | 113.3 % | 94.1 % | (19.2 %) | (20.4 %) | 97.8 % | (15.5 %) | (15.8 %) |
| Salaries and Contract Labor per APD | \$ 1,147 | \$ 1,127 | (\$ 19) | (1.7 %) | \$ 1,179 | \$ 32 | 2.7 % |
| Benefits per APD | 244 | 268 | 24 | 9.0 % | 264 | 20 | 7.5 % |
| Supplies per APD | 328 | 280 | (48) | (17.1 %) | 353 | 24 | 6.9 % |
| Medical Service Fees per APD | 312 | 353 | 42 | 11.7 % | 345 | 33 | 9.5 % |
| All Other Expenses per APD * | 354 | 437 | 83 | 19.0 % | 536 | 182 | 33.9 % |
| Total Expenses per APD * | \$ 2,385 | \$ 2,467 | \$ 81 | 3.3 % | \$ 2,677 | \$ 291 | 10.9 % |
| Salaries and Contract Labor per Adj. Admission | \$ 11,490 | \$ 12,805 | \$ 1,315 | 10.3 % | \$ 10,871 | (\$ 620) | (5.7 %) |
| Benefits per Adj. Admission | 2,447 | 3,047 | 600 | 19.7 % | 2,435 | (12) | (0.5 %) |
| Supplies per Adj. Admission | 3,290 | 3,184 | (106) | (3.3 %) | 3,254 | (37) | (1.1 %) |
| Medical Service Fees per Adj. Admission | 3,126 | 4,015 | 889 | 22.1 % | 3,178 | 52 | 1.6 % |
| All Other Expenses per Adj. Admission * | 3,549 | 4,967 | 1,418 | 28.5 % | 4,945 | 1,396 | 28.2 % |
| Total Expenses per Adj. Admission * | \$ 23,902 | \$ 28,018 | \$ 4,116 | 14.7 % | \$ 24,682 | \$ 780 | 3.2 % |

* Excludes Depreciation



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

FINANCIAL INDICATORS

For the Five Periods Ending November 30, 2023

| | Nov-23 YTD Actual | Nov-23 YTD Budget | Nov-23 YTD Variance | YTD Nov-23 % Change | YTD Prior Year Nov-22 | YTD Prior Year Variance | YTD Prior Year % Change |
|--|----------------------|----------------------|------------------------|---------------------------|-----------------------------|-------------------------------|-------------------------------|
| Net Patient Service Revenue per APD | \$ 1,466 | \$ 1,577 | (\$ 111) | (7.1 %) | \$ 1,587 | (\$ 122) | (7.7 %) |
| Salaries | \$ 135,153,555 | \$ 126,143,307 | (\$ 9,010,248) | (7.1 %) | \$ 121,729,907 | (\$ 13,423,647) | (11.0 %) |
| Benefits | 40,568,965 | 37,435,107 | (3,133,858) | (8.4 %) | 35,747,869 | (4,821,096) | (13.5 %) |
| Contract Labor | 31,270,636 | 33,414,249 | 2,143,613 | 6.4 % | 34,605,547 | 3,334,912 | 9.6 % |
| Total Labor Costs | \$ 206,993,156 | \$ 196,992,663 | (\$ 10,000,493) | (5.1 %) | \$ 192,083,324 | (\$ 14,909,832) | (7.8 %) |
| Supplies | \$ 48,436,001 | \$ 40,644,014 | (\$ 7,791,987) | (19.2 %) | \$ 39,674,859 | (\$ 8,761,142) | (22.1 %) |
| Medical Service Fees | 39,278,411 | 47,596,647 | 8,318,236 | 17.5 % | 42,973,410 | 3,694,998 | 8.6 % |
| All Other * | 60,800,148 | 61,360,494 | 560,346 | 0.9 % | 70,399,172 | 9,599,024 | 13.6 % |
| Total | \$ 148,514,560 | \$ 149,601,155 | \$ 1,086,595 | 0.7 % | \$ 153,047,441 | \$ 4,532,881 | 3.0 % |
| Total Operating and Non-Operating Expenses * | \$ 355,507,716 | \$ 346,593,819 | (\$ 8,913,898) | (2.6 %) | \$ 345,130,765 | (\$ 10,376,951) | (3.0 %) |
| * Excludes Depreciation | | | | | | | |
| Tax Levy | | | | | | | |
| Property Tax | \$ 40,093,727 | \$ 40,093,727 | \$ 0 | 0.0 % | \$ 39,090,928 | \$ 1,002,800 | 2.6 % |
| Bonds | 22,168,025 | 22,168,025 | 0 | 0.0 % | 15,763,844 | 6,404,181 | 40.6 % |
| Total Tax Levy | \$ 62,261,752 | \$ 62,261,752 | \$ 0 | 0.0 % | \$ 54,854,772 | \$ 7,406,981 | 13.5 % |
| Patient Days - Acute | 28,791 | 28,742 | 49 | 0.2 % | 28,975 | (184) | (0.6 %) |
| Patient Days - Behavioral Health | 44,281 | 44,884 | (603) | (1.3 %) | 39,798 | 4,483 | 11.3 % |
| Patient Days - Total | 73,072 | 73,626 | (554) | (0.8 %) | 68,773 | 4,299 | 6.3 % |
| Adjusted Patient Days | 146,203 | 138,290 | 7,913 | 5.7 % | 130,363 | 15,840 | 12.2 % |
| APD Ratio | 2.00 | 1.88 | 0.12 | 6.5 % | 1.90 | 0.11 | 5.6 % |
| Admissions - Acute | 5,383 | 5,326 | 57 | 1.1 % | 5,527 | (144) | (2.6 %) |
| Admissions - Behavioral Health | 1,838 | 1,903 | (65) | (3.4 %) | 1,628 | 210 | 12.9 % |
| Admissions - Total | 7,221 | 7,229 | (8) | (0.1 %) | 7,155 | 66 | 0.9 % |
| Adjusted Admissions | 14,448 | 13,578 | 870 | 6.4 % | 13,563 | 885 | 6.5 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

FINANCIAL INDICATORS

For the Five Periods Ending November 30, 2023

| | Nov-23 YTD Actual | Nov-23 YTD Budget | Nov-23 YTD Variance | YTD Nov-23 % Change | YTD Prior Year Nov-22 | YTD Prior Year Variance | YTD Prior Year % Change |
|--|----------------------|----------------------|------------------------|---------------------------|-----------------------------|-------------------------------|-------------------------------|
| Average Daily Census - Acute | 188 | 188 | 0 | 0.2 % | 189 | (1) | (0.6 %) |
| Average Daily Census - Behavioral Health | 289 | 293 | (4) | (1.3 %) | 260 | 29 | 11.3 % |
| Average Daily Census - Total | 478 | 481 | (4) | (0.8 %) | 449 | 28 | 6.3 % |
| Adjusted Occupied Beds - Acute | 377 | 353 | 24 | 6.7 % | 359 | 18 | 4.9 % |
| Adjusted Occupied Beds - Behavioral Health | 579 | 551 | 28 | 5.1 % | 493 | 86 | 17.4 % |
| Adjusted Occupied Beds - Total | 956 | 904 | 52 | 5.7 % | 852 | 104 | 12.2 % |
| Paid FTEs - Payroll | 3,712 | 3,510 | (202) | (5.8 %) | 3,448 | (264) | (7.7 %) |
| Paid FTEs - Contract Labor | 468 | 494 | 26 | 5.3 % | 487 | 19 | 3.9 % |
| Paid FTEs - Total | 4,180 | 4,004 | (176) | (4.4 %) | 3,935 | (245) | (6.2 %) |
| FTEs per AOB | 4.37 | 4.43 | 0.06 | 1.3 % | 4.62 | 0.24 | 5.3 % |
| FTEs per AOB (w/o Residents) | 4.17 | 4.21 | 0.04 | 0.9 % | 4.40 | 0.23 | 5.2 % |
| Benefits as a % of Salaries | 30.0 % | 29.7 % | (0.3 %) | (1.1 %) | 29.4 % | (0.7 %) | (2.2 %) |
| Labor Costs as a % of Net Patient Revenue | 96.6 % | 90.3 % | (6.3 %) | (6.9 %) | 92.8 % | (3.8 %) | (4.1 %) |
| Salaries and Contract Labor per APD | \$ 1,138 | \$ 1,154 | \$ 15 | 1.3 % | \$ 1,199 | \$ 61 | 5.1 % |
| Benefits per APD | 277 | 271 | (7) | (2.5 %) | 274 | (3) | (1.2 %) |
| Supplies per APD | 331 | 294 | (37) | (12.7 %) | 304 | (27) | (8.9 %) |
| Medical Service Fees per APD | 269 | 344 | 76 | 21.9 % | 330 | 61 | 18.5 % |
| All Other Expenses per APD * | 416 | 444 | 28 | 6.3 % | 540 | 124 | 23.0 % |
| Total Expenses per APD * | \$ 2,432 | \$ 2,506 | \$ 75 | 3.0 % | \$ 2,647 | \$ 216 | 8.2 % |
| Salaries and Contract Labor per Adj. Admission | \$ 11,519 | \$ 11,751 | \$ 232 | 2.0 % | \$ 11,527 | \$ 8 | 0.1 % |
| Benefits per Adj. Admission | 2,808 | 2,757 | (51) | (1.8 %) | 2,636 | (172) | (6.5 %) |
| Supplies per Adj. Admission | 3,352 | 2,993 | (359) | (12.0 %) | 2,925 | (427) | (14.6 %) |
| Medical Service Fees per Adj. Admission | 2,719 | 3,505 | 787 | 22.4 % | 3,169 | 450 | 14.2 % |
| All Other Expenses per Adj. Admission * | 4,208 | 4,519 | 311 | 6.9 % | 5,191 | 982 | 18.9 % |
| Total Expenses per Adj. Admission * | \$ 24,606 | \$ 25,526 | \$ 920 | 3.6 % | \$ 25,447 | \$ 841 | 3.3 % |

* Excludes Depreciation

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending November 30, 2023**

OPERATING REVENUE

Patient Days, Admissions and Adjusted Patient Days

| <i>Acute Care</i> | Actual | Budget | Variance | %Variance |
|--------------------|--------|--------|----------|-----------|
| MTD - Patient Days | 5,662 | 5,630 | 32 | 0.6% |
| YTD - Patient Days | 28,791 | 28,742 | 49 | 0.2% |

| | | | | |
|------------------|-------|-------|-----|-------|
| MTD - Admissions | 1,034 | 893 | 141 | 15.8% |
| YTD - Admissions | 5,383 | 5,326 | 57 | 1.1% |

| | | | | |
|-------------------------------------|-----|-----|-----|-------|
| MTD - Average Length of Stay (ALOS) | 5.5 | 6.3 | 0.8 | 13.1% |
| YTD - Average Length of Stay (ALOS) | 5.3 | 5.4 | 0.0 | 0.9% |

| | | | | |
|----------------------------------|-----|-----|---|------|
| MTD - Average Daily Census (ADC) | 189 | 188 | 1 | 0.6% |
| YTD - Average Daily Census (ADC) | 188 | 188 | 0 | 0.2% |

| <i>Behavioral Health</i> | Actual | Budget | Variance | %Variance |
|--------------------------|--------|--------|----------|-----------|
| MTD - Patient Days | 8,536 | 8,772 | (236) | -2.7% |
| YTD - Patient Days | 44,281 | 44,884 | (603) | -1.3% |

| | | | | |
|------------------|-------|-------|------|-------|
| MTD - Admissions | 383 | 375 | 8 | 2.1% |
| YTD - Admissions | 1,838 | 1,903 | (65) | -3.4% |

| | | | | |
|-------------------------------------|------|------|-------|-------|
| MTD - Average Length of Stay (ALOS) | 22.3 | 23.4 | 1.1 | 4.7% |
| YTD - Average Length of Stay (ALOS) | 24.1 | 23.6 | (0.5) | -2.1% |

| | | | | |
|----------------------------------|-----|-----|-----|-------|
| MTD - Average Daily Census (ADC) | 285 | 292 | (8) | -2.7% |
| YTD - Average Daily Census (ADC) | 289 | 293 | (4) | -1.2% |

| <i>Adjusted Patient Days (APD)</i> | Actual | Budget | Variance | %Variance |
|------------------------------------|---------|---------|----------|-----------|
| Month-to-Date | 28,874 | 27,361 | 1,512 | 5.5% |
| Year-to-Date | 146,203 | 138,290 | 7,913 | 5.7% |

Net patient service revenue

| | Actual | Budget | Variance | %Variance |
|-----------------------|----------------|----------------|----------------|-----------|
| Month-to-Date | \$ 35,452,195 | \$ 40,598,075 | \$ (5,145,880) | -12.7% |
| Year-to-Date | \$ 214,282,515 | \$ 218,061,862 | \$ (3,779,347) | -1.7% |
| Month-to-Date Per APD | \$ 1,228 | \$ 1,484 | \$ (256) | -17.2% |
| Year-to-Date Per APD | \$ 1,466 | \$ 1,577 | \$ (111) | -7.1% |

Other operating revenue

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|---------------|-----------|
| Month-to-Date | \$ 18,036,771 | \$ 12,978,555 | \$ 5,058,216 | 39.0% |
| Year-to-Date | \$ 75,562,722 | \$ 65,069,563 | \$ 10,493,159 | 16.1% |

The majority of the positive variances for the month are in 340(b) program, Health II, value-based and other incentives, retail pharmacies revenues, and offsetting revenue grants/research.

Total operating revenues

| | Actual | Budget | Variance | %Variance |
|---------------|----------------|----------------|--------------|-----------|
| Month-to-Date | \$ 53,488,965 | \$ 53,576,629 | \$ (87,664) | -0.2% |
| Year-to-Date | \$ 289,845,237 | \$ 283,131,425 | \$ 6,713,812 | 2.4% |

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending November 30, 2023**

OPERATING EXPENSES

Salaries and wages

| | Actual | Budget | Variance | %Variance |
|---------------|----------------|----------------|----------------|-----------|
| Month-to-Date | \$ 27,316,552 | \$ 24,801,081 | \$ (2,515,471) | -10.1% |
| Year-to-Date | \$ 135,153,555 | \$ 126,143,307 | \$ (9,010,248) | -7.1% |

| | Actual | Budget | Variance | %Variance |
|-----------------------------|--------|--------|----------|-----------|
| <i>Paid FTE's - Payroll</i> | 3,832 | 3,553 | (279) | -7.9% |

| | Actual | Budget | Variance | %Variance |
|---|--------|--------|----------|-----------|
| <i>Paid FTE's - Payroll (w/o Residents)</i> | 3,830 | 3,549 | (280) | -7.9% |

| | Actual | Budget | Variance | %Variance |
|-------------------------------------|----------|----------|----------|-----------|
| <i>Salaries per FTE's - Payroll</i> | \$ 7,128 | \$ 6,979 | \$ (148) | -2.1% |

Contract labor

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 5,794,415 | \$ 6,045,863 | \$ 251,448 | 4.2% |
| Year-to-Date | \$ 31,270,636 | \$ 33,414,249 | \$ 2,143,613 | 6.4% |

| | Actual | Budget | Variance | %Variance |
|--|--------|--------|----------|-----------|
| <i>FTE's - Contract Labor incl Outsource</i> | 461 | 465 | 4 | 0.9% |

| | Actual | Budget | Variance | %Variance |
|-------------------------------|--------|--------|----------|-----------|
| <i>FTE's - Contract Labor</i> | | | | |
| Nursing operations - Acute | 151 | 149 | (2) | -1.3% |
| Revenue Cycle | - | - | - | -100.0% |
| Behavioral Health | 36 | 33 | (4) | -12.3% |
| Information Technology | - | - | - | -100.0% |
| Support Services | 12 | 11 | (1) | -9.1% |
| Interns & Residents | 198 | 202 | 4 | 2.0% |

| | Actual | Budget | Variance | %Variance |
|--|--------|--------|----------|-----------|
| <i>Paid FTE's - Payroll & Contract Labor</i> | 4,294 | 4,018 | (275) | -6.9% |

| | Actual | Budget | Variance | %Variance |
|-------------------------------------|--------|--------|----------|-----------|
| <i>Adjusted Occupied Beds (AOB)</i> | 962 | 912 | 50 | 5.5% |

| | Actual | Budget | Variance | %Variance |
|---------------------------|--------|--------|----------|-----------|
| <i>Paid FTE's per AOB</i> | 4.46 | 4.41 | (0.06) | -1.3% |

| | Actual | Budget | Variance | %Variance |
|---|--------|--------|----------|-----------|
| <i>Paid FTE's per AOB (w/o Residents)</i> | 4.25 | 4.18 | (0.07) | -1.7% |

Employee benefits

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|----------------|-----------|
| Month-to-Date | \$ 7,050,395 | \$ 7,340,467 | \$ 290,072 | 4.0% |
| Year-to-Date | \$ 40,568,965 | \$ 37,435,107 | \$ (3,133,858) | -8.4% |

The primary positive variances for the month are in the net medical expenses, and the paid leave accrual; while the primary negative variances for the month are in ASRS expenses and taxes.

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending November 30, 2023**

Benefits as a % of salaries

| | Actual | Budget | Variance | %Variance |
|---------------|--------|--------|----------|-----------|
| Month-to-Date | 25.8% | 29.6% | 3.8% | 12.8% |
| Year-to-Date | 30.0% | 29.7% | -0.3% | -1.1% |

Medical service fees

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 9,007,030 | \$ 9,670,925 | \$ 663,895 | 6.9% |
| Year-to-Date | \$ 39,278,411 | \$ 47,596,647 | \$ 8,318,236 | 17.5% |

The majority of the positive variance for the month is due to a completed reconciliation related to prior year programs with DMG. Additional reconciliations are still on-going.

Supplies

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|----------------|-----------|
| Month-to-Date | \$ 9,481,045 | \$ 7,669,396 | \$ (1,811,648) | -23.6% |
| Year-to-Date | \$ 48,436,001 | \$ 40,644,014 | \$ (7,791,987) | -19.2% |

The negative variances for the month are primarily in pharmaceuticals, surgery related medical supplies (implants), and laboratory supplies; while majority of the positive variances for the month is primarily in GPO rebates.

Purchased services

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 4,863,278 | \$ 4,716,218 | \$ (147,060) | -3.1% |
| Year-to-Date | \$ 23,989,517 | \$ 23,707,896 | \$ (281,621) | -1.2% |

The major negative variances for the month are in other services, management fees, advertising services and attorney/legal fees; while the major positive variances for the month are in laundry & dry cleaning services, consulting & management fees, and other professional services.

Other expenses

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|----------------|-----------|
| Month-to-Date | \$ 6,122,705 | \$ 5,112,072 | \$ (1,010,632) | -19.8% |
| Year-to-Date | \$ 28,578,501 | \$ 26,513,238 | \$ (2,065,263) | -7.8% |

The major negative variances for the month are in repairs & maintenance, risk management expenses, rent expense, utilities, and organization memberships. The major positive variances for the month are in other miscellaneous expenses, and patient transport services.

Depreciation

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 4,535,881 | \$ 4,535,881 | \$ (0) | 0.0% |
| Year-to-Date | \$ 17,911,582 | \$ 22,447,463 | \$ 4,535,881 | 20.2% |

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending November 30, 2023**

Total operating expenses

| | Actual | Budget | Variance | %Variance |
|---------------|----------------|----------------|----------------|-----------|
| Month-to-Date | \$ 74,171,300 | \$ 69,891,904 | \$ (4,279,396) | -6.1% |
| Year-to-Date | \$ 365,187,169 | \$ 357,901,921 | \$ (7,285,248) | -2.0% |

Operating income (loss)

| | Actual | Budget | Variance | %Variance |
|---------------|-----------------|-----------------|----------------|-----------|
| Month-to-Date | \$ (20,682,334) | \$ (16,315,274) | \$ (4,367,060) | -26.8% |
| Year-to-Date | \$ (75,341,931) | \$ (74,770,495) | \$ (571,436) | -0.8% |

Non-operating revenues (expenses)

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 15,020,689 | \$ 11,662,580 | \$ 3,358,109 | 28.8% |
| Year-to-Date | \$ 65,104,141 | \$ 59,841,579 | \$ 5,262,562 | 8.8% |

The major positive variances for the month are in prior year true-up related to local match expenses, and investment income.

Excess of revenues over expenses

| | Actual | Budget | Variance | %Variance |
|---------------|-----------------|-----------------|----------------|-----------|
| Month-to-Date | \$ (5,661,645) | \$ (4,652,695) | \$ (1,008,951) | 21.7% |
| Year-to-Date | \$ (10,237,790) | \$ (14,928,917) | \$ 4,691,127 | -31.4% |

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending November 30, 2023**

ASSETS

Cash and cash equivalents - Delivery system

| Nov-23 | Jun-23 | Change | % change |
|----------------|----------------|-----------------|----------|
| \$ 177,211,699 | \$ 241,214,127 | \$ (64,002,428) | -26.5% |

Cash and cash equivalents - Bond (restricted)

| Nov-23 | Jun-23 | Change | % change |
|----------------|----------------|-----------------|----------|
| \$ 111,252,371 | \$ 166,504,192 | \$ (55,251,821) | -33.2% |

Paid \$40.7M in principal and interest in July 2023 related to the 3rd and 4th bond offerings.

Patient A/R, net of allowances

| Nov-23 | Jun-23 | Change | % change |
|---------------|---------------|--------------|----------|
| \$ 94,874,904 | \$ 85,709,368 | \$ 9,165,536 | 10.7% |

Other receivables and prepaid items

| Nov-23 | Jun-23 | Change | % change |
|---------------|---------------|---------------|----------|
| \$ 58,230,977 | \$ 42,225,086 | \$ 16,005,891 | 37.9% |

FY24 other receivables / prepaids includes:

| | |
|---|---|
| <ul style="list-style-type: none"> \$17.5M in prepaids/deposits \$12.2M in inventories \$10.1M receivables from grants & research sponsors \$6.4M in Health II \$5.2M due from Wellpartner/340B program \$2.2M due from other receivables | <ul style="list-style-type: none"> \$1.9M in retail pharmacy receivable \$1.5M in Psych subsidy \$603K due from Home Assist Health \$536K due from other hospital - resident rotation \$94K due from Health Foundation |
|---|---|

Estimated amounts due from third party payors

| Nov-23 | Jun-23 | Change | % change |
|---------------|---------------|---------------|----------|
| \$ 74,047,472 | \$ 50,640,640 | \$ 23,406,833 | 46.2% |

FY24 due from third party payors includes:

| | |
|--|--|
| <ul style="list-style-type: none"> \$72.0M due from AHCCCS for GME - FY2 \$1.8M due from AHCCCS for DSH - FY20 | <ul style="list-style-type: none"> \$331K due from First Things First |
|--|--|

Due from related parties

| Nov-23 | Jun-23 | Change | % change |
|--------------|--------------|----------------|----------|
| \$ 1,100,071 | \$ 3,376,279 | \$ (2,276,208) | -67.4% |

FY24 due from related parties includes:

- \$1.1M due from Public Health Ryan White Part A programs

Other Current Assets

| Nov-23 | Jun-23 | Change | % change |
|--------------|--------------|--------|----------|
| \$ 2,516,402 | \$ 2,516,402 | \$ - | 0.0% |

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending November 30, 2023**

Capital Assets, net

| Nov-23 | Jun-23 | Change | % change |
|----------------|----------------|---------------|----------|
| \$ 810,183,937 | \$ 796,596,154 | \$ 13,587,783 | 1.7% |

Other Assets

| Nov-23 | Jun-23 | Change | % change |
|--------------|--------------|--------|----------|
| \$ 5,005,017 | \$ 5,005,017 | - | 0.0% |

Deferred outflows

| Nov-23 | Jun-23 | Change | % change |
|---------------|---------------|--------|----------|
| \$ 56,462,313 | \$ 56,462,313 | - | 0.0% |

LIABILITIES AND NET POSITION

Current maturities of long-term debt

| Nov-23 | Jun-23 | Change | % change |
|---------------|---------------|------------|----------|
| \$ 44,183,944 | \$ 43,216,702 | \$ 967,242 | 2.2% |

FY24 current maturities includes:

\$41.7M in Bond current portion and interest payable

\$2.5M in current portion - Lease Liability

Accounts payable

| Nov-23 | Jun-23 | Change | % change |
|---------------|---------------|-----------------|----------|
| \$ 61,404,110 | \$ 75,381,153 | \$ (13,977,043) | -18.5% |

FY24 accounts payable includes:

\$33.2M in vendor related expense accruals/estimates

\$7.2M due to DMG for annual recon and pass thru payments

\$21.0M in vendor approved payments

Accrued payroll and expenses

| Nov-23 | Jun-23 | Change | % change |
|---------------|---------------|------------|----------|
| \$ 28,743,894 | \$ 28,158,703 | \$ 585,191 | 2.1% |

Medical claims payable

| Nov-23 | Jun-23 | Change | % change |
|---------------|---------------|--------------|----------|
| \$ 18,139,726 | \$ 18,892,539 | \$ (752,813) | -4.0% |

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending November 30, 2023**

Due to related parties

| Nov-23 | Jun-23 | Change | % change |
|---------------|----------|---------------|------------|
| \$ 14,342,824 | \$ 1,434 | \$ 14,341,390 | 1000208.6% |

Timing of tax levy revenue accrual and actual collection received.

Other current liabilities

| Nov-23 | Jun-23 | Change | % change |
|---------------|---------------|-----------------|----------|
| \$ 69,639,643 | \$ 80,724,270 | \$ (11,084,627) | -13.7% |

FY24 other current liabilities includes:

\$25.8M in deferred income (Health Foundation)
\$15.9M in deferred income (MC ARPA)
\$6.8M in deferred income (FQHC)
\$6.2M in patient credit balances
\$5.5M in settlement reserved for Medicare

\$4.8M in other deferred income (TIP, Optum, APSI)
\$3.0M in deferred income for grants, research, & study residuals
\$964K in capitation payments
\$427K in unclaimed/stale dated checks
\$260K in other deferred income (Target distribution/High impact areas)

Bonds payable

| Nov-23 | Jun-23 | Change | % change |
|----------------|----------------|-----------------|----------|
| \$ 606,076,197 | \$ 640,746,278 | \$ (34,670,082) | -5.4% |

Reclassified current maturities portion of Bond payable

Other long-term debt

| Nov-23 | Jun-23 | Change | % change |
|--------------|--------------|--------|----------|
| \$ 5,005,017 | \$ 5,005,017 | \$ - | 0.0% |

Long-term portion of lease liability

Long-term liabilities

| Nov-23 | Jun-23 | Change | % change |
|----------------|----------------|--------|----------|
| \$ 356,444,644 | \$ 356,444,644 | \$ - | 0.0% |

Pension liability per ASRS report - GASB68

Deferred inflows

| Nov-23 | Jun-23 | Change | % change |
|---------------|---------------|--------|----------|
| \$ 18,778,412 | \$ 18,778,412 | \$ - | 0.0% |

Net position

| Nov-23 | Jun-23 | Change | % change |
|----------------|----------------|-----------------|----------|
| \$ 168,126,753 | \$ 182,900,424 | \$ (14,773,670) | -8.1% |



**Valleywise Health
Health Plan sale proceeds**

| | | |
|--|------------------|---------------------------------------|
| Beginning balance - February 01, 2017 | | \$ - |
| ADD: Payment received from UHC for member transfer | \$ 33,361,499.99 | |
| Investment income | 1,601,294.04 | |
| Fund Interest | 1,100,985.70 | |
| Bank interest income received - YTD | <u>84,963.58</u> | |
| | | 36,148,743.31 |
| LESS: Consulting services expense | (547,601.00) | |
| Valleywise Health Foundation Funding | (5,500,000.00) | |
| Bank charges - transfer fees | <u>(50.00)</u> | |
| | | (6,047,651.00) |
| Ending balance as of November 30, 2023 | | <u><u>\$ 30,101,092.31</u></u> |

6. Financial and Statistical Information - December 2023



Financial and Statistical Information

for the month ending
December 31, 2023



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| Health plan sale proceeds (net) | 33 |



Financial Highlights – December 2023

Patient Activity

Total admissions in December were 11.1% over budget and 5.1% higher than December of last year. Inpatient acute admissions for the month were 16.9% over budget and 3.4% higher than last December 2022. Behavioral health admissions were 3.9% under budget for the month and 10.7% higher than last December 2022. Emergency department visits were 8.7% over budget for the month and 8.6% higher than December of last year. Ambulatory visits were 2.3% under budget for the month and 0.1% higher than the same month in the prior year.

Operating Revenue

Net patient service revenues were 3.3% under budget for the month and were 2.0% lower on a year-to-date basis. Other revenues were 5.2% under budget for the month, primarily in revenues related to sales at retail pharmacies, and grant/research program revenues. Overall total operating revenues were 3.7% under budget primarily in other revenues.

Operating Expense

Total operating expenses were 1.8% over budget for December. Labor expense, which includes salaries, benefits, and contract labor, were at budget for the month. Majority of negative variances were in clinical areas; acute units, behavioral units, and ambulatory clinics. Net medical service fees were 3.8% under budget for the month primarily due to higher than expected collections. Supplies were 15.7% over budget primarily in pharmaceuticals (specialty drugs), surgery related medical supplies (implants) due to increase surgery cases, and repairs & maintenance supplies. Purchased services were 3.7% over budget primarily in collection fees, management fees, laundry & dry cleaning services, legal fees, and reference laboratory services. Lastly, all other expenses excluding depreciation were 3.1% over budget for the month primarily in risk management related expenses, medical equipment rental, and utilities.

Non-Operating Revenue (Expense)

In total, net non-operating revenues and expenses were 4.1% over budget for the month of December, primarily due to capital related grant revenue and operating related grant revenue.



Cash and Cash Equivalents (including investments)

| | December 23 | June 23 |
|---|-----------------|-----------------|
| Operating / General Fund | \$171.4M | \$241.2M |
| Bond related – Restricted | \$105.9M | \$166.5M |
| Total cash and cash equivalents (including investments) | <u>\$277.3M</u> | <u>\$407.7M</u> |

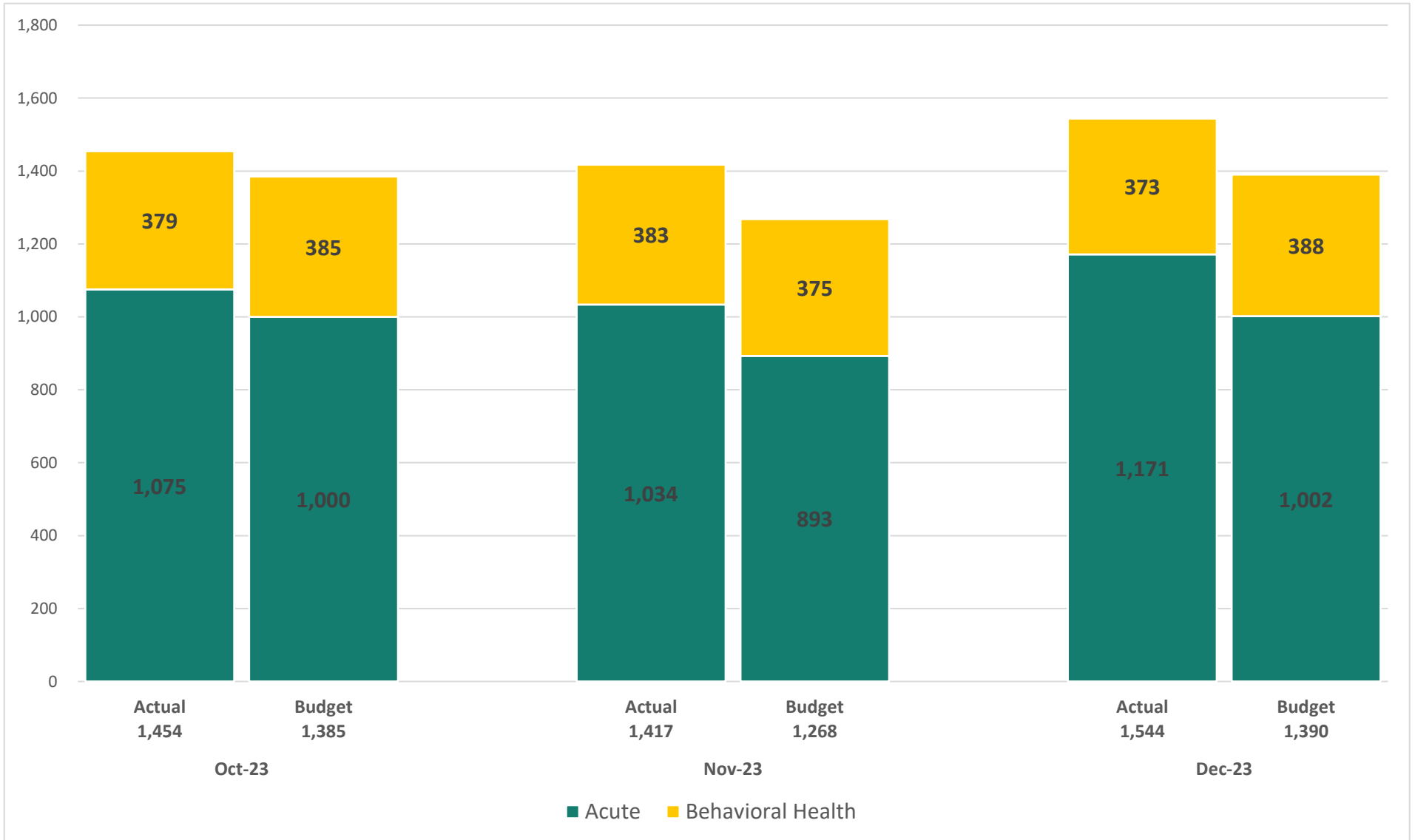
Select Ratios

| | YTD Actual | FY2024 YTD Budget |
|-------------------------------------|------------|----------------------|
| Liquidity | | |
| Days cash on hand (unrestricted) | 75.9 | 89.7 |
| Days in Accounts Receivable | 75.7 | 60 |
| Current Ratio (excludes Bond funds) | 2.1 | 3.7 |

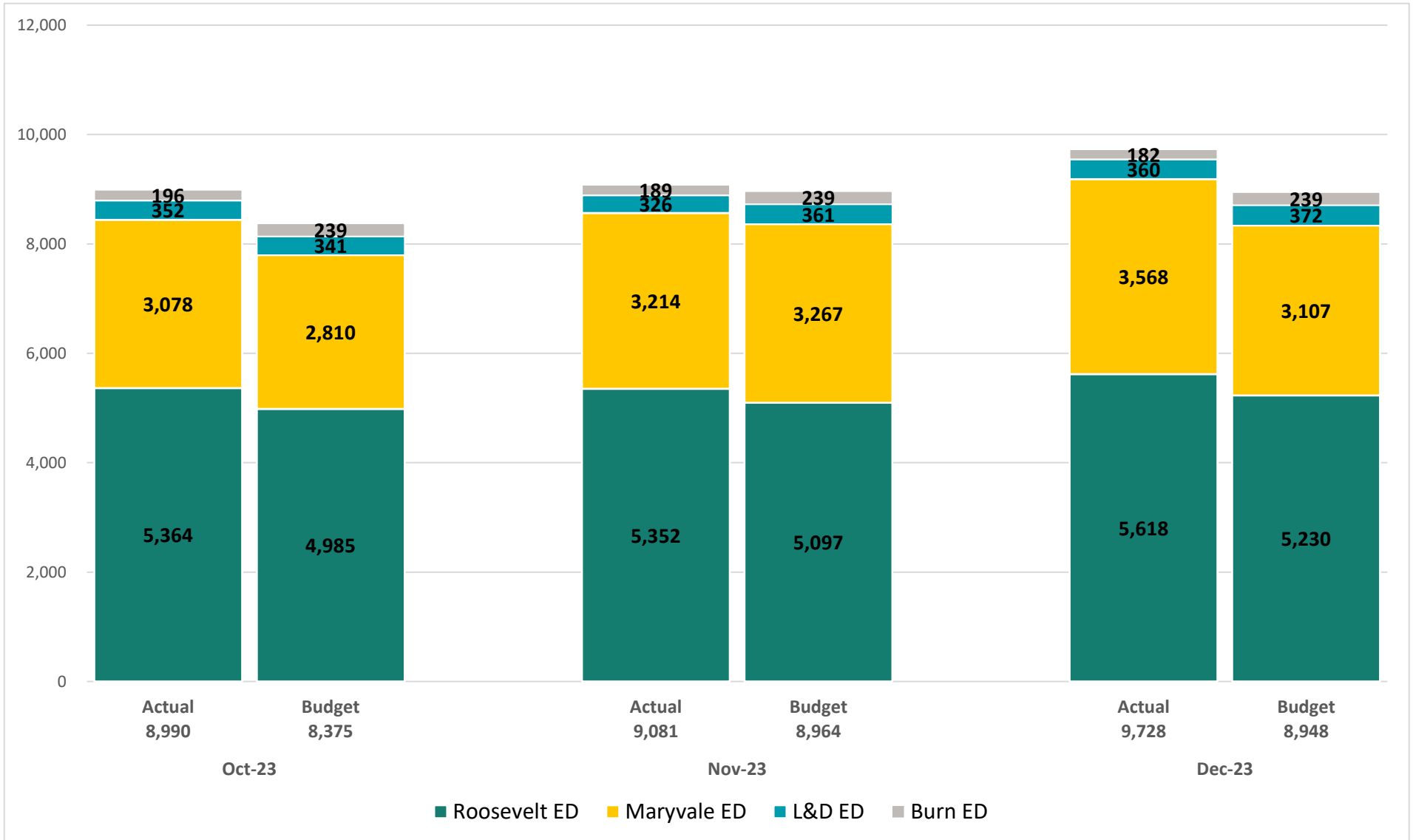
| | YTD Actual | FY2024 YTD Budget |
|--------------------------------|------------|----------------------|
| Profitability | | |
| Operating Margin (%) | (29.3) | (27.2) |
| Excess Margin – normalized (%) | (6.7) | (6.0) |
| Productivity | | |
| FTE/AOB w/o Residents | 4.18 | 4.21 |

If you have any questions, please do not hesitate to contact Melanie Talbot or Claire Agnew, CFO.

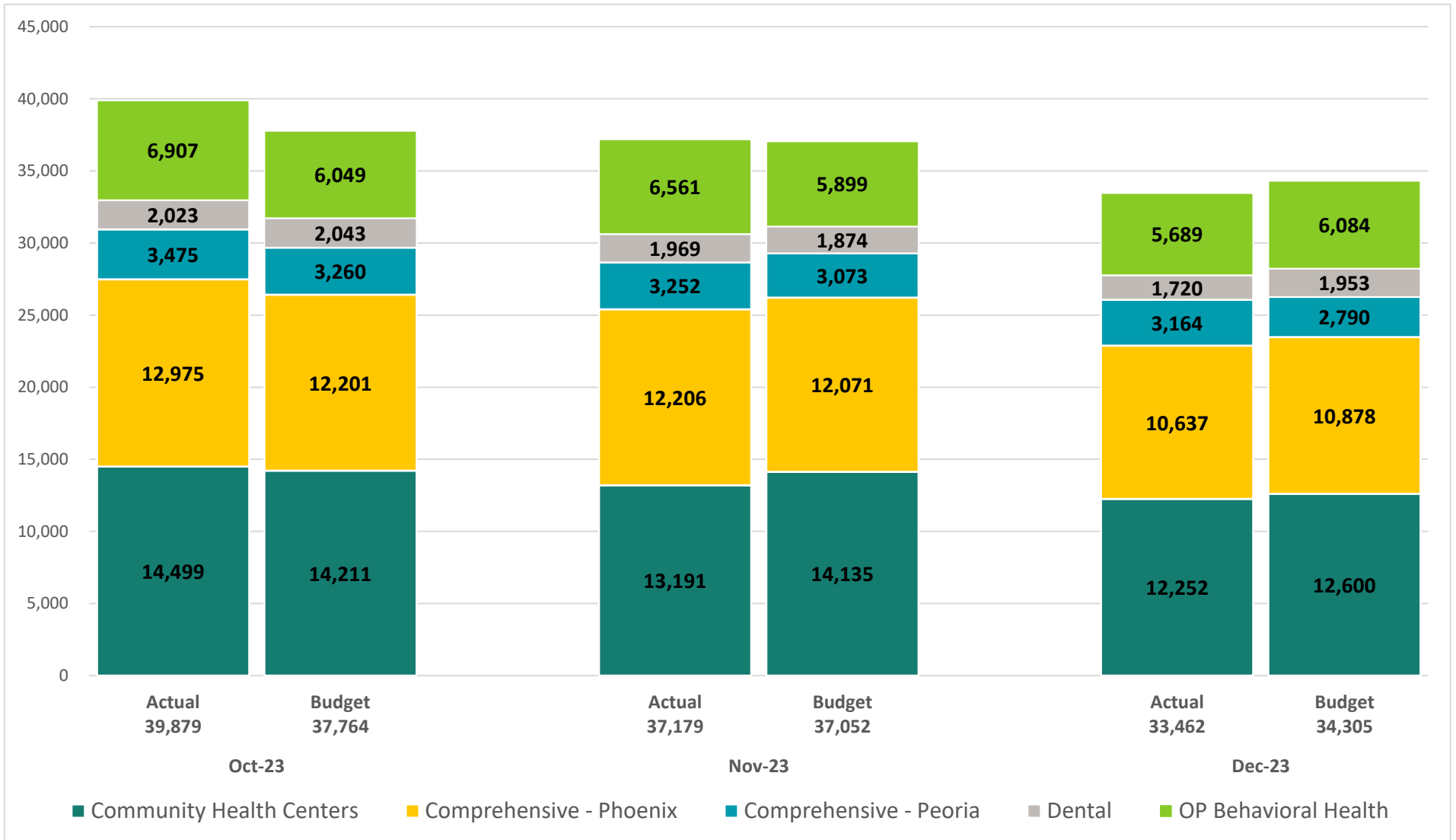
Fiscal Year 2024 Admissions



Fiscal Year 2024 Emergency Department Visits

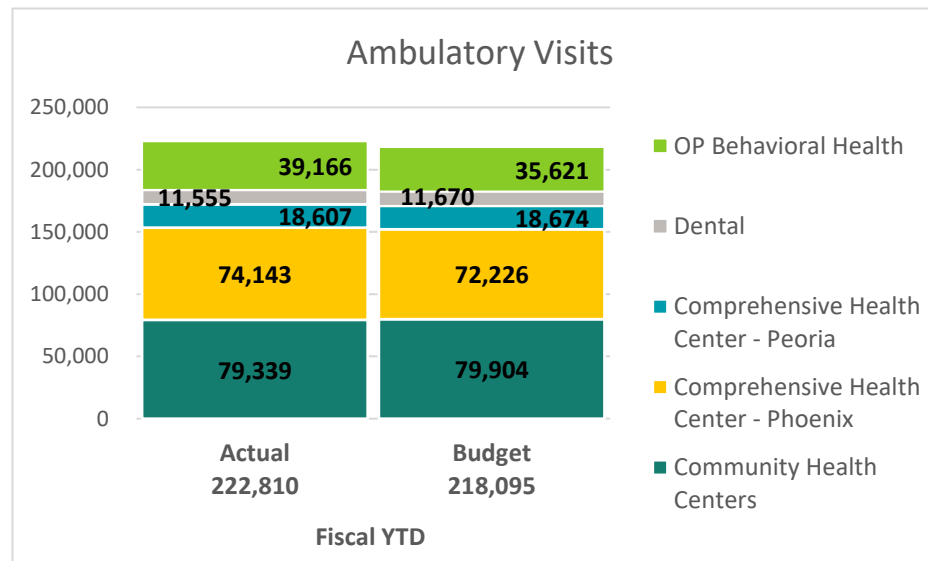
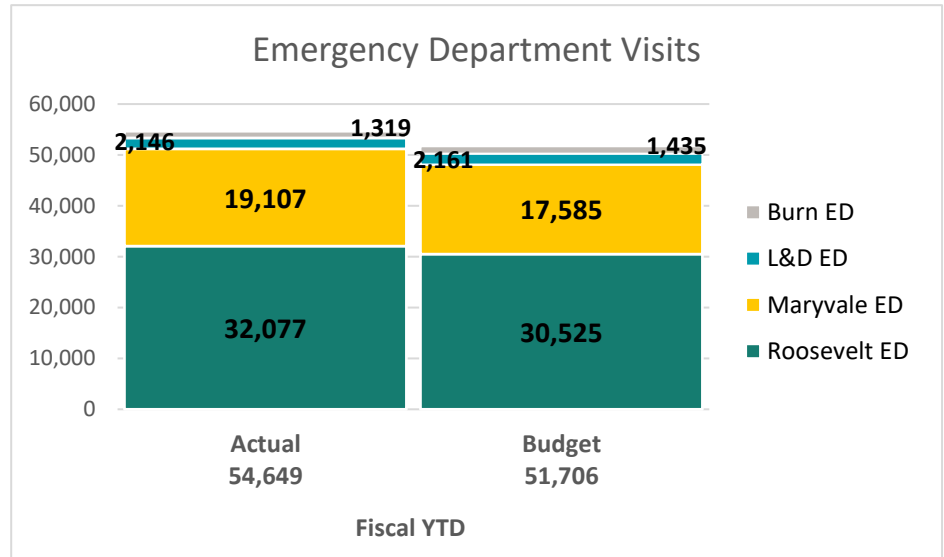
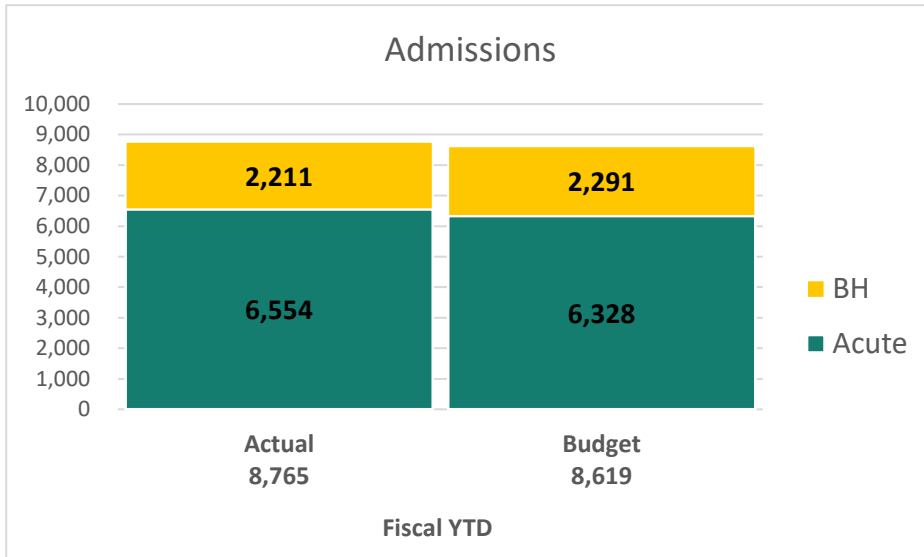


Fiscal Year 2024 Ambulatory Visits



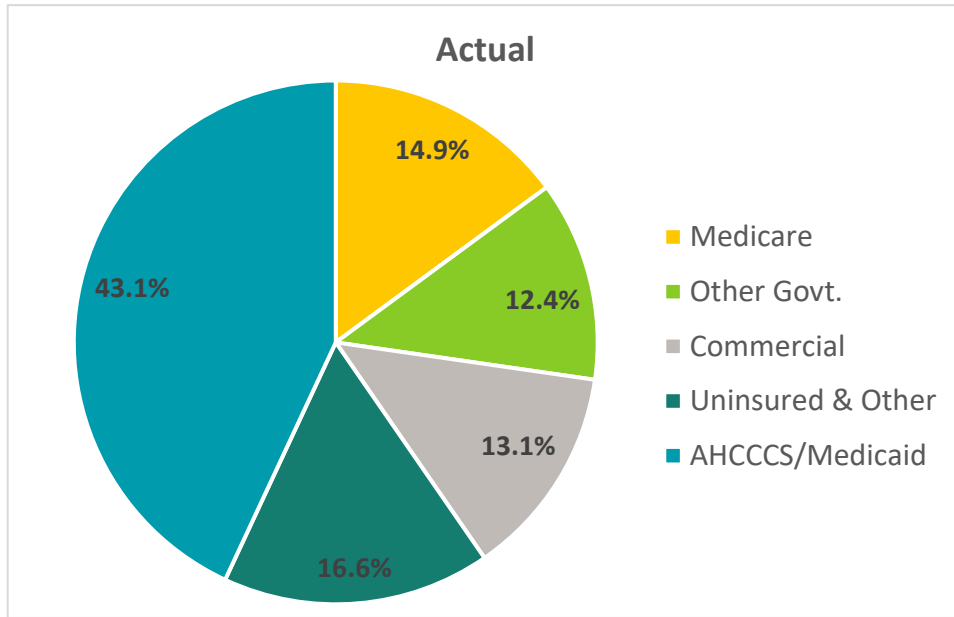
* Includes Telehealth visits -- 4,651 (October 2023) || 4,742 (November 2023) || 4,200 (December 2023)

Fiscal Year 2024 Year-to-Date Volume Summary

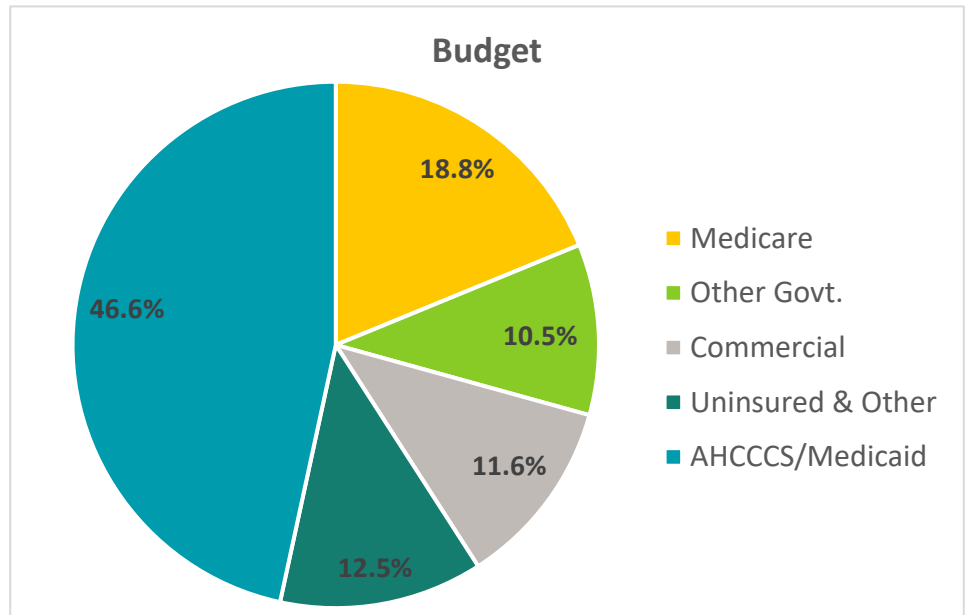


* Includes 27,562 Telehealth visits in FY 2024

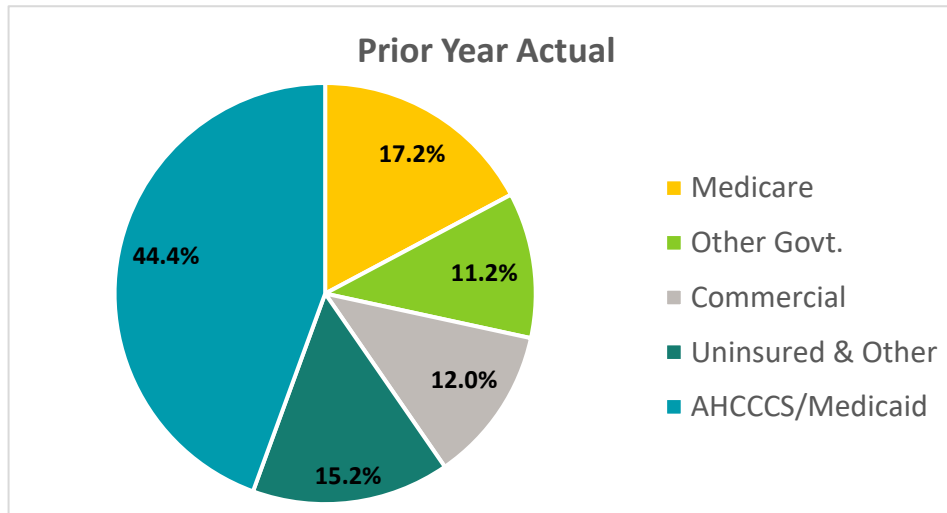
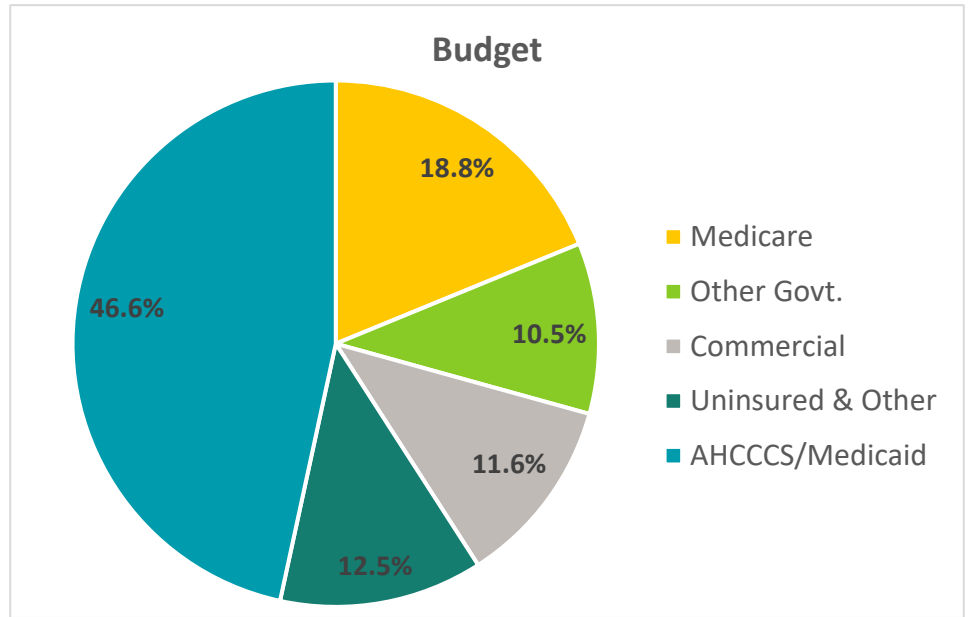
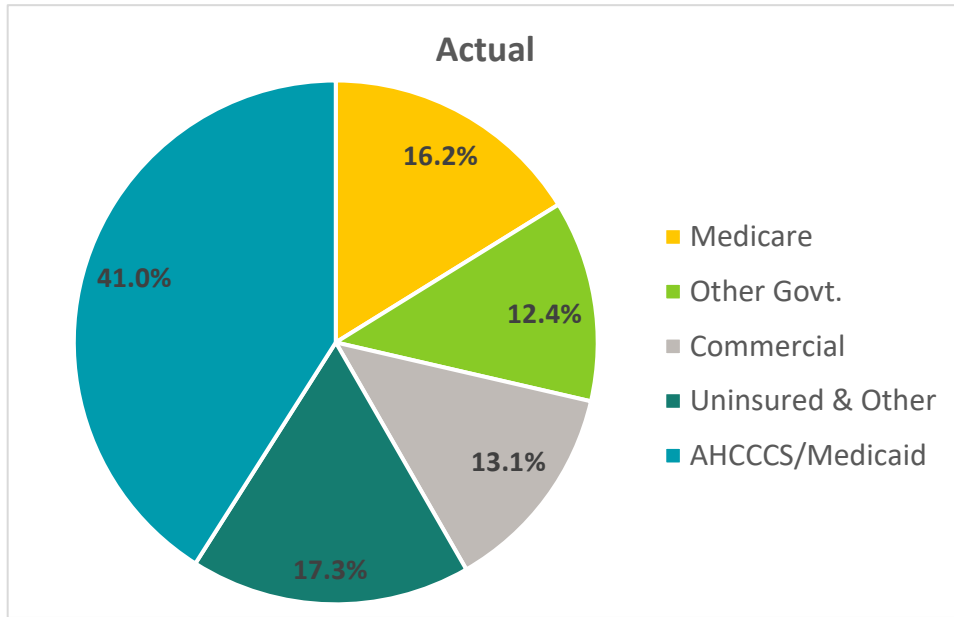
Fiscal Year 2024 Patient Revenue Source by Gross Revenue



Actual Gross Revenue is
month of December 31, 2023



Fiscal Year 2024 Patient Revenue Source by Gross Revenue



Actual Gross Revenue is
YTD as of December 31, 2023

Prior Year Gross Revenue is
all of fiscal year 2023



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF REVENUES AND EXPENSES

For the Period Ending December 31, 2023

| | DEC 2023 Actual | DEC 2023 Budget | DEC 2023 Variance | DEC 2023 % Change | Prior Year Same Month DEC 2022 | Prior Year Same Month Variance | Prior Year Same Month % Change |
|---|---------------------|---------------------|----------------------|----------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Net Patient Service Revenue | \$ 40,093,781 | \$ 41,454,665 | \$ (1,360,884) | (3.3 %) | \$ 41,247,082 | \$ (1,153,301) | (2.8 %) |
| Other Revenue | 12,191,237 | 12,860,545 | (669,308) | (5.2 %) | 13,282,102 | (1,090,865) | (8.2 %) |
| Total Operating Revenue | 52,285,018 | 54,315,210 | (2,030,192) | (3.7 %) | 54,529,184 | (2,244,166) | (4.1 %) |
| OPERATING EXPENSES | | | | | | | |
| Salaries and Wages | 26,828,108 | 25,524,067 | (1,304,041) | (5.1 %) | 24,317,360 | (2,510,748) | (10.3 %) |
| Contract Labor | 5,343,317 | 5,991,187 | 647,870 | 10.8 % | 7,020,756 | 1,677,439 | 23.9 % |
| Employee Benefits | 6,828,856 | 7,477,771 | 648,915 | 8.7 % | 6,837,663 | 8,807 | 0.1 % |
| Medical Service Fees | 9,285,497 | 9,648,860 | 363,362 | 3.8 % | 8,846,818 | (438,680) | (5.0 %) |
| Supplies | 9,671,422 | 8,356,174 | (1,315,248) | (15.7 %) | 9,284,323 | (387,100) | (4.2 %) |
| Purchased Services | 5,005,311 | 4,826,642 | (178,669) | (3.7 %) | 4,517,321 | (487,989) | (10.8 %) |
| Repair and Maintenance | 1,589,568 | 1,852,757 | 263,189 | 14.2 % | 1,774,499 | 184,931 | 10.4 % |
| Utilities | 752,355 | 610,269 | (142,086) | (23.3 %) | 703,539 | (48,816) | (6.9 %) |
| Rent | 535,996 | 472,839 | (63,157) | (13.4 %) | 538,601 | 2,604 | 0.5 % |
| Other Expenses | 2,521,094 | 2,299,024 | (222,070) | (9.7 %) | 1,878,805 | (642,288) | (34.2 %) |
| Provider Assessment | 0 | 0 | 0 | 0.0 % | 0 | 0 | 0.0 % |
| Depreciation | 4,146,011 | 4,146,011 | (0) | (0.0 %) | 3,664,782 | (481,229) | (13.1 %) |
| Total Operating Expense | 72,507,536 | 71,205,602 | (1,301,934) | (1.8 %) | 69,384,466 | (3,123,070) | (4.5 %) |
| Operating Income (Loss) | (20,222,518) | (16,890,392) | (3,332,126) | (19.7 %) | (14,855,282) | (5,367,236) | (36.1 %) |
| NONOPERATING REVENUES (EXPENSES) | | | | | | | |
| NonCapital Grants | 642,653 | 476,551 | 166,102 | 34.9 % | 449,645 | 193,008 | 42.9 % |
| NonCapital Transfers from County/State | 295,658 | 295,658 | 0 | 0.0 % | 295,658 | 0 | 0.0 % |
| Investment Income | 579,433 | 577,742 | 1,691 | 0.3 % | 1,002,371 | (422,938) | (42.2 %) |
| Other NonOperating Revenues (Expenses) | (394,824) | (708,450) | 313,627 | 44.3 % | (878,650) | 483,827 | 55.1 % |
| Interest Expense | (1,424,492) | (1,424,492) | (0) | (0.0 %) | (2,453,383) | 1,028,891 | 41.9 % |
| Tax Levy | 12,452,350 | 12,452,350 | 0 | 0.0 % | 10,767,838 | 1,684,513 | 15.6 % |
| Total NonOperating Revenues (Expenses) | 12,150,779 | 11,669,360 | 481,420 | 4.1 % | 9,183,479 | 2,967,300 | 32.3 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF REVENUES AND EXPENSES

For the Period Ending December 31, 2023

| | DEC 2023 Actual | DEC 2023 Budget | DEC 2023 Variance | DEC 2023 % Change | Prior Year Same Month DEC 2022 | Prior Year Same Month Variance | Prior Year Same Month % Change |
|--|--------------------|--------------------|----------------------|----------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Excess of Revenues over Expenses | \$ (8,071,739) | \$ (5,221,032) | \$ (2,850,707) | (54.6 %) | \$ (5,671,803) | \$ (2,399,936) | (42.3 %) |
| Bond-Related Revenues and Expenses | (3,234,059) | (3,349,013) | 114,954 | 3.4 % | (1,156,911) | (2,077,148) | (179.5 %) |
| Increase (Decrease) in Net Assets (normalized) | \$ (11,305,798) | \$ (8,570,045) | \$ (2,735,753) | (31.9 %) | \$ (6,828,714) | \$ (4,477,084) | (65.6 %) |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF REVENUES AND EXPENSES

For the Six Periods Ending December 31, 2023

| | DEC 2023 YTD Actual | DEC 2023 YTD Budget | DEC 2023 YTD Variance | YTD DEC 2023 % Change | YTD Prior Year DEC 2022 | YTD Prior Year Variance | YTD Prior Year % Change |
|---|------------------------|------------------------|--------------------------|-----------------------------|-------------------------------|-------------------------------|-------------------------------|
| Net Patient Service Revenue | \$ 254,376,296 | \$ 259,516,527 | \$ (5,140,231) | (2.0 %) | \$ 248,153,945 | \$ 6,222,351 | 2.5 % |
| Other Revenue | 87,753,959 | 77,930,109 | 9,823,851 | 12.6 % | 72,158,856 | 15,595,103 | 21.6 % |
| Total Operating Revenue | 342,130,255 | 337,446,635 | 4,683,620 | 1.4 % | 320,312,801 | 21,817,454 | 6.8 % |
| OPERATING EXPENSES | | | | | | | |
| Salaries and Wages | 161,981,663 | 151,667,373 | (10,314,289) | (6.8 %) | 146,047,267 | (15,934,395) | (10.9 %) |
| Contract Labor | 36,613,953 | 39,405,437 | 2,791,484 | 7.1 % | 41,626,303 | 5,012,350 | 12.0 % |
| Employee Benefits | 47,397,822 | 44,912,878 | (2,484,943) | (5.5 %) | 42,585,532 | (4,812,289) | (11.3 %) |
| Medical Service Fees | 48,563,909 | 57,245,507 | 8,681,598 | 15.2 % | 51,820,227 | 3,256,319 | 6.3 % |
| Supplies | 58,107,424 | 49,000,188 | (9,107,235) | (18.6 %) | 48,959,181 | (9,148,242) | (18.7 %) |
| Purchased Services | 28,994,828 | 28,534,538 | (460,290) | (1.6 %) | 27,302,896 | (1,691,932) | (6.2 %) |
| Repair and Maintenance | 11,187,924 | 10,856,110 | (331,814) | (3.1 %) | 10,748,219 | (439,705) | (4.1 %) |
| Utilities | 4,734,209 | 4,269,214 | (464,995) | (10.9 %) | 4,485,781 | (248,429) | (5.5 %) |
| Rent | 3,330,369 | 2,837,037 | (493,332) | (17.4 %) | 3,095,763 | (234,606) | (7.6 %) |
| Other Expenses | 14,725,013 | 13,785,767 | (939,246) | (6.8 %) | 11,087,608 | (3,637,405) | (32.8 %) |
| Provider Assessment | 0 | 0 | 0 | 0.0 % | 5,891,876 | 5,891,876 | 100.0 % |
| Depreciation | 26,593,473 | 26,593,473 | 0 | 0.0 % | 21,543,295 | (5,050,179) | (23.4 %) |
| Total Operating Expense | 442,230,586 | 429,107,522 | (13,123,063) | (3.1 %) | 415,193,948 | (27,036,637) | (6.5 %) |
| Operating Income (Loss) | (100,100,330) | (91,660,887) | (8,439,443) | (9.2 %) | (94,881,147) | (5,219,183) | (5.5 %) |
| NONOPERATING REVENUES (EXPENSES) | | | | | | | |
| NonCapital Grants | 6,218,564 | 4,828,737 | 1,389,827 | 28.8 % | 2,774,118 | 3,444,446 | 124.2 % |
| NonCapital Transfers from County/State | 1,773,948 | 1,773,948 | 0 | 0.0 % | 1,773,948 | 0 | 0.0 % |
| Investment Income | 4,599,751 | 3,466,454 | 1,133,297 | 32.7 % | 3,267,684 | 1,332,067 | 40.8 % |
| Other NonOperating Revenues (Expenses) | (1,504,493) | (4,725,351) | 3,220,858 | 68.2 % | (5,837,696) | 4,333,203 | 74.2 % |
| Interest Expense | (8,546,952) | (8,546,952) | (0) | (0.0 %) | (14,694,133) | 6,147,181 | 41.8 % |
| Tax Levy | 74,714,103 | 74,714,103 | 0 | 0.0 % | 65,622,609 | 9,091,493 | 13.9 % |
| Total NonOperating Revenues (Expenses) | 77,254,920 | 71,510,938 | 5,743,982 | 8.0 % | 52,906,530 | 24,348,390 | 46.0 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF REVENUES AND EXPENSES

For the Six Periods Ending December 31, 2023

| | DEC 2023 YTD Actual | DEC 2023 YTD Budget | DEC 2023 YTD Variance | YTD DEC 2023 % Change | YTD Prior Year DEC 2022 | YTD Prior Year Variance | YTD Prior Year % Change |
|--|------------------------|------------------------|--------------------------|-----------------------------|-------------------------------|-------------------------------|-------------------------------|
| Excess of Revenues over Expenses | \$ (22,845,410) | \$ (20,149,949) | \$ (2,695,461) | (13.4 %) | \$ (41,974,617) | \$ 19,129,207 | 45.6 % |
| Bond-Related Revenues and Expenses | (20,096,161) | (20,094,078) | (2,083) | (0.0 %) | (6,048,756) | (14,047,405) | (232.2 %) |
| Increase (Decrease) in Net Assets (normalized) | \$ (42,941,571) | \$ (40,244,027) | \$ (2,697,544) | (6.7 %) | \$ (48,023,373) | \$ 5,081,802 | 10.6 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF NET POSITION

December 31, 2023

| | 12/31/2023 | 06/30/2023 |
|---|-------------------------|-------------------------|
| ASSETS | | |
| Current Assets | | |
| Cash and Cash Equivalents | | |
| Cash - Care System | \$ 171,367,348 | \$ 241,214,127 |
| Cash and Short-Term Investment | 171,367,348 | 241,214,127 |
| Cash - Bond | 105,921,330 | 166,504,192 |
| Cash and Short-Term Investment - Bond | 105,921,330 | 166,504,192 |
| Total Cash and Cash Equivalents | 277,288,678 | 407,718,319 |
| Patient A/R, Net of Allowances | 97,546,876 | 85,709,368 |
| Other Receivables and Prepaid Items | 64,947,743 | 42,225,086 |
| Estimated Amounts Due from Third-Party Payors | 78,801,005 | 50,640,640 |
| Due from Related Parties | 1,496,186 | 3,376,279 |
| Other Current Assets | 2,516,402 | 2,516,402 |
| Total Current Assets | 522,596,891 | 592,186,093 |
| Capital Assets, Net | 814,019,052 | 796,596,154 |
| Other Assets | | |
| Long-Term Portion - Right to use Assets | 5,005,017 | 5,005,017 |
| Total Other Assets | 5,005,017 | 5,005,017 |
| Total Assets | 1,341,620,960 | 1,393,787,264 |
| Deferred Outflows | 56,462,313 | 56,462,313 |
| Total Assets and Deferred Outflows | \$ 1,398,083,273 | \$ 1,450,249,577 |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

STATEMENT OF NET POSITION

December 31, 2023

| | <u>12/31/2023</u> | <u>06/30/2023</u> |
|--|--------------------------------|--------------------------------|
| LIABILITIES AND NET POSITION | | |
| Current Liabilities | | |
| Current Maturities of Long-Term Debt | \$ 46,503,452 | \$ 43,216,702 |
| Accounts Payable | 77,836,621 | 75,381,153 |
| Accrued Payroll and Expenses | 31,170,627 | 28,158,703 |
| Medical Claims Payable | 18,156,140 | 18,892,539 |
| Due to Related Parties | 9,509,352 | 1,434 |
| Other Current Liabilities | 69,467,813 | 80,724,270 |
| Total Current Liabilities | <u>252,644,005</u> | <u>246,374,801</u> |
| Long-Term Debt | | |
| Bonds Payable | 605,156,180 | 640,746,278 |
| Other Long-Term Debt | 5,005,017 | 5,005,017 |
| Total Long-Term Debt | <u>610,161,197</u> | <u>645,751,296</u> |
| Long-Term Liabilities | 356,444,644 | 356,444,644 |
| Total Liabilities | 1,219,249,846 | 1,248,570,741 |
| Deferred Inflows | 18,778,412 | 18,778,412 |
| Net Position | | |
| Invested in Capital Assets, Net of Related Debt | 762,510,582 | 748,374,435 |
| Temporarily Restricted | 48,499,456 | 49,521,120 |
| Unrestricted | (650,955,024) | (614,995,130) |
| Total Net Position | <u>160,055,014</u> | <u>182,900,424</u> |
| Total Liabilities, Deferred Inflows, and Net Position | <u>\$ 1,398,083,273</u> | <u>\$ 1,450,249,577</u> |



Supplemental Information

351/504

Valleywise Health
 Financial and Statistical Information
 31-Dec-23

| 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 Date | | | | Prior Fiscal Year to Date | | |
|---------------|--------|----------|-------|---------------------|--------|----------|-------|---------------------------|----------|-------|
| Actual | Budget | Variance | Var % | Actual | Budget | Variance | Var % | Actual | Variance | Var % |

| Acute | | | | | | | | | | | | | | |
|----------------------|-------|-------|-----|-------|--|--------|--------|-----|------|--|--------|-------|--------|--|
| Admissions | 1,171 | 1,002 | 169 | 16.9% | | 6,554 | 6,328 | 226 | 3.6% | | 6,659 | (105) | (1.6%) | |
| Length of Stay (LOS) | 5.3 | 5.8 | 0.5 | 8.9% | | 5.3 | 5.5 | 0.1 | 2.3% | | 5.2 | (0.1) | (2.2%) | |
| Patient Days | 6,186 | 5,808 | 378 | 6.5% | | 34,977 | 34,550 | 427 | 1.2% | | 34,786 | 191 | 0.5% | |

| Acute - Observation Days and Admits | | | | | | | | | | | | | | |
|--|-------|-------|------|--------|--|-------|-------|------|--------|--|-------|------|--------|--|
| Observation Days | 598 | 608 | (11) | (1.8%) | | 4,192 | 3,601 | 591 | 16.4% | | 3,488 | 704 | 20.2% | |
| Observation Admission - Transfer to Inpatient | 224 | 221 | 3 | 1.4% | | 1,270 | 1,326 | (56) | (4.2%) | | 1,334 | (64) | (4.8%) | |
| Observation Admission Only | 371 | 364 | 7 | 1.9% | | 2,299 | 2,184 | 115 | 5.3% | | 2,152 | 147 | 6.8% | |
| Total Admissions - Acute plus Observation Only | 1,542 | 1,366 | 176 | 12.9% | | 8,853 | 8,512 | 341 | 4.0% | | 8,811 | 42 | 0.5% | |

| Behavioral Health | | | | | | | | | | | | | | |
|--|-------|-------|-------|---------|--|--------|--------|---------|---------|--|--------|-------|--------|--|
| Admissions | 373 | 388 | (15) | (3.9%) | | 2,211 | 2,291 | (80) | (3.5%) | | 1,965 | 246 | 12.5% | |
| Length of Stay (LOS) | 23.7 | 23.4 | (0.3) | (1.3%) | | 24.0 | 23.5 | (0.5) | (2.0%) | | 24.3 | 0.3 | 1.2% | |
| Patient Days | 8,827 | 9,065 | (238) | (2.6%) | | 53,108 | 53,949 | (841) | (1.6%) | | 47,762 | 5,346 | 11.2% | |
| Valleywise Behavioral Health Center-Phoenix | 2,473 | 2,135 | 338 | 15.8% | | 14,307 | 12,672 | 1,635 | 12.9% | | 10,299 | 4,008 | 38.9% | |
| Valleywise Behavioral Health Center-Mesa | 3,044 | 3,514 | (470) | (13.4%) | | 18,558 | 20,999 | (2,441) | (11.6%) | | 18,942 | (384) | (2.0%) | |
| Valleywise Behavioral Health Center-Maryvale | 3,310 | 3,416 | (106) | (3.1%) | | 20,243 | 20,278 | (35) | (0.2%) | | 18,521 | 1,722 | 9.3% | |

| Combined (Acute + Behavioral Health) | | | | | | | | | | | | | | |
|---|--------|--------|-------|-------|--|---------|---------|-------|------|--|---------|--------|-------|--|
| Adjusted Admissions | 2,942 | 2,576 | 366 | 14.2% | | 17,395 | 16,152 | 1,243 | 7.7% | | 16,341 | 1,054 | 6.5% | |
| Adjusted Patient Days | 28,605 | 27,561 | 1,043 | 3.8% | | 174,813 | 165,849 | 8,963 | 5.4% | | 156,410 | 18,403 | 11.8% | |

| Case Mix Index | | | | | | | | | | | | | | |
|----------------------------|------|------|--------|---------|--|------|------|--------|--------|--|------|--------|--------|--|
| Total Hospital | 1.57 | 1.55 | 0.02 | 1.3% | | 1.55 | 1.55 | 0.00 | 0.0% | | 1.57 | (0.02) | (1.3%) | |
| Acute (Excluding Newborns) | 1.64 | 1.75 | (0.11) | (6.3%) | | 1.68 | 1.75 | (0.07) | (4.0%) | | 1.79 | (0.11) | (6.1%) | |
| Behavioral Health | 1.31 | 1.26 | 0.05 | 4.0% | | 1.28 | 1.26 | 0.02 | 1.6% | | 1.24 | 0.04 | 3.2% | |
| Medicare | 2.08 | 2.10 | (0.02) | (1.0%) | | 2.05 | 2.10 | (0.05) | (2.4%) | | 2.18 | (0.13) | (6.0%) | |
| AHCCCS | 1.58 | 1.82 | (0.24) | (13.2%) | | 1.69 | 1.82 | (0.13) | (7.1%) | | 1.84 | (0.15) | (8.2%) | |

| Ambulatory | | | | | | | | | | | | | | |
|---|---------------|---------------|--------------|---------------|--|----------------|----------------|--------------|-------------|--|----------------|--------------|-------------|--|
| Valleywise Community Health Centers Visits | 12,252 | 12,600 | (348) | (2.8%) | | 79,339 | 79,904 | (565) | (0.7%) | | 85,286 | (5,947) | (7.0%) | |
| Valleywise Comprehensive Health Center-Phoenix Visits | 10,637 | 10,878 | (241) | (2.2%) | | 74,143 | 72,226 | 1,917 | 2.7% | | 72,273 | 1,870 | 2.6% | |
| Valleywise Comprehensive Health Center-Peoria Visits | 3,164 | 2,790 | 374 | 13.4% | | 18,607 | 18,674 | (67) | (0.4%) | | 18,481 | 126 | 0.7% | |
| Dental Clinics Visits | 1,720 | 1,953 | (233) | (11.9%) | | 11,555 | 11,670 | (115) | (1.0%) | | 11,426 | 129 | 1.1% | |
| OP Behavioral Health Visits | 5,689 | 6,084 | (395) | (6.5%) | | 39,166 | 35,621 | 3,545 | 10.0% | | 33,426 | 5,740 | 17.2% | |
| Total Ambulatory Visits : | 33,462 | 34,305 | (843) | (2.5%) | | 222,810 | 218,095 | 4,715 | 2.2% | | 220,892 | 1,918 | 0.9% | |

Valleywise Health
 Financial and Statistical Information
 31-Dec-23

| 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 Date | | | | Prior Fiscal Year to Date | | |
|---------------|--------|----------|-------|---------------------|--------|----------|-------|---------------------------|----------|-------|
| Actual | Budget | Variance | Var % | Actual | Budget | Variance | Var % | Actual | Variance | Var % |

| Other | | | | | | | | | | | | | | |
|--|--------------|--------------|-------------|----------------|--|---------------|---------------|--------------|---------------|--|---------------|--------------|---------------|--|
| Operating Room Utilization | 73% | 70% | 2.9% | 4.1% | | 71% | 70% | 1.1% | 1.6% | | 70% | 0.7% | 0.9% | |
| Total Main OR Surgical Minutes - Roosevelt | 76,815 | 62,943 | 13,872 | 22.0% | | 454,155 | 404,634 | 49,521 | 12.2% | | 442,320 | 11,835 | 2.7% | |
| Main OR Minutes per Case - Roosevelt | 113 | 115 | 2.1 | 1.8% | | 116 | 115 | (0.9) | (0.8%) | | 113 | (3.3) | (3.0%) | |
| Total Main OR Surgeries - Roosevelt | 680 | 547 | 133 | 24.3% | | 3,918 | 3,519 | 399 | 11.3% | | 3,929 | (11) | (0.3%) | |
| OP Surgeries - Peoria | 80 | 90 | (10) | (11.1%) | | 458 | 535 | (77) | (14.4%) | | 233 | 225 | 96.6% | |
| Total Surgeries - Roosevelt (Main OR) and Peoria | 760 | 637 | 123 | 19.3% | | 4,376 | 4,054 | 322 | 7.9% | | 4,162 | 214 | 5.1% | |
| Endoscopy Procedures - Roosevelt | 223 | 308 | (85) | (27.7%) | | 1,580 | 1,850 | (270) | (14.6%) | | 1,626 | (46) | (2.8%) | |
| Endoscopy Procedures - Peoria | 93 | 89 | 4 | 4.3% | | 639 | 573 | 66 | 11.5% | | 644 | (5) | (0.8%) | |
| Total Endoscopy Procedures - Roosevelt and Peoria | 316 | 398 | (82) | (20.5%) | | 2,219 | 2,423 | (204) | (8.4%) | | 2,270 | (51) | (2.2%) | |
| Deliveries | 138 | 211 | (73) | (34.6%) | | 1,014 | 1,266 | (252) | (19.9%) | | 1,270 | (256) | (20.2%) | |
| Trauma Visits (subset of ED Visits) | 178 | 172 | 6 | 3.5% | | 929 | 1,006 | (77) | (7.7%) | | 1,039 | (110) | (10.6%) | |
| Emergency Department (ED) | 9,728 | 8,948 | 780 | 8.7% | | 54,649 | 51,706 | 2,943 | 5.7% | | 52,108 | 2,541 | 4.9% | |
| Roosevelt ED | 5,618 | 5,230 | 388 | 7.4% | | 32,077 | 30,525 | 1,552 | 5.1% | | 30,491 | 1,586 | 5.2% | |
| Maryvale ED | 3,568 | 3,107 | 461 | 14.8% | | 19,107 | 17,585 | 1,522 | 8.7% | | 18,077 | 1,030 | 5.7% | |
| L&D ED | 360 | 372 | (12) | (3.2%) | | 2,146 | 2,161 | (15) | (0.7%) | | 2,124 | 22 | 1.0% | |
| Burn ED | 182 | 239 | (57) | (23.8%) | | 1,319 | 1,435 | (116) | (8.1%) | | 1,416 | (97) | (6.9%) | |
| % of Total ED Visits Resulting in Admission Roosevelt | 13.0% | 12.7% | 0.3% | 2.7% | | 12.3% | 12.7% | (0.4%) | (2.8%) | | 12.5% | (0.2%) | (1.4%) | |
| % of Total ED Visits Resulting in Admission Maryvale | 4.9% | 4.9% | 0.1% | 1.5% | | 5.0% | 5.0% | 0.0% | 0.4% | | 4.9% | 0.1% | 1.5% | |
| % of Acute Patients Admitted Through the ED | 92.7% | 101.0% | (8.4%) | (8.3%) | | 90.8% | 93.4% | (2.5%) | (2.7%) | | 87.7% | 3.2% | 3.6% | |
| Left Without Treatment (LWOT) ROOSEVELT | 1.8% | <3% | 1.2% | 41.4% | | 1.4% | <3% | 1.6% | 54.3% | | 1.5% | 0.1% | 5.5% | |
| Left Without Treatment (LWOT) MARYVALE | 1.9% | <3% | 1.1% | 36.4% | | 1.1% | <3% | 1.9% | 64.3% | | 1.3% | 0.2% | (18.3%) | |
| Overall ED Median Length of Stay (minutes) ROOSEVELT | 226 | <240 | 14 | 5.8% | | 225 | <240 | 15 | 6.3% | | 221 | (4) | (1.8%) | |
| Overall ED Median Length of Stay (minutes) MARYVALE | 156 | <220 | 64 | 29.1% | | 158 | <220 | 62 | 28.2% | | 182 | 24 | (13.2%) | |
| PSYCH ED Median LOS (minutes) ROOSEVELT | 619 | <240 | (619) | (100.0%) | | 592 | <240 | (592) | (100.0%) | | 641 | 49 | 7.6% | |
| PSYCH ED Median LOS (minutes) MARYVALE | 941 | <240 | (941) | (100.0%) | | 798 | <240 | (798) | (100.0%) | | 551 | (247) | (44.8%) | |
| Median Time to Treatment (MTT) (minutes) ROOSEVELT | 32 | <30 | (2) | (6.7%) | | 28 | <30 | 2 | 6.7% | | 29 | 1 | 3.4% | |
| Median Time to Treatment (MTT) (minutes) MARYVALE | 24 | <30 | 6 | 20.0% | | 25 | <30 | 5 | 16.7% | | 28 | 3 | (10.7%) | |
| Cath Lab Utilization - Room 1 | 29% | 45% | (15.7%) | (35.0%) | | 23% | 45% | (21.6%) | (48.1%) | | 19% | 3.9% | 19.9% | |
| Cath Lab Utilization - Room 2 | 5% | 45% | (40.2%) | (89.3%) | | 19% | 45% | (25.7%) | (57.1%) | | 25% | (5.6%) | (22.5%) | |
| Cath Lab Utilization - IR | 109% | 65% | 43.8% | 67.3% | | 97% | 65% | 31.9% | 49.1% | | 99% | (1.9%) | (1.9%) | |
| CCTA/Calcium Score | 25 | 15 | 10 | 66.7% | | 104 | 90 | 14 | 15.6% | | 87 | 17 | 19.5% | |
| Pediatric ED Visits at Maryvale (under age 18) | 820 | | | | | 3,589 | | | | | 3,718 | (129) | (3.5%) | |
| Adult ED Visits at Maryvale (age 18 and over) | 2,748 | | | | | 15,518 | | | | | 14,359 | 1,159 | 8.1% | |
| Maryvale ED to Inpatient OR (under age 18) | 4 | | | | | 21 | | | | | 17 | 4 | 23.5% | |
| Maryvale ED to Inpatient OR (Total) | 50 | | | | | 291 | | | | | 183 | 108 | 59.0% | |
| Pediatric ED Visits at Roosevelt (under age 18) | 1,047 | | | | | 4,597 | | | | | 5,479 | (882) | (16.1%) | |
| Adult ED Visits at Roosevelt (age 18 and over) | 4,570 | | | | | 27,479 | | | | | 25,012 | 2,467 | 9.9% | |

Valleywise Health
 Financial and Statistical Information
 31-Dec-23

| | |
|---|--|
| Greater than or equal to 100% of Budget | |
| Within 95% to 100% of Budget | |
| Less than 95% of Budget | |

| Current Month | | | | Fiscal Year to Date | | | | Prior Fiscal Year to Date | | |
|---------------|--------|----------|-------|---------------------|--------|----------|-------|---------------------------|----------|-------|
| Actual | Budget | Variance | Var % | Actual | Budget | Variance | Var % | Actual | Variance | Var % |

Operating Income / (Loss) in 000s

| | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|----|----------|----|----------|----|---------|---------|--|----|-----------|----|----------|----|---------|--------|--|----|----------|----|---------|--------|--|
| Valleywise Health | \$ | (20,223) | \$ | (16,890) | \$ | (3,332) | (19.7%) | | \$ | (100,100) | \$ | (91,661) | \$ | (8,439) | (9.2%) | | \$ | (94,881) | \$ | (5,219) | (5.5%) | |
|-------------------|----|----------|----|----------|----|---------|---------|--|----|-----------|----|----------|----|---------|--------|--|----|----------|----|---------|--------|--|

Net Income / (Loss) in 000s

| | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|----|---------|----|---------|----|---------|---------|--|----|----------|----|----------|----|---------|---------|--|----|----------|----|--------|-------|--|
| Valleywise Health | \$ | (8,072) | \$ | (5,221) | \$ | (2,851) | (54.6%) | | \$ | (22,845) | \$ | (20,150) | \$ | (2,695) | (13.4%) | | \$ | (41,975) | \$ | 19,129 | 45.6% | |
|-------------------|----|---------|----|---------|----|---------|---------|--|----|----------|----|----------|----|---------|---------|--|----|----------|----|--------|-------|--|

Net Income / (Loss) in 000s Normalized

| | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|----|----------|----|---------|----|---------|---------|--|----|----------|----|----------|----|---------|--------|--|----|----------|----|-------|-------|--|
| Valleywise Health | \$ | (11,306) | \$ | (8,570) | \$ | (2,736) | (31.9%) | | \$ | (42,942) | \$ | (40,244) | \$ | (2,698) | (6.7%) | | \$ | (48,023) | \$ | 5,082 | 10.6% | |
|-------------------|----|----------|----|---------|----|---------|---------|--|----|----------|----|----------|----|---------|--------|--|----|----------|----|-------|-------|--|

RATIOS:

| Prior Fiscal Year End | | |
|-----------------------|----------|-------|
| Actual | Variance | Var % |

Liquidity

| | | | | | | | | | | |
|---|--|----|--------|--|----|-------|----|--------|----------|--|
| Total Cash and Investments (000s) | | \$ | 171.4 | | \$ | 241.9 | \$ | (70.5) | (29.2%) | |
| Total Days Cash on Hand | | | 67.3 | | | 109.2 | | (41.9) | (38.3%) | |
| Current Ratio | | | 2.1 | | | 2.6 | | (0.5) | (20.3%) | |
| Current Ratio without Bond-related Assets & Liabilities | | | 1.7 | | | 2.3 | | (0.6) | (28.2%) | |
| Days in Accounts Receivable (Hospital only) | | | 75.2 | | | 57.7 | | (17.5) | (30.3%) | |
| EBIDA Debt Service Coverage | | | (0.14) | | | 0.70 | | (0.84) | (120.4%) | |

Profitability

| | | | | | | | | | | | | | | |
|------------------|---------|---------|--------|---------|--|---------|---------|--------|------|--|---------|--------|---------|--|
| Operating Margin | (37.7%) | (31.1%) | (6.6%) | (21.3%) | | (29.1%) | (27.2%) | (1.9%) | (7%) | | (24.3%) | (4.8%) | (19.8%) | |
|------------------|---------|---------|--------|---------|--|---------|---------|--------|------|--|---------|--------|---------|--|

Labor

| | | | | | | | | | | | | | | |
|----------------------|------|------|--------|--------|--|------|------|------|------|--|------|------|------|--|
| FTE/AOB WO Residents | 4.26 | 4.23 | (0.03) | (0.6%) | | 4.18 | 4.21 | 0.03 | 0.7% | | 4.40 | 0.21 | 4.9% | |
|----------------------|------|------|--------|--------|--|------|------|------|------|--|------|------|------|--|

| | Current Month | | | | Rolling Last Twelve Months | | | |
|--------------------------------|---------------|--------------|----------------|-----------------|----------------------------|---------------|--------------|---------------|
| | Actual | Prior Year | Variance | Var % | Actual | Prior Year | Variance | Var % |
| Turnover Rate - Voluntary | 1.49% | 1.19% | (0.30%) | (25.21%) | 16.82% | 22.41% | 5.59% | 24.94% |
| Turnover Rate - Involuntary | 0.47% | 0.40% | (0.07%) | (17.50%) | 4.93% | 4.34% | (0.59%) | (13.59%) |
| Turnover Rate - Uncontrollable | 0.42% | 0.34% | (0.08%) | (23.53%) | 5.26% | 4.82% | (0.44%) | (9.13%) |
| Turnover Rate - Total | 2.38% | 1.92% | (0.46%) | (23.96%) | 27.01% | 31.57% | 4.56% | 14.44% |

Appendix A Definition of Financial Indicators

| Indicator | Definition | Desired Position | |
|---|---|------------------|--------|
| | | Trend | Median |
| Total Days Cash on Hand | $= \frac{\text{Cash} + \text{Short-Term Investments}}{(\text{Operating Expenses Less - Depreciation}) / \text{YTD Days}}$ | Up | Above |
| Days in Accounts Receivable | $= \frac{\text{Net Patient Accounts Receivable (including Due/From)}}{\text{Net Patient Service Revenue} / \text{YTD Days}}$ | Down | Below |
| Cushion Ratio | $= \frac{\text{Cash} + \text{Short-Term Investments}}{\text{Principal} + \text{Interest Expenses}}$ | Up | Above |
| Cash to Debt | $= \frac{\text{Cash} + \text{Short-Term Investments}}{\text{Long Term Debt}} \times 100$ | Up | Above |
| EBITDA Debt Service Coverage | $= \frac{\text{EBITDA}}{\text{Principal} + \text{Interest Expenses}}$ | Up | Above |
| Debt to Net Assets | $= \frac{\text{Long Term Debt}}{\text{Long Term Debt} + \text{Unrestricted Assets}} \times 100$ | Down | Below |
| Operating Margin | $= \frac{\text{Operating Income (Loss)}}{\text{Operating Revenues}} \times 100$ | Up | Above |
| EBITDA Margin | $= \frac{\text{EBITDA}}{\text{Operating Revenues} + \text{Non Operating Revenues}} \times 100$ | Up | Above |
| Excess Margin | $= \frac{\text{Net Income}}{\text{Operating Revenues} + \text{Non Operating Revenues}} \times 100$ | Up | Above |
| Case Mix Index - Total Hospital | All discharged accounts. = Includes normal newborns (DRG 795). Includes discharges with a Behavioral Health patient type. | Up | Above |
| Case Mix Index - Acute (Excluding Newborns) | Discharged accounts. = 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 |
| Case Mix Index - Medicare | Discharged accounts with a financial class of Medicare <u>or</u> Medicare Managed Care. Excludes normal newborns (DRG 795). Excludes discharges with a Behavioral Health patient type. | Up | Above |
| Case Mix Index - AHCCCS | Discharged accounts with a financial class of AHCCCS <u>or</u> Maricopa Health Plan. Excludes normal newborns (DRG 795). Excludes discharges with a Behavioral Health patient type. | Up | Above |

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.



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

VOLUMES

For the Six Periods Ending December 31, 2023

| | DEC 2023 Actual | DEC 2023 Budget | DEC 2023 Variance | DEC 2023 % Change | Prior Year Same Month DEC 2022 | Prior Year Same Month % Change | DEC 2023 YTD Actual | DEC 2023 YTD Budget | DEC 2023 YTD Variance | YTD DEC 2023 % Change | YTD Prior Year DEC 2022 | YTD Prior Year % Change |
|--|--------------------|--------------------|----------------------|----------------------|--------------------------------------|--------------------------------------|------------------------|------------------------|--------------------------|-----------------------------|-------------------------------|-------------------------------|
| ADMISSIONS | | | | | | | | | | | | |
| Acute | 1,171 | 1,002 | 169 | 16.9 % | 1,132 | 3.4 % | 6,554 | 6,328 | 226 | 3.6 % | 6,659 | (1.6 %) |
| Behavioral Health | 373 | 388 | (15) | (3.9 %) | 337 | 10.7 % | 2,211 | 2,291 | (80) | (3.5 %) | 1,965 | 12.5 % |
| Valleywise Behavioral Health Center-Phoenix | 89 | 91 | (2) | (2.2 %) | 63 | 41.3 % | 445 | 531 | (86) | (16.2 %) | 321 | 38.6 % |
| Valleywise Behavioral Health Center-Mesa | 129 | 152 | (23) | (15.1 %) | 154 | (16.2 %) | 876 | 898 | (22) | (2.4 %) | 894 | (2.0 %) |
| Valleywise Behavioral Health Center-Maryvale | 155 | 145 | 10 | 6.9 % | 120 | 29.2 % | 890 | 862 | 28 | 3.2 % | 750 | 18.7 % |
| Total | 1,544 | 1,390 | 154 | 11.1 % | 1,469 | 5.1 % | 8,765 | 8,619 | 146 | 1.7 % | 8,624 | 1.6 % |
| OBSERVATION ADMISSIONS | | | | | | | | | | | | |
| Transferred to Inpatient * | 224 | 221 | 3 | 1.4 % | 239 | (6.3 %) | 1,270 | 1,326 | (56) | (4.2 %) | 1,334 | (4.8 %) |
| Observation Admission Only | 371 | 364 | 7 | 1.9 % | 420 | (11.7 %) | 2,299 | 2,184 | 115 | 5.3 % | 2,152 | 6.8 % |
| Total Observation Admissions | 595 | 585 | 10 | 1.7 % | 659 | (9.7 %) | 3,569 | 3,510 | 59 | 1.7 % | 3,486 | 2.4 % |
| TOTAL ADMISSIONS AND OBSERVATION ONLY | | | | | | | | | | | | |
| Total | 1,915 | 1,754 | 161 | 9.2 % | 1,889 | 1.4 % | 11,064 | 10,803 | 261 | 2.4 % | 10,776 | 2.7 % |
| ADJUSTED ADMISSIONS | | | | | | | | | | | | |
| Total | 2,942 | 2,576 | 366 | 14.2 % | 2,777 | 5.9 % | 17,395 | 16,152 | 1,243 | 7.7 % | 16,341 | 6.5 % |
| PATIENT DAYS | | | | | | | | | | | | |
| Acute | 6,186 | 5,808 | 378 | 6.5 % | 5,811 | 6.5 % | 34,977 | 34,550 | 427 | 1.2 % | 34,786 | 0.5 % |
| Behavioral Health | 8,827 | 9,065 | (238) | (2.6 %) | 7,964 | 10.8 % | 53,108 | 53,949 | (841) | (1.6 %) | 47,762 | 11.2 % |
| Valleywise Behavioral Health Center-Phoenix | 2,473 | 2,135 | 338 | 15.8 % | 1,780 | 38.9 % | 14,307 | 12,672 | 1,635 | 12.9 % | 10,299 | 38.9 % |
| Valleywise Behavioral Health Center-Mesa | 3,044 | 3,514 | (470) | (13.4 %) | 3,182 | (4.3 %) | 18,558 | 20,999 | (2,441) | (11.6 %) | 18,942 | (2.0 %) |
| Valleywise Behavioral Health Center-Maryvale | 3,310 | 3,416 | (106) | (3.1 %) | 3,002 | 10.3 % | 20,243 | 20,278 | (35) | (0.2 %) | 18,521 | 9.3 % |
| Total | 15,013 | 14,873 | 140 | 0.9 % | 13,775 | 9.0 % | 88,085 | 88,499 | (414) | (0.5 %) | 82,548 | 6.7 % |
| AVERAGE DAILY CENSUS | | | | | | | | | | | | |
| Acute | 200 | 187 | 12 | 6.5 % | 187 | 6.5 % | 190 | 188 | 2 | 1.2 % | 189 | 0.5 % |
| Behavioral Health | 285 | 292 | (8) | (2.6 %) | 257 | 10.8 % | 289 | 293 | (5) | (1.6 %) | 260 | 11.2 % |
| Valleywise Behavioral Health Center-Phoenix | 80 | 69 | 11 | 15.8 % | 57 | 38.9 % | 78 | 69 | 9 | 12.9 % | 56 | 38.9 % |
| Valleywise Behavioral Health Center-Mesa | 98 | 113 | (15) | (13.4 %) | 103 | (4.3 %) | 101 | 114 | (13) | (11.6 %) | 103 | (2.0 %) |
| Valleywise Behavioral Health Center-Maryvale | 107 | 110 | (3) | (3.1 %) | 97 | 10.3 % | 110 | 110 | (0) | (0.2 %) | 101 | 9.3 % |
| Total | 484 | 480 | 5 | 0.9 % | 444 | 9.0 % | 479 | 481 | (2) | (0.5 %) | 449 | 6.7 % |
| ADJUSTED PATIENT DAYS | | | | | | | | | | | | |
| Total | 28,605 | 27,561 | 1,043 | 3.8 % | 26,045 | 9.8 % | 174,813 | 165,849 | 8,963 | 5.4 % | 156,410 | 11.8 % |

* Already included in 'Acute Admissions'.



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

VOLUMES

For the Six Periods Ending December 31, 2023

| | DEC 2023 Actual | DEC 2023 Budget | DEC 2023 Variance | DEC 2023 % Change | Prior Year Same Month DEC 2022 | Prior Year Same Month % Change | DEC 2023 YTD Actual | DEC 2023 YTD Budget | DEC 2023 YTD Variance | YTD DEC 2023 % Change | YTD Prior Year DEC 2022 | YTD Prior Year % Change |
|--|--------------------|--------------------|----------------------|----------------------|--------------------------------------|--------------------------------------|------------------------|------------------------|--------------------------|-----------------------------|-------------------------------|-------------------------------|
| OPERATING ROOM SURGERIES - ROOSEVELT | | | | | | | | | | | | |
| Inpatient | 402 | 321 | 81 | 25.2 % | 372 | 8.1 % | 2,174 | 2,067 | 107 | 5.2 % | 2,329 | (6.7 %) |
| Outpatient | 278 | 226 | 52 | 23.0 % | 274 | 1.5 % | 1,744 | 1,452 | 292 | 20.1 % | 1,600 | 9.0 % |
| Total | 680 | 547 | 133 | 24.3 % | 646 | 5.3 % | 3,918 | 3,519 | 399 | 11.3 % | 3,929 | (0.3 %) |
| Inpatient Minutes | 48,195 | 39,639 | 8,556 | 21.6 % | 43,170 | 11.6 % | 273,285 | 254,825 | 18,460 | 7.2 % | 269,910 | 1.3 % |
| Outpatient Minutes | 28,620 | 23,304 | 5,316 | 22.8 % | 29,745 | (3.8 %) | 180,870 | 149,809 | 31,061 | 20.7 % | 172,410 | 4.9 % |
| Total | 76,815 | 62,943 | 13,872 | 22.0 % | 72,915 | 5.3 % | 454,155 | 404,634 | 49,521 | 12.2 % | 442,320 | 2.7 % |
| OPERATING ROOM SURGERIES - PEORIA | | | | | | | | | | | | |
| Outpatient | 80 | 90 | (10) | (11.1 %) | 47 | 70.2 % | 458 | 535 | (77) | (14.4 %) | 233 | 96.6 % |
| Outpatient Minutes | 5,970 | 5,286 | 684 | 12.9 % | 4,695 | 27.2 % | 34,125 | 28,933 | 5,192 | 17.9 % | 21,870 | 56.0 % |
| ENDOSCOPY PROCEDURES - ROOSEVELT | | | | | | | | | | | | |
| Inpatient | 80 | 96 | (16) | (16.4 %) | 70 | 14.3 % | 481 | 574 | (93) | (16.3 %) | 509 | (5.5 %) |
| Outpatient | 143 | 213 | (70) | (32.7 %) | 118 | 21.2 % | 1,099 | 1,276 | (177) | (13.8 %) | 1,117 | (1.6 %) |
| Total | 223 | 308 | (85) | (27.7 %) | 188 | 18.6 % | 1,580 | 1,850 | (270) | (14.6 %) | 1,626 | (2.8 %) |
| ENDOSCOPY PROCEDURES - PEORIA | | | | | | | | | | | | |
| Outpatient | 93 | 89 | 4 | 4.3 % | 40 | 132.5 % | 639 | 573 | 66 | 11.5 % | 644 | (0.8 %) |
| DELIVERIES | | | | | | | | | | | | |
| Total | 138 | 211 | (73) | (34.6 %) | 218 | (36.7 %) | 1,014 | 1,266 | (252) | (19.9 %) | 1,270 | (20.2 %) |
| ED VISITS | | | | | | | | | | | | |
| Roosevelt | 5,618 | 5,230 | 388 | 7.4 % | 5,210 | 7.8 % | 32,077 | 30,525 | 1,552 | 5.1 % | 30,491 | 5.2 % |
| Maryvale | 3,568 | 3,107 | 461 | 14.8 % | 3,198 | 11.6 % | 19,107 | 17,585 | 1,522 | 8.7 % | 18,077 | 5.7 % |
| Labor & Delivery | 360 | 372 | (12) | (3.2 %) | 344 | 4.7 % | 2,146 | 2,161 | (15) | (0.7 %) | 2,124 | 1.0 % |
| Burn | 182 | 239 | (57) | (23.8 %) | 205 | (11.2 %) | 1,319 | 1,435 | (116) | (8.1 %) | 1,416 | (6.9 %) |
| Total | 9,728 | 8,948 | 780 | 8.7 % | 8,957 | 8.6 % | 54,649 | 51,706 | 2,943 | 5.7 % | 52,108 | 4.9 % |
| AMBULATORY VISITS | | | | | | | | | | | | |
| Valleywise Community Health Centers | 12,252 | 12,600 | (348) | (2.8 %) | 12,901 | (5.0 %) | 79,339 | 79,904 | (565) | (0.7 %) | 85,286 | (7.0 %) |
| Valleywise Comprehensive Health Center-Phoenix | 10,637 | 10,878 | (241) | (2.2 %) | 10,942 | (2.8 %) | 74,143 | 72,226 | 1,917 | 2.7 % | 72,273 | 2.6 % |
| Valleywise Comprehensive Health Center-Peoria | 3,164 | 2,790 | 374 | 13.4 % | 2,437 | 29.8 % | 18,607 | 18,674 | (67) | (0.4 %) | 18,481 | 0.7 % |
| Outpatient Behavioral Health | 5,689 | 6,084 | (395) | (6.5 %) | 5,248 | 8.4 % | 39,166 | 35,621 | 3,545 | 10.0 % | 33,426 | 17.2 % |
| Dental | 1,720 | 1,953 | (233) | (11.9 %) | 1,876 | (8.3 %) | 11,555 | 11,670 | (115) | (1.0 %) | 11,426 | 1.1 % |
| Total | 33,462 | 34,305 | (843) | (2.5 %) | 33,404 | 0.2 % | 222,810 | 218,095 | 4,715 | 2.2 % | 220,892 | 0.9 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

FINANCIAL INDICATORS

For the Period Ending December 31, 2023

| | DEC 2023 Actual | DEC 2023 Budget | DEC 2023 Variance | DEC 2023 % Change | Prior Year Same Month DEC 2022 | Prior Year Same Month Variance | Prior Year Same Month % Change |
|--|----------------------|----------------------|----------------------|----------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Net Patient Service Revenue per APD | \$ 1,402 | \$ 1,504 | (\$ 102) | (6.8 %) | \$ 1,584 | (\$ 182) | (11.5 %) |
| Salaries | \$ 26,828,108 | \$ 25,524,067 | (\$ 1,304,041) | (5.1 %) | \$ 24,317,360 | (\$ 2,510,748) | (10.3 %) |
| Benefits | 6,828,856 | 7,477,771 | 648,915 | 8.7 % | 6,837,663 | 8,807 | 0.1 % |
| Contract Labor | 5,343,317 | 5,991,187 | 647,870 | 10.8 % | 7,020,756 | 1,677,439 | 23.9 % |
| Total Labor Costs | \$ 39,000,281 | \$ 38,993,025 | (\$ 7,256) | (0.0 %) | \$ 38,175,778 | (\$ 824,503) | (2.2 %) |
| Supplies | \$ 9,671,422 | \$ 8,356,174 | (\$ 1,315,248) | (15.7 %) | \$ 9,284,323 | (\$ 387,100) | (4.2 %) |
| Medical Service Fees | 9,285,497 | 9,648,860 | 363,362 | 3.8 % | 8,846,818 | (438,680) | (5.0 %) |
| All Other * | 12,223,640 | 12,194,474 | (29,166) | (0.2 %) | 12,744,799 | 521,159 | 4.1 % |
| Total | \$ 31,180,560 | \$ 30,199,508 | (\$ 981,051) | (3.2 %) | \$ 30,875,939 | (\$ 304,620) | (1.0 %) |
| Total Operating and Non-Operating Expenses * | \$ 70,180,841 | \$ 69,192,533 | (\$ 988,308) | (1.4 %) | \$ 69,051,718 | (\$ 1,129,123) | (1.6 %) |
| * Excludes Depreciation | | | | | | | |
| Tax Levy | | | | | | | |
| Property Tax | \$ 8,018,745 | \$ 8,018,745 | \$ 0 | 0.0 % | \$ 7,673,441 | \$ 345,305 | 4.5 % |
| Bonds | 4,433,605 | 4,433,605 | 0 | 0.0 % | 3,094,397 | 1,339,208 | 43.3 % |
| Total Tax Levy | \$ 12,452,350 | \$ 12,452,350 | \$ 0 | 0.0 % | \$ 10,767,838 | \$ 1,684,513 | 15.6 % |
| Patient Days - Acute | 6,186 | 5,808 | 378 | 6.5 % | 5,811 | 375 | 6.5 % |
| Patient Days - Behavioral Health | 8,827 | 9,065 | (238) | (2.6 %) | 7,964 | 863 | 10.8 % |
| Patient Days - Total | 15,013 | 14,873 | 140 | 0.9 % | 13,775 | 1,238 | 9.0 % |
| Adjusted Patient Days | 28,605 | 27,561 | 1,043 | 3.8 % | 26,045 | 2,560 | 9.8 % |
| APD Ratio | 1.91 | 1.85 | 0.05 | 2.8 % | 1.89 | 0.01 | 0.8 % |
| Admissions - Acute | 1,171 | 1,002 | 169 | 16.9 % | 1,132 | 39 | 3.4 % |
| Admissions - Behavioral Health | 373 | 388 | (15) | (3.9 %) | 337 | 36 | 10.7 % |
| Admissions - Total | 1,544 | 1,390 | 154 | 11.1 % | 1,469 | 75 | 5.1 % |
| Adjusted Admissions | 2,942 | 2,576 | 366 | 14.2 % | 2,777 | 164 | 5.9 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

FINANCIAL INDICATORS

For the Period Ending December 31, 2023

| | DEC 2023 Actual | DEC 2023 Budget | DEC 2023 Variance | DEC 2023 % Change | Prior Year Same Month DEC 2022 | Prior Year Same Month Variance | Prior Year Same Month % Change |
|--|--------------------|--------------------|----------------------|----------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Average Daily Census - Acute | 200 | 187 | 12 | 6.5 % | 187 | 12 | 6.5 % |
| Average Daily Census - Behavioral Health | 285 | 292 | (8) | (2.6 %) | 257 | 28 | 10.8 % |
| Average Daily Census - Total | 484 | 480 | 5 | 0.9 % | 444 | 40 | 9.0 % |
| Adjusted Occupied Beds - Acute | 380 | 347 | 33 | 9.5 % | 354 | 26 | 7.3 % |
| Adjusted Occupied Beds - Behavioral Health | 543 | 542 | 1 | 0.1 % | 486 | 57 | 11.7 % |
| Adjusted Occupied Beds - Total | 923 | 889 | 34 | 3.8 % | 840 | 83 | 9.8 % |
| Paid FTEs - Payroll | 3,682 | 3,514 | (168) | (4.8 %) | 3,361 | (321) | (9.6 %) |
| Paid FTEs - Contract Labor | 438 | 450 | 12 | 2.7 % | 519 | 81 | 15.5 % |
| Paid FTEs - Total | 4,120 | 3,964 | (156) | (3.9 %) | 3,880 | (240) | (6.2 %) |
| FTEs per AOB | 4.47 | 4.46 | (0.01) | (0.2 %) | 4.62 | 0.15 | 3.3 % |
| FTEs per AOB (w/o Residents) | 4.26 | 4.23 | (0.03) | (0.6 %) | 4.40 | 0.14 | 3.2 % |
| Benefits as a % of Salaries | 25.5 % | 29.3 % | 3.8 % | 13.1 % | 28.1 % | 2.7 % | 9.5 % |
| Labor Costs as a % of Net Patient Revenue | 97.3 % | 94.1 % | (3.2 %) | (3.4 %) | 92.6 % | (4.7 %) | (5.1 %) |
| Salaries and Contract Labor per APD | \$ 1,125 | \$ 1,143 | \$ 19 | 1.6 % | \$ 1,203 | \$ 79 | 6.5 % |
| Benefits per APD | 239 | 271 | 33 | 12.0 % | 263 | 24 | 9.1 % |
| Supplies per APD | 338 | 303 | (35) | (11.5 %) | 356 | 18 | 5.2 % |
| Medical Service Fees per APD | 325 | 350 | 25 | 7.3 % | 340 | 15 | 4.4 % |
| All Other Expenses per APD * | 427 | 442 | 15 | 3.4 % | 489 | 62 | 12.7 % |
| Total Expenses per APD * | \$ 2,453 | \$ 2,510 | \$ 57 | 2.3 % | \$ 2,651 | \$ 198 | 7.5 % |
| Salaries and Contract Labor per Adj. Admission | \$ 10,936 | \$ 12,235 | \$ 1,299 | 10.6 % | \$ 11,283 | \$ 347 | 3.1 % |
| Benefits per Adj. Admission | 2,321 | 2,903 | 582 | 20.0 % | 2,462 | 141 | 5.7 % |
| Supplies per Adj. Admission | 3,288 | 3,244 | (43) | (1.3 %) | 3,343 | 55 | 1.6 % |
| Medical Service Fees per Adj. Admission | 3,156 | 3,746 | 590 | 15.7 % | 3,185 | 29 | 0.9 % |
| All Other Expenses per Adj. Admission * | 4,155 | 4,734 | 579 | 12.2 % | 4,589 | 433 | 9.4 % |
| Total Expenses per Adj. Admission * | \$ 23,856 | \$ 26,862 | \$ 3,006 | 11.2 % | \$ 24,861 | \$ 1,005 | 4.0 % |

* Excludes Depreciation



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

FINANCIAL INDICATORS

For the Six Periods Ending December 31, 2023

| | DEC 2023 YTD Actual | DEC 2023 YTD Budget | DEC 2023 YTD Variance | YTD DEC 2023 % Change | YTD Prior Year DEC 2022 | YTD Prior Year Variance | YTD Prior Year % Change |
|--|------------------------|------------------------|--------------------------|-----------------------------|-------------------------------|-------------------------------|-------------------------------|
| Net Patient Service Revenue per APD | \$ 1,455 | \$ 1,565 | (\$ 110) | (7.0 %) | \$ 1,587 | (\$ 131) | (8.3 %) |
| Salaries | \$ 161,981,663 | \$ 151,667,373 | (\$ 10,314,289) | (6.8 %) | \$ 146,047,267 | (\$ 15,934,395) | (10.9 %) |
| Benefits | 47,397,822 | 44,912,878 | (2,484,943) | (5.5 %) | 42,585,532 | (4,812,289) | (11.3 %) |
| Contract Labor | 36,613,953 | 39,405,437 | 2,791,484 | 7.1 % | 41,626,303 | 5,012,350 | 12.0 % |
| Total Labor Costs | \$ 245,993,437 | \$ 235,985,688 | (\$ 10,007,749) | (4.2 %) | \$ 230,259,103 | (\$ 15,734,335) | (6.8 %) |
| Supplies | \$ 58,107,424 | \$ 49,000,188 | (\$ 9,107,235) | (18.6 %) | \$ 48,959,181 | (\$ 9,148,242) | (18.7 %) |
| Medical Service Fees | 48,563,909 | 57,245,507 | 8,681,598 | 15.2 % | 51,820,227 | 3,256,319 | 6.3 % |
| All Other * | 73,023,788 | 73,554,969 | 531,181 | 0.7 % | 83,143,972 | 10,120,184 | 12.2 % |
| Total | \$ 179,695,120 | \$ 179,800,664 | \$ 105,544 | 0.1 % | \$ 183,923,380 | \$ 4,228,260 | 2.3 % |
| Total Operating and Non-Operating Expenses * | \$ 425,688,557 | \$ 415,786,352 | (\$ 9,902,205) | (2.4 %) | \$ 414,182,483 | (\$ 11,506,075) | (2.8 %) |
| * Excludes Depreciation | | | | | | | |
| Tax Levy | | | | | | | |
| Property Tax | \$ 48,112,473 | \$ 48,112,472 | \$ 0 | 0.0 % | \$ 46,764,368 | \$ 1,348,104 | 2.9 % |
| Bonds | 26,601,630 | 26,601,630 | 0 | 0.0 % | 18,858,241 | 7,743,389 | 41.1 % |
| Total Tax Levy | \$ 74,714,103 | \$ 74,714,103 | \$ 0 | 0.0 % | \$ 65,622,609 | \$ 9,091,493 | 13.9 % |
| Patient Days - Acute | 34,977 | 34,550 | 427 | 1.2 % | 34,786 | 191 | 0.5 % |
| Patient Days - Behavioral Health | 53,108 | 53,949 | (841) | (1.6 %) | 47,762 | 5,346 | 11.2 % |
| Patient Days - Total | 88,085 | 88,499 | (414) | (0.5 %) | 82,548 | 5,537 | 6.7 % |
| Adjusted Patient Days | 174,813 | 165,849 | 8,963 | 5.4 % | 156,410 | 18,403 | 11.8 % |
| APD Ratio | 1.98 | 1.87 | 0.11 | 5.9 % | 1.89 | 0.09 | 4.7 % |
| Admissions - Acute | 6,554 | 6,328 | 226 | 3.6 % | 6,659 | (105) | (1.6 %) |
| Admissions - Behavioral Health | 2,211 | 2,291 | (80) | (3.5 %) | 1,965 | 246 | 12.5 % |
| Admissions - Total | 8,765 | 8,619 | 146 | 1.7 % | 8,624 | 141 | 1.6 % |
| Adjusted Admissions | 17,395 | 16,152 | 1,243 | 7.7 % | 16,341 | 1,054 | 6.5 % |



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT

VALLEYWISE HEALTH (COMBINED CARE SYSTEM)

FINANCIAL INDICATORS

For the Six Periods Ending December 31, 2023

| | DEC 2023 YTD Actual | DEC 2023 YTD Budget | DEC 2023 YTD Variance | YTD DEC 2023 % Change | YTD Prior Year DEC 2022 | YTD Prior Year Variance | YTD Prior Year % Change |
|--|------------------------|------------------------|--------------------------|-----------------------------|-------------------------------|-------------------------------|-------------------------------|
| Average Daily Census - Acute | 190 | 188 | 2 | 1.2 % | 189 | 1 | 0.5 % |
| Average Daily Census - Behavioral Health | 289 | 293 | (5) | (1.6 %) | 260 | 29 | 11.2 % |
| Average Daily Census - Total | 479 | 481 | (2) | (0.5 %) | 449 | 30 | 6.7 % |
| Adjusted Occupied Beds - Acute | 377 | 352 | 25 | 7.2 % | 358 | 19 | 5.3 % |
| Adjusted Occupied Beds - Behavioral Health | 573 | 549 | 23 | 4.2 % | 492 | 81 | 16.5 % |
| Adjusted Occupied Beds - Total | 950 | 901 | 49 | 5.4 % | 850 | 100 | 11.8 % |
| Paid FTEs - Payroll | 3,707 | 3,511 | (196) | (5.6 %) | 3,433 | (274) | (8.0 %) |
| Paid FTEs - Contract Labor | 463 | 487 | 24 | 4.9 % | 492 | 29 | 5.9 % |
| Paid FTEs - Total | 4,170 | 3,997 | (172) | (4.3 %) | 3,926 | (244) | (6.2 %) |
| FTEs per AOB | 4.39 | 4.43 | 0.05 | 1.0 % | 4.62 | 0.23 | 5.0 % |
| FTEs per AOB (w/o Residents) | 4.18 | 4.21 | 0.03 | 0.7 % | 4.40 | 0.21 | 4.9 % |
| Benefits as a % of Salaries | 29.3 % | 29.6 % | 0.4 % | 1.2 % | 29.2 % | (0.1 %) | (0.4 %) |
| Labor Costs as a % of Net Patient Revenue | 96.7 % | 90.9 % | (5.8 %) | (6.3 %) | 92.8 % | (3.9 %) | (4.2 %) |
| Salaries and Contract Labor per APD | \$ 1,136 | \$ 1,152 | \$ 16 | 1.4 % | \$ 1,200 | \$ 64 | 5.3 % |
| Benefits per APD | 271 | 271 | (0) | (0.1 %) | 272 | 1 | 0.4 % |
| Supplies per APD | 332 | 295 | (37) | (12.5 %) | 313 | (19) | (6.2 %) |
| Medical Service Fees per APD | 278 | 345 | 67 | 19.5 % | 331 | 54 | 16.1 % |
| All Other Expenses per APD * | 418 | 444 | 26 | 5.8 % | 532 | 114 | 21.4 % |
| Total Expenses per APD * | \$ 2,435 | \$ 2,507 | \$ 72 | 2.9 % | \$ 2,648 | \$ 213 | 8.0 % |
| Salaries and Contract Labor per Adj. Admission | \$ 11,417 | \$ 11,829 | \$ 413 | 3.5 % | \$ 11,485 | \$ 68 | 0.6 % |
| Benefits per Adj. Admission | 2,725 | 2,781 | 56 | 2.0 % | 2,606 | (119) | (4.6 %) |
| Supplies per Adj. Admission | 3,340 | 3,034 | (307) | (10.1 %) | 2,996 | (344) | (11.5 %) |
| Medical Service Fees per Adj. Admission | 2,792 | 3,544 | 752 | 21.2 % | 3,171 | 379 | 12.0 % |
| All Other Expenses per Adj. Admission * | 4,198 | 4,554 | 356 | 7.8 % | 5,088 | 890 | 17.5 % |
| Total Expenses per Adj. Admission * | \$ 24,472 | \$ 25,742 | \$ 1,270 | 4.9 % | \$ 25,347 | \$ 875 | 3.5 % |

* Excludes Depreciation

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending December 31, 2023**

OPERATING REVENUE

Patient Days, Admissions and Adjusted Patient Days

| <i>Acute Care</i> | Actual | Budget | Variance | %Variance |
|--------------------|--------|--------|----------|-----------|
| MTD - Patient Days | 6,186 | 5,808 | 378 | 6.5% |
| YTD - Patient Days | 34,977 | 34,550 | 427 | 1.2% |

| | | | | |
|------------------|-------|-------|-----|-------|
| MTD - Admissions | 1,171 | 1,002 | 169 | 16.9% |
| YTD - Admissions | 6,554 | 6,328 | 226 | 3.6% |

| | | | | |
|-------------------------------------|-----|-----|-----|------|
| MTD - Average Length of Stay (ALOS) | 5.3 | 5.8 | 0.5 | 8.9% |
| YTD - Average Length of Stay (ALOS) | 5.3 | 5.5 | 0.1 | 2.3% |

| | | | | |
|----------------------------------|-----|-----|----|------|
| MTD - Average Daily Census (ADC) | 200 | 187 | 12 | 6.5% |
| YTD - Average Daily Census (ADC) | 190 | 188 | 2 | 1.2% |

| <i>Behavioral Health</i> | Actual | Budget | Variance | %Variance |
|--------------------------|--------|--------|----------|-----------|
| MTD - Patient Days | 8,827 | 9,065 | (238) | -2.6% |
| YTD - Patient Days | 53,108 | 53,949 | (841) | -1.6% |

| | | | | |
|------------------|-------|-------|------|-------|
| MTD - Admissions | 373 | 388 | (15) | -3.9% |
| YTD - Admissions | 2,211 | 2,291 | (80) | -3.5% |

| | | | | |
|-------------------------------------|------|------|-------|-------|
| MTD - Average Length of Stay (ALOS) | 23.7 | 23.4 | (0.3) | -1.3% |
| YTD - Average Length of Stay (ALOS) | 24.0 | 23.5 | (0.5) | -2.0% |

| | | | | |
|----------------------------------|-----|-----|-----|-------|
| MTD - Average Daily Census (ADC) | 285 | 292 | (8) | -2.6% |
| YTD - Average Daily Census (ADC) | 289 | 293 | (4) | -1.4% |

| <i>Adjusted Patient Days (APD)</i> | Actual | Budget | Variance | %Variance |
|------------------------------------|---------|---------|----------|-----------|
| Month-to-Date | 28,605 | 27,561 | 1,043 | 3.8% |
| Year-to-Date | 174,813 | 165,849 | 8,963 | 5.4% |

Net patient service revenue

| | Actual | Budget | Variance | %Variance |
|-----------------------|----------------|----------------|----------------|-----------|
| Month-to-Date | \$ 40,093,781 | \$ 41,454,665 | \$ (1,360,884) | -3.3% |
| Year-to-Date | \$ 254,376,296 | \$ 259,516,527 | \$ (5,140,231) | -2.0% |
| Month-to-Date Per APD | \$ 1,402 | \$ 1,504 | \$ (102) | -6.8% |
| Year-to-Date Per APD | \$ 1,455 | \$ 1,565 | \$ (110) | -7.0% |

Other operating revenue

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 12,191,237 | \$ 12,860,545 | \$ (669,308) | -5.2% |
| Year-to-Date | \$ 87,753,959 | \$ 77,930,109 | \$ 9,823,851 | 12.6% |

The majority of the negative variance for the month is in the 340(b) program; while the majority of the positive variances are in Health II, retail pharmacies revenues, other incentives, offsetting revenue grants/research, and other miscellaneous operating revenue.

Total operating revenues

| | Actual | Budget | Variance | %Variance |
|---------------|----------------|----------------|----------------|-----------|
| Month-to-Date | \$ 52,285,018 | \$ 54,315,210 | \$ (2,030,192) | -3.7% |
| Year-to-Date | \$ 342,130,255 | \$ 337,446,635 | \$ 4,683,620 | 1.4% |

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending December 31, 2023**

OPERATING EXPENSES

Salaries and wages

| | Actual | Budget | Variance | %Variance |
|---------------|----------------|----------------|-----------------|-----------|
| Month-to-Date | \$ 26,828,108 | \$ 25,524,067 | \$ (1,304,041) | -5.1% |
| Year-to-Date | \$ 161,981,663 | \$ 151,667,373 | \$ (10,314,289) | -6.8% |

| | Actual | Budget | Variance | %Variance |
|-----------------------------|--------|--------|----------|-----------|
| <i>Paid FTE's - Payroll</i> | 3,682 | 3,514 | (168) | -4.8% |

| | Actual | Budget | Variance | %Variance |
|---|--------|--------|----------|-----------|
| <i>Paid FTE's - Payroll (w/o Residents)</i> | 3,679 | 3,510 | (170) | -4.8% |

| | Actual | Budget | Variance | %Variance |
|-------------------------------------|----------|----------|----------|-----------|
| <i>Salaries per FTE's - Payroll</i> | \$ 7,286 | \$ 7,264 | \$ (22) | -0.3% |

Contract labor

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 5,343,317 | \$ 5,991,187 | \$ 647,870 | 10.8% |
| Year-to-Date | \$ 36,613,953 | \$ 39,405,437 | \$ 2,791,484 | 7.1% |

| | Actual | Budget | Variance | %Variance |
|--|--------|--------|----------|-----------|
| <i>FTE's - Contract Labor incl Outsource</i> | 438 | 450 | 12 | 2.7% |

| | Actual | Budget | Variance | %Variance |
|-------------------------------|--------|--------|----------|-----------|
| <i>FTE's - Contract Labor</i> | | | | |
| Nursing operations - Acute | 134 | 142 | 8 | 5.6% |
| Revenue Cycle | - | - | - | -100.0% |
| Behavioral Health | 42 | 31 | (11) | -36.0% |
| Information Technology | - | - | - | -100.0% |
| Support Services | 11 | 10 | (1) | -9.8% |
| Interns & Residents | 192 | 202 | 10 | 5.0% |

| | Actual | Budget | Variance | %Variance |
|--|--------|--------|----------|-----------|
| <i>Paid FTE's - Payroll & Contract Labor</i> | 4,120 | 3,964 | (156) | -3.9% |

| | Actual | Budget | Variance | %Variance |
|-------------------------------------|--------|--------|----------|-----------|
| <i>Adjusted Occupied Beds (AOB)</i> | 923 | 889 | 34 | 3.8% |

| | Actual | Budget | Variance | %Variance |
|---------------------------|--------|--------|----------|-----------|
| <i>Paid FTE's per AOB</i> | 4.47 | 4.46 | (0.01) | -0.2% |

| | Actual | Budget | Variance | %Variance |
|---|--------|--------|----------|-----------|
| <i>Paid FTE's per AOB (w/o Residents)</i> | 4.25 | 4.23 | (0.03) | -0.6% |

Employee benefits

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|----------------|-----------|
| Month-to-Date | \$ 6,828,856 | \$ 7,477,771 | \$ 648,915 | 8.7% |
| Year-to-Date | \$ 47,397,822 | \$ 44,912,878 | \$ (2,484,943) | -5.5% |

The primary positive variances for the month are in the net medical expenses, and the paid leave accrual; while the primary negative variances for the month are in ASRS expenses and taxes.

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending December 31, 2023**

Benefits as a % of salaries

| | Actual | Budget | Variance | %Variance |
|---------------|--------|--------|----------|-----------|
| Month-to-Date | 25.5% | 29.3% | 3.8% | 13.1% |
| Year-to-Date | 29.3% | 29.6% | 0.4% | 1.2% |

Medical service fees

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 9,285,497 | \$ 9,648,860 | \$ 363,362 | 3.8% |
| Year-to-Date | \$ 48,563,909 | \$ 57,245,507 | \$ 8,681,598 | 15.2% |

The majority of the positive variance for the month is in DMG collections; while the majority of the negative variance for the month is in DMG staffing fees.

Supplies

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|----------------|-----------|
| Month-to-Date | \$ 9,671,422 | \$ 8,356,174 | \$ (1,315,248) | -15.7% |
| Year-to-Date | \$ 58,107,424 | \$ 49,000,188 | \$ (9,107,235) | -18.6% |

The negative variances for the month are primarily in pharmaceuticals, surgery related medical supplies (implants), and repairs & maintenance supplies; while majority of the positive variances for the month are primarily in blood & plasma supplies, and oxygen & other gases.

Purchased services

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 5,005,311 | \$ 4,826,642 | \$ (178,669) | -3.7% |
| Year-to-Date | \$ 28,994,828 | \$ 28,534,538 | \$ (460,290) | -1.6% |

The major negative variances for the month are in collection fees, management fees, laundry & dry cleaning services, attorney/legal fees, and reference laboratory services; while the major positive variances for the month are in other services, other professional services, and consulting & management.

Other expenses

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|----------------|-----------|
| Month-to-Date | \$ 5,399,014 | \$ 5,234,890 | \$ (164,124) | -3.1% |
| Year-to-Date | \$ 33,977,515 | \$ 31,748,128 | \$ (2,229,387) | -7.0% |

The major negative variances for the month are in risk management expenses, utilities, rent expense, and other miscellaneous expenses. The major positive variance for the month is in repair & maintenance.

Depreciation

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 4,146,011 | \$ 4,146,011 | \$ (0) | 0.0% |
| Year-to-Date | \$ 17,911,582 | \$ 26,593,473 | \$ 8,681,891 | 32.6% |

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending December 31, 2023**

Total operating expenses

| | Actual | Budget | Variance | %Variance |
|---------------|----------------|----------------|----------------|-----------|
| Month-to-Date | \$ 72,507,536 | \$ 71,205,602 | \$ (1,301,934) | -1.8% |
| Year-to-Date | \$ 433,548,694 | \$ 429,107,522 | \$ (4,441,172) | -1.0% |

Operating income (loss)

| | Actual | Budget | Variance | %Variance |
|---------------|-----------------|-----------------|----------------|-----------|
| Month-to-Date | \$ (20,222,518) | \$ (16,890,392) | \$ (3,332,126) | -19.7% |
| Year-to-Date | \$ (91,418,439) | \$ (91,660,887) | \$ 242,448 | 0.3% |

Non-operating revenues (expenses)

| | Actual | Budget | Variance | %Variance |
|---------------|---------------|---------------|--------------|-----------|
| Month-to-Date | \$ 12,150,779 | \$ 11,669,360 | \$ 481,420 | 4.1% |
| Year-to-Date | \$ 77,254,920 | \$ 71,510,938 | \$ 5,743,982 | 8.0% |

The major positive variances for the month are in capital related grant revenues, and operating related grant revenue; while majority of the negative variances are in local match related expenses.

Excess of revenues over expenses

| | Actual | Budget | Variance | %Variance |
|---------------|-----------------|-----------------|----------------|-----------|
| Month-to-Date | \$ (8,071,739) | \$ (5,221,032) | \$ (2,850,707) | 54.6% |
| Year-to-Date | \$ (14,163,518) | \$ (20,149,949) | \$ 5,986,431 | -29.7% |

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending December 31, 2023**

ASSETS

Cash and cash equivalents - Delivery system

| Dec-23 | Jun-23 | Change | % change |
|----------------|----------------|-----------------|----------|
| \$ 171,367,348 | \$ 241,214,127 | \$ (69,846,779) | -29.0% |

Cash and cash equivalents - Bond (restricted)

| Dec-23 | Jun-23 | Change | % change |
|----------------|----------------|-----------------|----------|
| \$ 105,921,330 | \$ 166,504,192 | \$ (60,582,862) | -36.4% |

Paid \$40.7M in principal and interest in July 2023 related to the 3rd and 4th bond offerings.

Patient A/R, net of allowances

| Dec-23 | Jun-23 | Change | % change |
|---------------|---------------|---------------|----------|
| \$ 97,546,876 | \$ 85,709,368 | \$ 11,837,509 | 13.8% |

Other receivables and prepaid items

| Dec-23 | Jun-23 | Change | % change |
|---------------|---------------|---------------|----------|
| \$ 64,947,743 | \$ 42,225,086 | \$ 22,722,658 | 53.8% |

FY24 other receivables / prepaids includes:

- | | |
|---|--|
| \$20.3M in prepaids/deposits | \$3.8M due from Wellpartner/340B program |
| \$12.2M in inventories | \$1.8M in retail pharmacy receivable |
| \$10.7M receivables from grants & research sponsors | \$611K due from other hospital - resident rotation |
| \$9.6M in Health II | \$600K due from Home Assist Health |
| \$5.2M due from other receivables | \$228K due from Health Foundation |

Estimated amounts due from third party payors

| Dec-23 | Jun-23 | Change | % change |
|---------------|---------------|---------------|----------|
| \$ 78,801,005 | \$ 50,640,640 | \$ 28,160,365 | 55.6% |

FY24 due from third party payors includes:

- | | |
|--|------------------------------------|
| \$76.4M due from AHCCCS for GME - FY2023 | \$320K due from First Things First |
| \$2.1M due from AHCCCS for DSH - FY2023 | |

Due from related parties

| Dec-23 | Jun-23 | Change | % change |
|--------------|--------------|----------------|----------|
| \$ 1,496,186 | \$ 3,376,279 | \$ (1,880,093) | -55.7% |

FY24 due from related parties includes:

- \$1.5M due from Public Health Ryan White Part A programs

Other Current Assets

| Dec-23 | Jun-23 | Change | % change |
|--------------|--------------|--------|----------|
| \$ 2,516,402 | \$ 2,516,402 | \$ - | 0.0% |

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending December 31, 2023**

Capital Assets, net

| Dec-23 | Jun-23 | Change | % change |
|----------------|----------------|---------------|----------|
| \$ 814,019,052 | \$ 796,596,154 | \$ 17,422,898 | 2.2% |

Other Assets

| Dec-23 | Jun-23 | Change | % change |
|--------------|--------------|--------|----------|
| \$ 5,005,017 | \$ 5,005,017 | \$ - | 0.0% |

Deferred outflows

| Dec-23 | Jun-23 | Change | % change |
|---------------|---------------|--------|----------|
| \$ 56,462,313 | \$ 56,462,313 | \$ - | 0.0% |

LIABILITIES AND NET POSITION

Current maturities of long-term debt

| Dec-23 | Jun-23 | Change | % change |
|---------------|---------------|--------------|----------|
| \$ 46,503,452 | \$ 43,216,702 | \$ 3,286,750 | 7.6% |

FY24 current maturities includes:

\$44.0M in Bond current portion and interest payable

\$2.5M in current portion - Lease Liability

Accounts payable

| Dec-23 | Jun-23 | Change | % change |
|---------------|---------------|--------------|----------|
| \$ 77,836,621 | \$ 75,381,153 | \$ 2,455,468 | 3.3% |

FY24 accounts payable includes:

\$39.4M in vendor related expense accruals/estimates

\$16.5M due to DMG for annual recon and pass thru payments

\$21.4M in vendor approved payments

Accrued payroll and expenses

| Dec-23 | Jun-23 | Change | % change |
|---------------|---------------|--------------|----------|
| \$ 31,170,627 | \$ 28,158,703 | \$ 3,011,924 | 10.7% |

Medical claims payable

| Dec-23 | Jun-23 | Change | % change |
|---------------|---------------|--------------|----------|
| \$ 18,156,140 | \$ 18,892,539 | \$ (736,399) | -3.9% |

**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH (COMBINED CARE SYSTEM)
FINANCIAL STATEMENT HIGHLIGHTS
For the month ending December 31, 2023**

Due to related parties

| Dec-23 | Jun-23 | Change | % change |
|--------------|----------|--------------|-----------|
| \$ 9,509,352 | \$ 1,434 | \$ 9,507,918 | 663108.7% |

Timing of tax levy revenue accrual and actual collection received.

Other current liabilities

| Dec-23 | Jun-23 | Change | % change |
|---------------|---------------|-----------------|----------|
| \$ 69,467,813 | \$ 80,724,270 | \$ (11,256,458) | -13.9% |

FY24 other current liabilities includes:

\$25.8M in deferred income (Health Foundation)
\$14.7M in deferred income (MC ARPA)
\$8.2M in deferred income (FQHC)
\$5.8M in patient credit balances
\$5.6M in settlement reserved for Medicare

\$4.8M in other deferred income (TIP, Optum, APSI)
\$3.0M in deferred income for grants, research, & study residuals
\$887K in capitation payments
\$402K in unclaimed/stale dated checks
\$219K in other deferred income (Target distribution/High impact areas)

Bonds payable

| Dec-23 | Jun-23 | Change | % change |
|----------------|----------------|-----------------|----------|
| \$ 605,156,180 | \$ 640,746,278 | \$ (35,590,098) | -5.6% |

Reclassified current maturities portion of Bond payable

Other long-term debt

| Dec-23 | Jun-23 | Change | % change |
|--------------|--------------|--------|----------|
| \$ 5,005,017 | \$ 5,005,017 | \$ - | 0.0% |

Long-term portion of lease liability

Long-term liabilities

| Dec-23 | Jun-23 | Change | % change |
|----------------|----------------|--------|----------|
| \$ 356,444,644 | \$ 356,444,644 | \$ - | 0.0% |

Pension liability per ASRS report - GASB68

Deferred inflows

| Dec-23 | Jun-23 | Change | % change |
|---------------|---------------|--------|----------|
| \$ 18,778,412 | \$ 18,778,412 | \$ - | 0.0% |

Net position

| Dec-23 | Jun-23 | Change | % change |
|----------------|----------------|-----------------|----------|
| \$ 160,055,014 | \$ 182,900,424 | \$ (22,845,409) | -12.5% |



**Valleywise Health
Health Plan sale proceeds**

| | | |
|--|------------------|---------------------------------------|
| Beginning balance - February 01, 2017 | | \$ - |
| ADD: Payment received from UHC for member transfer | \$ 33,361,499.99 | |
| Investment income | 1,601,294.04 | |
| Fund Interest | 1,151,346.14 | |
| Bank interest income received - YTD | <u>85,173.27</u> | |
| | | 36,199,313.44 |
| LESS: Consulting services expense | (547,601.00) | |
| Valleywise Health Foundation Funding | (5,500,000.00) | |
| Bank charges - transfer fees | <u>(50.00)</u> | |
| | | (6,047,651.00) |
| Ending balance as of December 31, 2023 | | <u><u>\$ 30,151,662.44</u></u> |

6. Quarterly Investment of Funds Report



Investment of Funds report Fiscal Year 2024

| FY2024 Combined | Average Cash Balance ** | Allocated Investment Income | Effective Yield | Annual Yield |
|----------------------------|------------------------------------|--|----------------------------|-------------------------|
| July | \$ 345,729,041 | \$ 986,521 | 0.29% | 3.42% |
| August | \$ 313,961,568 | \$ 833,756 | 0.27% | 3.19% |
| September | \$ 295,378,340 | \$ 643,467 | 0.22% | 2.61% |
| October | \$ 329,677,831 | \$ 663,228 | 0.20% | 2.41% |
| November | \$ 296,463,445 | \$ 972,770 | 0.33% | 3.94% |
| December | \$ 276,850,653 | \$ 526,346 | 0.19% | 2.28% |
| Monthly average | \$ 309,676,813 | \$ 771,015 | 0.26% | 3.07% |

| FY2024 Operating - VHMC | Average Cash Balance ** | Allocated Investment Income | Effective Yield | Annual Yield |
|------------------------------------|------------------------------------|--|----------------------------|-------------------------|
| July | \$ 220,821,449 | \$ 489,246 | 0.22% | 2.66% |
| August | \$ 202,635,393 | \$ 451,380 | 0.22% | 2.67% |
| September | \$ 186,365,634 | \$ 349,533 | 0.19% | 2.25% |
| October | \$ 210,867,147 | \$ 366,082 | 0.17% | 2.08% |
| November | \$ 185,211,829 | \$ 551,997 | 0.30% | 3.58% |
| December | \$ 170,745,784 | \$ 287,925 | 0.17% | 2.02% |
| Monthly average | \$ 196,107,873 | \$ 416,027 | 0.21% | 2.53% |

| FY2024 Bond - related | Average Cash Balance ** | Allocated Investment Income | Effective Yield | Annual Yield |
|----------------------------------|------------------------------------|--|----------------------------|-------------------------|
| July | \$ 124,907,591 | \$ 456,682 | 0.37% | 4.39% |
| August | \$ 111,326,176 | \$ 339,074 | 0.30% | 3.65% |
| September | \$ 109,012,706 | \$ 253,937 | 0.23% | 2.80% |
| October | \$ 118,810,684 | \$ 258,829 | 0.22% | 2.61% |
| November | \$ 111,251,616 | \$ 383,614 | 0.34% | 4.14% |
| December | \$ 106,104,869 | \$ 199,946 | 0.19% | 2.26% |
| Monthly average | \$ 113,568,940 | \$ 315,347 | 0.30% | 3.61% |

** Average cash balance includes both cash and cash equivalents, short and long term investments

** Investments are part of Maricopa County Treasurer's investment pool.

7. Update on Care Reimagined Projects

January 22, 2024

Care Reimagined Updates

Presented by:
Lia Christiansen, Chief Administrative Officer

373/504

Care Reimagined Program Overview

Care Reimagined Program Features



\$935M bond-funded program



13 Updated or new locations



680 Design & Construction Professionals Engaged



7 Decommission sites



Expanding High Quality Care



Over **27,083** total views on The Vine

Completion to Date:

| | |
|--|------|
| Valleywise Health Medical Center Campus | 89% |
| Valleywise Behavioral Health Center Maryvale | 100% |
| Ambulatory Peoria | 100% |
| South Phoenix/Laveen | 100% |
| North Phoenix | 100% |
| Mesa | 100% |
| West Maryvale | 100% |

Approximately 14,305,687 Accumulative Man Hours For All Projects

Care Reimagined Program Dashboard

| Legend: | |
|-----------------|---|
| Not Applicable | ○ |
| Not Started | ● |
| On Target | ● |
| Mitigation Plan | ● |
| Major Concern | ● |
| Completed | ● |

| | Schedule | Budget | Land Acquisition | Operational Program | Design | Construction | Off-Site Utilities | Long-Lead Materials | Medical EQUIP | FF&E | Safety | Issues |
|---|----------|--------|------------------|---------------------|--------|--------------|--------------------|---------------------|---------------|------|--------|--------|
| VHMC MAIN CAMPUS | | | | | | | | | | | | |
| Central Utilities Plant / Utility Corridors (2611) | | | N/A | | | | | | N/A | | | |
| Valleywise Health Medical Center | ● | ● | N/A | | | ● | | | ● | ● | | ● |
| West Parking | | | N/A | | | ● | | | N/A | N/A | | |
| Site Hardscape | | | N/A | | | | N/A | | N/A | N/A | | |
| Admin / Research / Faculty Support Services Building (S.S.B.) | | | N/A | | | | | | | ● | | |
| Abatement / Demolition (VHMC) | ● | ● | N/A | | ● | ● | ● | ● | N/A | N/A | ● | N/A |
| Valleywise Behavioral Health Center-Phoenix (Annex) | | | N/A | | | | | | N/A | | | |

Valleywise Health Medical Center Campus

Budget alignment and escalation: Valleywise Health approved an alternate funding source for \$20M plus the cost of the additional beds. Industry material and labor shortages, and project changes have impacted the cost and schedule for the ACH, as well as future site and demolition work packages. The Go-Live date of 4/11/2024 has been established.

Valleywise Health Piper Pavilion

Technology projected budget overage. Mitigation plan is ongoing to reduce cost exposure.

Valleywise Health Medical Center Campus

2601 E. Roosevelt St. Phoenix, AZ 85008

Vanir Project Director: Mike Miller
Programming: Blue Cottage
CM at Risk: Kitchell Contractors Inc.
Architect: Cuningham Group Architecture Inc.

Project Information:

The Medical Center Campus scope is comprised of many elements for hospital improvement that include replacing the existing Acute Care Hospital, Annex behavioral health air handling unit, and server accommodations. The new Central Utility Plant was built with an immediate connection to the existing site buildings for combined annual energy savings throughout the site construction duration.

Decommissioning of existing buildings, current Valleywise Health Medical Center, CAC (Administration Building), Hogan, and Central Energy Plant, to be phased post-Medical Center go-live. The laundry building decommissioning made way for the Piper Pavilion currently nearing completion (phased occupancy).

VHMC Acute Care & Ancillary Facilities Timeline

| | |
|--|-----------------------|
| Final Design Completion | Dec 2020 |
| Construction Contract-Substantial Completion | Oct. 30, 2023 |
| Substantial Completion Based on Approved Change Orders | November 29, 2023 |
| Substantial Completion Based on Observed Construction Progress | January 30, 2024 |
| Activation/Licensing | Sept. 2023-April 2024 |
| "Go-Live" | April 11, 2024 |

CONSTRUCTION UPDATE:

- Steris light and boom start-up and commissioning have commenced
- State testing of the elevators with the fire alarm system is underway
- All elevators are scheduled to be turned over in mid-January

EQUIPMENT & ACTIVATION UPDATE:

- Activation planning is ongoing and relocation planning is underway
- **NEXT 30 DAYS:**
- Lab automation line installation is scheduled for completion at the end of January with final connections completed in February
- Med gas testing and certification is projected to be complete in January
- Test & Balance throughout the building including Pharmacy and Lab hoods is expected to be complete in January
- Punch item corrections continue on all levels except level 1 North and level 2 which will be punched in January

| Estimate at Completion | Paid to Date | Billed to Date | Percent Spent |
|------------------------|--------------|------------------|---------------|
| \$616.6M | \$526.9M | \$538.4M | 87% |
| Days w/o Incident | Manhours | Percent Complete | |
| 906* | 26,270 | 98%* | |
| *without loss of time | | 89%** | |
| 376/504 | | | |

* Construction Complete

**Overall Complete

Source: Vanir CM, updated 01/08/24

Valleywise Health Medical Center Campus

2601 E. Roosevelt St. Phoenix, AZ 85008

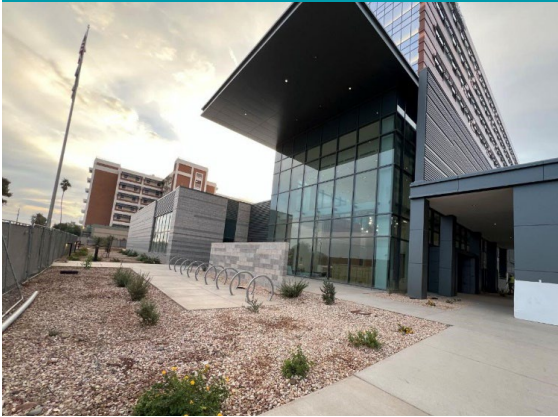


377/504

Valleywise Health Medical Center Campus

2601 E. Roosevelt St. Phoenix, AZ 85008

North Lobby Elevation



West Elevation, South of Lobby



PET/CT Pad Location



378/504

Valleywise Health Medical Center Campus

2601 E. Roosevelt St. Phoenix, AZ 85008

Acute Care Hospital

- All new major medical equipment has been installed.
- Final keys and cores have been turned over to Kitchell to install.
- Phase 4A parking has been turned over to Valleywise.
- Phase 4B parking demolition is complete. Underground electrical is in progress.

Level 2, Cath Lab



Level 4, Burn Trauma Bay



Level 3, Lab Progress

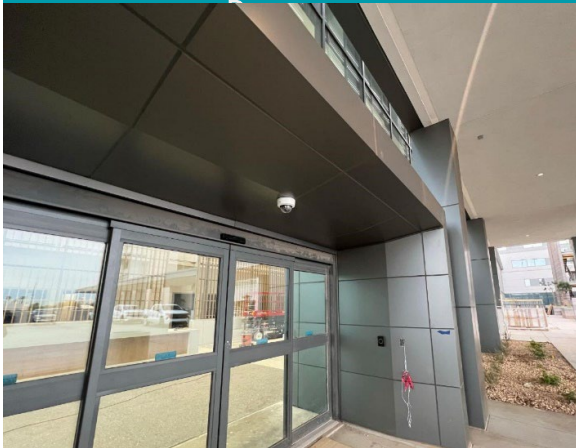


379/504

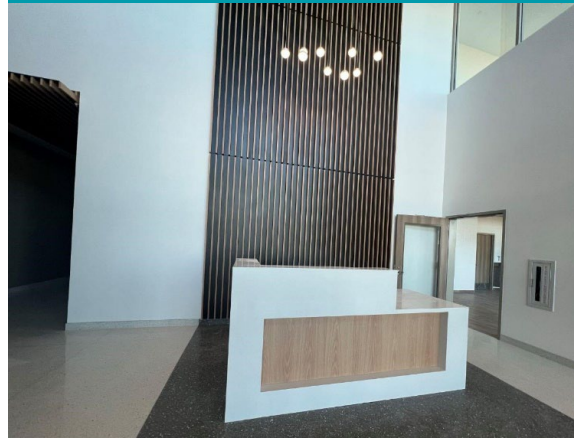
Valleywise Health Medical Center Campus

2601 E. Roosevelt St. Phoenix, AZ 85008

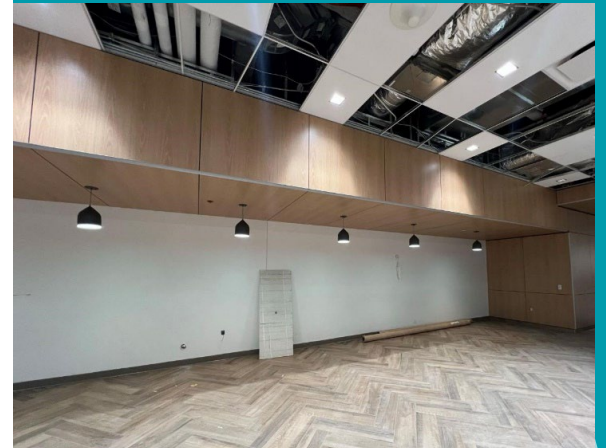
Exterior North Lobby Entrance



Level 1, Burn Unit Entry Lobby



Level 1, Dining Lighting Progress



Valleywise Health Medical Center Campus

2601 E. Roosevelt St. Phoenix, AZ 85008

Level 6, Playroom



Level 1, Servery /Dining



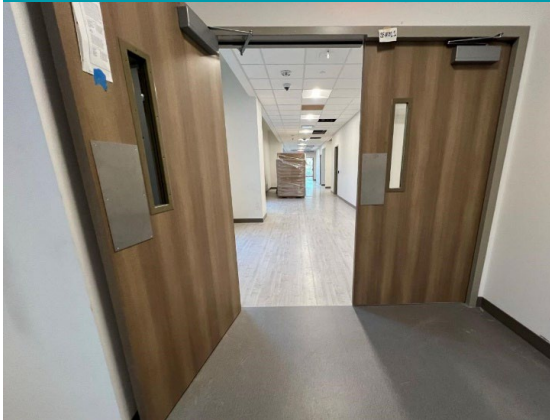
Level 1, Dining Corridor



Valleywise Health Medical Center Campus

2601 E. Roosevelt St. Phoenix, AZ 85008

Level 2, West Endoscopy Corridor



Level 1, NucMed Hot Lab



Level 3, Microbiology Lab



January 22, 2024

Care Reimagined Updates

Day in the Life

Day in the Life Exercises (DIL)

What?

A coordinated simulation exercise that will focus on testing workflows, facility systems and equipment, technology integration, travel paths, and patient safety systems

Why?

A “dress rehearsal” for testing Day One operations to identify, prioritize and resolve critical path issues prior to go-live and generate confidence and excitement of staff

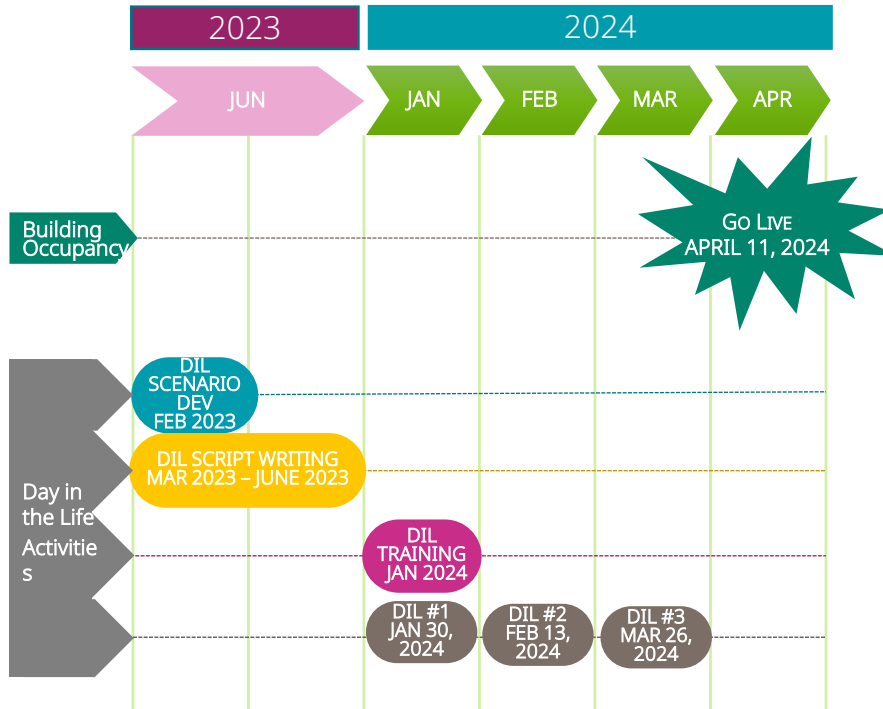
How?

Staff “play out” [scripted scenarios](#) in the ACH testing the patient journey, integrating multiple departments and processes

- Same scenarios are run across three separate DIL exercises to measure progress and ensure readiness



DIL Key Activities and Timeline



- **Department leadership and staff** involved in development of customized high-level scenarios, script language development, and resource identification


- **21** scenarios sequenced over entire day
- **180** participants engaged to simulate the following roles:
 - Scenario **Directors** and **Evaluators**
 - **Staff**
 - **Physicians**
 - **Patient** and **family** visitors
 - **Vendor** support
 - Debriefs occur after every scenario and in a large-group setting at the end of the day

Example A

Department: Acute Care (multidisciplinary)

Scenario Description:

Post Op patient is admitted to L9. Patient codes, is intubated and is transferred to the SICU. Stat Labs are ordered and delivered to the Lab by Patient Transport. Family arrives to visit, follows visitor process to SICU. Blood is needed and Ordered. Patient Transport transports blood from the Blood Bank to the SICU. Patient requires emergent trip back to OR.



INTEGRATED PROGRAM MANAGEMENT OFFICE (IPMO)

DIL Scenario #2: Admit from OR to L9 with Care Escalation to SICU

March 2023

Goals and Objectives

Day in the Life (DIL) is a **low fidelity simulation exercise to help identify issues prior to Go Live**; as such, it is expected that the testing components may not work and/or you may not achieve the desired outcomes. DIL is not intended to test clinical skills; it focuses on testing equipment, technology, process, travel paths, handoffs, and communications.

Testing Components

| Equipment and Technology | Processes and Travel Paths | Department Handoffs | Departments Involved |
|---|---|--|--|
| Epic, Mobile Device, Nurse Call, A-phone, Rover | Travel path from PACU to L9; Travel path from L9 to SICU; Travel path from SICU to Lab; Travel path Front Lobby to SICU; Travel path SICU to Blood Bank; Travel path from SICU to OR, Code cart restock | PACU RN to L9 RN; L9 Care Team to Code Team; Code Team to SICU; SICU to OR | Acute Care, ICU, Lab, Patient Transport, Supply Chain, Pharmacy, Code Team, HTM, Respiratory Therapy |

Scenario Description:

Post-op patient is admitted to L9. Patient codes, is intubated and is transferred to the SICU. Stat Labs are ordered and delivered to the Lab. Code cart is taken for exchange process. Family arrives to visit, follows visitor process to SICU. Blood is needed and ordered. Patient Transport transports blood from the Blood Bank to the SICU. Patient requires emergent trip back to OR.

Patient Name: Pam Majerlie, Female, 62

| Actions | Outcomes To Be Validated | Evaluator Comments | Staff |
|----------------------------------|--|--------------------|---|
| Care Delivery | | | |
| 1 Patient admitted to L9 post-op | <ul style="list-style-type: none"> • PACU calls for bed assignment • Handoff report between PACU and Unit • Patient recovered in PACU • Patient Transport request • Patient Transport request | | Nurse, Bed Placement, Patient Transport, EVS, HUC |

Example B

Department: Emergency Department (multidisciplinary)

Scenario Description:

Adult patient arrives in the ED. Patient requires ASL interpretation. Patient receives quick look and is sent to Fast Track. Patient requires point-of-care test. Patient is discharged and walks over to Outpatient Pharmacy; cash is collected for Rx. Security collects the cash. ED Room turned over.



INTEGRATED PROGRAM MANAGEMENT OFFICE (IPMO)

DIL Scenario #6: ED Walk-in Fast Track Patient

2023

Goals and Objectives

Day in the Life (DIL) is a **low fidelity simulation exercise to help identify issues prior to Go Live**; as such, it is expected that the testing components may not work and/or you may not achieve the desired outcomes. DIL is not intended to test clinical skills; it focuses on testing equipment, technology, process, travel paths, handoffs, and communications.

Testing Components

| <i>Equipment and Technology</i> | <i>Processes and Travel Paths</i> | <i>Department Handoffs</i> | <i>Departments Involved</i> |
|--|---|----------------------------|---|
| Epic Propio, Mobile Device, Discharge pharmacy notifications, POC test iSTAT Equipment needed for OPD Pharmacy pick-up/cash collection (?), ScriptPro | Travel path to triage and then to Fast Track, travel path to discharge pharmacy | Handoffs | ED, Language Services, Patient Access, Pharmacy, Security, ED Nurse, ED Provider, ED Tech |

Scenario Description:

Adult patient arrives in the ED. Patient requires ASL interpretation. Patient receives quick look and is sent to Fast Track. Patient requires point-of-care test. Patient is discharged and walks over to Outpatient Pharmacy and cash is collected for Rx. Security is called to escort the cash. ED Room turn over

Patient Name: Marla Barkley, Female, 29, ASL


| <i>Actions</i> | <i>Outcomes To Be Validated</i> | <i>Evaluator Comments</i> | <i>Staff</i> |
|---|--|---------------------------|---|
| Arrival | | | |
| 1 Patient arrives, is triaged determined to be acuity level 5, and sent to sub-wait | <ul style="list-style-type: none">• Patient arrives into ED• ASL Interpretation device Propio is retrieved• Patient is triaged and arrived and sent to subwait (assume no beds available)• Patient is pulled to Fast track room• Full Registration occurs while patient is in the room | | Triage Nurse, Patient Access Rep, Language Services |

Example C

Department: Cardio Diagnostics (multidisciplinary including new sallyport/holding area)

Scenario Description:

Incarcerated patient arrives via transport into the Sallyport. Patient needs a stress echo test. Patient is registered and then retrieved by Cardio Dx team. Patient is held in department holding area. Stress Echo test performed, results validated, and tested. Patient codes in the Stress Lab and is stabilized.



INTEGRATED PROGRAM MANAGEMENT OFFICE (IPMO)

DIL Scenario #8: Sallyport arrival for Stress Echo

2023

Goals and Objectives

Day in the Life (DIL) is a **low fidelity simulation exercise to help identify issues prior to Go Live**; as such, it is expected that the testing components may not work and/or you may not achieve the desired outcomes. DIL is not intended to test clinical skills; it focuses on testing equipment, technology, process, travel paths, handoffs, and communications.

Testing Components

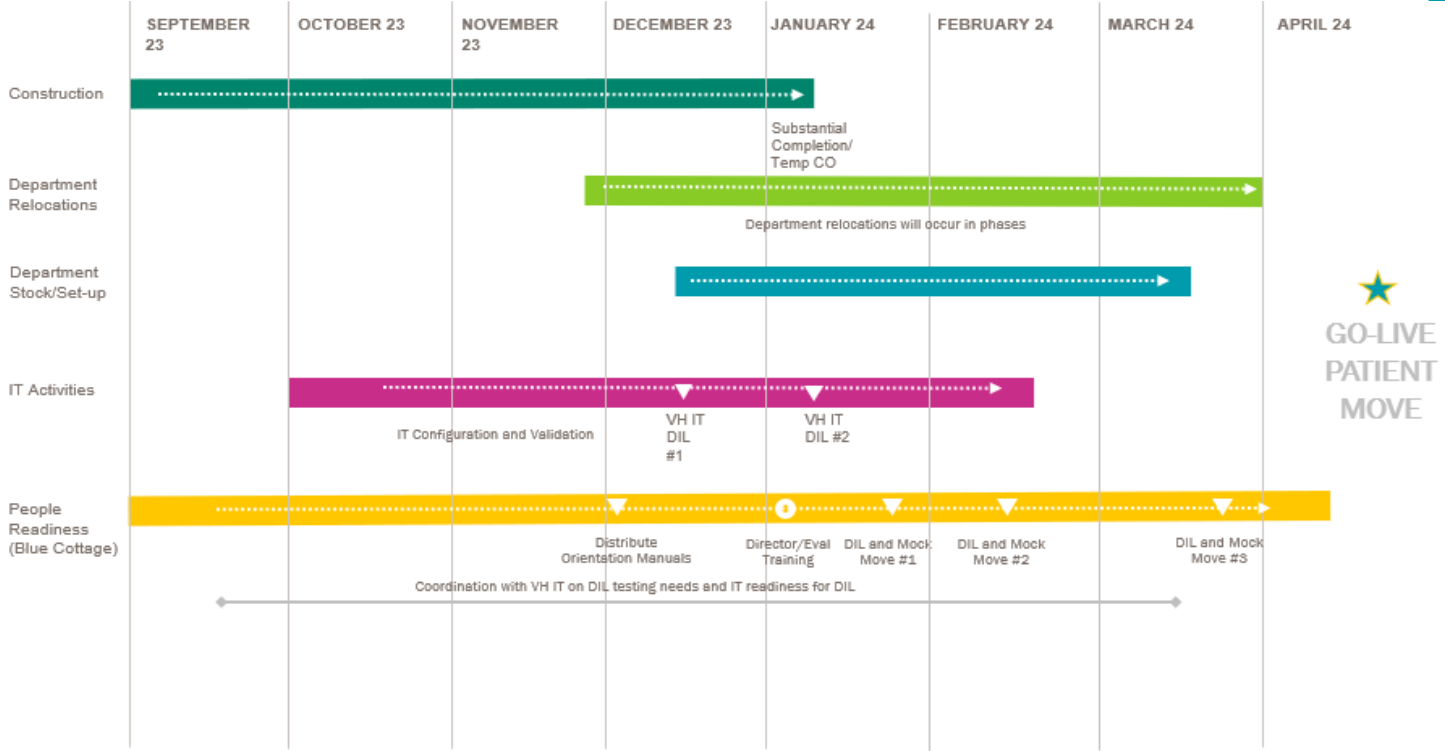
| Equipment and Technology | Processes and Travel Paths | Department Handoffs | Departments Involved |
|--|---|---|---|
| Epic, Code Blue/Nurse Assist Dual Push Button Station, Mobile Device, Code Cart, PACS, EKG Machine | Sally port entrance and arrival process | Cardio Diagnostics, Patient Access, Security, Code Team | Patient Access, Cardio Diagnostics, Security, Code Team |

Scenario Description:
Incarcerated patient arrives via transport into the Sallyport. Patient needs a stress echo test. Patient is registered and then retrieved by Cardio Dx team. Patient is held in department holding area. Stress Echo test performed and results validated and tested. Patient codes in the Stress Lab and then is stabilized.

Patient Name: Diana Taurasi, Female, 55, Inmate

| Actions | Outcomes To Be Validated | Evaluator Comments | Staff |
|---|---|--------------------|--|
| Arrival | | | |
| 1 Patient arrives via Sallyport and is escorted to holding area | <ul style="list-style-type: none"> • Arrival process into sallyport; access into garage and communication with Security Team • Patient Access visibility to see patient arrive | | Inmate Patient, Correction Officer, Security Officer, Patient Access Rep |
| 2 Patient is registered | <ul style="list-style-type: none"> • Patient registration is completed in Epic • Patient band is printed and put on patient • Department is able to see patient has arrived in Epic (and sees that patient in Sallyport) | | Inmate Patient and Officer, Patient Access Rep |

Valleywise Health Medical Center Campus Path to Go-Live



★
GO-LIVE
PATIENT
MOVE

▼ MILESTONE ○ MEETING

Valleywise Health Medical Center Campus

Dec. 2023/Jan 2024 :

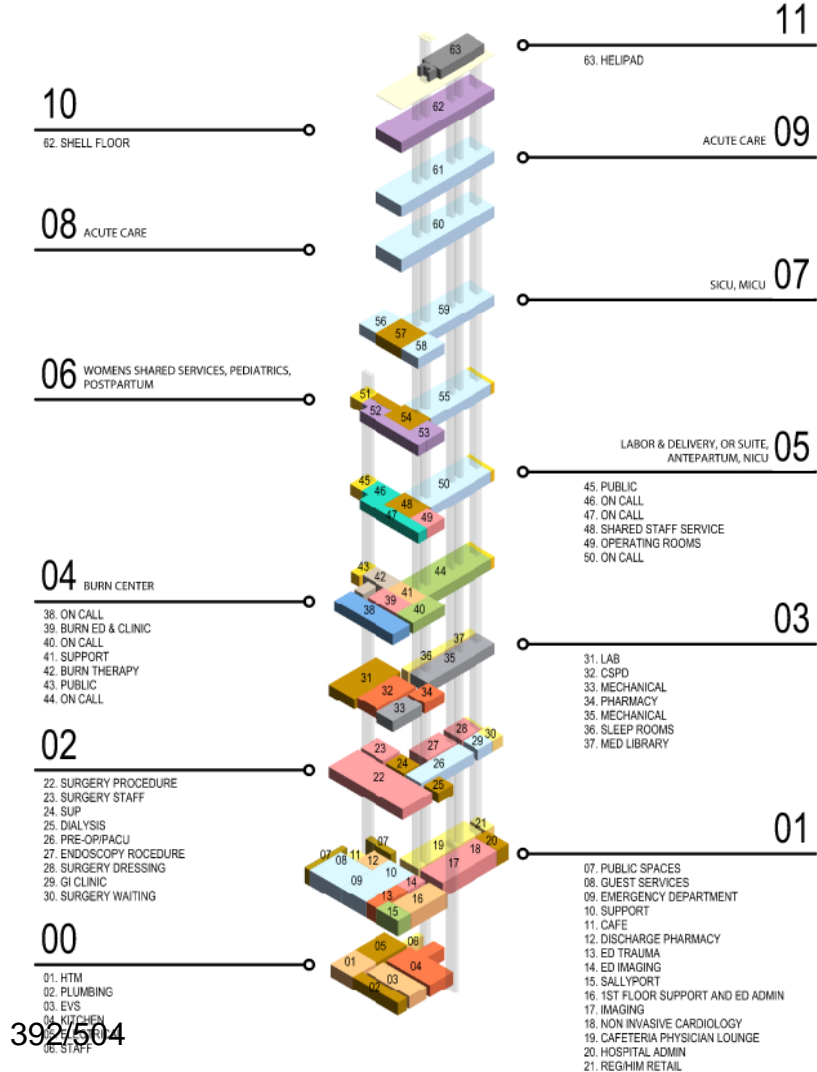
- Continue installation of lab automation lines for microbiology and the core lab
- Begin deployment of new equipment from the warehouse into final locations
- Start the migration of the existing lab to the new lab in ACH
- Finish the review of existing equipment and integrate this information into the master move plan
- Finalize the equipment travel route during the patient move
- Participate and support the Day in the Life exercises

Feb 2024:

- Continue deployment of new equipment from the warehouse into final locations
- Continue the migration of the existing lab to the new lab in ACH
- Participate and support the Day in the Life exercises

Valleywise Health Medical Center Campus

Departmental stacking diagram



3927504

Valleywise Health – Virginia G. Piper Charitable Trust Pavilion

2609 E. Roosevelt St. Phoenix, AZ 85008

Vanir Project Manager: Shannon Lobdell

Programming: Blue Cottage

CM at Risk: Kitchell Contractors Inc.

Architect: Cunningham Group Architecture Inc.

Project Information:

The Piper Pavilion scope comprises of a multi-story building that will house Supply Chain, Research & Education, SIM Lab, Faculty Spaces and Administrative Programs to support the new Acute Care Hospital

Piper Pavilion Timeline

| | |
|---|---------------------|
| Final Design Completion | January 2021 |
| Construction Completion | Nov 2023 |
| Temporary Certificate of Occupancy (TCO) 1 st and 2 nd Floors | June 2023 |
| Warehouse "Go Live" | June 2023 |
| Temporary Certificate of Occupancy (TCO) 3 rd Floor | July 2023 |
| Temporary Certificate of Occupancy (TCO) 4 th and 6 th Floors | August 2023 |
| Activation (including 5 th Floor) | June –February 2024 |
| Final Certificate of Occupancy (Completion of 5 th Floor) | November 2, 2023 |
| 5 th Floor Move-In | TBD |

CONSTRUCTION UPDATE:

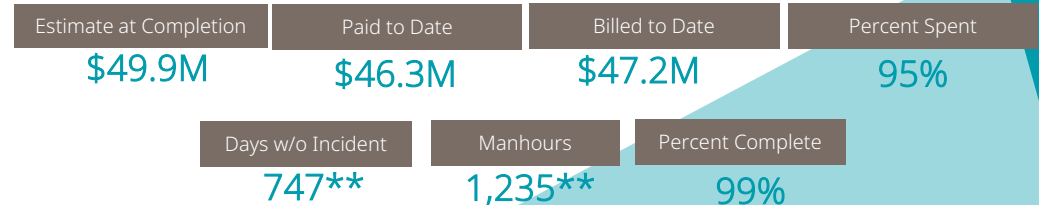
- Punch list activities are underway on level 5

EQUIPMENT & ACTIVATION UPDATE:

Upcoming level 5 activation activities to begin.

NEXT 30 DAYS:

- Project closeout activities continue
- Punch list items on level 5 to be completed
- Activation activities on level 5 to commence



393/504 ** No updates since Substantial Completion

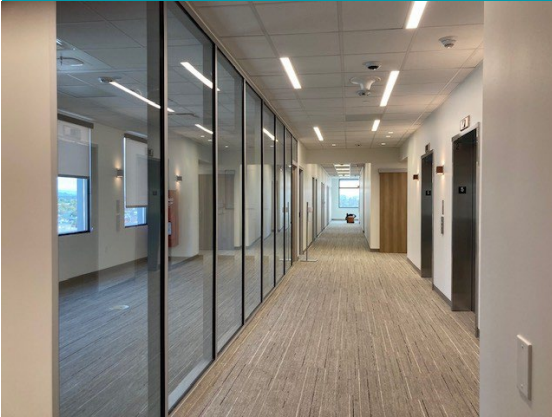
Valleywise Health – Virginia G. Piper Charitable Trust Pavilion

2609 E. Roosevelt St. Phoenix, AZ 85008

Level 5, Conference Room



Level 5, Elevator Lobby



Level 5, Kitchenette Area



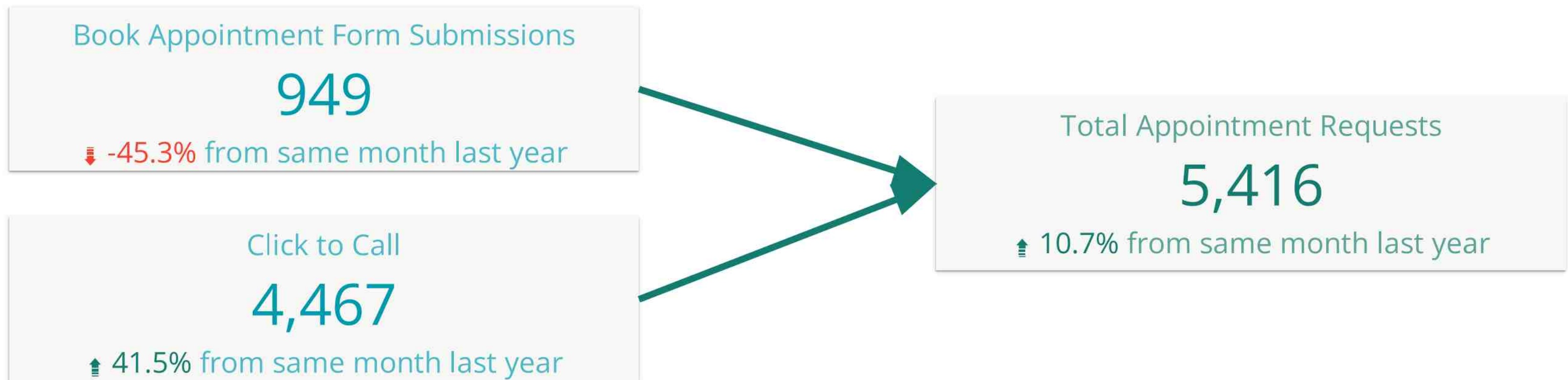
Conclusion – Discussion – Q&A – Next Steps



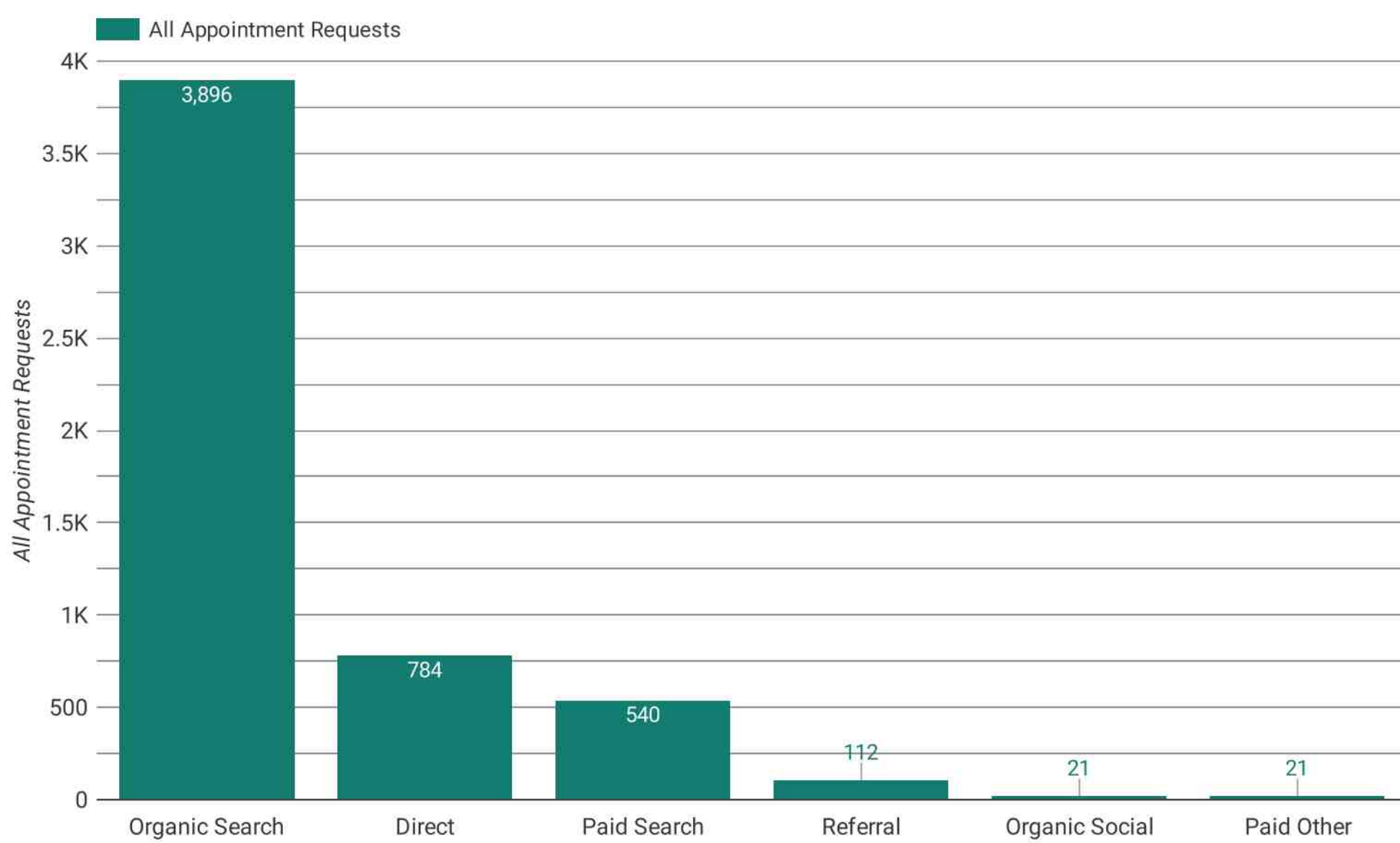
8.a. Marketing and Communications Report - November 2023

Nov 1, 2023 - Nov 30, 2023

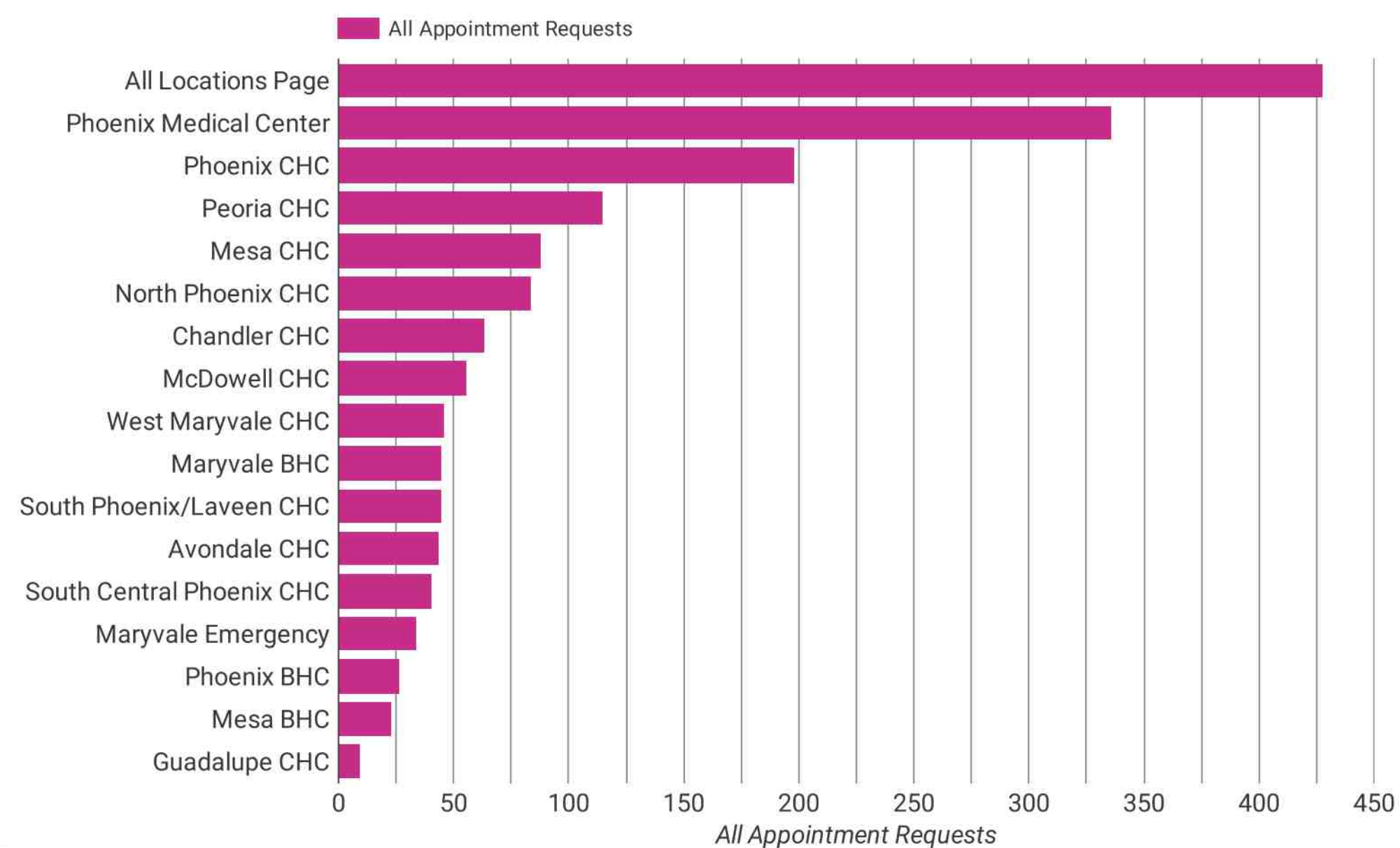
How Many People Are Visiting Valleywise



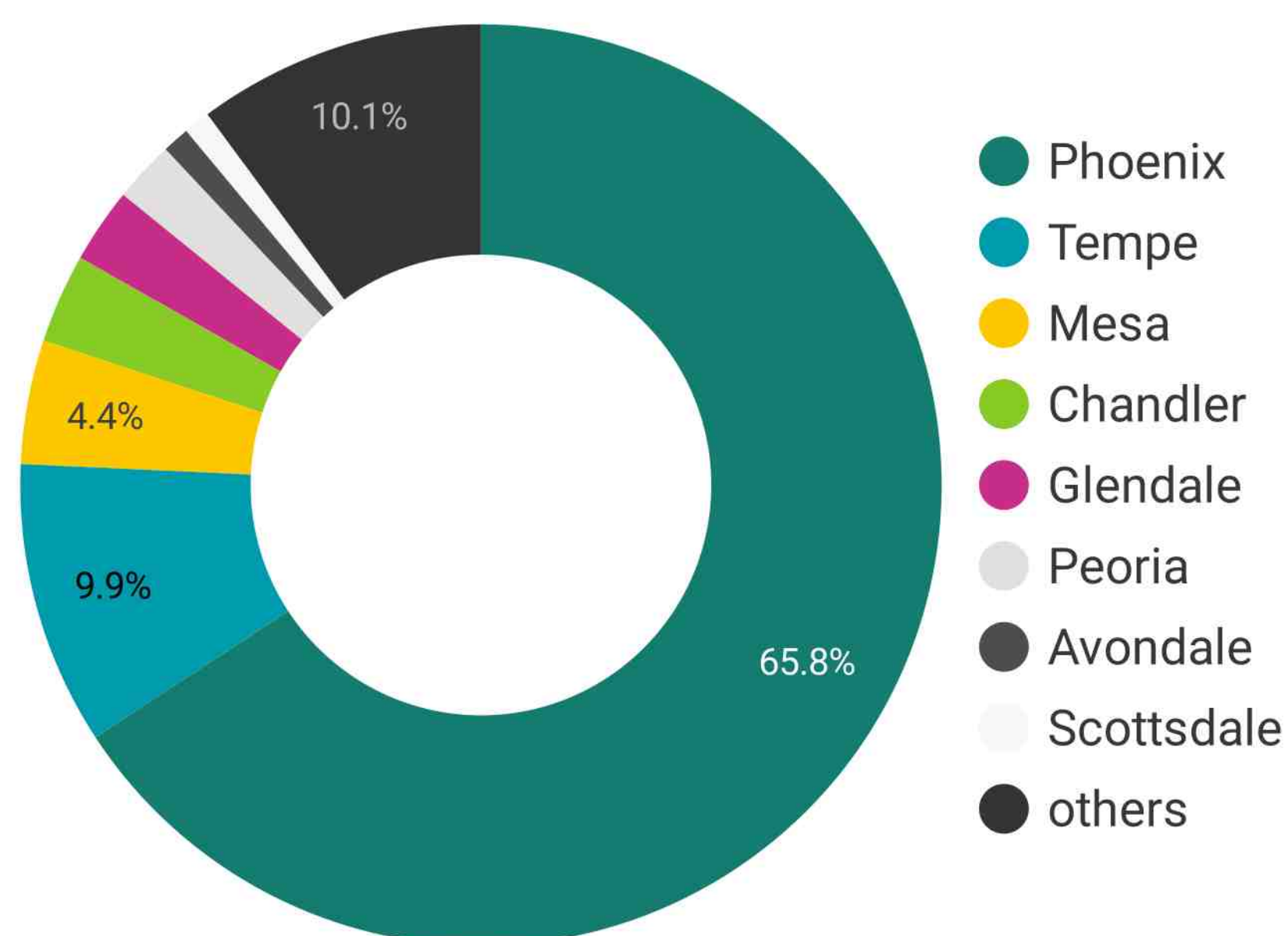
What Marketing Channels Are Driving Visits?



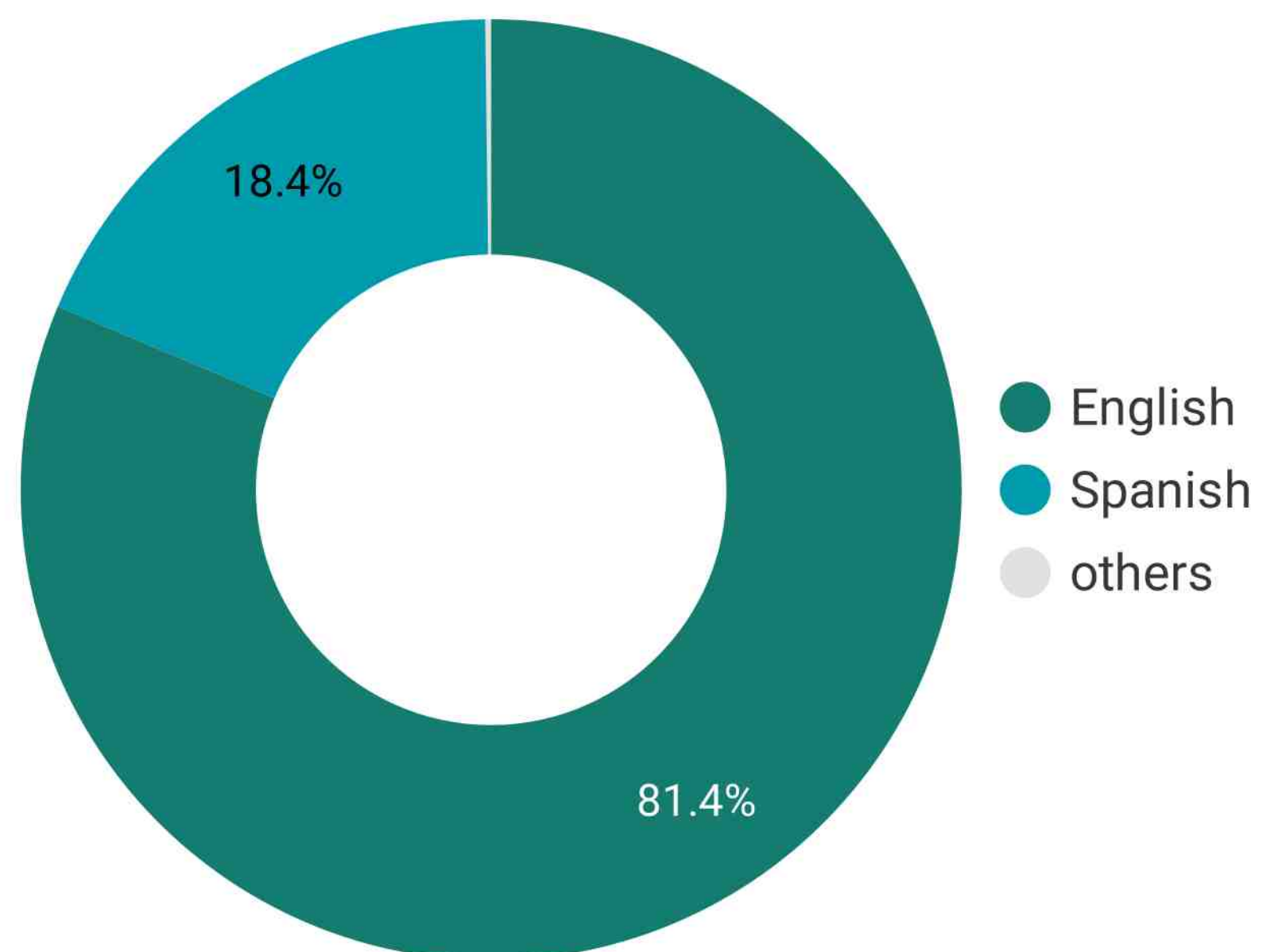
Location Pages Viewed Before Requesting an Appointment



Where Are People in Arizona Making Appointments From?



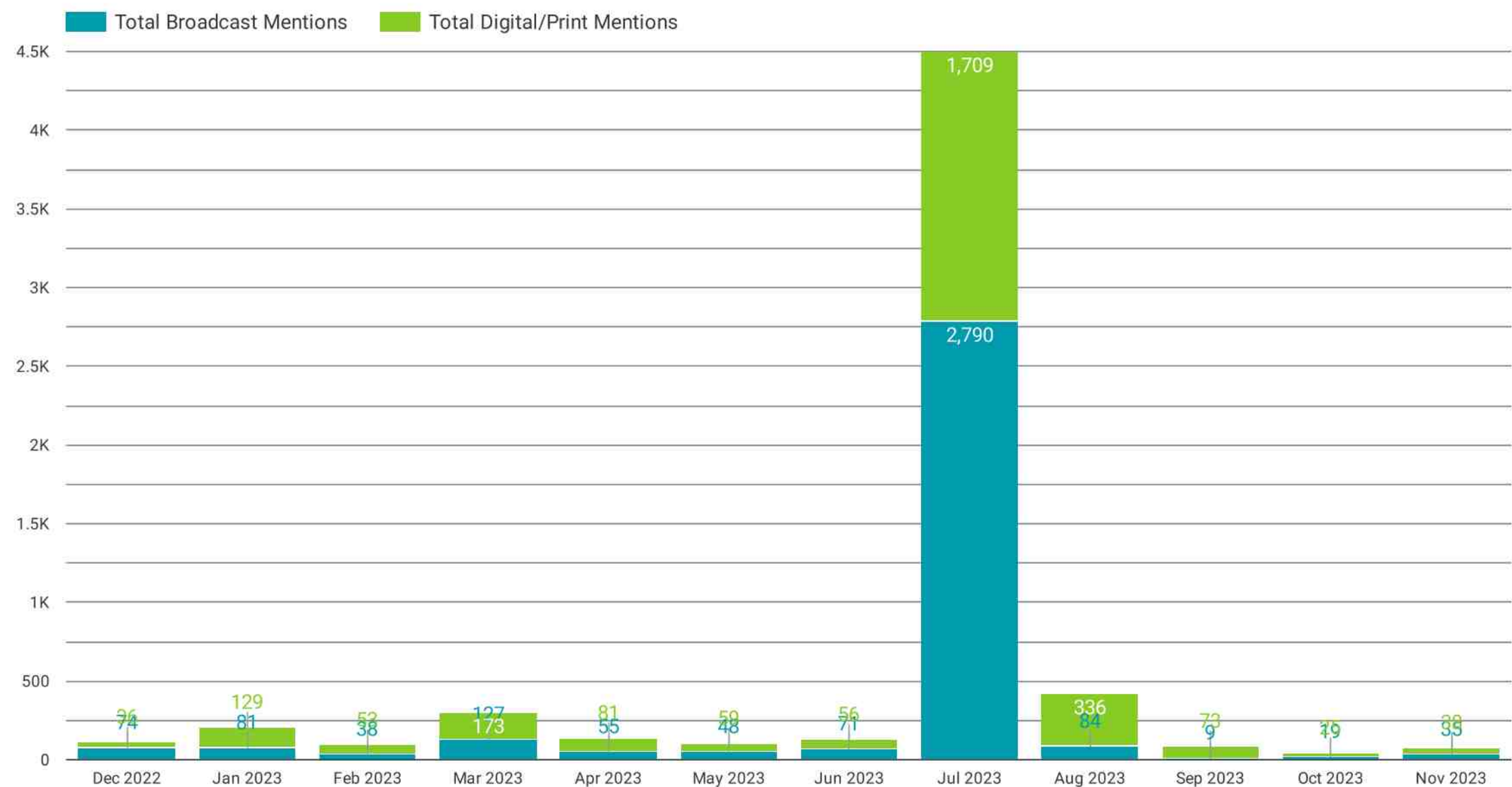
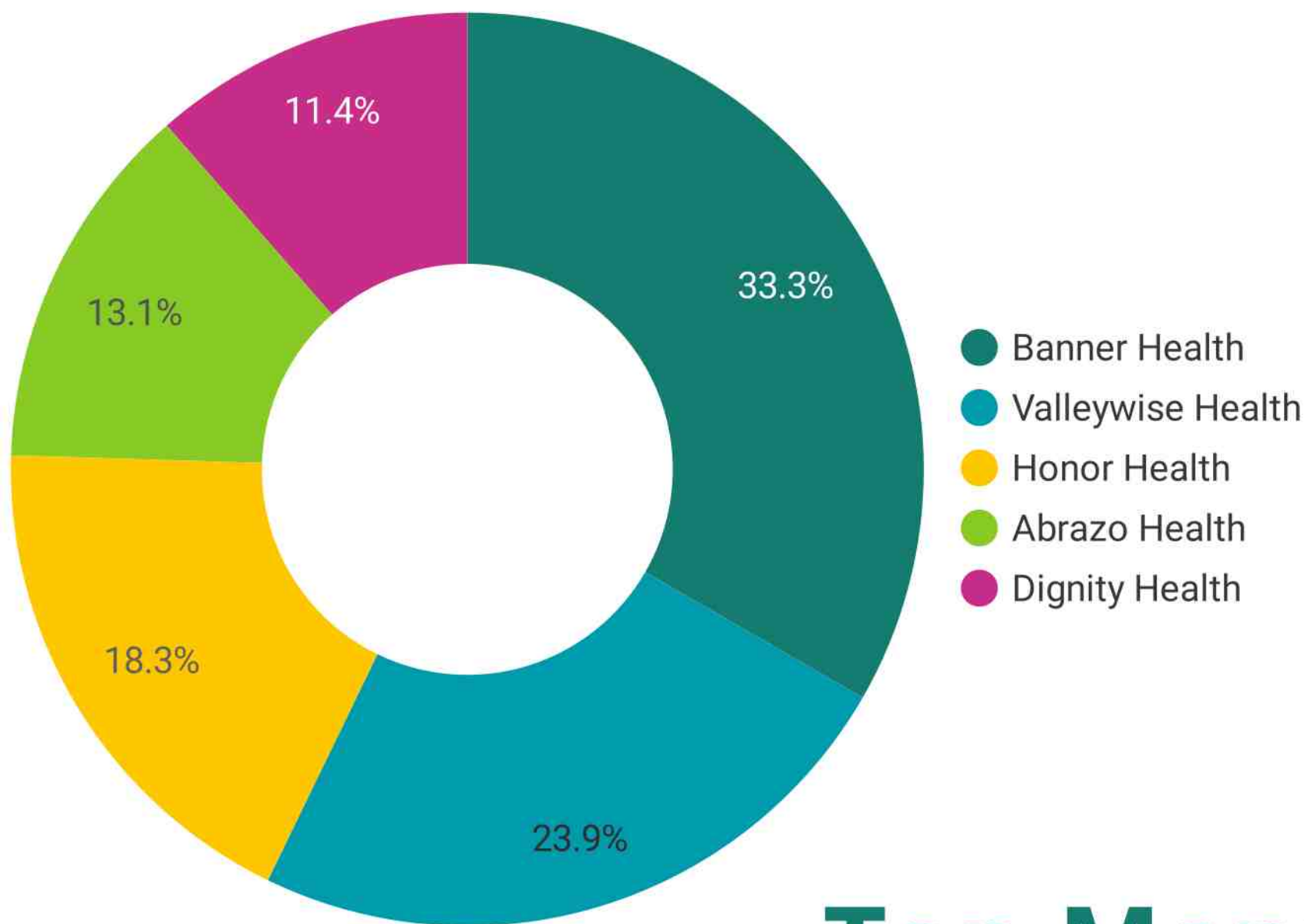
What Language Do They Speak?



Nov 1, 2023 - Nov 30, 2023

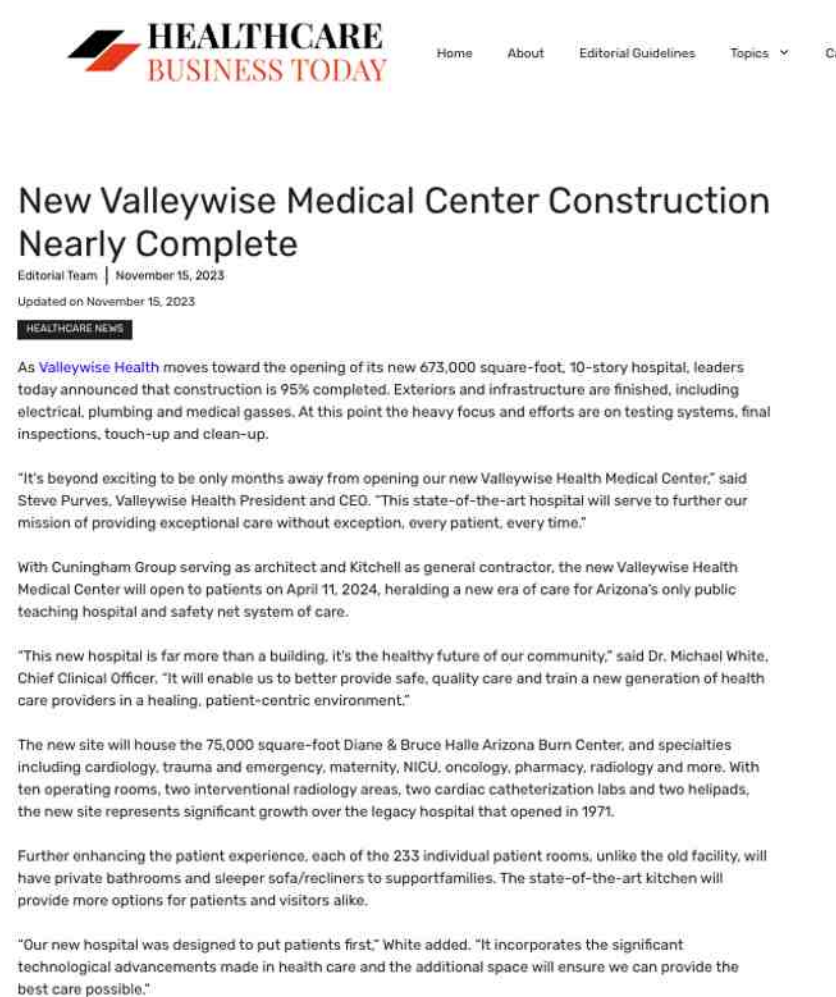
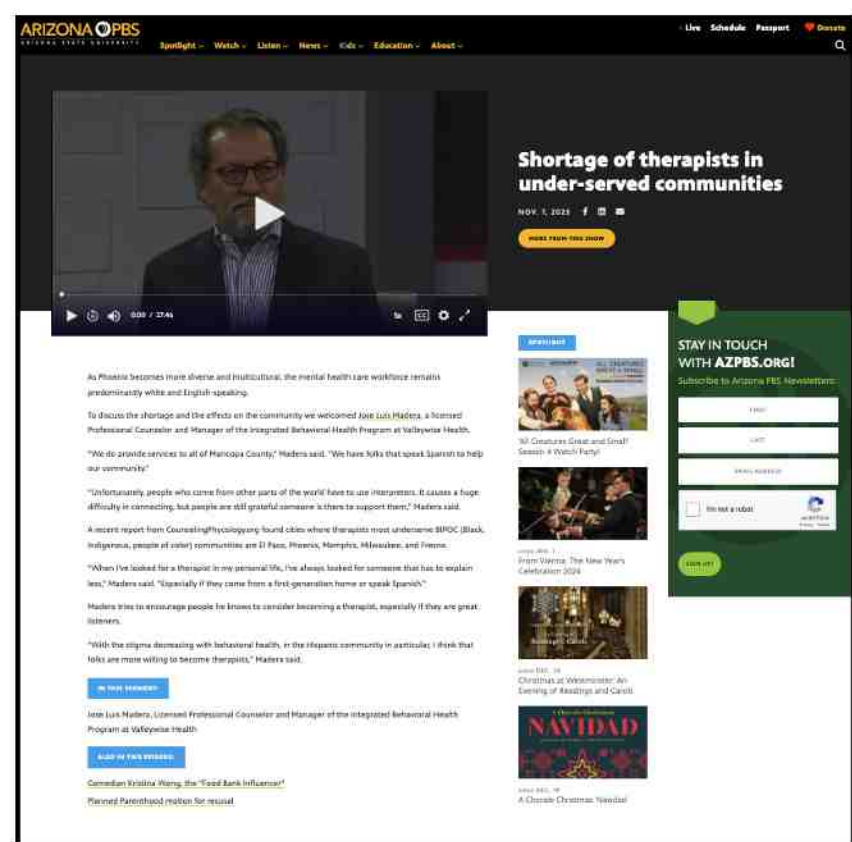
Share of Voice

Total News Mentions by Month



Top Mentions in the News

| Date | Media Outlet | Local/National | Topic |
|--------------|--------------------------|----------------|---|
| Nov 7, 2023 | PBS | Local | Shortage of therapists in under-served communities |
| Nov 15, 2023 | Healthcare Business T... | National | New Valleywise Medical Center Construction Nearly Complete |
| Nov 30, 2023 | Fox 10 Phoenix | Local | 'Tis the season for sick calls: Arizona sees rise in Flu, RSV cases |



How People Are Engaging with Our Newsletters

Community E-News

Open Rate
21.1%
0.00% from previous 30 days

Family Resource Center

Open Rate
36.8%
↑ 1.48% from previous 30 days

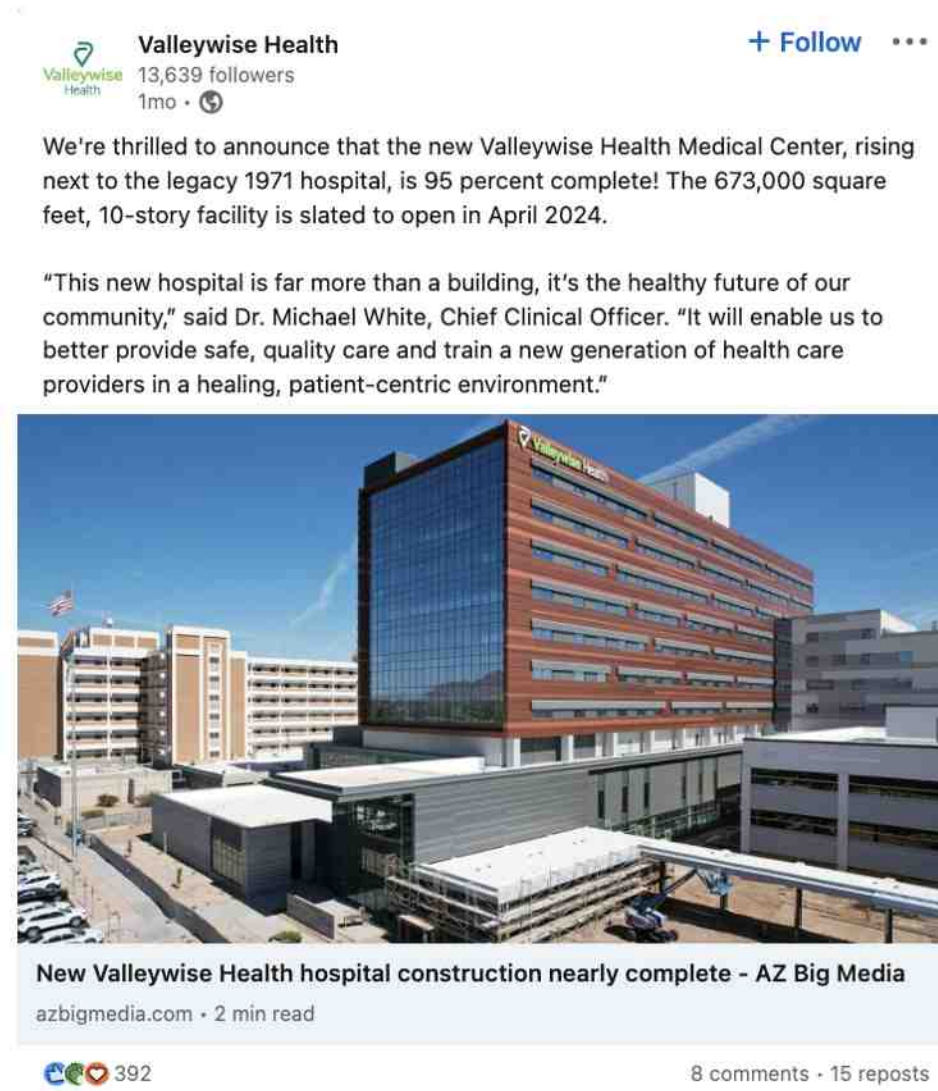
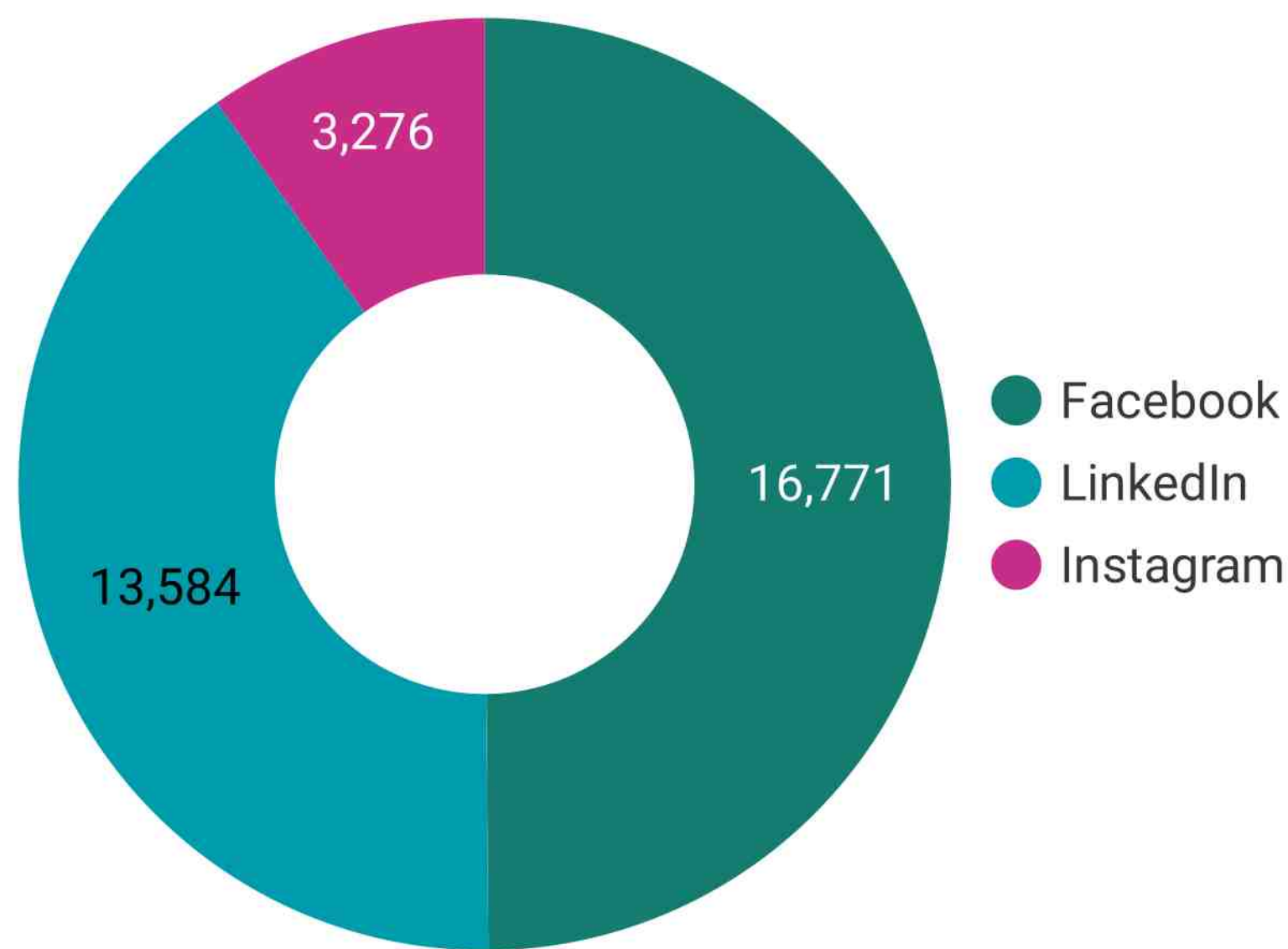
McDowell Clinic

Open Rate
22.8%
↑ 1.64% from previous 30 days

Nov 1, 2023 - Nov 30, 2023

Social Media

Total Followers



Community Outreach

Partner Engagement

Meetings
10

Participants
185

- CPLC
- City of Avondale
- Guadalupe Partnership Council
- Maricopa County Public Health – Building Bridges to Health Committee
- Maricopa Family Support Alliance

Events

3

Approximate Reach
630

- City of Tolleson Health and Resource Fair **300 families**
- Valley Metro Fiesta on Central **250 families**
- Wilson School District Winter Fest **80 families**

Business Development

Events
0

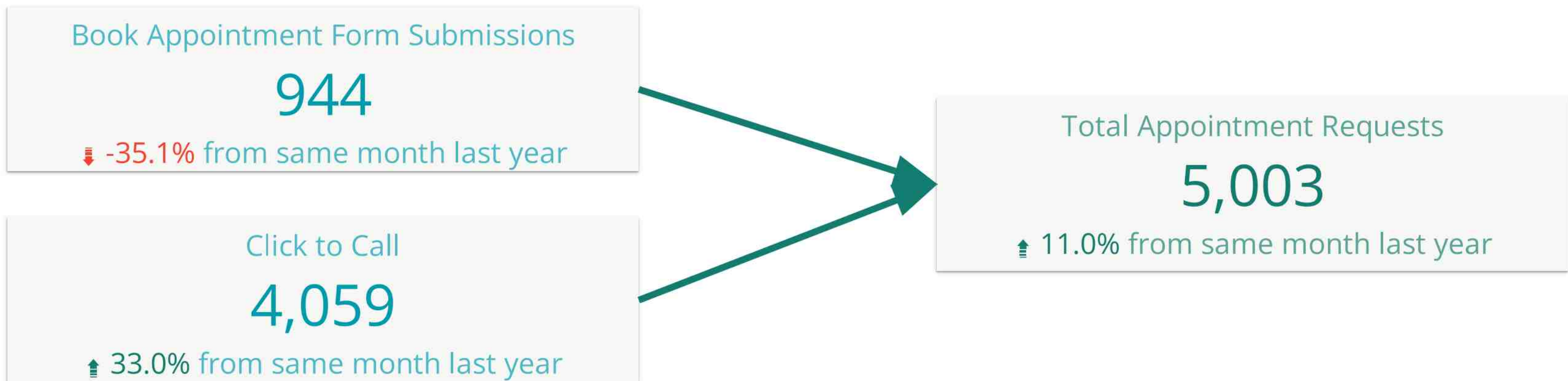
Meetings
3

- Glendale Chamber of Commerce
- Greater Phoenix Equality Chamber
- Peoria Chamber of Commerce

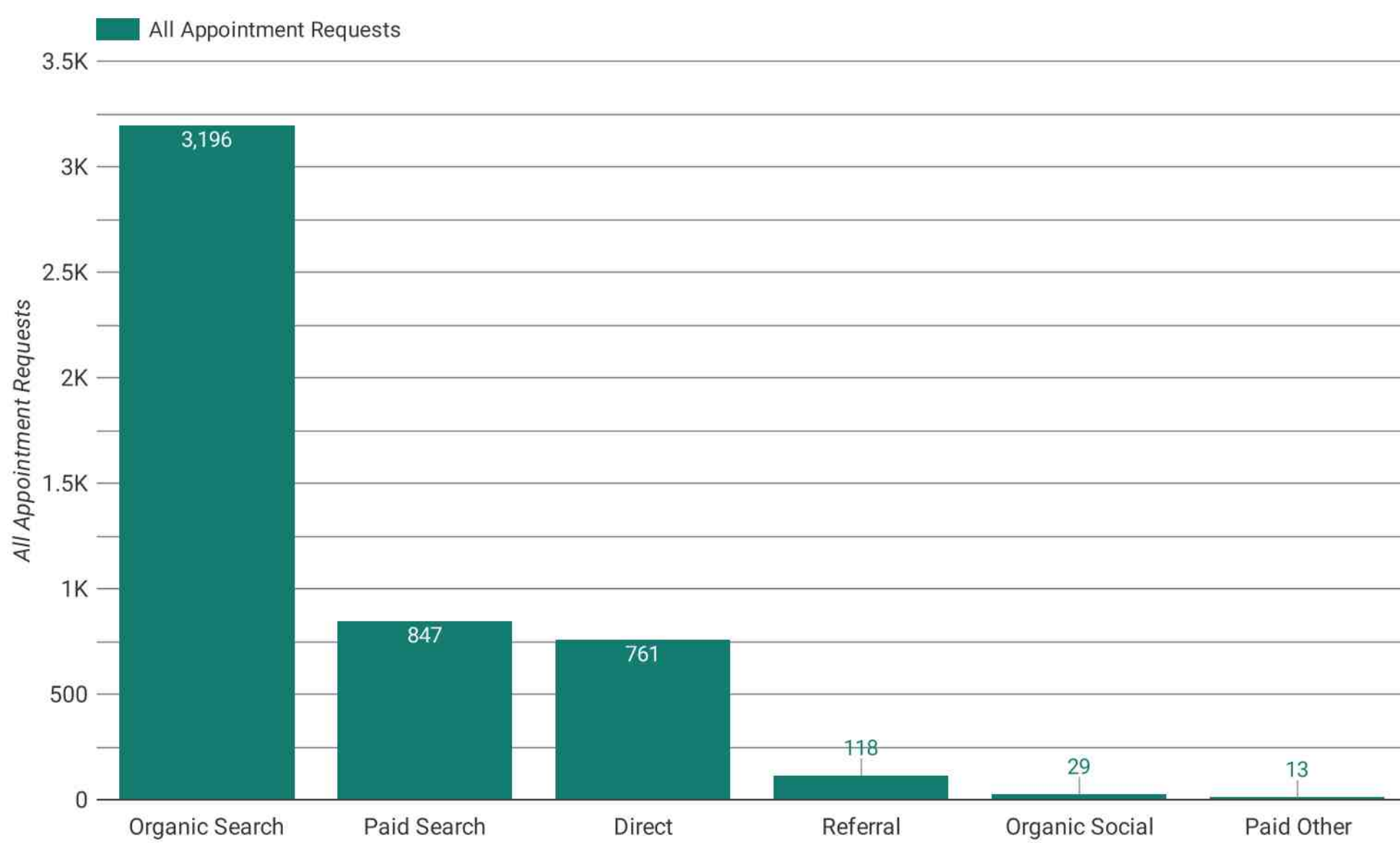
8.a. Marketing and Communications Report - December 2023

Dec 1, 2023 - Dec 31, 2023

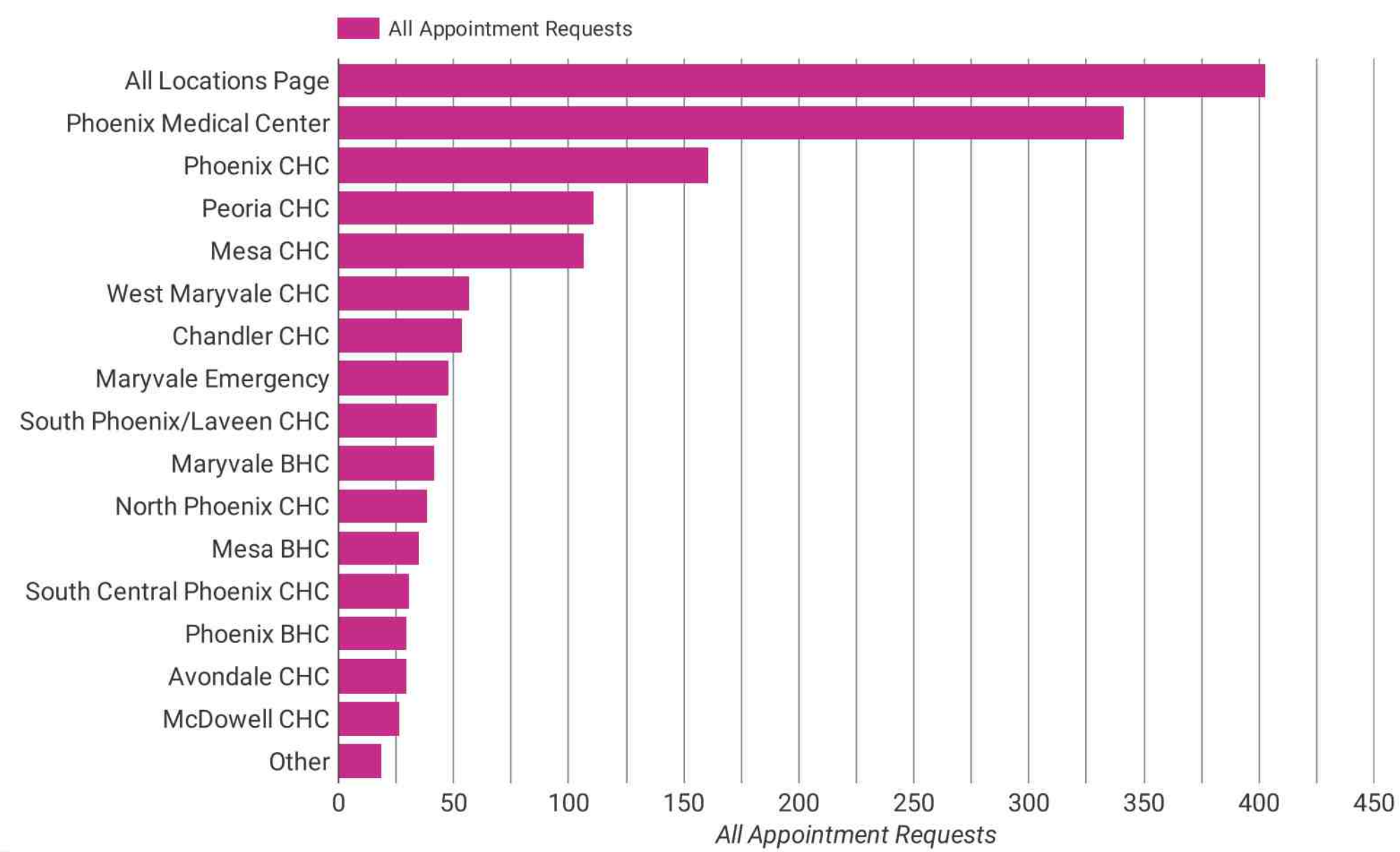
How Many People Are Visiting Valleywise



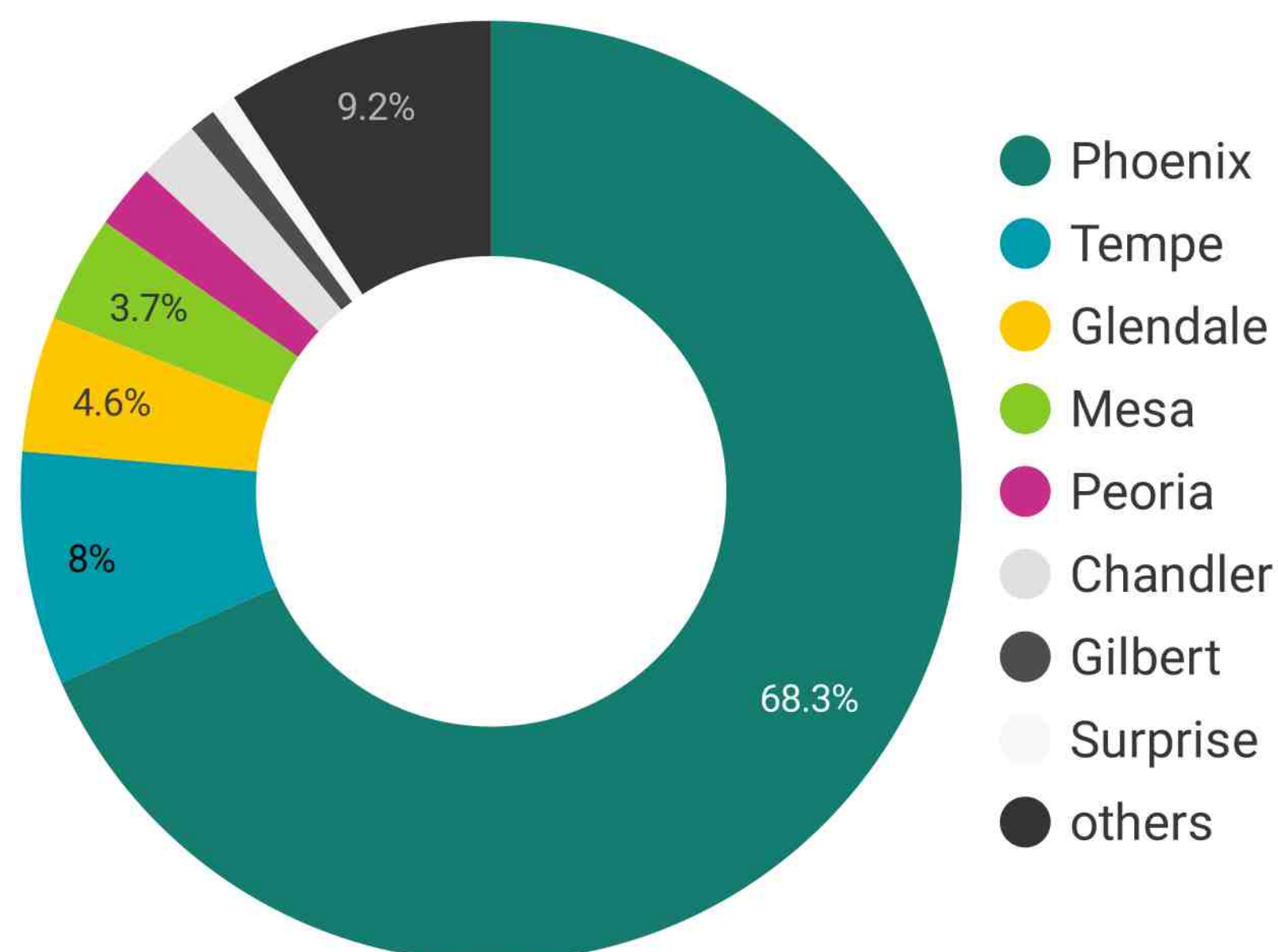
What Marketing Channels Are Driving Visits?



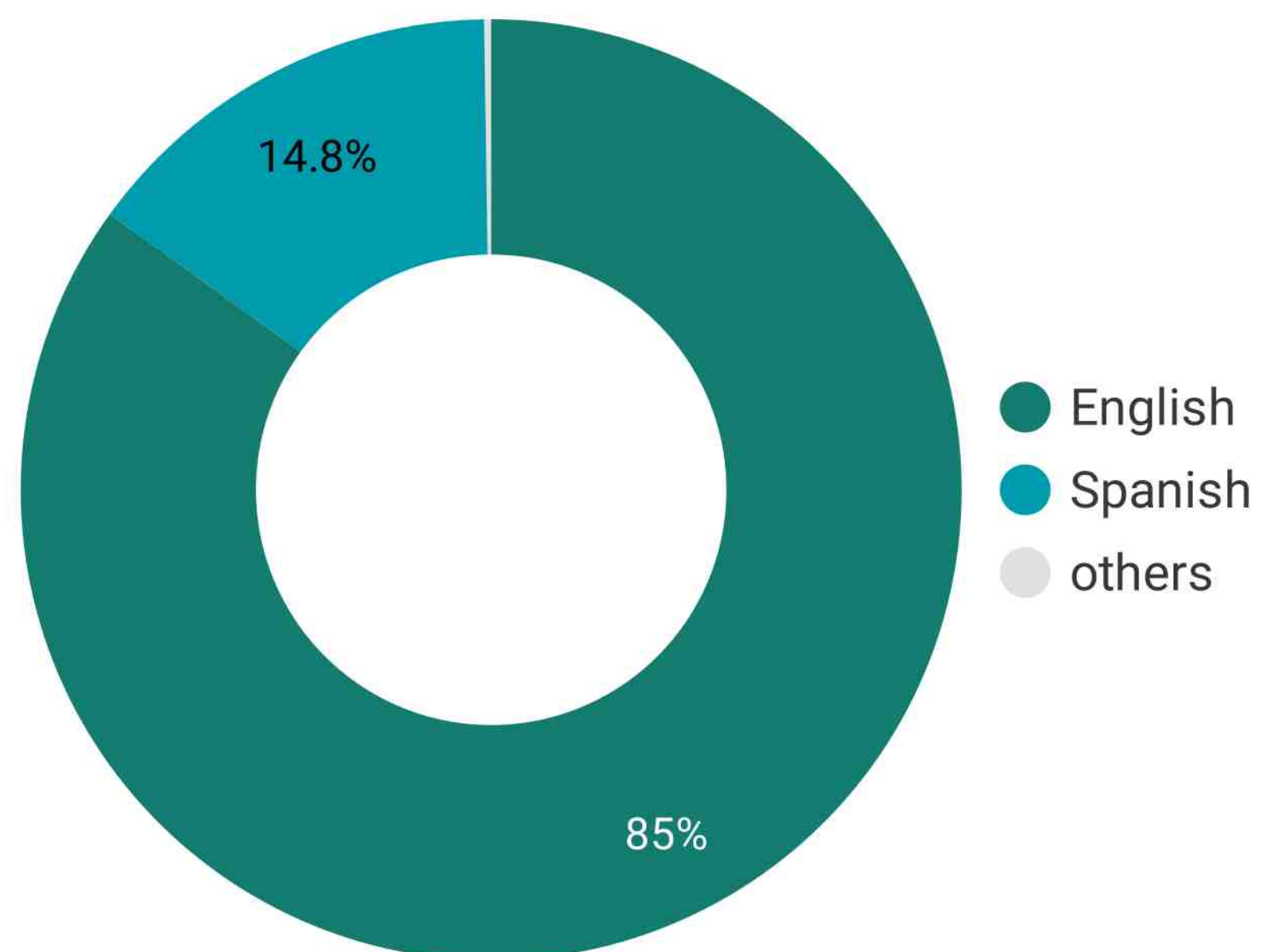
Location Pages Viewed Before Requesting an Appointment



Where Are People in Arizona Making Appointments From?

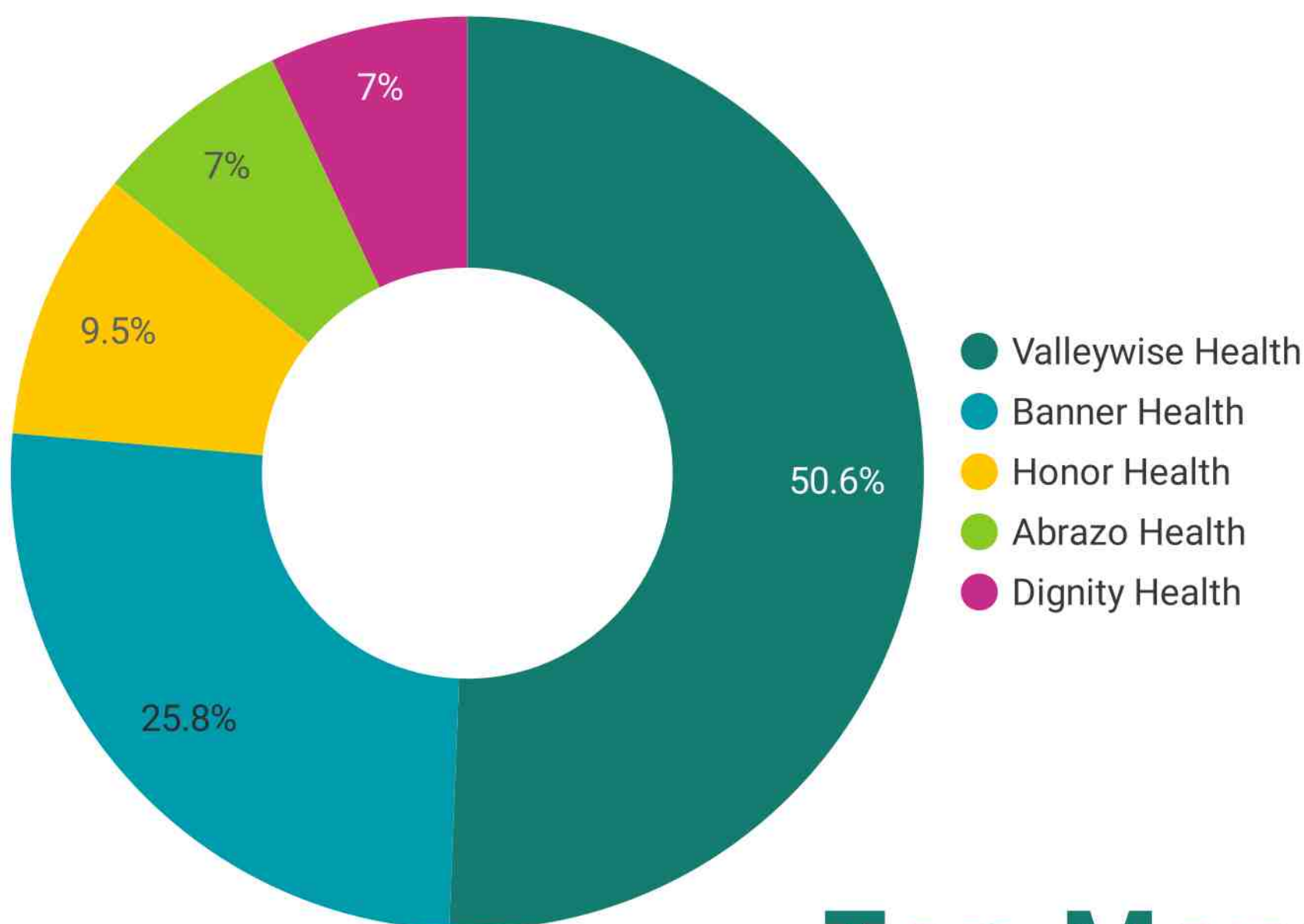


What Language Do They Speak?

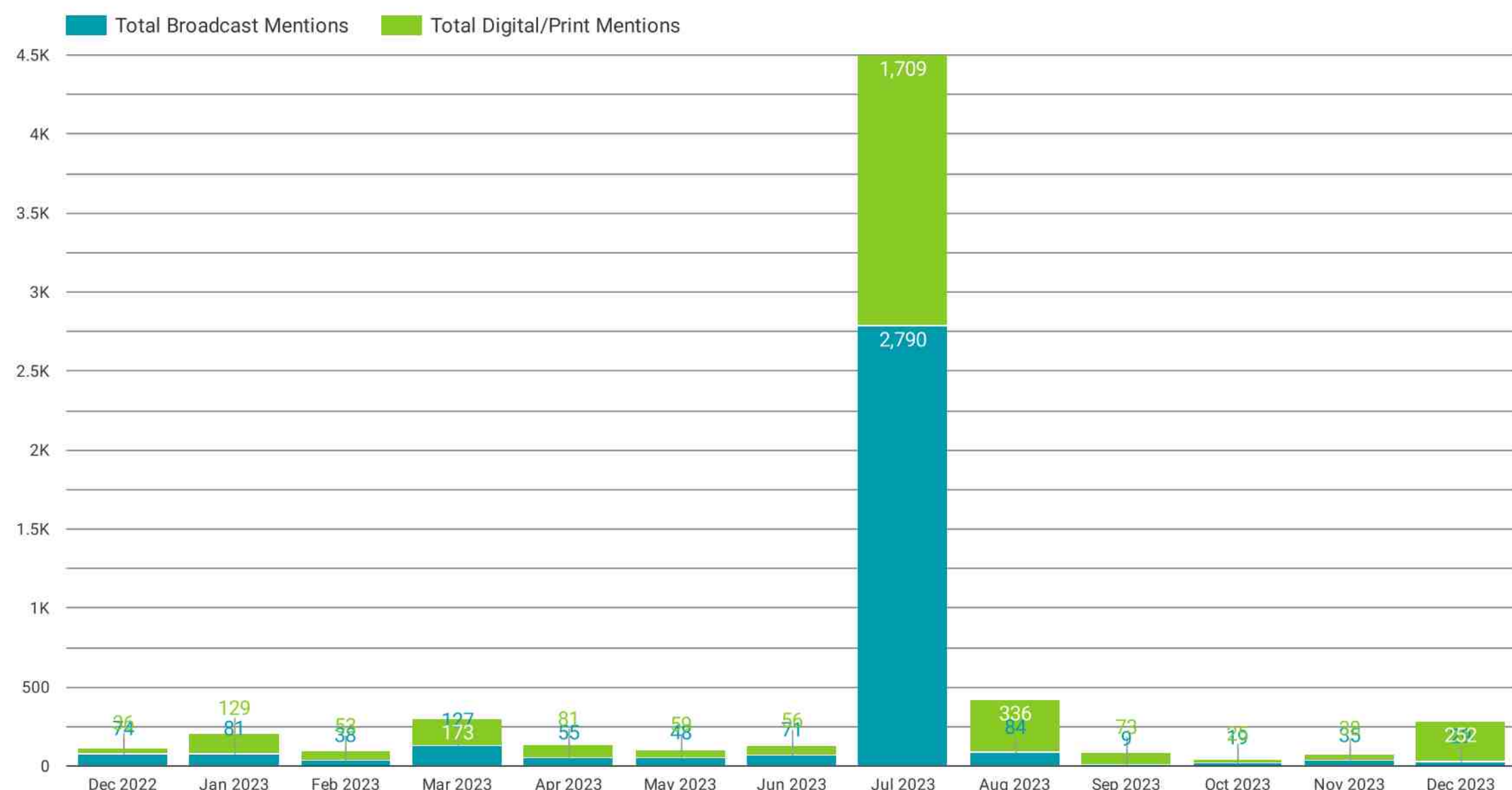


Dec 1, 2023 - Dec 31, 2023

Share of Voice

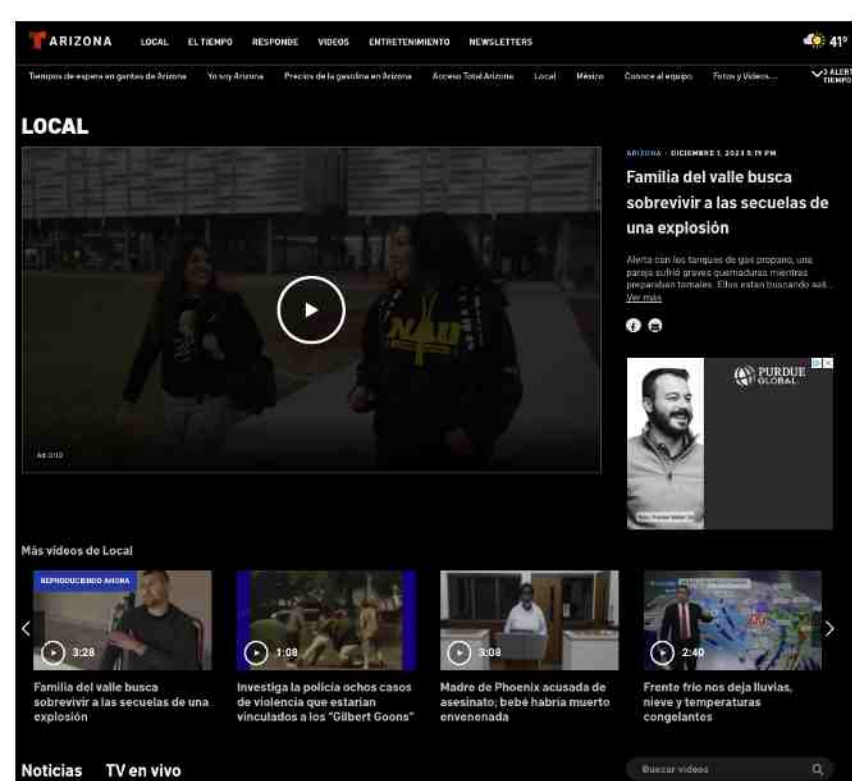


Total News Mentions by Month



Top Mentions in the News

| Date | Media Outlet | Local/National | Topic |
|--------------|---------------|----------------|---|
| Dec 1, 2023 | Telemundo AZ | Local | Familia del valle busca sobrevivir a las secuelas de una explosión |
| Dec 24, 2023 | New York Post | National | Husband dies days after wife, unborn baby killed in pre-Christmas car wreck on way to share preg... |
| Dec 30, 2023 | AZ Big Media | Local | Arizona sees a 20% increase in new HIV diagnoses |



How People Are Engaging with Our Newsletters

Community E-News

Open Rate
19.1%

↓ -2.04% from previous month

Family Resource Center

Open Rate
30.0%

↓ -6.80% from previous month

McDowell Clinic

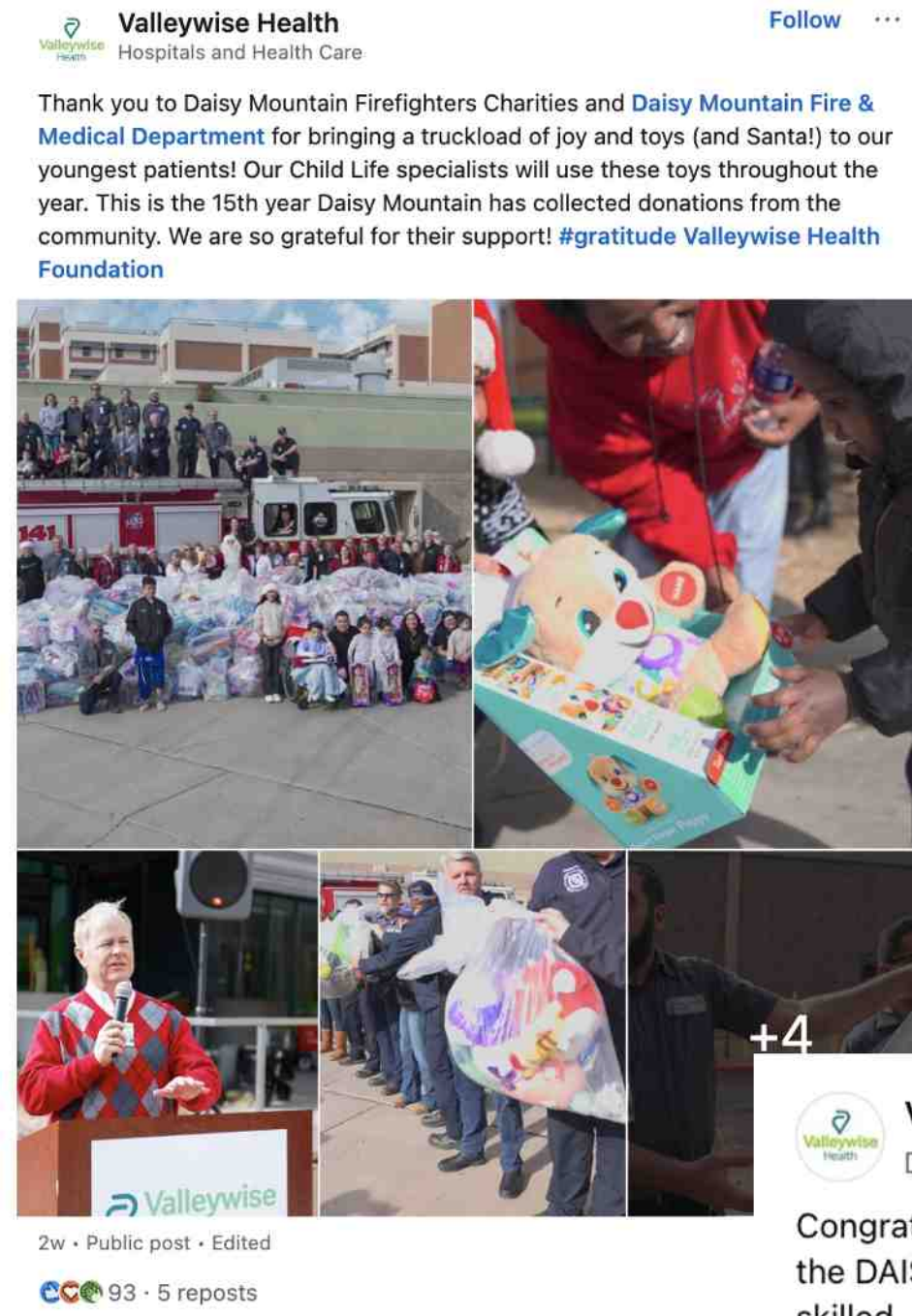
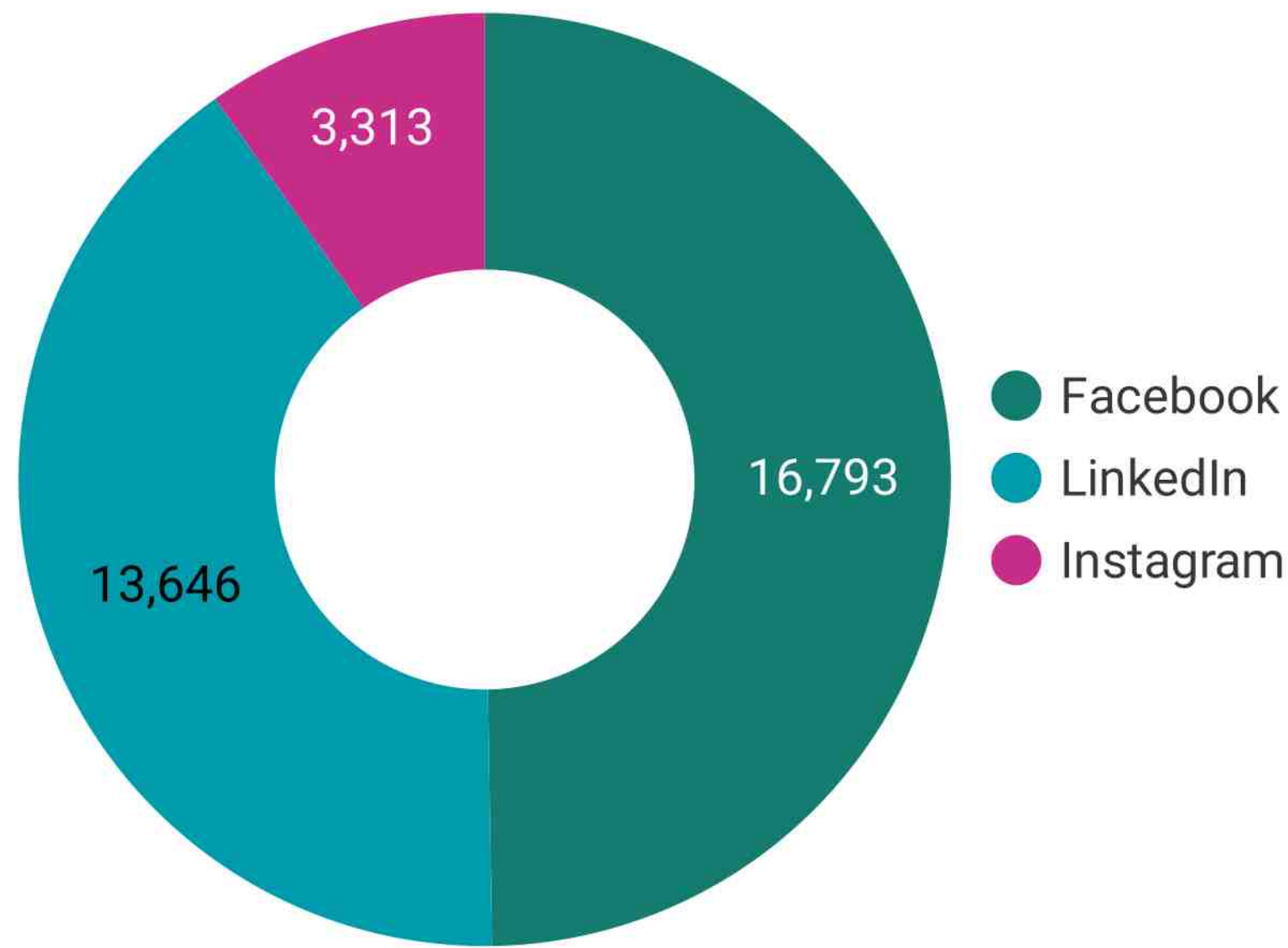
Open Rate
17.8%

↓ -5.00% from previous month

Dec 1, 2023 - Dec 31, 2023

Social Media

Total Followers



Community Outreach

Partner Engagement

Meetings
6

Participants
98

- Arizona Complete Health
- City of Peoria
- Guadalupe Partnership Council
- Hope Network
- Maricopa County Public Health – Building Bridges to Health Committee

Events

4

Approximate Reach
605

- Chandler Winter Fest: 120 families
- Families First Winter Fest: 200 families
- Friendly House Winter Fest: 85 families
- Roosevelt SD Winter Fest: 200 families

Business Development

Events
4

Meetings
3

- Greater Phoenix Equality Chamber
- Peoria Chamber of Commerce
- WESTMARC

8.b. Care Reimagined Capital Purchases Report - November 2023



Care Reimagined – Spend report (November 2023)

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| FunCWional Area - Outpatient Health Facilities | | | | | |
| ABBOTT RAPID DIAGNOSTICS | 19-930 | | | | \$ 1,870 |
| ADVANCED STERILIZATION | 19-930 | | | | \$ 140,587 |
| Advanced Testing | 19-930 | | | | \$ 10,605 |
| Airpark Signs | 19-930 | | | | \$ 184,498 |
| ALLEGIANCE CORP | 19-930 | | | | \$ 40,417 |
| ALTURA | 19-930 | | | | \$ 204,410 |
| AMICO | 19-930 | | | | \$ 5,648 |
| ARC Products LLC | 19-930 | | | | \$ 3,699 |
| Arizona Department of Health | 19-930 | | | | \$ 300 |
| ARIZONA PUBLIC SERVICE | 19-930 | | | | \$ (32,545) |
| Armstrong Medical | 19-930 | | | | \$ 8,955 |
| ARTHREX | 19-930 | | | | \$ 64,558 |
| B BRAUN | 19-930 | | | | \$ 180,457 |
| BAYER HEALTHCARE | 19-930 | | | | \$ 86,500 |
| Baxter Health | 19-930 | | | | \$ 4,995 |
| BONNY PIONTKOWSKI | 19-930 | | | | \$ 7,720 |
| BPG Technologies | 19-921 | | | | \$ 174,467 |
| BPG Technologies | 19-930 | | | | \$ 16,080 |
| CAPSULE TECH | 19-930 | | | | \$ 164,493 |
| CARDINAL HEALTH | 19-930 | | | | \$ 2,070 |
| CAREFUSION | 19-930 | | | | \$ 269,605 |
| CDW Government | 19-930 | | | | \$ 296,946 |
| CENTURYLINK | 19-930 | | | | \$ 12,532 |
| CHEMDAQ | 19-930 | | | | \$ 21,874 |
| City of Peoria | | | | | \$ 80,987 |
| CME | 19-930 | | | | \$ 1,731,072 |
| COOPER ATKINS | 19-930 | | | | \$ 33,020 |
| COOPER SURGICAL | 19-930 | | | | \$ 11,787 |
| COVIDIEN | 19-930 | | | | \$ 83,550 |
| CROSSPOINT COMMUNICATIONS | 19-930 | | | | \$ 18,657 |
| Cushman and Wakefield of Arizona | | | | | \$ 4,000 |
| C-SCAN TECHNOLOGIES | 19-930 | | | | \$ 230 |
| DAAVLIN DISTRUBITING | 19-930 | | | | \$ 7,000 |
| DAN GWILLIAM CONSULTING | | | | | \$ 300 |
| DANIELS MOVING | 19-930 | | | | \$ 23,133 |
| Davis Enterprises | 19-930 | | | | \$ 14,807 |
| DATA INNOVATIONS LLC | | | | | \$ 14,285 |
| DATEX OHMEDA | | | | | \$ 387,508 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|--|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| DEPUY SYNTHES | 19-930 | | | | \$ 48,170 |
| DIBBLE ENGINEERING | | | | | \$ 12,570 |
| ELITECHGROUP INC | 19-930 | | | | \$ 16,895 |
| EXTENDATA | 19-930 | | | | \$ 60,844 |
| FILLMASTER | 19-930 | | | | \$ 1,494 |
| FOLLETT | 19-930 | | | | \$ 1,690 |
| E3 DIAGNOSTICS | 19-930 | | | | \$ 7,319 |
| GE | 19-930 | | | | \$ 4,264,076 |
| GE PRECISION HEALTHCARE LLC | 19-930 | | | | \$ 42,646 |
| GLOBAL SURGICAL | 16-930 | | | | \$ 14,442 |
| Goodmans | 19-930 | | | | \$ 898,159 |
| GRAINGER | | | | | \$ 19,076 |
| GRAYBAR ELECTRIC | | | | | \$ 630 |
| HELMER | | | | | \$ 137,145 |
| Henry Schein | 19-930 | | | | \$ 404,003 |
| HILL ROM | 19-930 | | | | \$ 49,105 |
| Hobbs and Black Associates Inc | | | | | \$ 3,224,039 |
| Hobbs and Black Associates Inc | 19-930 | | | | \$ 35,773 |
| Hologic | 19-907 | | | | \$ 673,682 |
| HP INC | 19-930 | | | | \$ 134,737 |
| Hye Tech Network | | | | | \$ 1,015,724 |
| INTELLIGENT HEARING | 19-930 | | | | \$ 4,185 |
| INTERMETRO INDUSTRIES | | | | | \$ 147,669 |
| J AND J HEALTHCARE SYSTEMS | 19-930 | | | | \$ 32,013 |
| KRONOS | 19-930 | | | | \$ 23,505 |
| Lanmor | 19-930 | | | | \$ 664 |
| LEICA MICROSYSTEMS | 19-930 | | | | \$ 28,107 |
| 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 | | | | \$ 571,470 |
| MDM COMMERCIAL | 19-930 | | | | \$ 43,692 |
| MEDIVATORS | | | | | \$ 8,982 |
| MEDTRONIC | 19-930 | | | | \$ 12,909 |
| MIZUHO ORTHOPEDICS | 19-930 | | | | \$ 2,347 |
| MONOPRICE INC | 19-930 | | | | \$ 757 |
| NATUS MEDICAL | 19-930 | | | | \$ 35,088 |
| NCI INC | | | | | \$ 9,262 |
| Ninyo and Moore Geotechnical and Environment | | | | | \$ 131,484 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|--|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| NUAIER | 19-930 | | | | \$ 13,123 |
| OIEC MEDICAL SYSTEMS | 19-930 | | | | \$ 250,893 |
| Okland Construction Company | 19-930 | | | | \$ 43,421,603 |
| Olympus | 19-930 | | | | \$ 592,862 |
| OWENS AND MINOR | 19-930 | | | | \$ 1,683 |
| O&M HALYARD INC | 19-930 | | | | \$ 11,441 |
| PARKS MEDICAL | 19-930 | | | | \$ 710 |
| PARTS SOURCE | 19-930 | | | | \$ 1,761 |
| PATRIOT PURVEYORS | | | | | \$ 29,499 |
| PENTAX MEDICAL | 19-930 | | | | \$ 122,737 |
| PHILIPS HEALTHCARE | 19-930 | | | | \$ 29,975 |
| Radiation Physics and Engineering | | | | | \$ 6,250 |
| RICOH | 19-930 | | | | \$ 17,536 |
| SIGNOSTICS INC | 19-930 | | | | \$ 22,020 |
| SCRIPTPRO | | | | | \$ 199,244 |
| SOFT COMPUTER | 19-930 | | | | \$ 65,675 |
| SMITH & NEPHEW | 19-930 | | | | \$ 49,859 |
| SMITHS MEDICAL | 19-930 | | | | \$ 12,972 |
| SPEEDIE AND ASSOCIATES | | | | | \$ 2,637 |
| SPHERE COMMERCE | | | | | \$ 1,577 |
| Steris | 19-930 | | | | \$ 387,839 |
| Stryker Communications | 19-921 | | | | \$ 683,239 |
| Stryker Communications | 19-930 | | | | \$ 8,397 |
| STRYKER SALES CORPORATION | 19-930 | | | | \$ 300,593 |
| TBCX | | | | | \$ 156,758 |
| THUNDERBIRD GRANT | 19-930 | | | | \$ (187,982) |
| THE BAKER CO. | 19-930 | | | | \$ 14,485 |
| THE CBORD GROUP | 19-930 | | | | \$ 21,623 |
| THE CLOROX SALES | 19-930 | | | | \$ 44,800 |
| THE GRAPHICS MEDICAL | 19-930 | | | | \$ 6,550 |
| Thomas Printworks | 19-930 | | | | \$ 5,204 |
| TRANSONIC SYSTEMS | | | | | \$ 24,389 |
| UTECH PRODUCTS | | | | | \$ 47,600 |
| VERATHON | 19-930 | | | | \$ 14,620 |
| Vizient Inc | | | | | \$ 379,135 |
| WAXIE SANITARY SUPPLY | 19-930 | \$ (84.30) | | | \$ - |
| West Valley Fidelity National Title - Land Purchase (Grand Ave/Cotton) | | | | | \$ 5,595,598 |
| West Valley Fidelity National Title (escrow) | | | | | \$ 75,000 |
| AS SOFTWARE INC | | | | | \$ 9,500 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| GF HEALTH PRODUCTS INC | | | | | \$ 5,519 |
| INVIVO CORPORATION | | | | | \$ 53,865 |
| TOTAL West Valley Specialty Center (WVSC) | | \$ (84.30) | \$ - | \$ - | \$ 69,114,874.76 |
| Alliance Land Surveying LLC | 19-942 | | | | \$ 1,825 |
| Great American Title (escrow/property tax) - Chandler | 19-942 | | | | \$ 1,195,064 |
| SPEEDIE AND ASSOC | 19-942 | | | | \$ 3,600 |
| Ninyo and Moore Geotechnical and Environment | 19-942 | | | | \$ 70,599 |
| TOTAL Chandler FHC (CHAN) | | \$ - | \$ - | \$ - | \$ 1,271,088.42 |
| Fidelity National Title (escrow) - Miller&Main | 19-944 | | | | \$ 1,989,756 |
| AMAZON | 19-944 | | | | \$ 129 |
| Allstare Rent A Fence | 19-944 | | | | \$ 2,847 |
| ALLEGIANCE CORPORATION | 19-944 | | | | \$ 8,996 |
| ALTURA COMMUNICATIONS | 19-944 | | | | \$ 16,489 |
| ABBOTT RAPID DIAGNOSTICS INFORMATICS INC | 19-944 | | | | \$ 67 |
| BPG TECHNOLOGIES LLC | 19-944 | | | | \$ 1,075 |
| BONNY PIONTKOWSKI | 19-944 | | | | \$ 1,120 |
| CDW G | 19-944 | | | | \$ 36,138 |
| ALTURA COMMUNICATIONS | 19-944 | | | | \$ 18,826 |
| CENTURYLINK | 19-944 | | | | \$ 19,853 |
| CITY OF MESA | 19-944 | | | | \$ 92,022 |
| GE PRECISION HEALTHCARE | 19-944 | | | | \$ 34,138 |
| GE HEALTHCARE IITS USA CORP | 19-944 | | | | \$ 134,394 |
| CME | 19-944 | | | | \$ 139,688 |
| COOPER ATKINS CORPORATION | 19-944 | | | | \$ 6,560 |
| CAPSULE TECH INC | 19-944 | | | | \$ 55,920 |
| SPEEDIE AND ASSOC | 19-944 | | | | \$ 3,600 |
| DAVES CONSTRUCTION | 19-944 | | | | \$ 72,981 |
| DIBBLE ENGINEERING | 19-944 | | | | \$ 8,256 |
| DWL ARCHITECTS + PLANNERS INC | 19-944 | | | | \$ 1,027,447 |
| DANIELS MOVING & STORAGE | 19-944 | | | | \$ 15,825 |
| HELMER INC | 19-944 | | | | \$ 18,323 |
| HP INC | 19-944 | | | | \$ 23,058 |
| HOLOGIC INC | 19-944 | | | | \$ 349,945 |
| HYE TECH NETWORK AND SECURITY SOLUTIONS | 19-944 | | | | \$ 143,092 |
| FILLMASTER | 19-944 | | | | \$ 1,494 |
| INTERMETRO INDUSTRIES | 19-944 | | | | \$ 13,859 |
| JENSEN HUGHES | 19-944 | | | | \$ 7,031 |
| Maricopa County - Envionmental Services Dept | 19-944 | | | | \$ 1,485 |
| Maricopa County Planning | 19-944 | | | | \$ 64,615 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|--|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| MDM COMMERCIAL | 19-944 | | | | \$ 6,997 |
| MONOPRICE | 19-944 | | | | \$ 335 |
| OKLAND CONSTRUCTION | 19-944 | \$ 1,602.39 | | | \$ 9,989,582 |
| THE CBORD GROUP INC | 19-944 | | | | \$ 2,826 |
| TEMP ARMOUR | 19-944 | | | | \$ 9,947 |
| THE GRAPHS MEDICAL PHYSICS | 19-944 | | | | \$ 2,450 |
| SCRIPTPRO USA | 19-944 | | | | \$ 104,544 |
| SMITHCRAFT SIGNS | 19-944 | | | | \$ 106,105 |
| SPEEDIE AND ASSOC | 19-944 | | | | \$ 20,116 |
| STRYKER SALES | 19-944 | | | | \$ 6,665 |
| SPRAY SYSTEMS | 19-944 | | | | \$ 29,640 |
| TRANSACT COMMERCIAL | 19-944 | | | | \$ 332,754 |
| Ninyo and Moore Geotechnical and Environment | 19-944 | | | | \$ 34,055 |
| CROSSPOINT COMMUNICATIONS | | | | | \$ 8,161 |
| FIDELITY NATIONAL TITLE AGENCY INC | | | | | \$ 557 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 1,190,675 |
| TOTAL Mesa FHC (MESA) | | \$ 1,602.39 | \$ - | \$ - | \$ 16,154,442.01 |
| Clear Title Agency (escrow) - Central Phoenix Clinic | | | | | \$ 2,704,752 |
| Clear Title Agency (escrow) - Phoenix Metro | | | | | \$ 50,000 |
| Cushman and Wakefield of Arizona Inc | 19-945 | | | | \$ 4,750 |
| DAVES CONSTRUCTION | 19-945 | | | | \$ 171,254 |
| DWL ARCHITECTS + PLANNERS INC | 19-945 | | | | \$ 681,890 |
| JENSEN HUGHES | 19-945 | | | | \$ 398 |
| MARICOPA COUNTY PLANNING | 19-945 | | | | \$ 62,251 |
| Ninyo and Moore Geotechnical and Environment | 19-945 | | | | \$ 53,438 |
| OKLAND CONSTRUCTION | 19-945 | | | | \$ 346,215 |
| SPEEDIE AND ASSOC | 19-945 | | | | \$ 3,600 |
| Spray Systems | 19-945 | | | | \$ 119,430 |
| ALLIANCE LAND SURVEYING LLC | | | | | \$ 2,400 |
| STRYKER SALES CORPORATION | | | | | \$ 247 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 811,810 |
| TOTAL Central Phoenix FHC (PHXM) | | \$ - | \$ - | \$ - | \$ 5,012,435.57 |
| DIBBLE ENGINEERING | 19-929 | | | | \$ 6,904 |
| ABBOTT RAPID DIAG | 19-929 | | | | \$ 190 |
| ALLEGIANCE CORP | 19-929 | | | | \$ 1,591 |
| ALTURA COMMUNICATION | 19-929 | | | | \$ 52,314 |
| BONNY PIONTKOWSKI | 19-929 | | | | \$ 1,645 |
| BPG TECHNOLOGIES | 19-929 | | | | \$ 28,099 |
| CAPSULE TECH | 19-929 | | | | \$ 57,185 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|--|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| CITY OF PHOENIX | 19-929 | | | | \$ 1,262 |
| COOPER ATKINS | 19-929 | | | | \$ 9,754 |
| CROSSPOINT COMMUNICATION | 19-929 | | | | \$ 8,138 |
| DANIELS MOVING | 19-929 | | | | \$ 11,266 |
| DWL ARCHITECTS + PLANNERS INC | 19-929 | | | | \$ 942,593 |
| CDW G | 19-929 | | | | \$ 21,797 |
| CME | 19-929 | | | | \$ 162,064 |
| FED EX FREIGHT | 19-929 | | | | \$ 376 |
| Fidelity National Title (escrow) - North Metro | 19-929 | | | | \$ 2,307,776 |
| FILLMASTER | 19-929 | | | | \$ 1,494 |
| GE HEALTHCARE | 19-929 | | | | \$ 331,885 |
| GRAINGER | 19-929 | | | | \$ 3,225 |
| HP INC | 19-929 | | | | \$ 17,086 |
| HYE TECH NETWORK | 19-929 | | | | \$ 152,885 |
| INTERMETRO INDUSTRIES | 19-929 | | | | \$ 11,756 |
| Jensen Hughes | 19-929 | | | | \$ 8,788 |
| LOVITT & TOUCHE | 19-929 | | | | \$ 8,196 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-929 | | | | \$ 51,093 |
| MDM COMMERCIAL | 19-929 | | | | \$ 4,339 |
| OFFSITE OFFICE EQUIPMENT STORAGE | 19-929 | | | | \$ 250 |
| OLYMPUS | 19-929 | | | | \$ 1,232 |
| SCRIPTPRO | 19-929 | | | | \$ 104,544 |
| SMITHCRAFT SIGNS | 19-929 | | | | \$ 99,956 |
| SPEEDIE AND ASSOC | 19-929 | | | | \$ 11,910 |
| SALT RIVER PROJECT | 19-929 | | | | \$ 4,265 |
| SPHERE COMMERCE | 19-929 | | | | \$ 797 |
| Stryker Communications | 19-929 | | | | \$ 12,626 |
| Sundt Construction Inv | 19-929 | | | | \$ 9,303,374 |
| THE GRAPHS MEDICAL PHYSICS, INC. | 19-929 | | | | \$ 700 |
| TEMP ARMOUR | 19-929 | | | | \$ 9,897 |
| TRANSACT COMMERCIAL | 19-929 | | | | \$ 279,878 |
| THE CBORD GROUP | 19-929 | | | | \$ 2,794 |
| AMAZON | | | | | \$ 136 |
| EXTENDATA SOLUTIONS | | | | | \$ 11,706 |
| MONOPRICE INC | | | | | \$ 513 |
| PAL-WW NORTHERN STORAGE JV LLC | | | | | \$ 106,121 |
| RICOH AMERICAS CORPORATION | | | | | \$ 140 |
| THOMAS PRINTWORKS | | | | | \$ 71 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 1,561,667 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| TOTAL North Phoenix FHC (19AV) | | \$ - | \$ - | \$ - | \$ 15,716,277.76 |
| Cox Communications | 19-928 | | | | \$ 4,489 |
| Cox Communications | | | | | \$ (1,699) |
| ABBOTT RAPID DIAG | 19-928 | | | | \$ 238 |
| ALTURA | 19-928 | | | | \$ 50,192 |
| ALLEGIANCE CORP | 19-928 | | | | \$ 10,318 |
| AZ Dept of Env Quality | 19-928 | | | | \$ 100 |
| BONNY PIONTKOWSKI | 19-928 | | | | \$ 1,645 |
| BPG Technologies | 19-928 | | | | \$ 28,048 |
| CAPSULE TECH | 19-928 | | | | \$ 56,193 |
| CDW GOVERNMENT INC | 19-928 | | | | \$ 21,760 |
| Centurylink | 19-928 | | | | \$ 24,539 |
| CITY OF PHOENIX | 19-928 | | | | \$ 218,063 |
| CME | 19-928 | | | | \$ 184,168 |
| COOPER ATKINS | 19-928 | | | | \$ 6,576 |
| CROSSPOINT COMMUNICATION | 19-928 | | | | \$ 8,008 |
| Daniels Moving | 19-928 | | | | \$ 11,441 |
| DIBBLE ENGINEERING | 19-928 | | | | \$ 7,168 |
| DWL ARCHITECTS + PLANNERS INC | 19-928 | | | | \$ 1,152,163 |
| EXTENDATA | 19-928 | | | | \$ 11,102 |
| Fidelity National Title (escrow) - South Mountain | 19-928 | | | | \$ 721,482 |
| FILLMASTER SYSTEMS | 19-928 | | | | \$ 1,494 |
| GE HEALTHCARE | 19-928 | | | | \$ 502,285 |
| GRAINGER | 19-928 | | | | \$ 978 |
| HELMER | 19-928 | | | | \$ 20,426 |
| HP INC | 19-928 | | | | \$ 12,772 |
| Hye Tech Network | 19-928 | \$ (35,790.68) | | | \$ (59,083) |
| INTERMETRO INDUSTRIES | 19-928 | | | | \$ 19,591 |
| JENSEN HUGHES | 19-928 | | | | \$ 11,464 |
| LOVITT & TOUCHE | 19-928 | | | | \$ 3,144 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-928 | | | | \$ 51,046 |
| MDM COMMERCIAL | 19-928 | | | | \$ 5,429 |
| MONOPRICE | 19-928 | | | | \$ 526 |
| NATUS | 19-928 | | | | \$ 2,130 |
| OFFSITE OFFICE | 19-928 | | | | \$ 395 |
| OLYMPUS AMERICA | 19-928 | | | | \$ 1,229 |
| Ricoh | 19-928 | | | | \$ 132 |
| SCRIPTPRO USA INC | 19-928 | | | | \$ 104,544 |
| SMITHCRAFT SIGNS | 19-928 | | | | \$ 100,570 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| Speedie and Associates | 19-928 | | | | \$ 15,670 |
| SPHERE COMMERCE | 19-928 | | | | \$ 795 |
| SRP | 19-928 | | | | \$ 13,775 |
| Sundt Construction Inc | 19-928 | | | | \$ 9,083,290 |
| Stryker Communications | 19-928 | | | | \$ 12,626 |
| TEMP ARMOUR | 19-928 | | | | \$ 6,448 |
| THE CBORD GROUP | 19-928 | | | | \$ 2,794 |
| THE GRAPHICS MEDICAL | 19-928 | | | | \$ 700 |
| TRANSACT | 19-928 | | | | \$ 280,739 |
| THOMAS PRINTWORKS | 19-928 | | | | \$ 326 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 1,295,734 |
| TOTAL South Phoenix FHC (SPHX) | | \$ (35,790.68) | \$ - | \$ - | \$ 14,007,963.47 |
| CDW GOVERNMENT INC | 19-946 | | | | \$ 56,372 |
| ADVANCE INNOVATIVE SOLUTIONS | 19-946 | | | | \$ 4,623 |
| ALLEGIANCE CORP | 19-946 | | | | \$ 920 |
| ALTURA COMMUNICATIONS | 19-946 | | | | \$ 33,123 |
| ABBOTT RAPID DIAGNOSTICS INFORMATICS INC | 19-946 | | | | \$ 96 |
| BPG TECHNOLOGIES | 19-946 | | | | \$ 757 |
| BONNY POINTKOWSKI | 19-946 | | | | \$ 1,645 |
| CARDINAL HEALTH | 19-946 | | | | \$ 8,996 |
| CAPSULE TECH | 19-946 | | | | \$ 56,272 |
| CITY OF PHOENIX | 19-946 | | | | \$ 40,670 |
| CME | 19-946 | \$ (3,823.05) | | | \$ 156,950 |
| COOPER ATKINS | 19-946 | | | | \$ 8,233 |
| DIBBLE ENGINEERING | 19-946 | | | | \$ 6,534 |
| DWL ARCHITECTS + PLANNERS INC | 19-946 | | | | \$ 811,095 |
| DANIELS MOVING | 19-946 | | | | \$ 20,892 |
| Fidelity National Title (escrow) - 79thAve&Thomas | 19-946 | | | | \$ 1,878,902 |
| FILLMASTER SYSTEMS | 19-946 | | | | \$ 1,494 |
| GE PRECISION | 19-946 | | | | \$ 168,532 |
| HYE TECH | 19-946 | | | | \$ 138,754 |
| HP INC | 19-946 | | | | \$ 29,510 |
| INTERMETRO INDUSTRIES | 19-946 | | | | \$ 15,951 |
| JENSEN HUGHES | 19-946 | | | | \$ 9,999 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-946 | | | | \$ 62,657 |
| MARICOPA COUNTY ENVIRONMENTAL SERVICES | 19-946 | | | | \$ 1,490 |
| MARICOPA COUNTY RECORDER | 19-946 | | | | \$ 30 |
| MDM COMMERCIAL | 19-946 | | | | \$ 5,546 |
| MONOPRICE | 19-946 | | | | \$ 522 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|--|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| MOBILE COMMUNICATIONS AMERICA INC | 19-946 | | | | \$ 8,161 |
| NATUS MEDICAL | 19-946 | | | | \$ 1,141 |
| Ninyo and Moore Geotechnical and Environment | 19-946 | | | | \$ 11,400 |
| Okland Construction Company | 19-946 | | | | \$ 9,433,806 |
| OLYMPUS | 19-946 | | | | \$ 1,211 |
| SALT RIVER PROJECT | 19-946 | | | | \$ 25,648 |
| SMITHCRAFT SIGNS | 19-946 | | | | \$ 106,985 |
| SPEEDIE AND ASSOC | 19-946 | | | | \$ 24,143 |
| SCRIPT PRO | 19-946 | | | | \$ 104,544 |
| THE CBORD GROUP | 19-946 | | | | \$ 2,883 |
| TEMP ARMOUR | 19-946 | | | | \$ 9,947 |
| TRANSACT COMMERCIAL | 19-946 | | | | \$ 291,462 |
| THE GRAPHICS MEDICAL | 19-946 | | | | \$ 950 |
| SPHERECOMMERCE LLC | 19-946 | | | | \$ 895 |
| AMAZON | | | | | \$ 135 |
| KITCHELL CONTRACTORS INC OF ARIZONA | | | | | \$ 3,280 |
| STRYKER SALES CORPORATION | | | | | \$ 247 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 1,034,425 |
| TOTAL West Maryvale FHC (WM79) | | \$ (3,823.05) | \$ - | \$ - | \$ 14,581,827.85 |
| | | \$ (38,095.64) | \$ - | \$ - | \$ 135,858,909.83 |

Note: Prior months amount paid are hidden

| Functional Area - Behavioral Health Services | | | | | |
|--|--------|--|--|--|------------|
| Adams and WENDT | | | | | \$ 118,891 |
| ADVANCED INN VATIVE SOLUTIONS | | | | | \$ 11,735 |
| Advanced Egress Solutions | 19-912 | | | | \$ 3,090 |
| Airclean Systems | 19-912 | | | | \$ 4,457 |
| Allscripts Healthcare | 18-913 | | | | \$ 5,760 |
| Allscripts Healthcare | 19-909 | | | | \$ 225,345 |
| Altura Communications | 19-909 | | | | \$ 477,526 |
| Altura Communications | 19-939 | | | | \$ 91,807 |
| Altura Communications | 18-913 | | | | \$ 1,340 |
| Amazon | 19-909 | | | | \$ 1,080 |
| AMT Datasouth | 19-912 | | | | \$ 4,124 |
| ARC Products LLC | 19-912 | | | | \$ 58,715 |
| ARIZONA DEPT OF HEALTH | 19-939 | | | | \$ 150 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---------------------------------------|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| Arizona Lock and Safe | | | | | \$ 1,025 |
| Armstrong Medical | 19-912 | | | | \$ 36,470 |
| Arrington Watkins Architects | | | | | \$ 301,274 |
| Arrow International | 19-912 | | | | \$ 610 |
| Baxter Healthcare Corp | 19-912 | | | | \$ 5,368 |
| Bayer Healthcare | 18-920 | | | | \$ 74,376 |
| BEL-Aire Mechanical | | | | | \$ 40,215 |
| Burlington Medical | 19-912 | | | | \$ 3,028 |
| CAPSA SOLUTIONS | 19-909 | | | | \$ 5,936 |
| CAPSA SOLUTIONS | 19-912 | | | | \$ (25) |
| Capsule Tech | 19-912 | | | | \$ 143,422 |
| CAPSULE TECH INC | 18-913 | \$ (10,481.06) | | | \$ (10,481) |
| Cardinal Health | 19-912 | | | | \$ 85,931 |
| CDW Government | 19-909 | | | | \$ 275,954 |
| CDW Government | 19-938 | | | | \$ 48,448 |
| CDW Government | 19-939 | | | | \$ 161,925 |
| CME | 19-912 | | | | \$ 185,907 |
| Comprehensive Risk Services | | | | | \$ 547,333 |
| Coviden | 19-912 | | | | \$ 11,817 |
| Crosspoint Communications | | | | | \$ 25,724 |
| Datcard Systems | 19-909 | | | | \$ 18,821 |
| EXTENDATA SOLUTIONS | 19-909 | | | | \$ 500 |
| KRONOS INC | 19-909 | | | | \$ 196 |
| MDM COMMERCIAL ENTERPRISES INC | 19-909 | | | | \$ 1,400 |
| RETAIL MANAGEMENT SOLLUTIONS | 19-909 | | | | \$ (5,961) |
| THE CBORD GROUP INC | 19-909 | | | | \$ (1,234) |
| CME | 18-918 | | | | \$ 68 |
| COOPER ATKINS CORPORATION | 18-918 | | | | \$ (0) |
| MEDTRONIC USA INC | 18-918 | | | | \$ 59 |
| THE CBORD GROUP INC | 18-918 | | | | \$ 14 |
| GE MEDICAL SYSTEMS ULTRASOUND PRIMARY | 18-918 | | | | \$ 527,736 |
| GE MEDICAL SYSTEMS ULTRASOUND PRIMARY | 18-922 | | | | \$ 219,671 |
| Delynn Consultant | 19-940 | | | | \$ 114,187 |
| DLR Group Inc | | | | | \$ 4,222,015 |
| EMD Millpore | 19-912 | | | | \$ 7,175 |
| ENDOSCOPE SERVICES | 19-912 | | | | \$ 32,270 |
| Epstexas Storage | 19-912 | | | | \$ 633 |
| EQ2 LLC | 19-912 | | | | \$ 67,500 |
| Ethos Evacuation | 19-912 | | | | \$ 10,130 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|--|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| ETL REPOSE | 19-912 | | | | \$ 29,482 |
| EXTENDATA SOLUTIONS | | | | | \$ 66,659 |
| Felix Storch Inc | | | | | \$ 5,796 |
| FERGUSON ENTERPRISES | 19-912 | | | | \$ 3,571 |
| First American Title - Maryvale Hospital | | | | | \$ 7,582,335 |
| Follett | 19-912 | | | | \$ 40,303 |
| GE Healthcare | 18-915 | | | | \$ 773,012 |
| GE Healthcare | 19-901 | | | | \$ 14,880 |
| GE Healthcare | 18-917 | | | | \$ 766,491 |
| GE Healthcare | 18-918 | | | | \$ (787,011) |
| GE Healthcare | 19-938 | | | | \$ 13,999 |
| GE Medical Systems | 19-912 | | | | \$ 13,999 |
| GE Medical Ultrasound | 18-917 | | | | \$ 138,680 |
| General Devices | 19-912 | | | | \$ 47,400 |
| Gentherm | 19-912 | | | | \$ 16,692 |
| Gilbane Building CO. | 18-913 | | | | \$ 55,180,150 |
| FED EX FREIGHT | 18-913 | | | | \$ 3,481 |
| Global Equipment | 19-912 | | | | \$ 2,003 |
| Goodmans | 19-916 | | | | \$ 96,476 |
| Goodmans | 19-917 | | | | \$ 104,809 |
| Goodmans | 19-923 | | | | \$ 551,725 |
| Goodmans | 19-926 | | | | \$ 154,049 |
| Goodmans | 19-939 | | | | \$ 1,570 |
| Goodmans | 18-913 | | | | \$ 3,900 |
| JENSEN HUGHES INC | 18-913 | | | | \$ 11,538 |
| VALLEY SYSTEMS | 18-913 | | | | \$ 9,952 |
| Grainger | 19-912 | | | | \$ 63,690 |
| Graybar Electric | | | | | \$ 5,586 |
| GUEST COMMUNICATIONS | 19-912 | | | | \$ 17,130 |
| Haemonetics | 19-912 | | | | \$ 83,854 |
| HD Supply Facilities Maintenance Ltd | 19-912 | | | | \$ 39,937 |
| Helmer Inc | 19-912 | | | | \$ 144,487 |
| Hill Rom | | | | | \$ 20,409 |
| HP INC | 19-909 | | | | \$ 363,091 |
| HP INC | 19-939 | | | | \$ 168,146 |
| HUMANE RESTRAINT | 19-909 | | | | \$ 40,160 |
| HUMANE RESTRAINT | 19-912 | | | | \$ (4,480) |
| Hye Tech Network | 19-909 | | | | \$ 368,641 |
| IMEG Corp | | | | | \$ 91,590 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|--|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| Interior Solutions | 19-923 | | | | \$ 242,017 |
| Interior Solutions | 19-926 | | | | \$ 100,132 |
| Intermetro Industries | 19-912 | | | | \$ 42,332 |
| Intersan Manufacturing | 19-912 | | | | \$ 3,603 |
| Jensen Hughes | | | | | \$ 2,750 |
| Kronos Inc | | | | | \$ 72,000 |
| Lanmor Services Inc | | | | | \$ 1,952 |
| LOGIQUIP | 19-912 | | | | \$ 1,059 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | | | | | \$ 299,669 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 18-913 | | | | \$ (19,806) |
| MARKETLAB | 19-912 | | | | \$ 10,824 |
| MCG HEALTH LLC | | | | | \$ 37,017 |
| MDM Commercial | 19-909 | | | | \$ 40,622 |
| Medline | 19-912 | | | | \$ 3,628 |
| Medtronic | 19-912 | | | | \$ 7,931 |
| Mindray | 19-912 | | | | \$ 98,014 |
| Monoprice | 19-909 | | | | \$ 968 |
| Monoprice | 19-939 | | | | \$ 842 |
| MOPEC | 19-912 | | | | \$ 20,479 |
| NORIX GROUP INC | 19-926 | | | | \$ 11,918 |
| NANOSONICS INC | 19-912 | | | | \$ 22,944 |
| Ninyo and Moore Geotechnical and Environment | 19-923 | | | | \$ 11,700 |
| NORIX GROUP INC | | | | | \$ 400,689 |
| Olympus America | | | | | \$ 32,231 |
| Olympus America | 19-912 | | | | \$ 135 |
| OEC Medical Systems | 19-904 | | | | \$ 80,529 |
| OMC INVESTERS LLC | | | | | \$ 11,518 |
| OMC INVESTERS LLC | 19-912 | | | | \$ 117 |
| Owens and Minor | 19-912 | | | | \$ 56,788 |
| PAC VAN | | | | | \$ (790) |
| PAC VAN | | | | | \$ 1,295 |
| Parks Medical | 19-912 | | | | \$ 2,167 |
| Philips Healthcare | 18-921 | | | | \$ 38,523 |
| Physio Control | 19-912 | | | | \$ 19,458 |
| Progressive Roofing | 19-931 | | | | \$ 84,628 |
| PRONK TECHNOLOGIES INC | | | | | \$ 3,040 |
| PRONK TECHNOLOGIES INC | 19-912 | | | | \$ 16 |
| QRS Calibrations | 19-912 | | | | \$ 7,151 |
| Radiation Physics and Engineering | 18-917 | | | | \$ 1,250 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|--------------------------------------|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| Radiation Physics and Engineering | 18-920 | | | | \$ 1,600 |
| RAY-BAR | 18-913 | | | | \$ 4,905 |
| RETAIL MANAMIGAS SOLUTIONS | | | | | \$ 5,961 |
| RICOH AMERICAS CORPORATION | | | | | \$ 29,892 |
| Ruiz Custom Upholstery | 19-912 | | | | \$ 53,718 |
| SCOTTSDALE RESTAURANT SUPPLY | | | | | \$ 5,391 |
| Signodtics | 19-912 | | | | \$ 22,460 |
| Smiths Medical | 19-912 | | | | \$ 9,253 |
| SOFT COMPUTER CONSULTANT INC | | | | | \$ 89,550 |
| Smithcraft Signs | 18-913 | | | | \$ 10,266 |
| Speedie and Associates | | | | | \$ 17,823 |
| SALT RIVER PROJECT | 18-913 | | | | \$ (23,852) |
| Standard Textile | 19-912 | | | | \$ 4,464 |
| Stryker Communications | 19-910 | | | | \$ (14,174) |
| Stryker Communications | 19-910 | | | | \$ 5,103 |
| Stryker Communications | 19-920 | | | | \$ 9,072 |
| Steris Corp | | | | | \$ 13,950 |
| Stryker | | | | | \$ 175,192 |
| TBJ Inc | 19-912 | | | | \$ 5,654 |
| TD INDUSTRIES | 19-924 | | | | \$ 460,415 |
| The Cbord Group | 19-909 | | | | \$ 26,421 |
| THYSSENKRUPP ELEVATOR CORP | 19-912 | | | | \$ 587,346 |
| Translogic | 19-912 | | | | \$ 3,931 |
| Tucson Business Interiors | 19-912 | | | | \$ 3,000 |
| Tucson Business Interiors | 19-923 | | | | \$ 34,193 |
| Tucson Business Interiors | 19-926 | | | | \$ 335,704 |
| UMF Medical | 19-912 | | | | \$ 11,788 |
| Verathon | 19-912 | | | | \$ 14,020 |
| VERIZON | 19-909 | | | | \$ 16,853 |
| WAXIE | 19-912 | | | | \$ 3,002 |
| World Wide Technology | | | | | \$ 701,128 |
| Zoll Medical | 19-912 | | | | \$ 46,732 |
| AFFILIATED ENGINEERS INC | | | | | \$ 203,070 |
| CUSHMAN AND WAKEFIELD OF ARIZONA INC | | | | | \$ 12,500 |
| MARICOPA COUNTY TREASURER | | | | | \$ 10,000 |
| PHOENIX FENCE | | | | | \$ 2,283 |
| RELAYHEALTH INC | | | | | \$ 11,250 |
| THOMAS PRINTWORKS | | | | | \$ 4,863 |
| TOTAL Maryvale Campus (MV) | | \$ (10,481.06) | \$ - | \$ - | \$ 79,077,703.46 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|--|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| Adams and Wendt | 19-936 | | | | \$ 114,235 |
| APS | 19-936 | | | | \$ (14,700) |
| AIRPARK SIGNS | | | | | \$ 1,305 |
| Arizona Department of Health | 19-936 | | | | \$ 1,050 |
| AFFILIATED ENGINEERS | 19-936 | | | | \$ 394,767 |
| BUREAU VERITAS | 19-936 | | | | \$ 28,125 |
| Engineering Economics | 19-936 | | | | \$ 63,807 |
| GOODMANS | 19-936 | | | | \$ 109,429 |
| Grainger | 19-936 | | | | \$ 5,504 |
| JENSEN HUGHES | 19-936 | | | | \$ 15,462 |
| KITCHELL | 19-936 | | | | \$ 8,386,706 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-936 | | | | \$ 230 |
| Speedie and Assoc | 19-936 | | | | \$ 2,040 |
| Valley Systems | 19-936 | | | | \$ 14,320 |
| INNERFACE ARCHITECTURAL SIGNAGE | | | | | \$ 862 |
| MARICOPA COUNTY TREASURER | | | | | \$ 8,212 |
| THE CBORD GROUP INC | | | | | \$ 13,022 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 631,930 |
| TOTAL Annex HVAC Replacement (RSVT) | | \$ - | \$ - | \$ - | \$ 9,776,304.24 |
| | | \$ (10,481.06) | \$ - | \$ - | \$ 88,854,008 |

Note: Prior months amount paid are hidden

| Functional Area - Acute Care Facilities' | | | | | |
|--|--------|--|--|--|--------------|
| eSTF - Enterprise Strengthening the Foundation (see attached for detail) | 17-900 | | | | \$ 6,237,142 |
| Client & Mobility (Phase 1) | 16-934 | | | | \$ 1,434,893 |
| Client & Mobility (Phase 2) | 17-906 | | | | \$ 1,512,376 |
| IPT (PBX Replacement) | 16-909 | | | | \$ 2,789,264 |
| Legacy Storage (DP-007) | 16-910 | | | | \$ 2,506,978 |
| Single Sign on | 17-913 | | | | \$ 81,150 |
| OPTIV SECURITY INC | 16-900 | | | | \$ (25) |
| 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 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| 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 |
| Imprivata ConfirmID | 19-911 | | | | \$ 137,295 |
| ESB (Tibco) - Infrastructure | 19-918 | | | | \$ 34,861 |
| PWIM Global Monitor Software - additional funding required to support imp | 16-924 | | | | \$ 35,400 |
| AMICO ACCESSORIES | 16-908 | | | | \$ (704) |
| Patient monitors - High Acuity | 16-908 | | | | \$ 6,240,243 |
| NHR NEWCO HOLDINGS LLC | 16-908 | | | | \$ (339) |
| NHR NEWCO HOLDINGS LLC | 16-910 | | | | \$ (86) |
| Stretcher replacement | 16-912 | | | | \$ 395,538 |
| IVUS - intravascular ultrasound for placement of stents | 16-922 | | | | \$ 128,371 |
| VOLCANO CORPORATION | 16-922 | | | | \$ (323) |
| EDWARDS LIFESCIENCES LLC | 16-928 | | | | \$ (116) |
| Vigileo Monitors (8) | 16-928 | | | | \$ 96,132 |
| VANIR CONSTRUCTION | 16-928 | | | | \$ 463,755 |
| Balloon Pumps | 16-920 | | | | \$ 149,197 |
| MAQUET MEDICAL SYSTEMS USA | 16-920 | | | | \$ (2,897) |
| Zeiss - Cirrus HD opthal camera | 16-919 | | | | \$ 60,654 |
| Vivid Q BT12 Ultrasound | 16-931 | | | | \$ 55,019 |
| MINDRAY DS USA INC | 16-931 | | | | \$ (19) |
| 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 | | | | \$ 20,195 |
| MIZUHO ORTHOPEDIC SYSTEMS INC | NO PO | | | | \$ (52) |
| 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 |
| SIZEWISE RENTALS | 16-932 | | | | \$ (4,056) |
| King Tong Pelvic fx reducer | 16-926 | | | | \$ 9,500 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| Stryker Core Power Equipment --Contract | 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 | | | | \$ 1,884,099 |
| POC Ultrasounds (10) | 16-931 | | | | \$ 634,702 |
| Ice Machine Replacement | 16-911 | | | | \$ 23,881 |
| FOLLETT CORPORATION | 16-911 | | | | \$ (880) |
| 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 |
| Facility upkeep | 18-905 | | | | \$ 69,218 |
| Colposcopes | 18-909 | | | | \$ 24,607 |
| OWENS AND MINOR | 18-909 | | | | \$ 279 |
| Chandler ADA Doors | 18-042 | | | | \$ 5,867 |
| Glendale Digital X-Ray unit and Sensors (Panoramic Digital AND Nomad 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 Delivery 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 |
| CHC Internal Medicine Clinic Renovation - Increase the number of exam rooms | 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 | | | | \$ 164,096 |
| 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 |
| CEPHEID | 19-914 | | | | \$ 1,098 |
| Bili Meter - Draegar (10 units) | 19-927 | | | | \$ 71,875 |
| Colposcope - Guadalupe | 19-925 | | | | \$ 9,927 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| 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 |
| ALTURA COMMUNICATIONS | 16-909 | | | | \$ 138,061 |
| AMICO ACCESSORIES | 17-903 | | | | \$ (55) |
| ASCOM WIRELESS SOLUTIONS | 17-903 | | | | \$ (35) |
| EXTENDATA SOLUTIONS | 17-903 | | | | \$ (92) |
| 3rd Floor Behavioral Health/Medical Unit Remodel | 17-903 | | | | \$ 2,570,464 |
| CREATIVE COMMUNICATIONS | 17-903 | | | | \$ (23) |
| OWENS AND MINOR | 17-903 | | | | \$ (230) |
| PATIENT TELEPHONE SUPPLY LLC | 17-903 | | | | \$ (22) |
| 22 Behavioral Health Beds for 3rd Floor MMC | 17-907 | | | | \$ 188,527 |
| SIZEWISE RENTALS | 17-907 | | | | \$ (3,377) |
| 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 | | | | \$ 95,059 |
| Diablo Infrastructure Costs | 18-903 | | | | \$ 431,149 |
| KRONOS INC | 18-903 | | | | \$ (37) |
| HP INC | 16-923 | | | | \$ (38) |
| Epic Willow - Ambulatory & Inventory | 18-906 | | | | \$ 428,269 |
| Navigant - Proposition 480 planning | 16-923 | | | | \$ 910,000 |
| Kaufmann Hall - Prop 480 planning | 16-923 | | | | \$ 370,019 |
| IPv4XChange (ARIN Based Transfer Escrow Payment) | 16-923 | | | | \$ 7,040 |
| MARSH & MCLENNAN AGENCY LLC | 16-923 | | | | \$ 15,000 |
| MARSH & MCLENNAN AGENCY LLC | 17-916 | | | | \$ (15,000) |
| Vanir Construction Management (Planning Phase) | 17-915 | | | | \$ 749,971 |
| Vanir Construction Management (\$48M) (\$48,300,501 - Entire Project) | 17-916 | | | | \$ 4,580,656 |
| WORLD WIDE TECHNOLOGY HOLDINGS CO LLC | 17-916 | \$ (3,682.80) | | | \$ - |
| LOVITT & TOUCHE INC | 17-916 | \$ 53,191.00 | | | \$ - |
| Vanir Construction Management (Planning Phase) | 16-923 | \$ 207,861.28 | \$ 709,373.63 | \$ 256,790.85 | \$ 1,286,190 |
| IPMO Modular Building | 17-902 | | | | \$ 329,631 |
| Dickenson Wright PLLC | 16-923 | | | | \$ 181,495 |
| GE HEALTHCARE | 19-918 | | | | \$ (32,261) |
| Sims Murrary LD | 16-923 | | | | \$ 24,128 |
| Devenney Group LTD | 16-923 | | | | \$ 242,450 |
| MTI Connect Inc | 16-923 | | | | \$ 181 |
| SHI INTERNATIONAL | 19-911 | | | | \$ 2,577 |
| Payroll/Supplies/Misc Expenses | 16-923 | | | | \$ 792,042 |
| EPIC replatform and upgrade to 2016 (see attached for detail) | 17-900 | | | | \$ 7,675,491 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| Guidesoft | 17-900 | | | | \$ (27,373) |
| Reimbursement for Capital Expenditures | N/A | | | | \$ 36,000,000 |
| OCULUS SURGICAL INC | | | | | \$ (52) |
| Vcore Technology | | | | | \$ (68,550) |
| Other exp/recon items | | | | | \$ 677 |
| TOTAL Tranch 1 | | \$ 257,369.48 | \$ 709,373.63 | \$ 256,790.85 | \$ 92,162,645.12 |
| Bond issuance costs | | | | | \$ 817,684 |
| BPG Technologies LLC | | | | | \$ 288,397 |
| Dickinson Wright PLLC | | | | | \$ 323,597 |
| Hye Tech Neywork and Security Solutions | | | | | \$ 3,795,099 |
| Goodmans | | | | | \$ 4,790 |
| GOODMANS | 16-923 | | | | \$ (2,921) |
| JRC DESIGN | 19-955 | | | | \$ 282,995 |
| Lovitt & Touche INC | 16-923 | | | | \$ 75,000 |
| Lovitt & Touche INC | 19-934 | \$ 24,573.00 | \$ 8,191.00 | \$ 8,191.00 | \$ 4,160,348 |
| PAC VAN INC | 19-934 | | | | \$ 80,395 |
| MARSH & MCLENNAN AGENCY LLC | 19-934 | | | \$ 569,974.00 | \$ 653,165 |
| LOVITT & TOUCHE INC | 19-951 | | | | \$ 505 |
| PAC-VAN | 19-955 | | | | \$ 71,160 |
| Payroll/Supplies/Misc Expenses | | | | | \$ 7,865,404 |
| Sims Murrary LD | | | | | \$ 30,441 |
| Sims Murrary LD | 19-955 | | | | \$ 9,433 |
| Vanir Construction Management (\$48M) (\$48,300,501 - Entire Project) | | | | | \$ 21,072,901 |
| World Wide Technology Co Inc | | | | | \$ 448,569 |
| Zurich North America | 16-923 | | | | \$ 48,327 |
| AFFILIATED ENGINEERS INC | | | | | \$ 38,348 |
| BALLARD SPAHR | | | | | \$ 288,544 |
| BLUETREE NETWORK INC | | | | | \$ 178,563 |
| CARAHSOFT TECHNOLOGY CORPORATION | | | | | \$ 143,344 |
| CDW GOVERNMENT INC | | | | | \$ 555,016 |
| CENTURYLINK | | | | | \$ 170,013 |
| CORPORATE TECHNOLOGY SOLUTIONS LLC | | | | | \$ 178,552 |
| DEVENNEY GROUP LTD | | | | | \$ 530,623 |
| DWL ARCHITECTS + PLANNERS INC | | | | | \$ 272,318 |
| EPIC SYSTEMS CORPORATION | | | | | \$ 554,536 |
| FITCH RATINGS | | | | | \$ 120,000 |
| GRAYBAR ELECTRIC | | | | | \$ 17,357 |
| GREENBERG TRAURIG, LLP | | | | | \$ 240,000 |
| GUIDESOFT INC | | | | | \$ 503,715 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|-------------------------------------|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| HP INC | | | | | \$ 19,960 |
| INTEGRATED CONTROL SYSTEMS INC | | | | | \$ 2,160 |
| LANMOR SERVICES INC | | | | | \$ 209,036 |
| MISCELLANEOUS | | | | | \$ 228,750 |
| MOODY'S | | | | | \$ 120,000 |
| MOSS ADAMS LLP | | | | | \$ 42,500 |
| ORRICK | | | | | \$ 35,000 |
| PRESIDIO NETWORKED SOLUTIONS INC | | | | | \$ 310,797 |
| RICOH AMERICAS CORPORATION | | | | | \$ 180 |
| RMJ ELECTRICAL CONTRACTORS INC | | | | | \$ 43,305 |
| SAVVIS COMMUNICATIONS LLC | | | | | \$ 116,363 |
| SHI INTERNATIONAL CORP | | | | | \$ 122,929 |
| SPRAY SYSTEMS ENVIRONMENTAL INC | | | | | \$ 13,780 |
| STIFEL | | | | | \$ 268,910 |
| THOMAS PRINTWORKS | | | | | \$ 1,291 |
| US BANK | | | | | \$ 900 |
| US BANK - CORPORATE TRUST SERVICES | | | | | \$ 600 |
| Valleywise | | | | | \$ 1,509 |
| VANIR CONSTRUCTION MANAGMENT INC | | | | | \$ (4,370,442) |
| WALMART.COM | | | | | \$ 549 |
| WOODRUFF CONSTRUCTION | | | | | \$ 17,015 |
| TOTAL Enterprise | | \$ 24,573.00 | \$ 8,191.00 | \$ 578,165.00 | \$ 41,001,308.50 |
| Adams and Wendt | 19-935 | | | | \$ 32,697 |
| APS | 19-935 | | | | \$ (335,303) |
| Affiliated Engineers Inc | 19-935 | | | | \$ 1,587,215 |
| Affiliated Engineers Inc | 19-935 | | | | \$ 2,068,896 |
| Arnold Machinery | 19-935 | | | | \$ 34,209 |
| ARIZONA DEPARTMENT OF HEALTH | 19-935 | | | | \$ 150 |
| ALTURA COMMUNICATIONS SOLUTIONS LLC | 19-935 | | | | \$ 5,749 |
| BPG TECHNOLOGIES LLC | 19-935 | | | | \$ 2,774 |
| CABLE SOLUTIONS LLC | 19-935 | | | | \$ 80,880 |
| CDW GOVERNMENT INC | 19-935 | | | | \$ 337 |
| CENTERLINE MECHANICAL | 19-935 | | | | \$ 24,522 |
| CITY OF PHOENIX | 19-935 | | | | \$ 2,296 |
| ELONTEC LLC | 19-935 | | | | \$ 3,414 |
| ENGINEERING ECONOMICS | 19-935 | | | | \$ 135,362 |
| GOODMANS | 19-935 | | | | \$ 12,143 |
| HYE TECH | 19-935 | | | | \$ 2,060,999 |
| JENSEN HUGHES | 19-935 | | | | \$ 12,263 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| KITCHELL | 19-935 | | | | \$ 54,628,414 |
| KM FACILITY SERVICES | 19-935 | | | | \$ 71,885 |
| LANMOR | 19-935 | | | | \$ 23,708 |
| Maricopa County | 19-935 | | | | \$ 1,500 |
| MDM COMMERCIAL | 19-935 | | | | \$ 1,760 |
| Soft Computer Consultants | 19-935 | | | | \$ 5,250 |
| SMITHCRAFT SIGNS | 19-935 | | | | \$ 5,782 |
| Speedie snd Assoc | 19-935 | | | | \$ 29,245 |
| SOUTHWEST GAS | 19-935 | | | | \$ 121,938 |
| SYNTELLIS PERFORMANCE SOLUTIONS LLC | 19-935 | | | | \$ 28,000 |
| Thomas Printworks | 19-935 | | | | \$ 41 |
| VALLEY SYSTEMS | 19-935 | | | | \$ 960 |
| WESTERN STATES FIRE | 19-935 | | | | \$ 705 |
| ARIZONA PUBLIC SERVICE COMPANY | | | | | \$ 1,773,158 |
| HYE TECH NETWORK AND SECURITY SOLUTIONS | | | | | \$ 7,125 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | | | | | \$ 239,965 |
| MARICOPA COUNTY TREASURER | | | | | \$ 135,146 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 719,110 |
| TOTAL Central Utility Plant (RSVT) | | \$ - | \$ - | \$ - | \$ 63,522,292.58 |
| ADAMS AND WENDT | 19-949 | | | | \$ 65,342 |
| ADAMS AND WENDT | 19-948 | | | | \$ 32,968 |
| ADAMS AND WENDT | 19-947 | | | | \$ 71,561 |
| ADAMS AND WENDT | 19-951 | | | | \$ 90,538 |
| ADAMS AND WENDT | | | | | \$ 6,600 |
| ADVANCED INSTRUMENTS LLC | 19-947 | | | | \$ 30,605 |
| ACIST MEDICAL SYSTEMS INC | 19-947 | | | \$ 150,700.00 | \$ 150,700 |
| ACCUVEIN INC | 19-947 | \$ 28,925.00 | | | \$ 28,925 |
| HYE TECH NETWORK | 19-947 | | | | \$ 2,953,494 |
| HYE TECH NETWORK | 19-951 | | | | \$ 14,702 |
| ADAMS AND WENDT | 19-953 | | | | \$ 5,460 |
| ADAMS AND WENDT | 19-948 | | | | \$ 2,596 |
| AFFILIATED ENGINEERS | 19-948 | | | | \$ 396,165 |
| AFFILIATED ENGINEERS | 19-954 | | | | \$ 1,050 |
| AFFILIATED ENGINEERS | | | | | \$ 1,092 |
| ANCO SANITATION | 19-948 | | | | \$ 1,450 |
| ATLANTIC RELOCATIONS | 19-948 | | | | \$ 49,125 |
| ALLEGIANCE CORPORATION | 19-947 | | | \$ 1,558.42 | \$ 14,858 |
| ABBOTT LABORATORIES INC | 19-947 | | | | \$ 178,515 |
| ALTURA COMMUNICATIONS | 19-947 | | | | \$ 34,924 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|----------------------------------|------------|---------------|---------------|---------------|------------------|
| | | SEPT'23 | OCT'23 | NOV'23 | Cumulative Total |
| AMAZON | 19-947 | | | | \$ 965 |
| ARMSTRONG MEDICAL INDUSTRIES INC | 19-951 | | | | \$ 2,151 |
| ARMSTRONG MEDICAL INDUSTRIES INC | 19-947 | | | \$ 10,755.00 | \$ 10,755 |
| AMICO ACCESSORIES | 19-951 | \$ 36,170.00 | | | \$ 43,425 |
| BAKER SERVICES | 19-951 | | | | \$ 2,950 |
| BAKER SERVICES | 19-947 | \$ 3,300.00 | | | \$ 4,600 |
| BUNNELL INC | 19-947 | | | | \$ 82,940 |
| BPG TECH | 19-948 | | | | \$ 182,186 |
| BPG TECH | 19-947 | | | | \$ 7,339 |
| BPG TECH | 19-951 | | | | \$ 23,013 |
| B BRAUN MEDICAL INC | 19-947 | | | \$ 58,963.14 | \$ 58,963 |
| CABLE SOLUTIONS | 19-947 | \$ 297,264.24 | \$ 223,876.64 | \$ 369,557.69 | \$ 7,384,423 |
| CABLE SOLUTIONS | 19-951 | \$ 49,046.79 | \$ 35,961.16 | \$ 23,838.50 | \$ 1,035,813 |
| CARL ZEISS MEDITEC INC | 19-947 | \$ 152,884.37 | \$ 933,402.00 | | \$ 1,086,286 |
| C-SCAN TECHNOLOGIES | 19-947 | | | \$ 5,407.50 | \$ 12,513 |
| CAPSULE TECH | 19-951 | | | | \$ 8,708 |
| CAPSULE TECH | 19-947 | | | \$ 154,563.80 | \$ 154,564 |
| CDW G | 19-947 | \$ 51,955.13 | \$ 697,352.61 | \$ 66,217.30 | \$ 1,352,200 |
| CDW G | 19-951 | | | | \$ 1,024 |
| CENTURY LINK | 19-951 | | | | \$ 6,706 |
| CENTRAK INC | 19-947 | \$ 1,463.96 | \$ 97,010.62 | \$ 5,275.08 | \$ 826,366 |
| CITY OF PHOENIX | 19-947 | | | | \$ 84,493 |
| CITY OF PHOENIX | 19-948 | | | | \$ 9,525 |
| CME | 19-948 | | | | \$ 21,924 |
| CME | 19-951 | | | | \$ 7,046 |
| CME | 19-947 | \$ 3,733.94 | \$ 275,835.58 | \$ 113,396.89 | \$ 808,643 |
| CUNINGHAM ARCHITECT | 19-947 | | | \$ 60,000.00 | \$ 31,836,365 |
| CUNINGHAM ARCHITECT | 19-951 | \$ 8,000.00 | | | \$ 40,640 |
| CUNINGHAM ARCHITECT | 19-937 | | | | \$ 73,619 |
| CLIMATEC LLC | 19-947 | | | | \$ 8,322 |
| CONNECTIVITY WIRELESS INC | 19-947 | | | | \$ 1,333,892 |
| CONNECTIVITY WIRELESS INC | 19-951 | | | | \$ 187,796 |
| CONNECTIVITY WIRELESS SOLUTIONS | 19-951 | \$ 91,213.96 | | | \$ 91,214 |
| CONNECTIVITY WIRELESS SOLUTIONS | 19-947 | \$ 16,828.00 | \$ 35,903.21 | | \$ 52,731 |
| COOPER ATKINS CORPORATION | 19-947 | | | \$ 32,350.16 | \$ 32,350 |
| CARAHSOFT TECHNOLOGY | . | | | | \$ 2,520 |
| CS MEDICAL LLC | 19-947 | | | | \$ 27,880 |
| DATEx OHMEDA | 19-951 | \$ 17,177.86 | \$ 691,601.82 | | \$ 708,780 |
| DANIELS MOVING | 19-948 | | | | \$ 18,756 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| DYNAMIC INSTALLATION | 19-948 | | | | \$ 23,932 |
| DYNAMIC INSTALLATION | 19-951 | | | | \$ 501 |
| DISTRICT MEDICAL GROUP | 19-948 | | | | \$ 89,356 |
| ECD SYSTEMS | 19-947 | \$ 135,804.00 | \$ 65,244.00 | | \$ 1,640,615 |
| ECD SYSTEMS | 19-951 | \$ 4,949.52 | | \$ 1,590.28 | \$ 40,938 |
| ENDOSCOPE SERVICES | 19-951 | | \$ 7,691.06 | \$ 3,945.50 | \$ 11,637 |
| ENGINEERING ECONOMICS | 19-951 | | | | \$ 62,767 |
| ENGINEERING ECONOMICS | 19-947 | | | | \$ 295,508 |
| ENDOSOFT LLC | 19-947 | | | | \$ 73,920 |
| EXCESSIVE CARTS | 19-948 | | | | \$ 23,182 |
| EPIC SYSTEMS CORPORATION | 19-947 | | | | \$ 5,000 |
| FISHER HEALTHCARE | 19-947 | \$ 61,978.34 | | \$ 3,793.09 | \$ 245,295 |
| FC HOSPITALITY | 19-948 | | | | \$ 216,732 |
| Follett | 16-923 | | | | \$ 63,102 |
| Follett | 19-947 | | | \$ 20,722.67 | \$ 53,785 |
| FILLMASTER SYSTEMS LLC | 19-947 | \$ 1,495.00 | | | \$ 1,495 |
| GOODMANS | | | | | \$ 101,011 |
| GOODMANS | 19-951 | | \$ 747.16 | | \$ 30,993 |
| GOODMANS | 19-947 | \$ 1,071,993.17 | | \$ 250,793.83 | \$ 2,037,601 |
| GRAINGER | 19-947 | \$ 19,304.00 | | \$ 11,458.94 | \$ 96,139 |
| GRAINGER | 19-951 | \$ 9,726.58 | | | \$ 29,011 |
| GE MEDICAL SYSTEMS | 19-947 | | | | \$ 81,132 |
| GE HEALTHCARE | 19-947 | | | \$ 1,223,549.90 | \$ 1,558,276 |
| GE PRECISION HEALTHCARE LLC | 19-947 | | | \$ 1,061,848.56 | \$ 1,184,921 |
| GETINGE USA SALES LLC | 19-947 | | | | \$ 721,318 |
| Helmer Inc | 19-947 | | | | \$ 45,972 |
| HILL ROM | 19-951 | | | | \$ 16,453 |
| HILL ROM | 19-947 | | | | \$ 125,223 |
| HP INC | 19-947 | | | \$ 74,770.79 | \$ 75,296 |
| HOLOGIC INC | 19-947 | | | | \$ 4,000 |
| HOME DEPOT - Buyers Log | 19-948 | | | | \$ 587 |
| HYE TECH NETWORK AND SECURITY SOLUTIONS | 19-951 | \$ 531.92 | \$ 23,514.93 | | \$ 62,142 |
| HYE TECH NETWORK AND SECURITY SOLUTIONS | 19-947 | \$ 2,142.00 | | | \$ 746,692 |
| Innerface Architectural Signage | 19-948 | | | | \$ 13,927 |
| Innerface Architectural Signage | 19-951 | | | | \$ 833 |
| INTERMETRO INDUSTRIES CORPORATION | 19-947 | | | | \$ 252,028 |
| INTERMETRO INDUSTRIES CORPORATION | | | | | \$ 1,351 |
| JENSEN HUGHES | 19-947 | | | | \$ 82,763 |
| JENSEN HUGHES | 19-951 | | | | \$ 41,127 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|--|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| KRONOS INC | 19-947 | | | | \$ 6,444 |
| KITCHELL | 19-947 | \$ 3,008,431.53 | \$ 3,025,304.17 | \$ 3,187,658.00 | \$ 296,037,705 |
| KITCHELL | 19-937 | | | | \$ 667,452 |
| KITCHELL | 19-948 | | \$ 20,328.00 | | \$ 11,950,855 |
| KITCHELL | 19-951 | | \$ 428,157.17 | \$ 833,679.23 | \$ 33,815,474 |
| KITCHELL | 19-954 | | | | \$ 8,373 |
| LANMOR | 19-947 | | | | \$ 833,283 |
| LANMOR | 19-948 | | | | \$ 4,547 |
| LANMOR | 19-951 | \$ 45,969.92 | | | \$ 124,428 |
| LEVEL 3 AUDIO VISUAL | 19-947 | | | | \$ 636,289 |
| LEVEL 3 AUDIO VISUAL | 19-951 | | \$ 37,084.78 | | \$ 265,798 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-951 | | | | \$ 289,918 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-947 | | | | \$ 2,044,437 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | | | | \$ 190.00 | \$ 6,211 |
| MARICOPA COUNTY ENVIRONMENTAL SERVICES | 19-947 | | | | \$ 3,550 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-948 | | | | \$ 3,308 |
| MEDLINE INDUSTRIES INC | 19-947 | | \$ 4,537.86 | | \$ 4,538 |
| MINDRAY DS USA INC | 19-947 | | | | \$ 264,042 |
| MIZUHO ORTHOPEDICS SYSTEMS INC | 19-947 | \$ 183,505.09 | | | \$ 183,505 |
| MDM COMMERCIAL | 19-951 | | \$ 700.00 | | \$ 14,695 |
| MDM COMMERCIAL | 19-947 | | | | \$ 33,982 |
| MDM COMMERCIAL | 19-950 | | | | \$ 748 |
| MOBILE COMMUNICATIONS AMERICA INC | 19-947 | | | | \$ 5,738 |
| MONOPRICE INC | 19-947 | | | \$ 15,476.95 | \$ 15,477 |
| MIHS PAYROLL | | \$ 192,690.07 | | \$ 91,597.02 | \$ - |
| NINYO AND MOORE | 19-947 | | | | \$ 11,200 |
| NINYO AND MOORE | 19-947 | | | | \$ 6,824 |
| NINYO AND MOORE | 19-951 | | | | \$ 16,293 |
| NCI INC | 19-947 | | | | \$ 19,725 |
| NATUS MEDICAL INC | 19-947 | | | | \$ 60,912 |
| OHIO MEDICAL LLC | 19-947 | | \$ 237,543.53 | | \$ 238,474 |
| OHIO MEDICAL LLC | 19-951 | | | | \$ 1,029 |
| OFFSITE EQUIPMENT STORAGE | 19-948 | | | | \$ 650 |
| PAC-VAN | 19-947 | | | | \$ 7,220 |
| POHLE NV CENTER INC | 19-948 | | | | \$ 11,904 |
| PERRY BAROMEDICAL CORPORATION | 19-947 | | | | \$ 270,269 |
| PRINTWORKS | 19-947 | | | \$ 41.09 | \$ 41 |
| PHILIPS HEALTHCARE | 19-947 | | | \$ 3,575,331.13 | \$ 3,575,331 |
| PATIENT TELEPHONE SUPPLY | 19-947 | | | \$ 3,825.00 | \$ 3,825 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid SEPT'23 | Amount Paid OCT'23 | Amount Paid NOV'23 | Amount Paid Cumulative Total |
|---|------------|------------------------|-----------------------|-----------------------|---------------------------------|
| RECLASS UTILITIES ALLOCATION TO CONSTRUCTION PROJECTS | 19-951 | | | | \$ (34,000) |
| RECLASS UTILITIES ALLOCATION TO CONSTRUCTION PROJECTS | 19-947 | | | | \$ 34,000 |
| RMJ Electrical Contractors | | | | | \$ 551 |
| SIEMENS HEALTHCARE DIAGNOSTICS | 19-947 | \$ 1,544,200.00 | | | \$ 3,180,400 |
| SKYTRON | 19-947 | \$ 29,850.80 | | | \$ 239,934 |
| SKYTRON | 19-951 | | | | \$ 13,430 |
| SKYTRON | | | | | \$ (207,963) |
| SMITHCRAFT SIGNS | 19-947 | | | | \$ 34,085 |
| SMITHCRAFT SIGNS | 19-951 | | | | \$ 54,388 |
| SMITHCRAFT SIGNS | 20-404 | | \$ 415,848.00 | | \$ 415,848 |
| SPEEDIE AND ASSOC | 19-947 | \$ 37,770.00 | | | \$ 295,673 |
| SPEEDIE AND ASSOC | 19-951 | | | | \$ 55,000 |
| STERIS CORPORATION | 19-947 | \$ 274,545.15 | \$ 126,504.64 | \$ 9,370.00 | \$ 5,229,824 |
| STERIS CORPORATION | 19-951 | \$ 4,919.31 | | | \$ 110,622 |
| SCRIPTPRO USA INC | 19-947 | | | | \$ 146,801 |
| STRYKER SALES CORPORATION | 19-951 | | | | \$ 49,298 |
| STRYKER SALES CORPORATION | 19-947 | \$ 975.00 | | \$ 288,716.34 | \$ 294,568 |
| STRYKER COMMUNICATIONS | 19-947 | \$ 1,346.99 | | | \$ 1,339,235 |
| SWISSLOG | 19-947 | | | | \$ 2,500 |
| SIRVA MOVE MANAGEMENT | 19-947 | | \$ 368,988.93 | | \$ 368,989 |
| TEMP ARMOUR | 19-951 | | | | \$ 6,649 |
| Valley Systems | 19-948 | | | | \$ 756 |
| Valley Systems | 19-951 | | | | \$ 1,018 |
| Speedie and Assoc | 19-947 | | | | \$ 80,881 |
| Speedie and Assoc | 19-951 | | | | \$ 28,802 |
| Speedie and Assoc | 19-948 | | | | \$ 1,120 |
| SRP | 19-947 | | | | \$ 500 |
| WAXIE SANITARY SUPPLY | 19-947 | | | | \$ 840 |
| UTILITY ALLOCATION | 19-947 | \$ 129,000.00 | | \$ 114,000.00 | \$ 1,292,500 |
| UTILITY ALLOCATION | | | | | \$ 18,500 |
| THOMAS PRINTWORKS | | | | | \$ 4,069 |
| THOMAS PRINTWORKS | 19-947 | \$ 30.68 | \$ 25.45 | | \$ 530 |
| Trademark Visual | 19-948 | | | | \$ 2,576 |
| THE BAKER COMPANY | 19-947 | | | | \$ 148,103 |
| TRANSACT COMMERCIAL INTERIORS | 19-951 | | | | \$ 15,157 |
| ORANGE FACTOR IMAGING PHYSICISTS LLC | | | | \$ 6,400.00 | \$ 6,400 |
| US BANK-WIRE/BOND | | | | \$ 300.00 | \$ 300 |
| ZORO TOOLS | 19-948 | | | | \$ 14,481 |
| ALTURA COMMUNICATIONS SOLUTIONS LLC | | | | | \$ 11,827 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

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|--|------------|------------------------|------------------------|-------------------------|---------------------------------|
| DH PACE COMPANY INC | | | | | \$ 1,468 |
| ENTERPRISE SECURITY INC | | | | | \$ 13,715 |
| HD SUPPLY FACILITIES MAINTENANCE LTD | | | | | \$ 3,780 |
| INTERMETRO INDUSTRIES CORPORATION | | | | | \$ 833 |
| LOVITT & TOUCHE INC | | | | | \$ 505 |
| MARICOPA COUNTY TREASURER | | | | | \$ 7,310 |
| SKYLINE BUILDERS AND RESTORATION INC | | | | | \$ 122,769 |
| STRYKER SALES CORPORATION | | | | | \$ 384,697 |
| TEMPE DIABLO LLC | | | | | \$ 33,132 |
| TUCSON BUSINESS INTERIORS INC | | | | | \$ 447,192 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 13,205,451 |
| WORLD WIDE TECHNOLOGY HOLDINGS CO LLC | | | | | \$ 35,500 |
| TOTAL Roosevelt Campus Site Development Plan (RSVT) | | \$ 7,519,122.32 | \$ 7,753,163.32 | \$ 11,832,468.99 | \$ 440,880,655.11 |

| | | | |
|---------------------|---------------------|----------------------|-----------------------|
| \$ 7,801,065 | \$ 8,470,728 | \$ 12,667,425 | \$ 637,566,901 |
|---------------------|---------------------|----------------------|-----------------------|

Bond Proceeds received to date:

\$935,805,959

TOTAL MONTHLY SPENT AMOUNT

| | | | |
|---------------------|------------------------|-------------------------|-----------------------|
| \$ 7,752,488 | \$ 8,470,727.95 | \$ 12,667,424.84 | \$ 862,279,819 |
|---------------------|------------------------|-------------------------|-----------------------|

VARIANCE: Bond Proceeds amount vs CER amount issued

-

REMAINING Cash for disbursement

| | | | |
|---------------------|---------------------|---------------------|---------------------|
| \$94,664,293 | \$86,193,565 | \$73,526,140 | \$73,526,140 |
|---------------------|---------------------|---------------------|---------------------|

8.b. Care Reimagined Capital Purchase Report - December 2023



Care Reimagined – Spend report (December 2023)

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|---|------------|-------------|-------------|-------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| Functional Area - Outpatient Health Facilities | | | | | |
| ABBOTT RAPID DIAGNOSTICS | 19-930 | | | | \$ 1,870 |
| ADVANCED STERILIZATION | 19-930 | | | | \$ 140,587 |
| Advanced Testing | 19-930 | | | | \$ 10,605 |
| Airpark Signs | 19-930 | | | | \$ 184,498 |
| ALLEGIANCE CORP | 19-930 | | | | \$ 40,417 |
| ALTURA | 19-930 | | | | \$ 204,410 |
| AMICO | 19-930 | | | | \$ 5,648 |
| ARC Products LLC | 19-930 | | | | \$ 3,699 |
| Arizona Department of Health | 19-930 | | | | \$ 300 |
| ARIZONA PUBLIC SERVICE | 19-930 | | | | \$ (32,545) |
| Armstrong Medical | 19-930 | | | | \$ 8,955 |
| ARTHREX | 19-930 | | | | \$ 64,558 |
| B BRAUN | 19-930 | | | | \$ 180,457 |
| BAYER HEALTHCARE | 19-930 | | | | \$ 86,500 |
| Baxter Health | 19-930 | | | | \$ 4,995 |
| BONNY PIONTKOWSKI | 19-930 | | | | \$ 7,720 |
| BPG Technologies | 19-921 | | | | \$ 174,467 |
| BPG Technologies | 19-930 | | | | \$ 16,080 |
| CAPSULE TECH | 19-930 | | | | \$ 164,493 |
| CARDINAL HEALTH | 19-930 | | | | \$ 2,070 |
| CAREFUSION | 19-930 | | | | \$ 269,605 |
| CDW Government | 19-930 | | | | \$ 296,946 |
| CENTURYLINK | 19-930 | | | | \$ 12,532 |
| CHEMDAQ | 19-930 | | | | \$ 21,874 |
| City of Peoria | | | | | \$ 80,987 |
| CME | 19-930 | | | | \$ 1,731,072 |
| COOPER ATKINS | 19-930 | | | | \$ 33,020 |
| COOPER SURGICAL | 19-930 | | | | \$ 11,787 |
| COVIDIEN | 19-930 | | | | \$ 83,550 |
| CROSSPOINT COMMUNICATIONS | 19-930 | | | | \$ 18,657 |
| Cushman and Wakefield of Arizona | | | | | \$ 4,000 |
| C-SCAN TECHNOLOGIES | 19-930 | | | | \$ 230 |
| DAAVLIN DISTRUBITING | 19-930 | | | | \$ 7,000 |
| DAN GWILLIAM CONSULTING | | | | | \$ 300 |
| DANIELS MOVING | 19-930 | | | | \$ 23,133 |
| Davis Enterprises | 19-930 | | | | \$ 14,807 |
| DATA INNOVATIONS LLC | | | | | \$ 14,285 |
| DATEX OHMEDA | | | | | \$ 387,508 |

VALLEYWISE HEALTH

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|--|------------|-------------|-------------|-------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| DEPUY SYNTHES | 19-930 | | | | \$ 48,170 |
| DIBBLE ENGINEERING | | | | | \$ 12,570 |
| ELITECHGROUP INC | 19-930 | | | | \$ 16,895 |
| EXTENDATA | 19-930 | | | | \$ 60,844 |
| FILLMASTER | 19-930 | | | | \$ 1,494 |
| FOLLETT | 19-930 | | | | \$ 1,690 |
| E3 DIAGNOSTICS | 19-930 | | | | \$ 7,319 |
| GE | 19-930 | | | | \$ 4,264,076 |
| GE PRECISION HEALTHCARE LLC | 19-930 | | | | \$ 42,646 |
| GLOBAL SURGICAL | 16-930 | | | | \$ 14,442 |
| Goodmans | 19-930 | | | | \$ 898,159 |
| GRAINGER | | | | | \$ 19,076 |
| GRAYBAR ELECTRIC | | | | | \$ 630 |
| HELMER | | | | | \$ 137,145 |
| Henry Schein | 19-930 | | | | \$ 404,003 |
| HILL ROM | 19-930 | | | | \$ 49,105 |
| Hobbs and Black Associates Inc | | | | | \$ 3,224,039 |
| Hobbs and Black Associates Inc | 19-930 | | | | \$ 35,773 |
| Hologic | 19-907 | | | | \$ 673,682 |
| HP INC | 19-930 | | | | \$ 134,737 |
| Hye Tech Network | | | | | \$ 1,015,724 |
| INTELLIGENT HEARING | 19-930 | | | | \$ 4,185 |
| INTERMETRO INDUSTRIES | | | | | \$ 147,669 |
| J AND J HEALTHCARE SYSTEMS | 19-930 | | | | \$ 32,013 |
| KRONOS | 19-930 | | | | \$ 23,505 |
| Lanmor | 19-930 | | | | \$ 664 |
| LEICA MICROSYSTEMS | 19-930 | | | | \$ 28,107 |
| 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 | | | | \$ 571,470 |
| MDM COMMERCIAL | 19-930 | | | | \$ 43,692 |
| MEDIVATORS | | | | | \$ 8,982 |
| MEDTRONIC | 19-930 | | | | \$ 12,909 |
| MIZUHO ORTHOPEDICS | 19-930 | | | | \$ 2,347 |
| MONOPRICE INC | 19-930 | | | | \$ 757 |
| NATUS MEDICAL | 19-930 | | | | \$ 35,088 |
| NCI INC | | | | | \$ 9,262 |
| Ninyo and Moore Geotechnical and Environment | | | | | \$ 131,484 |

VALLEYWISE HEALTH

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| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|--|------------|-------------|-------------|-------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| NUAIER | 19-930 | | | | \$ 13,123 |
| OIEC MEDICAL SYSTEMS | 19-930 | | | | \$ 250,893 |
| Okland Construction Company | 19-930 | | | | \$ 43,421,603 |
| Olympus | 19-930 | | | | \$ 592,862 |
| OWENS AND MINOR | 19-930 | | | | \$ 1,683 |
| O&M HALYARD INC | 19-930 | | | | \$ 11,441 |
| PARKS MEDICAL | 19-930 | | | | \$ 710 |
| PARTS SOURCE | 19-930 | | | | \$ 1,761 |
| PATRIOT PURVEYORS | | | | | \$ 29,499 |
| PENTAX MEDICAL | 19-930 | | | | \$ 122,737 |
| PHILIPS HEALTHCARE | 19-930 | | | | \$ 29,975 |
| Radiation Physics and Engineering | | | | | \$ 6,250 |
| RICOH | 19-930 | | | | \$ 17,536 |
| SIGNOSTICS INC | 19-930 | | | | \$ 22,020 |
| SCRIPTPRO | | | | | \$ 199,244 |
| SOFT COMPUTER | 19-930 | | | | \$ 65,675 |
| SMITH & NEPHEW | 19-930 | | | | \$ 49,859 |
| SMITHS MEDICAL | 19-930 | | | | \$ 12,972 |
| SPEEDIE AND ASSOCIATES | | | | | \$ 2,637 |
| SPHERE COMMERCE | | | | | \$ 1,577 |
| Steris | 19-930 | | | | \$ 387,839 |
| Stryker Communications | 19-921 | | | | \$ 683,239 |
| Stryker Communications | 19-930 | | | | \$ 8,397 |
| STRYKER SALES CORPORATION | 19-930 | | | | \$ 300,593 |
| TBCX | | | | | \$ 156,758 |
| THUNDERBIRD GRANT | 19-930 | | | | \$ (187,982) |
| THE BAKER CO. | 19-930 | | | | \$ 14,485 |
| THE CBORD GROUP | 19-930 | | | | \$ 21,623 |
| THE CLOROX SALES | 19-930 | | | | \$ 44,800 |
| THE GRAPHICS MEDICAL | 19-930 | | | | \$ 6,550 |
| Thomas Printworks | 19-930 | | | | \$ 5,204 |
| TRANSONIC SYSTEMS | | | | | \$ 24,389 |
| UTECH PRODUCTS | | | | | \$ 47,600 |
| VERATHON | 19-930 | | | | \$ 14,620 |
| 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 |
| AS SOFTWARE INC | | | | | \$ 9,500 |
| GF HEALTH PRODUCTS INC | | | | | \$ 5,519 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|---|------------|-------------|-------------|-------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| INVIVO CORPORATION | | | | | \$ 53,865 |
| TOTAL West Valley Specialty Center (WVSC) | | \$ - | \$ - | \$ - | \$ 69,114,874.76 |
| Alliance Land Surveying LLC | 19-942 | | | | \$ 1,825 |
| Great American Title (escrow/property tax) - Chandler | 19-942 | | | | \$ 1,195,064 |
| SPEEDIE AND ASSOC | 19-942 | | | | \$ 3,600 |
| Ninyo and Moore Geotechnical and Environment | 19-942 | | | | \$ 70,599 |
| TOTAL Chandler FHC (CHAN) | | \$ - | \$ - | \$ - | \$ 1,271,088.42 |
| Fidelity National Title (escrow) - Miller&Main | 19-944 | | | | \$ 1,989,756 |
| AMAZON | 19-944 | | | | \$ 129 |
| Allstare Rent A Fence | 19-944 | | | | \$ 2,847 |
| ALLEGIANCE CORPORATION | 19-944 | | | | \$ 8,996 |
| ALTURA COMMUNICATIONS | 19-944 | | | | \$ 16,489 |
| ABBOTT RAPID DIAGNOSTICS INFORMATICS INC | 19-944 | | | | \$ 67 |
| BPG TECHNOLOGIES LLC | 19-944 | | | | \$ 1,075 |
| BONNY PIONTKOWSKI | 19-944 | | | | \$ 1,120 |
| CDW G | 19-944 | | | | \$ 36,138 |
| ALTURA COMMUNICATIONS | 19-944 | | | | \$ 18,826 |
| CENTURYLINK | 19-944 | | | | \$ 19,853 |
| CITY OF MESA | 19-944 | | | | \$ 92,022 |
| GE PRECISION HEALTHCARE | 19-944 | | | | \$ 34,138 |
| GE HEALTHCARE IITS USA CORP | 19-944 | | | | \$ 134,394 |
| CME | 19-944 | | | | \$ 139,688 |
| COOPER ATKINS CORPORATION | 19-944 | | | | \$ 6,560 |
| CAPSULE TECH INC | 19-944 | | | | \$ 55,920 |
| SPEEDIE AND ASSOC | 19-944 | | | | \$ 3,600 |
| DAVES CONSTRUCTION | 19-944 | | | | \$ 72,981 |
| DIBBLE ENGINEERING | 19-944 | | | | \$ 8,256 |
| DWL ARCHITECTS + PLANNERS INC | 19-944 | | | | \$ 1,027,447 |
| DANIELS MOVING & STORAGE | 19-944 | | | | \$ 15,825 |
| HELMER INC | 19-944 | | | | \$ 18,323 |
| HP INC | 19-944 | | | | \$ 23,058 |
| HOLOGIC INC | 19-944 | | | | \$ 349,945 |
| HYE TECH NETWORK AND SECURITY SOLUTIONS | 19-944 | | | | \$ 143,092 |
| FILLMASTER | 19-944 | | | | \$ 1,494 |
| INTERMETRO INDUSTRIES | 19-944 | | | | \$ 13,859 |
| JENSEN HUGHES | 19-944 | | | | \$ 7,031 |
| Maricopa County - Environmental Services Dept | 19-944 | | | | \$ 1,485 |
| Maricopa County Planning | 19-944 | | | | \$ 64,615 |
| MDM COMMERCIAL | 19-944 | | | | \$ 6,997 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | | | Amount Paid |
|--|------------|-------------|--------|----------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | |
| MONOPRICE | 19-944 | | | | \$ 335 |
| OKLAND CONSTRUCTION | 19-944 | | | \$ 10.00 | \$ 9,989,592 |
| THE CBORD GROUP INC | 19-944 | | | | \$ 2,826 |
| TEMP ARMOUR | 19-944 | | | | \$ 9,947 |
| THE GRAPHS MEDICAL PHYSICS | 19-944 | | | | \$ 2,450 |
| SCRIPTPRO USA | 19-944 | | | | \$ 104,544 |
| SMITHCRAFT SIGNS | 19-944 | | | | \$ 106,105 |
| SPEEDIE AND ASSOC | 19-944 | | | | \$ 20,116 |
| STRYKER SALES | 19-944 | | | | \$ 6,665 |
| SPRAY SYSTEMS | 19-944 | | | | \$ 29,640 |
| TRANSACT COMMERCIAL | 19-944 | | | | \$ 332,754 |
| Ninyo and Moore Geotechnical and Environment | 19-944 | | | | \$ 34,055 |
| CROSSPOINT COMMUNICATIONS | | | | | \$ 8,161 |
| FIDELITY NATIONAL TITLE AGENCY INC | | | | | \$ 557 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 1,190,675 |
| TOTAL Mesa FHC (MESA) | | \$ - | \$ - | \$ 10.00 | \$ 16,154,452.01 |
| Clear Title Agency (escrow) - Central Phoenix Clinic | | | | | \$ 2,704,752 |
| Clear Title Agency (escrow) - Phoenix Metro | | | | | \$ 50,000 |
| Cushman and Wakefield of Arizona Inc | 19-945 | | | | \$ 4,750 |
| DAVES CONSTRUCTION | 19-945 | | | | \$ 171,254 |
| DWL ARCHITECTS + PLANNERS INC | 19-945 | | | | \$ 681,890 |
| JENSEN HUGHES | 19-945 | | | | \$ 398 |
| MARICOPA COUNTY PLANNING | 19-945 | | | | \$ 62,251 |
| Ninyo and Moore Geotechnical and Environment | 19-945 | | | | \$ 53,438 |
| OKLAND CONSTRUCTION | 19-945 | | | | \$ 346,215 |
| SPEEDIE AND ASSOC | 19-945 | | | | \$ 3,600 |
| Spray Systems | 19-945 | | | | \$ 119,430 |
| ALLIANCE LAND SURVEYING LLC | | | | | \$ 2,400 |
| STRYKER SALES CORPORATION | | | | | \$ 247 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 824,810 |
| TOTAL Central Phoenix FHC (PHXM) | | \$ - | \$ - | \$ - | \$ 5,025,435.57 |
| DIBBLE ENGINEERING | 19-929 | | | | \$ 6,904 |
| ABBOTT RAPID DIAG | 19-929 | | | | \$ 190 |
| ALLEGIANCE CORP | 19-929 | | | | \$ 1,591 |
| ALTURA COMMUNICATION | 19-929 | | | | \$ 52,314 |
| BONNY PIONTKOWSKI | 19-929 | | | | \$ 1,645 |
| BPG TECHNOLOGIES | 19-929 | | | | \$ 28,099 |
| CAPSULE TECH | 19-929 | | | | \$ 57,185 |
| CITY OF PHOENIX | 19-929 | | | | \$ 1,262 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|--|------------|-------------|-------------|-------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| COOPER ATKINS | 19-929 | | | | \$ 9,754 |
| CROSSPOINT COMMUNICATION | 19-929 | | | | \$ 8,138 |
| DANIELS MOVING | 19-929 | | | | \$ 11,266 |
| DWL ARCHITECTS + PLANNERS INC | 19-929 | | | | \$ 942,593 |
| CDW G | 19-929 | | | | \$ 21,797 |
| CME | 19-929 | | | | \$ 162,064 |
| FED EX FREIGHT | 19-929 | | | | \$ 376 |
| Fidelity National Title (escrow) - North Metro | 19-929 | | | | \$ 2,307,776 |
| FILLMASTER | 19-929 | | | | \$ 1,494 |
| GE HEALTHCARE | 19-929 | | | | \$ 331,885 |
| GRAINGER | 19-929 | | | | \$ 3,225 |
| HP INC | 19-929 | | | | \$ 17,086 |
| HYE TECH NETWORK | 19-929 | | | | \$ 152,885 |
| INTERMETRO INDUSTRIES | 19-929 | | | | \$ 11,756 |
| Jensen Hughes | 19-929 | | | | \$ 8,788 |
| LOVITT & TOUCHE | 19-929 | | | | \$ 8,196 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-929 | | | | \$ 51,093 |
| MDM COMMERCIAL | 19-929 | | | | \$ 4,339 |
| OFFSITE OFFICE EQUIPMENT STORAGE | 19-929 | | | | \$ 250 |
| OLYMPUS | 19-929 | | | | \$ 1,232 |
| SCRIPTPRO | 19-929 | | | | \$ 104,544 |
| SMITHCRAFT SIGNS | 19-929 | | | | \$ 99,956 |
| SPEEDIE AND ASSOC | 19-929 | | | | \$ 11,910 |
| SALT RIVER PROJECT | 19-929 | | | | \$ 4,265 |
| SPHERE COMMERCE | 19-929 | | | | \$ 797 |
| Stryker Communications | 19-929 | | | | \$ 12,626 |
| Sundt Construction Inv | 19-929 | | | | \$ 9,303,374 |
| THE GRAPHS MEDICAL PHYSICS, INC. | 19-929 | | | | \$ 700 |
| TEMP ARMOUR | 19-929 | | | | \$ 9,897 |
| TRANSACT COMMERCIAL | 19-929 | | | | \$ 279,878 |
| THE CBORD GROUP | 19-929 | | | | \$ 2,794 |
| AMAZON | | | | | \$ 136 |
| EXTENDATA SOLUTIONS | | | | | \$ 11,706 |
| MONOPRICE INC | | | | | \$ 513 |
| PAL-WW NORTHERN STORAGE JV LLC | | | | | \$ 106,121 |
| RICOH AMERICAS CORPORATION | | | | | \$ 140 |
| THOMAS PRINTWORKS | | | | | \$ 71 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 1,561,667 |
| TOTAL North Phoenix FHC (19AV) | | \$ - | \$ - | \$ - | \$ 15,716,277.76 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|---|------------|-------------|-------------|-------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| Cox Communications | 19-928 | | | | \$ 4,489 |
| Cox Communications | | | | | \$ (1,699) |
| ABBOTT RAPID DIAG | 19-928 | | | | \$ 238 |
| ALTURA | 19-928 | | | | \$ 50,192 |
| ALLEGIANCE CORP | 19-928 | | | | \$ 10,318 |
| AZ Dept of Env Quality | 19-928 | | | | \$ 100 |
| BONNY PIONTKOWSKI | 19-928 | | | | \$ 1,645 |
| BPG Technologies | 19-928 | | | | \$ 28,048 |
| CAPSULE TECH | 19-928 | | | | \$ 56,193 |
| CDW GOVERNMENT INC | 19-928 | | | | \$ 21,760 |
| Centurylink | 19-928 | | | | \$ 24,539 |
| CITY OF PHOENIX | 19-928 | | | | \$ 218,063 |
| CME | 19-928 | | | | \$ 184,168 |
| COOPER ATKINS | 19-928 | | | | \$ 6,576 |
| CROSSPOINT COMMUNICATION | 19-928 | | | | \$ 8,008 |
| Daniels Moving | 19-928 | | | | \$ 11,441 |
| DIBBLE ENGINEERING | 19-928 | | | | \$ 7,168 |
| DWL ARCHITECTS + PLANNERS INC | 19-928 | | | | \$ 1,152,163 |
| EXTENDATA | 19-928 | | | | \$ 11,102 |
| Fidelity National Title (escrow) - South Mountain | 19-928 | | | | \$ 721,482 |
| FILLMASTER SYSTEMS | 19-928 | | | | \$ 1,494 |
| GE HEALTHCARE | 19-928 | | | | \$ 502,285 |
| GRAINGER | 19-928 | | | | \$ 978 |
| HELMER | 19-928 | | | | \$ 20,426 |
| HP INC | 19-928 | | | | \$ 12,772 |
| Hye Tech Network | 19-928 | | | | \$ (59,083) |
| INTERMETRO INDUSTRIES | 19-928 | | | | \$ 19,591 |
| JENSEN HUGHES | 19-928 | | | | \$ 11,464 |
| LOVITT & TOUCHE | 19-928 | | | | \$ 3,144 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-928 | | | | \$ 51,046 |
| MDM COMMERCIAL | 19-928 | | | | \$ 5,429 |
| MONOPRICE | 19-928 | | | | \$ 526 |
| NATUS | 19-928 | | | | \$ 2,130 |
| OFFSITE OFFICE | 19-928 | | | | \$ 395 |
| OLYMPUS AMERICA | 19-928 | | | | \$ 1,229 |
| Ricoh | 19-928 | | | | \$ 132 |
| SCRIPTPRO USA INC | 19-928 | | | | \$ 104,544 |
| SMITHCRAFT SIGNS | 19-928 | | | | \$ 100,570 |
| Speedie and Associates | 19-928 | | | | \$ 15,670 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|---|------------|-------------|-------------|---------------|-------------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| SPHERE COMMERCE | 19-928 | | | | \$ 795 |
| SRP | 19-928 | | | | \$ 13,775 |
| Sundt Construction Inc | 19-928 | | | | \$ 9,083,290 |
| Stryker Communications | 19-928 | | | | \$ 12,626 |
| TEMP ARMOUR | 19-928 | | | | \$ 6,448 |
| THE CBORD GROUP | 19-928 | | | | \$ 2,794 |
| THE GRAPHICS MEDICAL | 19-928 | | | | \$ 700 |
| TRANSACT | 19-928 | | | | \$ 280,739 |
| THOMAS PRINTWORKS | 19-928 | | | | \$ 326 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 1,295,734 |
| TOTAL South Phoenix FHC (SPHX) | | \$ - | \$ - | \$ - | \$ 14,007,963.47 |
| CDW GOVERNMENT INC | 19-946 | | | | \$ 56,372 |
| ADVANCE INNOVATIVE SOLUTIONS | 19-946 | | | | \$ 4,623 |
| ALLEGIANCE CORP | 19-946 | | | | \$ 920 |
| ALTURA COMMUNICATIONS | 19-946 | | | | \$ 33,123 |
| ABBOTT RAPID DIAGNOSTICS INFORMATICS INC | 19-946 | | | | \$ 96 |
| BPG TECHNOLOGIES | 19-946 | | | | \$ 757 |
| BONNY POINTKOWSKI | 19-946 | | | | \$ 1,645 |
| CARDINAL HEALTH | 19-946 | | | | \$ 8,996 |
| CAPSULE TECH | 19-946 | | | | \$ 56,272 |
| CITY OF PHOENIX | 19-946 | | | | \$ 40,670 |
| CME | 19-946 | | | | \$ 156,950 |
| COOPER ATKINS | 19-946 | | | | \$ 8,233 |
| DIBBLE ENGINEERING | 19-946 | | | | \$ 6,534 |
| DWL ARCHITECTS + PLANNERS INC | 19-946 | | | | \$ 811,095 |
| DANIELS MOVING | 19-946 | | | | \$ 20,892 |
| Fidelity National Title (escrow) - 79thAve&Thomas | 19-946 | | | | \$ 1,878,902 |
| FILLMASTER SYSTEMS | 19-946 | | | | \$ 1,494 |
| GE PRECISION | 19-946 | | | | \$ 168,532 |
| HYE TECH | 19-946 | | | | \$ 138,754 |
| HP INC | 19-946 | | | | \$ 29,510 |
| INTERMETRO INDUSTRIES | 19-946 | | | | \$ 15,951 |
| JENSEN HUGHES | 19-946 | | | | \$ 9,999 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-946 | | | \$ (1,913.00) | \$ 60,744 |
| MARICOPA COUNTY ENVIRONMENTAL SERVICES | 19-946 | | | | \$ 1,490 |
| MARICOPA COUNTY RECORDER | 19-946 | | | | \$ 30 |
| MDM COMMERCIAL | 19-946 | | | | \$ 5,546 |
| MONOPRICE | 19-946 | | | | \$ 522 |
| MOBILE COMMUNICATIONS AMERICA INC | 19-946 | | | | \$ 8,161 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|--|------------|-------------|-------------|----------------------|-------------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| NATUS MEDICAL | 19-946 | | | | \$ 1,141 |
| Ninyo and Moore Geotechnical and Environment | 19-946 | | | | \$ 11,400 |
| Okland Construction Company | 19-946 | | | | \$ 9,433,806 |
| OLYMPUS | 19-946 | | | | \$ 1,211 |
| SALT RIVER PROJECT | 19-946 | | | | \$ 25,648 |
| SMITHCRAFT SIGNS | 19-946 | | | | \$ 106,985 |
| SPEEDIE AND ASSOC | 19-946 | | | | \$ 24,143 |
| SCRIPT PRO | 19-946 | | | | \$ 104,544 |
| THE CBORD GROUP | 19-946 | | | | \$ 2,883 |
| TEMP ARMOUR | 19-946 | | | | \$ 9,947 |
| TRANSACT COMMERCIAL | 19-946 | | | | \$ 291,462 |
| THE GRAPHICS MEDICAL | 19-946 | | | | \$ 950 |
| SPHERECOMMERCE LLC | 19-946 | | | | \$ 895 |
| AMAZON | | | | | \$ 135 |
| KITCHELL CONTRACTORS INC OF ARIZONA | | | | | \$ 3,280 |
| STRYKER SALES CORPORATION | | | | | \$ 247 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 1,034,425 |
| TOTAL West Maryvale FHC (WM79) | | \$ - | \$ - | \$ (1,913.00) | \$ 14,579,914.85 |
| | | \$ - | \$ - | \$ (1,903.00) | \$ 135,870,007 |

Note: Prior months amount paid are hidden

| Functional Area - Behavioral Health Services | | | | | |
|--|--------|--|--|--|------------|
| Adams and WENDT | | | | | \$ 118,891 |
| ADVANCED INN VATIVE SOLUTIONS | | | | | \$ 11,735 |
| Advanced Egress Solutions | 19-912 | | | | \$ 3,090 |
| Airclean Systems | 19-912 | | | | \$ 4,457 |
| Allscripts Healthcare | 18-913 | | | | \$ 5,760 |
| Allscripts Healthcare | 19-909 | | | | \$ 225,345 |
| Altura Communications | 19-909 | | | | \$ 477,526 |
| Altura Communications | 19-939 | | | | \$ 91,807 |
| Altura Communications | 18-913 | | | | \$ 1,340 |
| Amazon | 19-909 | | | | \$ 1,080 |
| AMT Datasouth | 19-912 | | | | \$ 4,124 |
| ARC Products LLC | 19-912 | | | | \$ 58,715 |
| ARIZONA DEPT OF HEALTH | 19-939 | | | | \$ 150 |
| Arizona Lock and Safe | | | | | \$ 1,025 |
| Armstrong Medical | 19-912 | | | | \$ 36,470 |
| Arrington Watkins Architects | | | | | \$ 301,274 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | | | Amount Paid |
|---------------------------------------|------------|-------------|--------|--------------|--------------|
| | | OCT'23 | NOV'23 | DEC'23 | |
| Arrow International | 19-912 | | | | \$ 610 |
| Baxter Healthcare Corp | 19-912 | | | | \$ 5,368 |
| Bayer Healthcare | 18-920 | | | | \$ 74,376 |
| BEL-Aire Mechanical | | | | | \$ 40,215 |
| Burlington Medical | 19-912 | | | | \$ 3,028 |
| CAPSA SOLUTIONS | 19-909 | | | | \$ 5,936 |
| CAPSA SOLUTIONS | 19-912 | | | | \$ (25) |
| Capsule Tech | 19-912 | | | | \$ 143,422 |
| CAPSULE TECH INC | 18-913 | | | \$ 10,481.06 | \$ - |
| Cardinal Health | 19-912 | | | | \$ 85,931 |
| CDW Government | 19-909 | | | | \$ 275,954 |
| CDW Government | 19-938 | | | | \$ 48,448 |
| CDW Government | 19-939 | | | | \$ 161,925 |
| CME | 19-912 | | | | \$ 185,907 |
| Comprehensive Risk Services | | | | | \$ 547,333 |
| Coviden | 19-912 | | | | \$ 11,817 |
| Crosspoint Communications | | | | | \$ 25,724 |
| Datcard Systems | 19-909 | | | | \$ 18,821 |
| EXTENDATA SOLUTIONS | 19-909 | | | | \$ 500 |
| KRONOS INC | 19-909 | | | | \$ 196 |
| MDM COMMERCIAL ENTERPRISES INC | 19-909 | | | | \$ 1,400 |
| RETAIL MANAGEMENT SOLLUTIONS | 19-909 | | | | \$ (5,961) |
| THE CBORD GROUP INC | 19-909 | | | | \$ (1,234) |
| CME | 18-918 | | | | \$ 68 |
| MEDTRONIC USA INC | 18-918 | | | | \$ 59 |
| THE CBORD GROUP INC | 18-918 | | | | \$ 14 |
| GE MEDICAL SYSTEMS ULTRASOUND PRIMARY | 18-918 | | | | \$ 527,736 |
| GE MEDICAL SYSTEMS ULTRASOUND PRIMARY | 18-922 | | | | \$ 219,671 |
| Delynn Consultant | 19-940 | | | | \$ 114,187 |
| DLR Group Inc | | | | | \$ 4,222,015 |
| EMD Millpore | 19-912 | | | | \$ 7,175 |
| ENDOSCOPE SERVICES | 19-912 | | | | \$ 32,270 |
| Epstexas Storage | 19-912 | | | | \$ 633 |
| EQ2 LLC | 19-912 | | | | \$ 67,500 |
| Ethos Evacuation | 19-912 | | | | \$ 10,130 |
| ETL REPOSE | 19-912 | | | | \$ 29,482 |
| EXTENDATA SOLUTIONS | | | | | \$ 66,659 |
| Felix Storch Inc | | | | | \$ 5,796 |
| FERGUSON ENTERPRISES | 19-912 | | | | \$ 3,571 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|--|------------|-------------|-------------|-------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| First American Title - Maryvale Hospital | | | | | \$ 7,582,335 |
| Follett | 19-912 | | | | \$ 40,303 |
| GE Healthcare | 18-915 | | | | \$ 773,012 |
| GE Healthcare | 19-901 | | | | \$ 14,880 |
| GE Healthcare | 18-917 | | | | \$ 766,491 |
| GE Healthcare | 18-918 | | | | \$ (787,011) |
| GE Healthcare | 19-938 | | | | \$ 13,999 |
| GE Medical Systems | 19-912 | | | | \$ 13,999 |
| GE Medical Ultrasound | 18-917 | | | | \$ 138,680 |
| General Devices | 19-912 | | | | \$ 47,400 |
| Gentherm | 19-912 | | | | \$ 16,692 |
| Gilbane Building CO. | 18-913 | | | | \$ 55,180,150 |
| FED EX FREIGHT | 18-913 | | | | \$ 3,481 |
| Global Equipment | 19-912 | | | | \$ 2,003 |
| Goodmans | 19-916 | | | | \$ 96,476 |
| Goodmans | 19-917 | | | | \$ 104,809 |
| Goodmans | 19-923 | | | | \$ 551,725 |
| Goodmans | 19-926 | | | | \$ 154,049 |
| Goodmans | 19-939 | | | | \$ 1,570 |
| Goodmans | 18-913 | | | | \$ 3,900 |
| JENSEN HUGHES INC | 18-913 | | | | \$ 11,538 |
| VALLEY SYSTEMS | 18-913 | | | | \$ 9,952 |
| Grainger | 19-912 | | | | \$ 63,690 |
| Graybar Electric | | | | | \$ 5,586 |
| GUEST COMMUNICATIONS | 19-912 | | | | \$ 17,130 |
| Haemonetics | 19-912 | | | | \$ 83,854 |
| HD Supply Facilities Maintenance Ltd | 19-912 | | | | \$ 39,937 |
| Helmer Inc | 19-912 | | | | \$ 144,487 |
| Hill Rom | | | | | \$ 20,409 |
| HP INC | 19-909 | | | | \$ 363,091 |
| HP INC | 19-939 | | | | \$ 168,146 |
| HUMANE RESTRAINT | 19-909 | | | | \$ 40,160 |
| HUMANE RESTRAINT | 19-912 | | | | \$ (4,480) |
| Hye Tech Network | 19-909 | | | | \$ 368,641 |
| IMEG Corp | | | | | \$ 91,590 |
| Interior Solutions | 19-923 | | | | \$ 242,017 |
| Interior Solutions | 19-926 | | | | \$ 100,132 |
| Intermetro Industries | 19-912 | | | | \$ 42,332 |
| Intersan Manufacturing | 19-912 | | | | \$ 3,603 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|--|------------|-------------|-------------|-------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| Jensen Hughes | | | | | \$ 2,750 |
| Kronos Inc | | | | | \$ 72,000 |
| Lanmor Services Inc | | | | | \$ 1,952 |
| LOGIQUIP | 19-912 | | | | \$ 1,059 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | | | | | \$ 299,669 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 18-913 | | | | \$ (19,806) |
| MARKETLAB | 19-912 | | | | \$ 10,824 |
| MCG HEALTH LLC | | | | | \$ 37,017 |
| MDM Commercial | 19-909 | | | | \$ 40,622 |
| Medline | 19-912 | | | | \$ 3,628 |
| Medtronic | 19-912 | | | | \$ 7,931 |
| Mindray | 19-912 | | | | \$ 98,014 |
| Monoprice | 19-909 | | | | \$ 968 |
| Monoprice | 19-939 | | | | \$ 842 |
| MOPEC | 19-912 | | | | \$ 20,479 |
| NORIX GROUP INC | 19-926 | | | | \$ 11,918 |
| NANOSONICS INC | 19-912 | | | | \$ 22,944 |
| Ninyo and Moore Geotechnical and Environment | 19-923 | | | | \$ 11,700 |
| NORIX GROUP INC | | | | | \$ 400,689 |
| Olympus America | | | | | \$ 32,231 |
| Olympus America | 19-912 | | | | \$ 135 |
| OEC Medical Systems | 19-904 | | | | \$ 80,529 |
| OMC INVESTERS LLC | | | | | \$ 11,518 |
| OMC INVESTERS LLC | 19-912 | | | | \$ 117 |
| Owens and Minor | 19-912 | | | | \$ 56,788 |
| PAC VAN | | | | | \$ (790) |
| PAC VAN | | | | | \$ 1,295 |
| Parks Medical | 19-912 | | | | \$ 2,167 |
| Philips Healthcare | 18-921 | | | | \$ 38,523 |
| Physio Control | 19-912 | | | | \$ 19,458 |
| Progressive Roofing | 19-931 | | | | \$ 84,628 |
| PRONK TECHNOLOGIES INC | | | | | \$ 3,040 |
| PRONK TECHNOLOGIES INC | 19-912 | | | | \$ 16 |
| QRS Calibrations | 19-912 | | | | \$ 7,151 |
| Radiation Physics and Engineering | 18-917 | | | | \$ 1,250 |
| Radiation Physics and Engineering | 18-920 | | | | \$ 1,600 |
| RAY-BAR | 18-913 | | | | \$ 4,905 |
| RETAIL MANAGEMENT SOLUTIONS | | | | | \$ 5,961 |
| RICOH AMERICAS CORPORATION | | | | | \$ 29,892 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|--------------------------------------|------------|-------------|-------------|--------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| Ruiz Custom Upholstery | 19-912 | | | | \$ 53,718 |
| SCOTTSDALE RESTAURANT SUPPLY | | | | | \$ 5,391 |
| Signodtics | 19-912 | | | | \$ 22,460 |
| Smiths Medical | 19-912 | | | | \$ 9,253 |
| SOFT COMPUTER CONSULTANT INC | | | | | \$ 89,550 |
| Smithcraft Signs | 18-913 | | | | \$ 10,266 |
| Speedie and Associates | | | | | \$ 17,823 |
| SALT RIVER PROJECT | 18-913 | | | | \$ (23,852) |
| Standard Textile | 19-912 | | | | \$ 4,464 |
| Stryker Communications | 19-910 | | | | \$ (14,174) |
| Stryker Communications | 19-910 | | | | \$ 5,103 |
| Stryker Communications | 19-920 | | | | \$ 9,072 |
| Steris Corp | | | | | \$ 13,950 |
| Stryker | | | | | \$ 175,192 |
| TBJ Inc | 19-912 | | | | \$ 5,654 |
| TD INDUSTRIES | 19-924 | | | | \$ 460,415 |
| The Cbord Group | 19-909 | | | | \$ 26,421 |
| THYSSENKRUPP ELEVATOR CORP | 19-912 | | | | \$ 587,346 |
| Translogic | 19-912 | | | | \$ 3,931 |
| Tucson Business Interiors | 19-912 | | | | \$ 3,000 |
| Tucson Business Interiors | 19-923 | | | | \$ 34,193 |
| Tucson Business Interiors | 19-926 | | | | \$ 335,704 |
| UMF Medical | 19-912 | | | | \$ 11,788 |
| Verathon | 19-912 | | | | \$ 14,020 |
| VERIZON | 19-909 | | | | \$ 16,853 |
| WAXIE | 19-912 | | | | \$ 3,002 |
| World Wide Technology | | | | | \$ 701,128 |
| Zoll Medical | 19-912 | | | | \$ 46,732 |
| AFFILIATED ENGINEERS INC | | | | | \$ 203,070 |
| CUSHMAN AND WAKEFIELD OF ARIZONA INC | | | | | \$ 12,500 |
| MARICOPA COUNTY TREASURER | | | | | \$ 10,000 |
| PHOENIX FENCE | | | | | \$ 2,283 |
| RELAYHEALTH INC | | | | | \$ 11,250 |
| THOMAS PRINTWORKS | | | | | \$ 4,863 |
| TOTAL Maryvale Campus (MV) | | \$ - | \$ - | \$ 10,481.06 | \$ 79,088,184.52 |
| Adams and Wendt | 19-936 | | | | \$ 114,235 |
| APS | 19-936 | | | | \$ (14,700) |
| AIRPARK SIGNS | | | | | \$ 1,305 |
| Arizona Department of Health | 19-936 | | | | \$ 1,050 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|---|------------|-------------|-------------|-------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| 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 |
| Imprivata ConfirmID | 19-911 | | | | \$ 137,295 |
| ESB (Tibco) - Infrastructure | 19-918 | | | | \$ 34,861 |
| PWIM Global Monitor Software - additional funding required to support imple | 16-924 | | | | \$ 35,400 |
| AMICO ACCESSORIES | 16-908 | | | | \$ (704) |
| Patient monitors - High Acuity | 16-908 | | | | \$ 6,240,243 |
| NHR NEWCO HOLDINGS LLC | 16-908 | | | | \$ (339) |
| NHR NEWCO HOLDINGS LLC | 16-910 | | | | \$ (86) |
| Stretcher replacement | 16-912 | | | | \$ 395,538 |
| IVUS - intravascular ultrasound for placement of stents | 16-922 | | | | \$ 128,371 |
| VOLCANO CORPORATION | 16-922 | | | | \$ (323) |
| EDWARDS LIFESCIENCES LLC | 16-928 | | | | \$ (116) |
| Vigileo Monitors (8) | 16-928 | | | | \$ 96,132 |
| VANIR CONSTRUCTION | 16-928 | | | | \$ 463,755 |
| Balloon Pumps | 16-920 | | | | \$ 149,197 |
| MAQUET MEDICAL SYSTEMS USA | 16-920 | | | | \$ (2,897) |
| Zeiss - Cirrus HD ophthal camera | 16-919 | | | | \$ 60,654 |
| Vivid Q BT12 Ultrasound | 16-931 | | | | \$ 55,019 |
| MINDRAY DS USA INC | 16-931 | | | | \$ (19) |
| 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 | | | | \$ 20,195 |
| MIZUHO ORTHOPEDIC SYSTEMS INC | NO PO | | | | \$ (52) |
| 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 |
| SIZEWISE RENTALS | 16-932 | | | | \$ (4,056) |
| King Tong Pelvic fx reducer | 16-926 | | | | \$ 9,500 |
| Stryker Core Power Equipment --Contract | 16-904 | | | | \$ 369,113 |
| Patient Monitoring (Low Acuity) - Formerly named Alarm Management | 16-907 | | | | \$ 347,029 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|--|------------|-------------|-------------|-------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| 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 | | | | \$ 1,884,099 |
| POC Ultrasounds (10) | 16-931 | | | | \$ 634,702 |
| Ice Machine Replacement | 16-911 | | | | \$ 23,881 |
| FOLLETT CORPORATION | 16-911 | | | | \$ (880) |
| 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 |
| Facility upkeep | 18-905 | | | | \$ 69,218 |
| Colposcopes | 18-909 | | | | \$ 24,607 |
| OWENS AND MINOR | 18-909 | | | | \$ 279 |
| Chandler ADA Doors | 18-042 | | | | \$ 5,867 |
| Glendale Digital X-Ray unit and Sensors (Panoramic Digital AND Nomad 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 |
| CHC Internal Medicine Clinic Renovation - Increase the number of exam room | 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 | | | | \$ 164,096 |
| 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 |
| CEPHEID | 19-914 | | | | \$ 1,098 |
| 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 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|---|------------|---------------|---------------|---------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| Audiology - Astera Audiometer | 16-913 | | | | \$ 11,326 |
| ALTURA COMMUNICATIONS | 16-909 | | | | \$ 138,061 |
| AMICO ACCESSORIES | 17-903 | | | | \$ (55) |
| ASCOM WIRELESS SOLUTIONS | 17-903 | | | | \$ (35) |
| EXTENDATA SOLUTIONS | 17-903 | | | | \$ (92) |
| 3rd Floor Behavioral Health/Medical Unit Remodel | 17-903 | | | | \$ 2,570,464 |
| CREATIVE COMMUNICATIONS | 17-903 | | | | \$ (23) |
| OWENS AND MINOR | 17-903 | | | | \$ (230) |
| PATIENT TELEPHONE SUPPLY LLC | 17-903 | | | | \$ (22) |
| 22 Behavioral Health Beds for 3rd Floor MMC | 17-907 | | | | \$ 188,527 |
| SIZEWISE RENTALS | 17-907 | | | | \$ (3,377) |
| 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 | | | | \$ 95,059 |
| Diablo Infrastructure Costs | 18-903 | | | | \$ 431,149 |
| KRONOS INC | 18-903 | | | | \$ (37) |
| HP INC | 16-923 | | | | \$ (38) |
| Epic Willow - Ambulatory & Inventory | 18-906 | | | | \$ 428,269 |
| Navigant - Proposition 480 planning | 16-923 | | | | \$ 910,000 |
| Kaufmann Hall - Prop 480 planning | 16-923 | | | | \$ 370,019 |
| IPv4XChange (ARIN Based Transfer Escrow Payment) | 16-923 | | | | \$ 7,040 |
| MARSH & MCLENNAN AGENCY LLC | 16-923 | | | | \$ 15,000 |
| MARSH & MCLENNAN AGENCY LLC | 17-916 | | | | \$ (15,000) |
| Vanir Construction Management (Planning Phase) | 17-915 | | | | \$ 749,971 |
| Vanir Construction Management (\$48M) (\$48,300,501 - Entire Project) | 17-916 | | | | \$ 4,580,656 |
| Vanir Construction Management (Planning Phase) | 16-923 | \$ 709,373.63 | \$ 256,790.85 | \$ 424,345.78 | \$ 1,286,190 |
| IPMO Modular Building | 17-902 | | | | \$ 329,631 |
| Dickenson Wright PLLC | 16-923 | | | | \$ 181,495 |
| GE HEALTHCARE | 19-918 | | | | \$ (32,261) |
| Sims Murrery LD | 16-923 | | | | \$ 24,128 |
| Devenney Group LTD | 16-923 | | | | \$ 242,450 |
| MTI Connect Inc | 16-923 | | | | \$ 181 |
| SHI INTERNATIONAL | 19-911 | | | | \$ 2,577 |
| Payroll/Supplies/Misc Expenses | 16-923 | | | | \$ 792,042 |
| EPIC replatform and upgrade to 2016 (see attached for detail) | 17-900 | | | | \$ 7,675,491 |
| Guidesoft | 17-900 | | | | \$ (27,373) |
| Reimbursement for Capital Expenditures | N/A | | | | \$ 36,000,000 |
| OCULUS SURGICAL INC | | | | | \$ (52) |
| Vcore Technology | | | | | \$ (68,550) |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|---|------------|----------------------|----------------------|----------------------|-------------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| Other exp/recon items | | | | | \$ 677 |
| TOTAL Tranch 1 | | \$ 709,373.63 | \$ 256,790.85 | \$ 424,345.78 | \$ 92,162,645.12 |
| Bond issuance costs | | | | | \$ 817,684 |
| BPG Technologies LLC | | | | | \$ 288,397 |
| Dickinson Wright PLLC | | | | | \$ 323,597 |
| Hye Tech Neywork and Security Solutions | | | | | \$ 3,795,099 |
| Goodmans | | | | | \$ 4,790 |
| GOODMANS | 16-923 | | | | \$ (2,921) |
| JRC DESIGN | 19-955 | | | | \$ 282,995 |
| Lovitt & Touche INC | 16-923 | | | | \$ 75,000 |
| Lovitt & Touche INC | 19-934 | \$ 8,191.00 | \$ 8,191.00 | | \$ 4,160,348 |
| PAC VAN INC | 19-934 | | | | \$ 80,395 |
| MARSH & MCLENNAN AGENCY LLC | 19-934 | | \$ 569,974.00 | | \$ 653,165 |
| LOVITT & TOUCHE INC | 19-951 | | | | \$ 505 |
| PAC-VAN | 19-955 | | | | \$ 71,160 |
| Payroll/Supplies/Misc Expenses | | | | | \$ 8,068,292 |
| Sims Murrary LD | | | | | \$ 30,441 |
| Sims Murrary LD | 19-955 | | | | \$ 9,433 |
| Vanir Construction Management (\$48M) (\$48,300,501 - Entire Project) | | | | | \$ 21,497,247 |
| World Wide Technology Co Inc | | | | | \$ 448,569 |
| Zurich North America | 16-923 | | | | \$ 48,327 |
| AFFILIATED ENGINEERS INC | | | | | \$ 38,348 |
| BALLARD SPAHR | | | | | \$ 288,544 |
| BLUETREE NETWORK INC | | | | | \$ 178,563 |
| CARASOFT TECHNOLOGY CORPORATION | | | | | \$ 143,344 |
| CDW GOVERNMENT INC | | | | | \$ 555,016 |
| CENTURYLINK | | | | | \$ 170,013 |
| CORPORATE TECHNOLOGY SOLUTIONS LLC | | | | | \$ 178,552 |
| DEVENNEY GROUP LTD | | | | | \$ 530,623 |
| DWL ARCHITECTS + PLANNERS INC | | | | | \$ 272,318 |
| EPIC SYSTEMS CORPORATION | | | | | \$ 554,536 |
| FITCH RATINGS | | | | | \$ 120,000 |
| GRAYBAR ELECTRIC | | | | | \$ 17,357 |
| GREENBERG TRAUIG, LLP | | | | | \$ 240,000 |
| GUIDESOFT INC | | | | | \$ 503,715 |
| HP INC | | | | | \$ 19,960 |
| INTEGRATED CONTROL SYSTEMS INC | | | | | \$ 2,160 |
| LANMOR SERVICES INC | | | | | \$ 209,036 |
| MISCELLANEOUS | | | | | \$ 228,750 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|-------------------------------------|------------|--------------------|----------------------|------------------|-------------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| MOODY'S | | | | | \$ 120,000 |
| MOSS ADAMS LLP | | | | | \$ 42,500 |
| ORRICK | | | | | \$ 35,000 |
| PRESIDIO NETWORKED SOLUTIONS INC | | | | | \$ 310,797 |
| RICOH AMERICAS CORPORATION | | | | | \$ 180 |
| RMJ ELECTRICAL CONTRACTORS INC | | | | | \$ 43,305 |
| SAVVIS COMMUNICATIONS LLC | | | | | \$ 116,363 |
| SHI INTERNATIONAL CORP | | | | | \$ 122,929 |
| SPRAY SYSTEMS ENVIRONMENTAL INC | | | | | \$ 13,780 |
| STIFEL | | | | | \$ 268,910 |
| THOMAS PRINTWORKS | | | | | \$ 1,291 |
| US BANK | | | \$ 300.00 | \$ 600.00 | \$ 1,800 |
| US BANK - CORPORATE TRUST SERVICES | | | | | \$ 600 |
| Valleywise | | | | | \$ 1,509 |
| VANIR CONSTRUCTION MANAGMENT INC | | | | | \$ (4,644,045) |
| WALMART.COM | | | | | \$ 549 |
| WOODRUFF CONSTRUCTION | | | | | \$ 17,015 |
| TOTAL Enterprise | | \$ 8,191.00 | \$ 578,465.00 | \$ 600.00 | \$ 41,355,838.50 |
| Adams and Wendt | 19-935 | | | | \$ 32,697 |
| APS | 19-935 | | | | \$ (335,303) |
| Affiliated Engineers Inc | 19-935 | | | | \$ 1,587,215 |
| Affiliated Engineers Inc | 19-935 | | | | \$ 2,068,896 |
| Arnold Machinery | 19-935 | | | | \$ 34,209 |
| ARIZONA DEPARTMENT OF HEALTH | 19-935 | | | | \$ 150 |
| ALTURA COMMUNICATIONS SOLUTIONS LLC | 19-935 | | | | \$ 5,749 |
| BPG TECHNOLOGIES LLC | 19-935 | | | | \$ 2,774 |
| CABLE SOLUTIONS LLC | 19-935 | | | | \$ 80,880 |
| CDW GOVERNMENT INC | 19-935 | | | | \$ 337 |
| CENTERLINE MECHANICAL | 19-935 | | | | \$ 24,522 |
| CITY OF PHOENIX | 19-935 | | | | \$ 2,296 |
| ELONTEC LLC | 19-935 | | | | \$ 3,414 |
| ENGINEERING ECONOMICS | 19-935 | | | | \$ 135,362 |
| GOODMANS | 19-935 | | | | \$ 12,143 |
| HYE TECH | 19-935 | | | | \$ 2,060,999 |
| JENSEN HUGHES | 19-935 | | | | \$ 12,263 |
| KITCHELL | 19-935 | | | | \$ 54,628,414 |
| KM FACILITY SERVICES | 19-935 | | | | \$ 71,885 |
| LANMOR | 19-935 | | | | \$ 23,708 |
| Maricopa County | 19-935 | | | | \$ 1,500 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|---|------------|-------------|---------------|-------------|-------------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| MDM COMMERCIAL | 19-935 | | | | \$ 1,760 |
| Soft Computer Consultants | 19-935 | | | | \$ 5,250 |
| SMITHCRAFT SIGNS | 19-935 | | | | \$ 5,782 |
| Speedie snd Assoc | 19-935 | | | | \$ 29,245 |
| SOUTHWEST GAS | 19-935 | | | | \$ 121,938 |
| SYNTELLIS PERFORMANCE SOLUTIONS LLC | 19-935 | | | | \$ 28,000 |
| Thomas Printworks | 19-935 | | | | \$ 41 |
| VALLEY SYSTEMS | 19-935 | | | | \$ 960 |
| WESTERN STATES FIRE | 19-935 | | | | \$ 705 |
| ARIZONA PUBLIC SERVICE COMPANY | | | | | \$ 1,773,158 |
| HYE TECH NETWORK AND SECURITY SOLUTIONS | | | | | \$ 7,125 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | | | | | \$ 239,965 |
| MARICOPA COUNTY TREASURER | | | | | \$ 135,146 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 719,110 |
| TOTAL Central Utility Plant (RSVT) | | \$ - | \$ - | \$ - | \$ 63,522,292.58 |
| ADAMS AND WENDT | 19-949 | | | | \$ 65,342 |
| ADAMS AND WENDT | 19-948 | | | | \$ 32,968 |
| ADAMS AND WENDT | 19-947 | | | | \$ 71,561 |
| ADAMS AND WENDT | 19-951 | | | | \$ 90,538 |
| ADAMS AND WENDT | | | | | \$ 6,600 |
| ADVANCED INSTRUMENTS LLC | 19-947 | | | | \$ 30,605 |
| ACIST MEDICAL SYSTEMS INC | 19-947 | | \$ 150,700.00 | | \$ 150,700 |
| ACCUVEIN INC | 19-947 | | | | \$ 28,925 |
| HYE TECH NETWORK | 19-947 | | | | \$ 2,953,494 |
| HYE TECH NETWORK | 19-951 | | | | \$ 14,702 |
| ADAMS AND WENDT | 19-953 | | | | \$ 5,460 |
| ADAMS AND WENDT | 19-948 | | | | \$ 2,596 |
| AFFILIATED ENGINEERS | 19-948 | | | | \$ 396,165 |
| AFFILIATED ENGINEERS | 19-954 | | | | \$ 1,050 |
| AFFILIATED ENGINEERS | | | | | \$ 1,092 |
| ANCO SANITATION | 19-948 | | | | \$ 1,450 |
| ATLANTIC RELOCATIONS | 19-948 | | | | \$ 49,125 |
| ALLEGIANCE CORPORATION | 19-947 | | \$ 1,558.42 | | \$ 14,858 |
| ABBOTT LABORATORIES INC | 19-947 | | | | \$ 178,515 |
| ALTURA COMMUNICATIONS | 19-947 | | | | \$ 34,924 |
| AMAZON | 19-947 | | | | \$ 965 |
| ARMSTRONG MEDICAL INDUSTRIES INC | 19-951 | | | | \$ 2,151 |
| ARMSTRONG MEDICAL INDUSTRIES INC | 19-947 | | \$ 10,755.00 | | \$ 10,755 |
| AMICO ACCESSORIES | 19-951 | | | | \$ 43,425 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | | | Amount Paid |
|---------------------------------|------------|---------------|---------------|---------------|---------------|
| | | OCT'23 | NOV'23 | DEC'23 | |
| BAKER SERVICES | 19-951 | | | | \$ 2,950 |
| BAKER SERVICES | 19-947 | | | | \$ 4,600 |
| BUNNELL INC | 19-947 | | | | \$ 82,940 |
| BPG TECH | 19-948 | | | | \$ 182,186 |
| BPG TECH | 19-947 | | | | \$ 7,339 |
| BPG TECH | 19-951 | | | | \$ 23,013 |
| B BRAUN MEDICAL INC | 19-947 | | \$ 58,963.14 | | \$ 58,963 |
| BAYER HEALTHCARE LLC | 19-947 | | | \$ 55,065.00 | \$ 55,065 |
| CABLE SOLUTIONS | 19-947 | \$ 223,876.64 | \$ 369,557.69 | | \$ 7,384,423 |
| CABLE SOLUTIONS | 19-951 | \$ 35,961.16 | \$ 23,838.50 | \$ 53,412.47 | \$ 1,089,225 |
| CARL ZEISS MEDITEC INC | 19-947 | \$ 933,402.00 | | | \$ 1,086,286 |
| C-SCAN TECHNOLOGIES | 19-947 | | \$ 5,407.50 | | \$ 12,513 |
| CAPSULE TECH | 19-951 | | | | \$ 8,708 |
| CAPSULE TECH | 19-947 | | \$ 154,563.80 | | \$ 154,564 |
| CDW G | 19-947 | \$ 697,352.61 | \$ 66,217.30 | \$ 3,338.02 | \$ 1,355,538 |
| CDW G | 19-951 | | | | \$ 1,024 |
| CENTURY LINK | 19-951 | | | | \$ 6,706 |
| CENTRAK INC | 19-947 | \$ 97,010.62 | \$ 5,275.08 | | \$ 826,366 |
| CITY OF PHOENIX | 19-947 | | | | \$ 84,493 |
| CITY OF PHOENIX | 19-948 | | | | \$ 9,525 |
| CME | 19-948 | | | | \$ 21,924 |
| CME | 19-951 | | | | \$ 7,046 |
| CME | 19-947 | \$ 275,835.58 | \$ 113,396.89 | \$ 2,468.14 | \$ 811,111 |
| CUNINGHAM ARCHITECT | 19-947 | | \$ 60,000.00 | \$ 541,059.13 | \$ 32,377,424 |
| CUNINGHAM ARCHITECT | 19-951 | | | | \$ 40,640 |
| CUNINGHAM ARCHITECT | 19-937 | | | | \$ 73,619 |
| CLIMATEC LLC | 19-947 | | | | \$ 8,322 |
| CONNEXWIVITY WIRELESS INC | 19-947 | | | \$ 30,202.29 | \$ 1,364,094 |
| CONNEXWIVITY WIRELESS INC | 19-951 | | | \$ 593.84 | \$ 188,390 |
| CONNECTIVITY WIRELESS SOLUTIONS | 19-951 | | | | \$ 91,214 |
| CONNECTIVITY WIRELESS SOLUTIONS | 19-947 | \$ 35,903.21 | | | \$ 52,731 |
| COOPER ATKINS CORPORATION | 19-947 | | \$ 32,350.16 | | \$ 32,350 |
| CARASOFT TECHNOLOGY | | | | | \$ 2,520 |
| CS MEDICAL LLC | 19-947 | | | | \$ 27,880 |
| DATEX OHMEDA | 19-951 | \$ 691,601.82 | | | \$ 708,780 |
| DANIELS MOVING | 19-948 | | | | \$ 18,756 |
| DYNAMIC INSTALLATION | 19-948 | | | | \$ 23,932 |
| DYNAMIC INSTALLATION | 19-951 | | | | \$ 501 |
| DISTRICT MEDICAL GROUP | 19-948 | | | | \$ 89,356 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | | | Amount Paid |
|---|------------|-----------------|-----------------|-----------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | |
| | | | | | Cumulative Total |
| ECD SYSTEMS | 19-947 | \$ 65,244.00 | | \$ 154,624.00 | \$ 1,795,239 |
| ECD SYSTEMS | 19-951 | | \$ 1,590.28 | | \$ 40,938 |
| ENDOSCOPE SERVICES | 19-951 | \$ 7,691.06 | \$ 3,945.50 | \$ 4,866.38 | \$ 16,503 |
| ENGINEERING ECONOMICS | 19-951 | | | | \$ 62,767 |
| ENGINEERING ECONOMICS | 19-947 | | | | \$ 446,805 |
| ENDOSOFT LLC | 19-947 | | | | \$ 73,920 |
| EVOQUA WATER TECHNOLOGIES | 19-947 | | | \$ 97,291.23 | \$ 97,291 |
| EXCESSIVE CARTS | 19-948 | | | | \$ 23,182 |
| EPIC SYSTEMS CORPORATION | 19-947 | | | | \$ 5,000 |
| FISHER HEALTHCARE | 19-947 | | \$ 3,793.09 | | \$ 245,295 |
| FC HOSPITALITY | 19-948 | | | | \$ 216,732 |
| Follett | 16-923 | | | | \$ 63,102 |
| Follett | 19-947 | | \$ 20,722.67 | \$ (32.86) | \$ 53,753 |
| FILLMASTER SYSTEMS LLC | 19-947 | | | | \$ 1,495 |
| GOODMANS | | | | | \$ 101,011 |
| GOODMANS | 19-951 | \$ 747.16 | | | \$ 30,993 |
| GOODMANS | 19-947 | | \$ 250,793.83 | \$ 3,146.50 | \$ 2,040,747 |
| GRAINGER | 19-947 | | \$ 11,458.94 | | \$ 96,139 |
| GRAINGER | 19-951 | | | | \$ 29,011 |
| GE MEDICAL SYSTEMS | 19-947 | | | \$ (81,131.60) | \$ - |
| GE HEALTHCARE | 19-947 | | \$ 1,223,549.90 | \$ 172,900.55 | \$ 1,731,177 |
| GE PRECISION HEALTHCARE LLC | 19-947 | | \$ 1,061,848.56 | \$ 61,549.91 | \$ 1,246,470 |
| GETINGE USA SALES LLC | 19-947 | | | | \$ 721,318 |
| Helmer Inc | 19-947 | | | \$ 33,737.57 | \$ 79,709 |
| HILL ROM | 19-951 | | | | \$ 16,453 |
| HILL ROM | 19-947 | | | \$ 59,816.88 | \$ 185,040 |
| HP INC | 19-947 | | \$ 74,770.79 | | \$ 75,296 |
| HOLOGIC INC | 19-947 | | | | \$ 4,000 |
| HOME DEPOT - Buyers Log | 19-948 | | | | \$ 587 |
| HYE TECH NETWORK AND SECURITY SOLUTIONS | 19-951 | \$ 23,514.93 | | | \$ 62,142 |
| HYE TECH NETWORK AND SECURITY SOLUTIONS | 19-947 | | | | \$ 746,692 |
| Innerface Architectural Signage | 19-948 | | | | \$ 13,927 |
| Innerface Architectural Signage | 19-951 | | | | \$ 833 |
| INTERMETRO INDUSTRIES CORPORATION | 19-947 | | | \$ 27,461.99 | \$ 279,490 |
| INTERMETRO INDUSTRIES CORPORATION | | | | | \$ 1,351 |
| JENSEN HUGHES | 19-947 | | | | \$ 82,763 |
| JENSEN HUGHES | 19-951 | | | | \$ 41,127 |
| KRONOS INC | 19-947 | | | | \$ 6,444 |
| KITCHELL | 19-947 | \$ 3,025,304.17 | \$ 3,187,658.00 | \$ 1,484,899.42 | \$ 297,522,604 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | | | Amount Paid |
|---|------------|---------------|-----------------|---------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | |
| | | | | | Cumulative Total |
| KITCHELL | 19-937 | | | | \$ 667,452 |
| KITCHELL | 19-948 | \$ 20,328.00 | | | \$ 11,950,855 |
| KITCHELL | 19-951 | \$ 428,157.17 | \$ 833,679.23 | \$ 89,839.27 | \$ 33,905,313 |
| KITCHELL | 19-954 | | | | \$ 8,373 |
| LANMOR | 19-947 | | | | \$ 833,283 |
| LANMOR | 19-948 | | | | \$ 4,547 |
| LANMOR | 19-951 | | | | \$ 124,428 |
| LEVEL 3 AUDIO VISUAL | 19-947 | | | | \$ 636,289 |
| LEVEL 3 AUDIO VISUAL | 19-951 | \$ 37,084.78 | | | \$ 265,798 |
| MASIMO AMERICAS INC | 19-947 | | | \$ 22,485.93 | \$ 22,486 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-951 | | | | \$ 289,918 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-947 | | | | \$ 2,044,437 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | | | \$ 190.00 | | \$ 6,211 |
| MARICOPA COUNTY ENVIRONMENTAL SERVICES | 19-947 | | | | \$ 3,550 |
| MARICOPA COUNTY PLANNING AND DEVELOPMENT | 19-948 | | | | \$ 3,308 |
| MEDLINE INDUSTRIES INC | 19-947 | \$ 4,537.86 | | | \$ 4,538 |
| MINDRAY DS USA INC | 19-947 | | | \$ 6,835.38 | \$ 270,878 |
| MIZUHO ORTHOPEDICS SYSTEMS INC | 19-947 | | | | \$ 183,505 |
| MDM COMMERCIAL | 19-951 | \$ 700.00 | | | \$ 14,695 |
| MDM COMMERCIAL | 19-947 | | | \$ 235,074.70 | \$ 269,057 |
| MDM COMMERCIAL | 19-950 | | | | \$ 748 |
| MOBILE COMMUNICATIONS AMERICA INC | 19-947 | | | | \$ 5,738 |
| MONOPRICE INC | 19-947 | | \$ 15,476.95 | | \$ 15,477 |
| MIHS PAYROLL | | | \$ 91,597.02 | \$ 202,887.76 | \$ - |
| NINYO AND MOORE | 19-947 | | | | \$ 11,200 |
| NINYO AND MOORE | 19-947 | | | | \$ 6,824 |
| NINYO AND MOORE | 19-951 | | | | \$ 16,293 |
| NCI INC | 19-947 | | | | \$ 19,725 |
| NATUS MEDICAL INC | 19-947 | | | | \$ 60,912 |
| OHIO MEDICAL LLC | 19-947 | \$ 237,543.53 | | | \$ 238,474 |
| OHIO MEDICAL LLC | 19-951 | | | | \$ 1,029 |
| OLYMPUS AMERICA INC | 19-947 | | | \$ 31,244.44 | \$ 31,244 |
| OFFSITE EQUIPMENT STORAGE | 19-948 | | | | \$ 650 |
| PAC-VAN | 19-947 | | | | \$ 7,220 |
| POHLE NV CENTER INC | 19-948 | | | | \$ 11,904 |
| PERRY BAROMEDICAL CORPORATION | 19-947 | | | | \$ 270,269 |
| PHILIPS HEALTHCARE | 19-947 | | \$ 3,575,331.13 | | \$ 3,575,331 |
| PATIENT TELEPHONE SUPPLY | 19-947 | | \$ 3,825.00 | | \$ 3,825 |
| RECLASS UTILITIES ALLOCATION TO CONSTRUCTION PROJECTS | 19-951 | | | | \$ (34,000) |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|---|------------|---------------|---------------|-----------------|------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| RECLASS UTILITIES ALLOCATION TO CONSTRUCTION PROJECTS | 19-947 | | | | \$ 34,000 |
| RMJ Electrical Contractors | | | | | \$ 551 |
| SIEMENS HEALTHCARE DIAGNOSTICS | 19-947 | | | | \$ 3,180,400 |
| SKYTRON | 19-947 | | | | \$ 239,934 |
| SKYTRON | 19-951 | | | | \$ 13,430 |
| SKYTRON | | | | | \$ (207,963) |
| SMITHCRAFT SIGNS | 19-947 | | | | \$ 34,085 |
| SMITHCRAFT SIGNS | 19-951 | | | | \$ 54,388 |
| SMITHCRAFT SIGNS | 20-404 | \$ 415,848.00 | | | \$ 415,848 |
| SPEEDIE AND ASSOC | 19-947 | | | \$ 5,645.00 | \$ 301,318 |
| SPEEDIE AND ASSOC | 19-951 | | | \$ 190.00 | \$ 55,190 |
| STERIS CORPORATION | 19-947 | \$ 126,504.64 | \$ 9,370.00 | \$ - | \$ 5,229,824 |
| STERIS CORPORATION | 19-951 | | | | \$ 110,622 |
| SCRIPTPRO USA INC | 19-947 | | | | \$ 146,801 |
| STRYKER SALES CORPORATION | 19-951 | | | | \$ 49,298 |
| STRYKER SALES CORPORATION | 19-947 | | \$ 288,716.34 | \$ 4,237,583.92 | \$ 4,532,152 |
| STRYKER COMMUNICATIONS | 19-947 | | | | \$ 1,339,235 |
| SWISSLOG | 19-947 | | | | \$ 2,500 |
| SIRVA MOVE MANAGEMENT | 19-947 | \$ 368,988.93 | | | \$ 368,989 |
| TEMP ARMOUR | 19-951 | | | | \$ 6,649 |
| Valley Systems | 19-948 | | | | \$ 756 |
| Valley Systems | 19-951 | | | | \$ 1,018 |
| Speedie and Assoc | 19-947 | | | | \$ 80,881 |
| Speedie and Assoc | 19-951 | | | | \$ 28,802 |
| Speedie and Assoc | 19-948 | | | | \$ 1,120 |
| SRP | 19-947 | | | | \$ 500 |
| WAXIE SANITARY SUPPLY | 19-947 | | | | \$ 840 |
| UTILITY ALLOCATION | 19-947 | | \$ 114,000.00 | \$ 54,000.00 | \$ 1,346,500 |
| UTILITY ALLOCATION | | | | | \$ 18,500 |
| VVAIRE MEDICAL 211 INC | 19-947 | | | \$ 62,815.30 | \$ 62,815 |
| THOMAS PRINTWORKS | | | | | \$ 4,069 |
| THOMAS PRINTWORKS | 19-947 | \$ 25.45 | | | \$ 530 |
| Trademark Visual | 19-948 | | | | \$ 2,576 |
| THE BAKER COMPANY | 19-947 | | | | \$ 148,103 |
| TRANSACTT COMMERCIAL INTERIORS | 19-951 | | | | \$ 15,157 |
| ORANGE FACTOR IMAGING PHYSICISTS LLC | | | \$ 6,400.00 | | \$ 6,400 |
| ZORO TOOLS | 19-948 | | | | \$ 14,481 |
| ALTURA COMMUNICATIONS SOLUTIONS LLC | | | | | \$ 11,827 |
| DH PACE COMPANY INC | | | | | \$ 1,468 |

VALLEYWISE HEALTH

Care Reimagined - Expenditure Report

| Description | CER Number | Amount Paid | Amount Paid | Amount Paid | Amount Paid |
|--|------------|------------------------|-------------------------|------------------------|--------------------------|
| | | OCT'23 | NOV'23 | DEC'23 | Cumulative Total |
| ENTERPRISE SECURITY INC | | | | | \$ 13,715 |
| HD SUPPLY FACILITIES MAINTENANCE LTD | | | | | \$ 3,780 |
| INTERMETRO INDUSTRIES CORPORATION | | | | | \$ 833 |
| LOVITT & TOUCHE INC | | | | | \$ 505 |
| MARICOPA COUNTY TREASURER | | | | | \$ 7,310 |
| SKYLINE BUILDERS AND RESTORATION INC | | | | | \$ 122,769 |
| STRYKER SALES CORPORATION | | | | | \$ 384,697 |
| TEMPE DIABLO LLC | | | | | \$ 33,132 |
| TUCSON BUSINESS INTERIORS INC | | | | | \$ 447,192 |
| VANIR CONSTRUCTION MANAGEMENT INC | | | | | \$ 13,466,055 |
| WORLD WIDE TECHNOLOGY HOLDINGS CO LLC | | | | | \$ 35,500 |
| TOTAL Roosevelt Campus Site Development Plan (RSVT) | | \$ 7,753,163.32 | \$ 11,832,127.90 | \$ 7,653,870.56 | \$ 448,743,197.36 |

\$ 8,470,727.95 \$ 12,667,383.75 \$ 8,078,816.34 \$ 645,783,974

Bond Proceeds received to date:

\$935,805,959

TOTAL MONTHLY SPENT AMOUNT

\$ 8,470,727.95 \$ 12,667,383.75 \$ 8,238,691.40 \$ 870,518,469

VARIANCE: Bond Proceeds amount vs CER amount issued

-

REMAINING Cash for disbursement

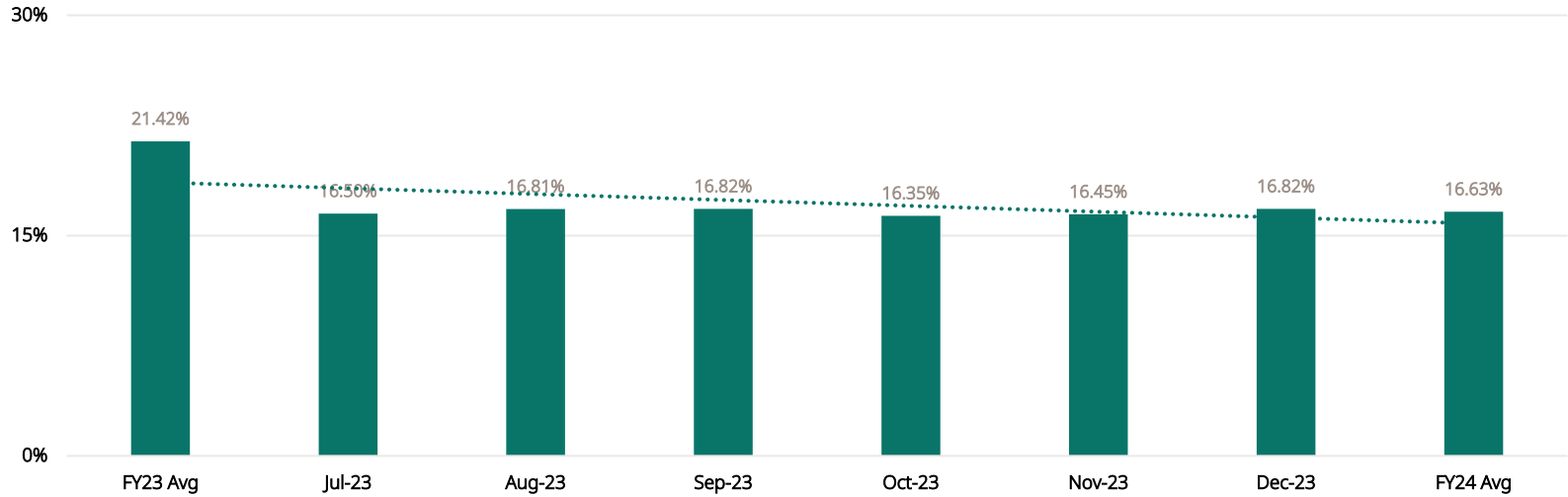
\$86,193,565 \$73,526,181 \$65,287,489 \$65,287,489.46

8.c. Valleywise Health Employee Turnover Report (November and December 2023)

Human Resources Board Turnover Data

November and December 2023

FY23-24 Voluntary Turnover Trending to Date



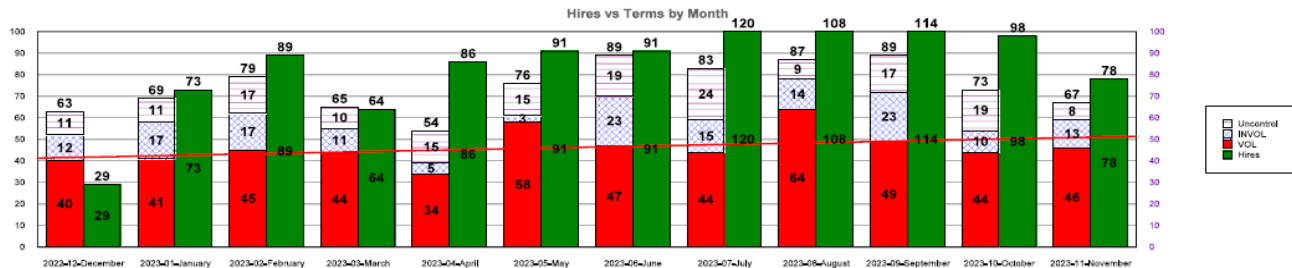
Valleywise Health November Turnover



ALL Valleywise Health Summary

| November - 2023 | Avg Emps | Avg Emps 1Yr | Hires | VOL | VOL 1 Yr | VOL 1st Yr % | INVOL | Uncontrol | Retire | VOL% | INVOL% | Uncon % | Total% |
|-----------------------------|---------------|---------------|-----------|-----------|-----------|---------------|-----------|-----------|----------|---------------|---------------|---------------|---------------|
| Administrative | 49.08 | 14.00 | 5 | 8 | 5 | 2.98 % | 3 | 3 | 0 | 1.36 % | 0.51 % | 0.51 % | 2.38 % |
| Clinical (Non-Licensed) | 77.75 | 34.08 | 26 | 18 | 12 | 2.93 % | 8 | 0 | 0 | 1.93 % | 0.86 % | 0.00 % | 2.79 % |
| Clinical Licensed | 23.92 | 7.17 | 4 | 2 | 1 | 1.16 % | 0 | 0 | 0 | 0.70 % | 0.00 % | 0.00 % | 0.70 % |
| Clinical Tech & Specialists | 13.58 | 5.08 | 3 | 2 | 2 | 3.28 % | 0 | 0 | 0 | 1.23 % | 0.00 % | 0.00 % | 1.23 % |
| Management & Supervision | 21.67 | 3.17 | 1 | 4 | 0 | 0.00 % | 0 | 0 | 0 | 1.54 % | 0.00 % | 0.00 % | 1.54 % |
| Professional | 25.42 | 6.83 | 4 | 0 | 0 | 0.00 % | 1 | 1 | 0 | 0.00 % | 0.33 % | 0.33 % | 0.66 % |
| Provider Non-Physician | 1.33 | 0.33 | 0 | 0 | 0 | 0.00 % | 0 | 0 | 0 | 0.00 % | 0.00 % | 0.00 % | 0.00 % |
| RN | 71.08 | 27.17 | 31 | 11 | 10 | 3.07 % | 0 | 4 | 0 | 1.29 % | 0.00 % | 0.47 % | 1.76 % |
| Support | 17.25 | 8.00 | 4 | 1 | 1 | 1.04 % | 1 | 0 | 0 | 0.48 % | 0.48 % | 0.00 % | 0.97 % |
| Total | 301.08 | 105.83 | 78 | 46 | 31 | 2.44 % | 13 | 8 | 0 | 1.27 % | 0.36 % | 0.22 % | 1.85 % |

| Total (Last 12 Months) | Avg Emps | Avg Emps 1Yr | Hires | VOL | VOL 1 Yr | VOL 1st Yr % | INVOL | Uncontrol | Retire | VOL% | INVOL% | Uncon % | Total% |
|-----------------------------|-----------------|---------------|-------------|------------|------------|----------------|------------|------------|----------|----------------|---------------|---------------|----------------|
| Administrative | 571.25 | 139.17 | 134 | 83 | 60 | 43.11 % | 17 | 30 | 0 | 14.53 % | 2.98 % | 5.25 % | 22.76 % |
| Clinical (Non-Licensed) | 898.83 | 335.00 | 379 | 226 | 142 | 42.39 % | 94 | 73 | 0 | 25.14 % | 10.46 % | 8.12 % | 43.72 % |
| Clinical Licensed | 268.00 | 63.25 | 46 | 26 | 14 | 22.13 % | 3 | 8 | 0 | 9.70 % | 1.12 % | 2.99 % | 13.81 % |
| Clinical Tech & Specialists | 154.17 | 47.92 | 39 | 25 | 16 | 33.39 % | 4 | 4 | 0 | 16.22 % | 2.59 % | 2.59 % | 21.41 % |
| Management & Supervision | 250.25 | 31.83 | 32 | 12 | 3 | 9.42 % | 13 | 9 | 0 | 4.80 % | 5.19 % | 3.60 % | 13.59 % |
| Professional | 293.25 | 61.00 | 63 | 25 | 10 | 16.39 % | 4 | 11 | 0 | 8.53 % | 1.36 % | 3.75 % | 13.64 % |
| Provider Non-Physician | 14.50 | 2.83 | 2 | 2 | 0 | 0.00 % | 0 | 0 | 0 | 13.79 % | 0.00 % | 0.00 % | 13.79 % |
| RN | 743.50 | 200.83 | 263 | 128 | 79 | 39.34 % | 15 | 32 | 0 | 17.22 % | 2.02 % | 4.30 % | 23.54 % |
| Support | 185.92 | 67.50 | 83 | 29 | 20 | 29.63 % | 13 | 8 | 0 | 15.60 % | 6.99 % | 4.30 % | 26.89 % |
| Total | 3,379.67 | 949.33 | 1041 | 556 | 344 | 36.24 % | 163 | 175 | 0 | 16.45 % | 4.82 % | 5.18 % | 26.45 % |



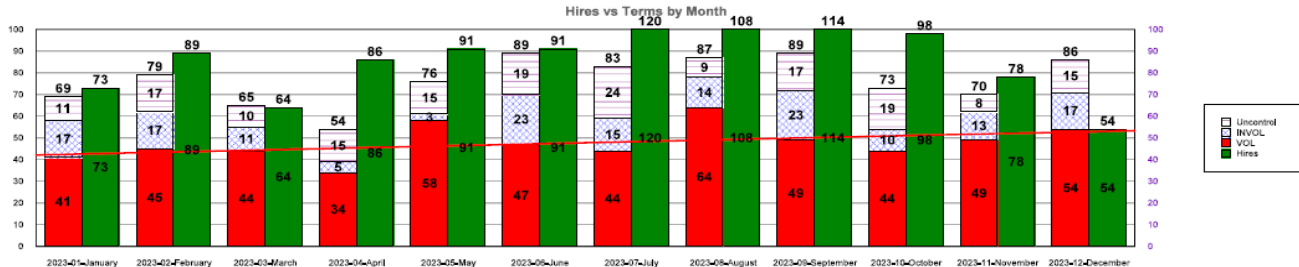
Valleywise Health December Turnover



ALL Valleywise Health Summary

| December - 2023 | Avg Emps | Avg Emps 1Yr | Hires | VOL | VOL 1 Yr | VOL 1st Yr % | INVOL | Uncontrol | Retire | VOL% | INVOL% | Uncon % | Total% |
|-----------------------------|---------------|---------------|-----------|-----------|-----------|---------------|-----------|-----------|----------|---------------|---------------|---------------|---------------|
| Administrative | 48.58 | 13.92 | 3 | 6 | 4 | 2.40 % | 4 | 2 | 0 | 1.03 % | 0.69 % | 0.34 % | 2.06 % |
| Clinical (Non-Licensed) | 77.17 | 34.58 | 22 | 19 | 15 | 3.61 % | 11 | 1 | 0 | 2.05 % | 1.19 % | 0.11 % | 3.35 % |
| Clinical Licensed | 23.92 | 7.33 | 3 | 1 | 1 | 1.14 % | 0 | 2 | 0 | 0.35 % | 0.00 % | 0.70 % | 1.05 % |
| Clinical Tech & Specialists | 13.50 | 5.08 | 0 | 1 | 1 | 1.64 % | 1 | 0 | 0 | 0.62 % | 0.62 % | 0.00 % | 1.23 % |
| Management & Supervision | 21.33 | 3.25 | 3 | 1 | 1 | 2.56 % | 1 | 5 | 0 | 0.39 % | 0.39 % | 1.95 % | 2.73 % |
| Professional | 26.17 | 6.92 | 5 | 5 | 5 | 6.02 % | 0 | 1 | 0 | 1.59 % | 0.00 % | 0.32 % | 1.91 % |
| Provider Non-Physician | 1.33 | 0.33 | 0 | 0 | 0 | 0.00 % | 0 | 0 | 0 | 0.00 % | 0.00 % | 0.00 % | 0.00 % |
| RN | 71.67 | 28.08 | 16 | 21 | 18 | 5.34 % | 0 | 4 | 0 | 2.44 % | 0.00 % | 0.47 % | 2.91 % |
| Support | 17.42 | 8.42 | 2 | 0 | 0 | 0.00 % | 0 | 0 | 0 | 0.00 % | 0.00 % | 0.00 % | 0.00 % |
| Total | 301.08 | 107.92 | 54 | 54 | 45 | 3.47 % | 17 | 15 | 0 | 1.49 % | 0.47 % | 0.42 % | 2.38 % |

| Total (Last 12 Months) | Avg Emps | Avg Emps 1Yr | Hires | VOL | VOL 1 Yr | VOL 1st Yr % | INVOL | Uncontrol | Retire | VOL% | INVOL% | Uncon % | Total% |
|-----------------------------|-----------------|---------------|-------------|------------|------------|----------------|------------|------------|----------|----------------|---------------|---------------|----------------|
| Administrative | 571.25 | 137.33 | 133 | 83 | 58 | 42.23 % | 21 | 30 | 0 | 14.53 % | 3.68 % | 5.25 % | 23.46 % |
| Clinical (Non-Licensed) | 902.92 | 339.75 | 388 | 225 | 146 | 42.97 % | 97 | 70 | 0 | 24.92 % | 10.74 % | 7.75 % | 43.41 % |
| Clinical Licensed | 270.67 | 65.25 | 48 | 24 | 12 | 18.39 % | 3 | 11 | 0 | 8.87 % | 1.11 % | 4.06 % | 14.04 % |
| Clinical Tech & Specialists | 155.08 | 48.33 | 37 | 24 | 14 | 28.97 % | 5 | 4 | 0 | 15.48 % | 3.22 % | 2.58 % | 21.28 % |
| Management & Supervision | 250.92 | 31.33 | 34 | 13 | 4 | 12.77 % | 13 | 14 | 0 | 5.18 % | 5.18 % | 5.58 % | 15.94 % |
| Professional | 295.50 | 62.08 | 64 | 30 | 15 | 24.16 % | 3 | 11 | 0 | 10.15 % | 1.02 % | 3.72 % | 14.89 % |
| Provider Non-Physician | 14.67 | 3.00 | 2 | 2 | 0 | 0.00 % | 0 | 0 | 0 | 13.64 % | 0.00 % | 0.00 % | 13.64 % |
| RN | 756.50 | 212.17 | 277 | 143 | 92 | 43.36 % | 13 | 31 | 0 | 18.90 % | 1.72 % | 4.10 % | 24.72 % |
| Support | 188.58 | 70.42 | 83 | 29 | 20 | 28.40 % | 13 | 8 | 0 | 15.38 % | 6.89 % | 4.24 % | 26.51 % |
| Total | 3,406.08 | 969.67 | 1066 | 573 | 361 | 37.23 % | 168 | 179 | 0 | 16.82 % | 4.93 % | 5.26 % | 27.01 % |





8.d. Quality Management Council Meeting Minutes - December 2023



Meeting Minutes Quality Management Council

12/04/23 • 3:30 PM – 4:30PM • WebEx

A = Absent E = Excused G = Guest P = Phone

| | | | | | | | | |
|--------------------------|--|---|--------------------|---|------------------------|---|-----------------------|---|
| CHAIR/FACILITATOR | Dr. White and Sherry Stotler, CNO | | | | | | | |
| MEMBERS/ATTENDEES | Christelle Kassis, MD | A | Dorinne Gray, RN | P | Mary Harden, RN | A | Tony Dunnigan, MD | A |
| | Christina Smarik Snyder, MD | P | Susan Willars | A | Michael White, MD | P | Gene Cavallo | P |
| | Crystal Garcia, RN | P | Heather Burton, RN | A | Amanda De Los Reyes | P | Claire Agnew, CFO | A |
| | Dale Schultz | P | Jo-el Detzel | P | Nelson Silva-Craig, RN | A | Martha Steiner, RN | A |
| | Dan Hobohm, MD | P | Kelly Summers | P | Sherrie Beardsley, RN | P | Lia Christiansen, CAO | P |
| | Jeffrey Stowell, MD | A | LT. Slaughter Jr. | A | Sherry Stotler, RN | P | Carol Olsen, MD | A |
| | David Wisinger, MD | A | Michelle Barker | P | Steve Purves, CEO | A | Tina Sheppard | P |
| | Paul Pugsley, MD | P | Merima Bucaj, DO | P | Gaby Iskander, MD | P | Helena Hoover | A |
| | Alexzandra Hollingworth | A | Michelle Barker | A | | | | |
| | | | | | | | | |

PURPOSE: Quality and Patient Safety Improvement

CALL TO ORDER

| Topic | Findings/Discussion | Conclusion/Action | Responsible |
|---------------------|--|------------------------------------|-------------|
| Approval of Minutes | November Meeting Minutes | Minutes were Approved | Committee |
| Consent Agenda | Motion Approval for consented agenda items | Consent agenda items were approved | Committee |

II. Standing Reports

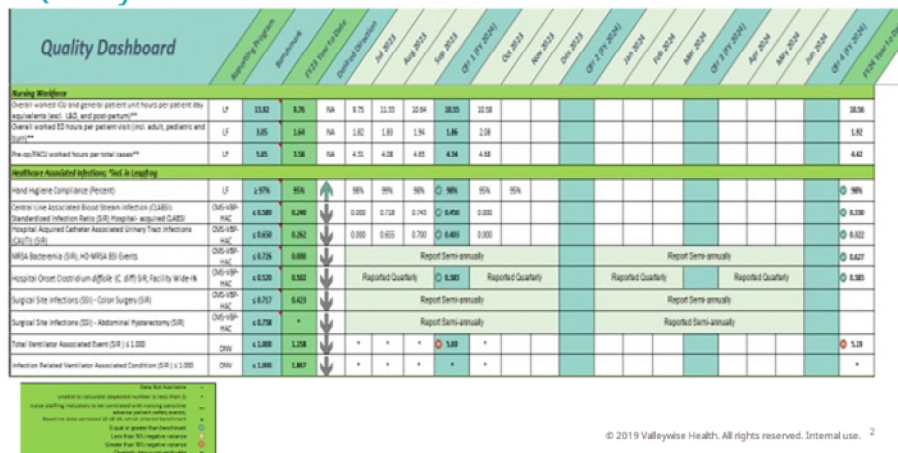
| Topic | Findings/Discussion | Responsible |
|-------|---------------------|-------------|
|-------|---------------------|-------------|



Quality Management
Council Committee Report
Reporting Group: Patient Care & Safety Committee
Person Reporting: Sherry Stotler, SVP Chief Nursing Officer

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Quality Dashboard



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- The slide shows that most metrics meet the benchmark for infections, but we are currently high in total ventilator-associated events, and the infection control group is addressing this and implementing action items.

Quality Dashboard

| Quality Dashboard | | Benchmark | 1717 Total (n=10) | Target | Actual | Delta | Target | Actual | Delta | Target | Actual | Delta | Target | Actual | Delta | Target | Actual | Delta |
|---|-------|-----------|-------------------|--------|--------|-------|--------|--------|-------|--------|--------|-------|--------|--------|-------|--------|--------|-------|
| Process of Care Measures - "Included in Longing" | | | | | | | | | | | | | | | | | | |
| COPD: Screen Patients with Shortness of Breath for Lung Cancer (Screening) | | | | | | | | | | | | | | | | | | |
| Q100-4022 | 157% | 88% | ↑ | 100% | 100% | 0% | 80% | 80% | 0% | 80% | 80% | 0% | 80% | 80% | 0% | 80% | 80% | 0% |
| Hospital-wide mortality rate (inpatient and outpatient) (All Causes) | | | | | | | | | | | | | | | | | | |
| Q100-4023 | 6.14% | 6.7% | ↓ | 6.5% | 6.5% | 0% | 6.7% | 6.7% | 0% | 6.7% | 6.7% | 0% | 6.7% | 6.7% | 0% | 6.7% | 6.7% | 0% |
| Medication Safety - Patient Medication | | | | | | | | | | | | | | | | | | |
| Hospital-wide medication use (inpatient and outpatient) | | | | | | | | | | | | | | | | | | |
| Q100-4024 | 1.14 | 1.14 | ↓ | 1.14 | 1.14 | 0% | 1.14 | 1.14 | 0% | 1.14 | 1.14 | 0% | 1.14 | 1.14 | 0% | 1.14 | 1.14 | 0% |
| Q100-4025: Hospital-wide mortality rate of cause (inpatient and outpatient) (All Causes) | | | | | | | | | | | | | | | | | | |
| Q100-4025 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Hospital-wide medication reconciliation (inpatient and outpatient) | | | | | | | | | | | | | | | | | | |
| Q100-4026 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge | | | | | | | | | | | | | | | | | | |
| Q100-4027 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History | | | | | | | | | | | | | | | | | | |
| Q100-4028 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education | | | | | | | | | | | | | | | | | | |
| Q100-4029 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4030 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4031 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4032 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4033 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4034 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4035 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4036 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4037 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4038 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4039 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |
| Q100-4040 | 1.14% | 1.14% | ↓ | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% | 1.14% | 1.14% | 0% |
| Medication Safety - Medication Reconciliation at Discharge with Medication History and Patient Education and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation and Medication Reconciliation | | | | | | | | | | | | | | | | | | |

- The slide shows high hospital-wide mortality based on benchmarks, being reviewed with Vizient to document patient health. Stemi meets October measures, while PSI-14 is high again, and monitoring is ongoing with Dr. Hollingworth group to determine if additional actions need to be developed.



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Measure Not Meeting Benchmark

| Measure | Benchmark | September 2023 | FY23 Q3 | FYTD 2023 |
|-----------------------------|-----------|---------------------------------------|---------|-----------|
| Unplanned Return to Surgery | ≤ 2.35 | Reported Quarterly with a quarter lag | 3.08 | 2.96 |



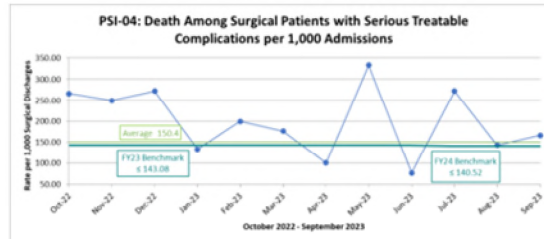
Analysis: 16 unplanned returns to surgery in FY23 Q3.
 • 8 out of the 16 unplanned returns to OR were due to SSI in FY23 Q3
 Action: Track and trend

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- The slide shows unplanned surgery returns not meeting benchmark, with 8 out of 16 due to SSI in FY23 Q3, continuous track and trend.

Measure Not meeting Benchmark

| Measure | Benchmark | September 2023 | FY24 Q1 | FYTD 2024 |
|--|--------------------|----------------|---------|-----------|
| PSI-04: Death Among Surgical Patients with Serious Treatable Complications per 1,000 | ≤ 140.52 (overall) | 166.67 | 208.33 | 208.33* |



Analysis: 1 case in September 2023
 • 55 y.o. presented with right chest pain, history of metastatic colon cancer s/p L. hemicolectomy with end colostomy as well as adjuvant chemoradiation.

Action: No opportunity identified as patient's surrogate decision maker placed patient on comfort care.

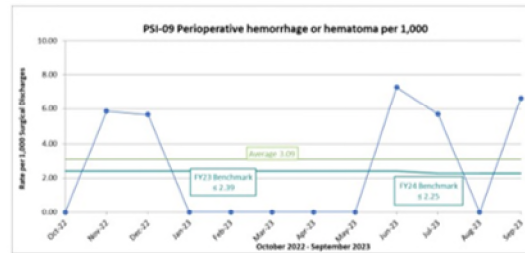
* FYTD 24: 5 events (5/24)

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- The slide shows a consistent trend of PSI-04 cases involving surgical patients, with one case in September where no opportunity was identified due to the patient's decision-making.

Measure Not Meeting Benchmark

| Measure | Benchmark | September 2023 | FY24 Q1 | FYTD 2024 |
|--|-----------|----------------|---------|-----------|
| PSI-09: Perioperative hemorrhage or hematoma per 1,000 | ≤ 2.25 | 6.62 | 3.84 | 3.84* |



Analysis: 1 case in September 2023
 • 62 y.o. Direct transfer to manage contact burns. 24% TBSA actively bleeding underneath allografts.

Action: Track and trend

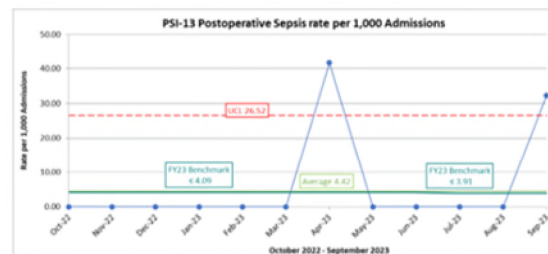
* FYTD24: 2 events (2/521)

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- The slide shows a PSI-09, indicating perioperative hemorrhage or hematoma, with a burn case in September displaying bleeding under their allograft, indicating a continuous trend.

Measure Not Meeting Benchmark

| Measure | Benchmark | September 2023 | FY24 Q1 | FYTD 2024 |
|--|-----------|----------------|---------|-----------|
| PSI-13: Postoperative Sepsis rate per 1,000 Admissions | ≤ 3.91 | 32.26 | 11.76 | 11.76* |



Analysis: 1 case in September 2023
 • 45 y.o. patient presented for elective removal of craniopharyngioma. While on the floor, pt continued to have fevers despite abx coverage. It was believed that he had developed post-intubation parotitis on his R side, given CT findings and swelling of the R parotid gland.

Action: Not a trend

* FYTD24: 1 event (1/85)

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- The slide displays a case of postoperative sepsis in September, surpassing the benchmark, demonstrating a continuous trend and track.

Measure Not Meeting Benchmark

| Measure | Benchmark | September 2023 | FY24 Q1 | FYTD 2024 |
|---|-----------|----------------|---------|-----------|
| PSI-14: Postoperative Wound Dehiscence rate per 1,000 | ≤ 1.58 | 34.48 | 8.85 | 8.85* |



Analysis: 1 case in September 2023

- 71 y.o. Patient presented as level 2 trauma, compressed by a forklift. Exploratory laparotomy. Re - exploration, sigmoid-recto anastomosis, creation of loop ileostomy, drain placement, and fascial closure. Abdominal wound dehiscence, patient take into OR for debridement.

Action: Track and trend

* FYTD24: 1 event (1/113)

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- The slide shows a postoperative wound dehiscence, with one case in September, and a small group with Dr. Hollingworth has had three months of no cases.

Measure Not Meeting Benchmark

| Measure | Benchmark | September 2023 | FY24 Q1 | FYTD 2024 |
|---|-----------|----------------|---------|-----------|
| PSI-15: Abdominopelvic accidental puncture or laceration rate per 1,000 | ≤ 0.97 | 8.33 | 4.61 | 2.28* |



Analysis: 1 case in September 2023

- 55 y.o. Exploratory laparotomy, extensive lysis of adhesions. Patient returned to OR for re-opening of laparotomy, adhesiolysis, small bowel resection, and abdominal closure.

Action: Not a trend

* FYTD24: 1 event (1/439)

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- The slide shows a PSI-15 case of Abdominopelvic accidental puncture or laceration, which increased the benchmark but did not show a trend and will continue to monitor.

Measure *Not* meeting Benchmark

| Measure | Benchmark | September 2023 | FY24 Q1 | FYTD 2024 |
|-----------------------------------|-----------|----------------|---------|-----------|
| Sedation Documentation Compliance | 100% | 100% | 99% | 99% |



Analysis: September 2023 at 100% compliance.

Action: Sedation documentation education provided to Surgeons on 10/17. Continue to track and trend.

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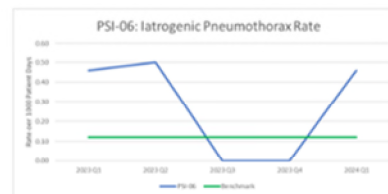
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- The slide displays a 100% compliance rate with sedation documentation for September.



Measures *NOT* Meeting Benchmark

| Measure | Benchmark | FY2023 Q4 | FY2024 Q1 | FYTD 2024 |
|--------------------------------------|-----------|-----------|-----------|-----------|
| PSI-06: Iatrogenic pneumothorax rate | ≤ 0.19 | 0.00 | 0.46 | 0.46 |



FY 2023Q1 fallout due to pneumothorax during a pacemaker insertion.

Assessment Recommendations:

- Track and trend.

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- The slide displays the PSI-06, Iatrogenic Pneumothorax rate, and

fallout in FY24 due to pneumothorax during a pacemaker infection, with a continuous track and trend.



- The slides

Valleywise Health PQMC UDS Quality Measure Report Results: September 2023 CYTD

| UDS Clinical Quality Measure | CY 2021 | Adjusted Quarterly Ranking 2021** | CY 2022 | Adjusted Quarterly Ranking 2022** | Jan-23 | Feb-23 | Mar-23 | Apr-23 | May-23 | Jun-23 | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | HP 2020 Goal | 2021 UDS National Average | *Target Goal? (2022 UDS National Average) | Variance From Current Target | Individual Breakout | Monthly Status (2022 UDS average) | |
|---|---------|-----------------------------------|---------|-----------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------------|---------------------------|---|------------------------------|---------------------|-----------------------------------|--------|
| Body Mass Index (BMI) Screening and Follow-Up Plan | 34.26% | 4 | 65.13% | 2 | 88.54% | 91.66% | 92.68% | 93.32% | 93.55% | 93.69% | 93.79% | 93.91% | 92.12% | | | | N/A* | 63.52% | 63.04% | 31.67% | | ↑ | Green |
| Cervical Cancer Screening | 49.77% | 3 | 53.62% | 2 | 54.68% | 54.81% | 54.76% | 54.84% | 55.12% | 55.59% | 55.83% | 56.38% | 56.45% | | | | N/A* | 52.99% | 53.96% | 2.46% | | ↑ | Green |
| Childhood Immunization Status (CIS) | 47.72% | 2 | 8.49% | 4 | 3.13% | 38.63% | 38.63% | 40.77% | 38.78% | 38.51% | 39.72% | 39.07% | 38.42% | | | | N/A* | 38.46% | 33.21% | 5.37% | | ↑ | Green |
| Colorectal Cancer Screening | 50.85% | 1 | 51.59% | 1 | 37.79% | 53.04% | 55.97% | 57.76% | 58.82% | 59.90% | 60.89% | 62.41% | 63.24% | | | | N/A* | 45.91% | 43.82% | 0.42% | | ↑ | Green |
| Controlling High Blood Pressure | 47.76% | 4 | 53.68% | 4 | 46.56% | 46.74% | 51.33% | 53.46% | 55.36% | 56.23% | 58.15% | 58.18% | 58.12% | | | | N/A* | 68.15% | 61.46% | -4.89% | | ↓ | Yellow |
| Diabetes Hemoglobin A1c Poor Control | 51.85% | 2 | 30.28% | 5 | 61.15% | 53.74% | 45.42% | 40.59% | 37.26% | 34.46% | 33.94% | 31.56% | 30.76% | | | | N/A* | 52.28% | 58.42% | 6.94% | | ↓ | Yellow |
| Ischemic Vascular Disease (IVD) Use of Aspirin or Another Antithrombotic | 78.51% | 3 | 75.01% | 3 | 76.25% | 75.78% | 76.54% | 76.74% | 76.87% | 77.07% | 76.87% | 76.53% | 76.63% | | | | N/A* | 78.21% | 76.87% | 0.08% | | ↑ | Green |
| Screening for Child or Adolescent and Adult-onset Depression and Follow-Up Plan/Referral/Screen | 46.75% | 4 | 54.67% | 4 | 46.25% | 50.13% | 52.84% | 55.05% | 58.36% | 60.03% | 63.53% | 68.52% | 70.22% | | | | N/A* | 67.42% | 70.01% | 0.19% | | ↑ | Green |
| Tobacco Use Screening and Cessation Intervention | 87.78% | 2 | 88.88% | 2 | 89.23% | 89.69% | 87.82% | 88.43% | 88.77% | 89.03% | 89.23% | 89.01% | 89.49% | | | | N/A* | 82.34% | 84.66% | 4.89% | | ↑ | Green |
| Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents | 76.08% | 2 | 76.51% | 2 | 51.04% | 54.62% | 58.53% | 60.82% | 63.25% | 67.09% | 70.28% | 73.86% | 74.47% | | | | N/A* | 68.72% | 69.81% | 4.66% | | ↑ | Green |
| Statins Therapy for the Prevention and Treatment of Cardiovascular Disease | 68.40% | 4 | 71.68% | 4 | 76.56% | 77.44% | 77.76% | 77.42% | 77.18% | 77.00% | 76.74% | 76.83% | 76.83% | | | | N/A* | 73.54% | 76.87% | 0.56% | | ↑ | Green |
| Recent Cancer Screening | 58.58% | 1 | 58.89% | 1 | 51.31% | 51.66% | 54.03% | 56.03% | 58.79% | 57.83% | 58.79% | 58.83% | 60.17% | | | | N/A* | 46.28% | 58.28% | 9.89% | | ↑ | Green |
| HRV Screening | 58.18% | 1 | 63.46% | 1 | 69.34% | 68.10% | 68.06% | 67.91% | 67.88% | 67.88% | 67.74% | 67.66% | 67.55% | | | | N/A* | 58.66% | 63.82% | 23.77% | | ↑ | Green |

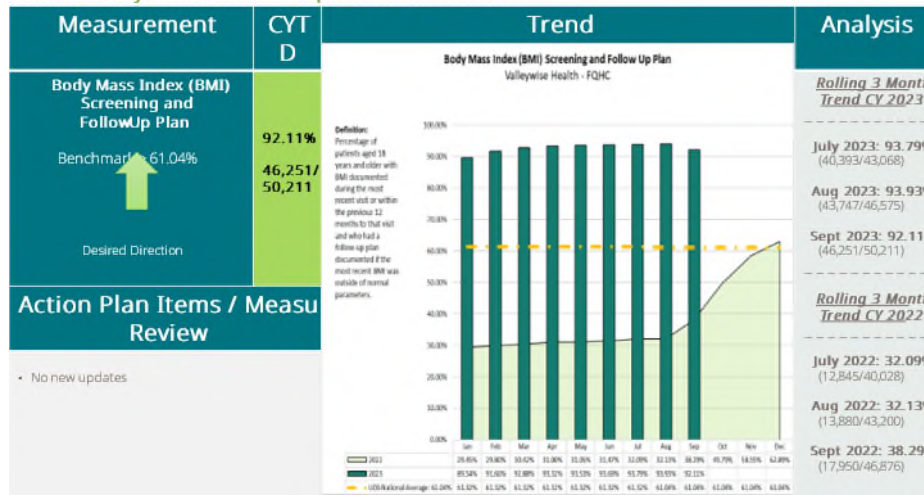
Monthly Status Key

| | |
|------------------------|--|
| Target Met or Exceeded | Indicator has met or is exceeding the target goal |
| Approaching Target | Indicator is within 10% of the target goal |
| Not Meeting Target | Indicator is > 10% below target goal |
| Improving | Indicator is NOT meeting the target goal but has shown consistent improvement (3 months or longer). *Consistent improvement identified as a 19% over a 3 month lookback period |

*HP 2020 Objective definition not equivalent to UDS Quality of Care

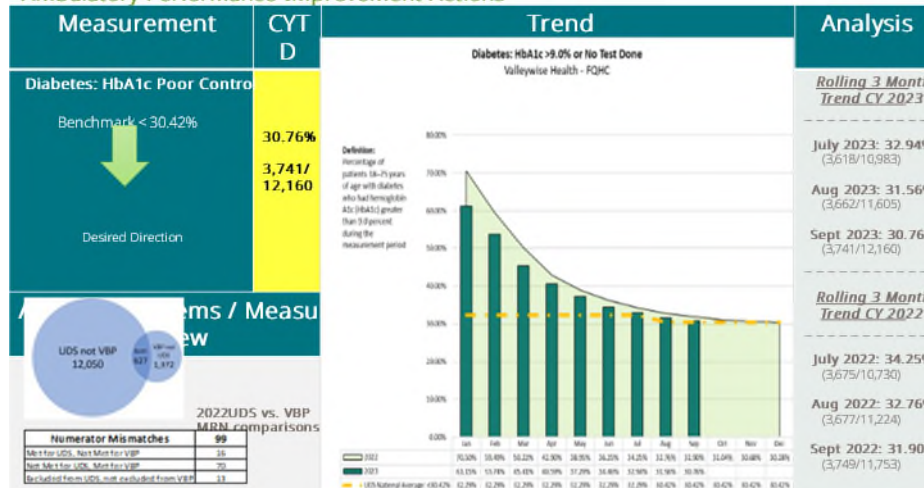
- The overall snapshot of ambulatory measures shows no red in overall metrics, with more green than yellow, indicating all work is being done by all work groups.

Ambulatory Performance Improvement Actions



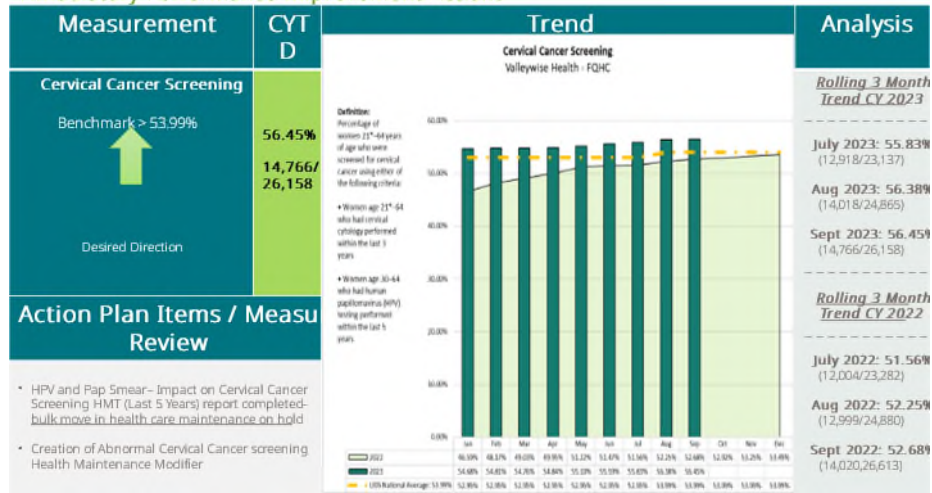
- The slide showcases an improved BMI Screening and Follow-Up plan, surpassing the benchmark from previous years, with significant improvements in EPIC to support further enhancements.

Ambulatory Performance Improvement Actions



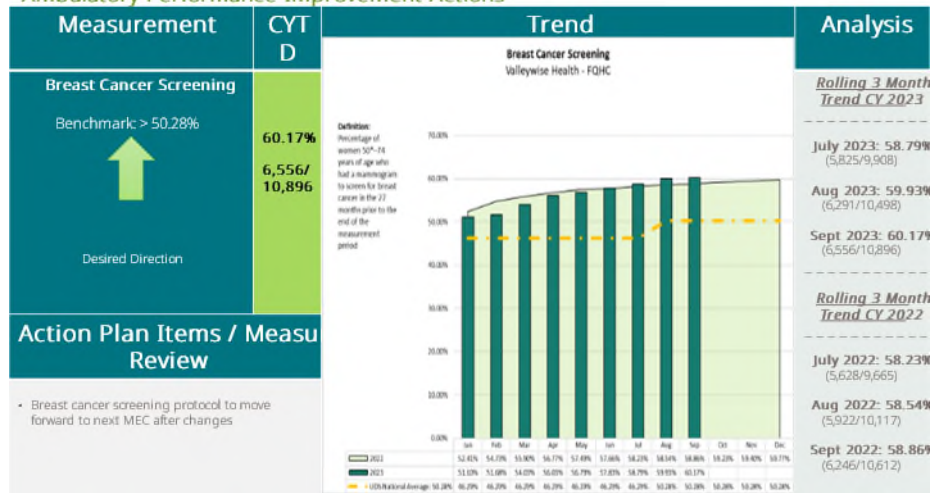
- The slide displays a diabetic with HbA1c poor control, below the UDS national average, indicating the need for ongoing track and trend.

Ambulatory Performance Improvement Actions



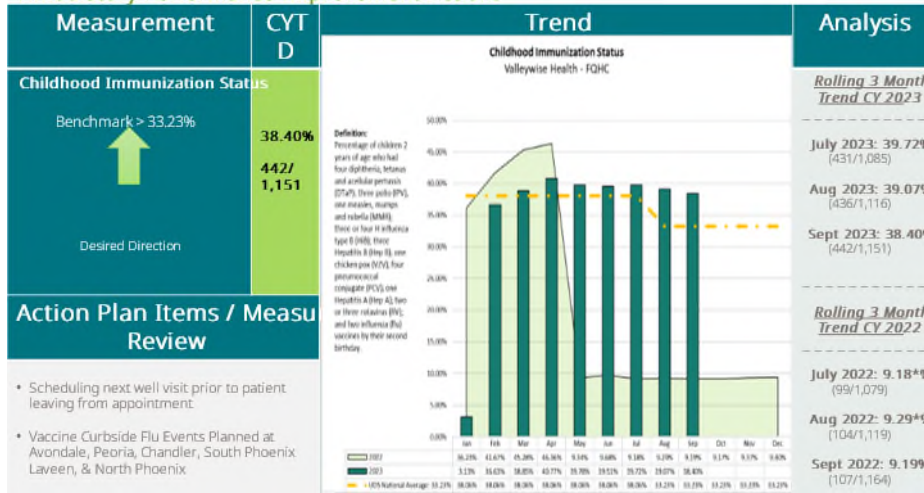
- The slide displays cervical cancer screening, which is meeting the required standards and surpassing our previous year's level.

Ambulatory Performance Improvement Actions



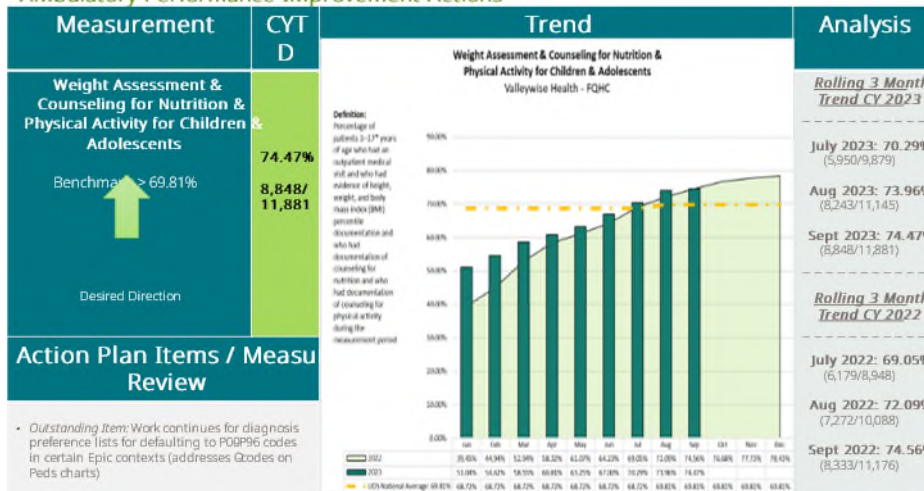
- The slide displays the progress of breast cancer screening, meeting the target and surpassing the previous year's end.

Ambulatory Performance Improvement Actions



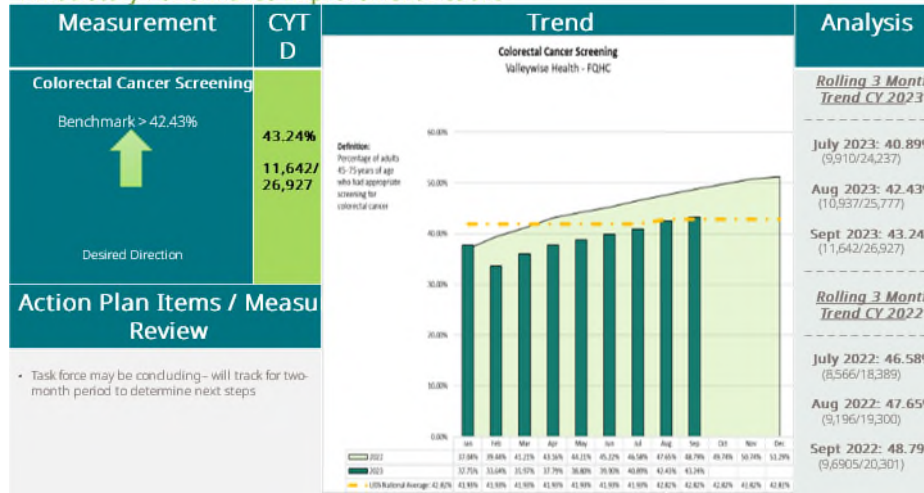
- The slide displays childhood Immunization Status, meeting the measure, and highlighting the difference between 22 and this year, which needed updating from a CMS perspective.

Ambulatory Performance Improvement Actions

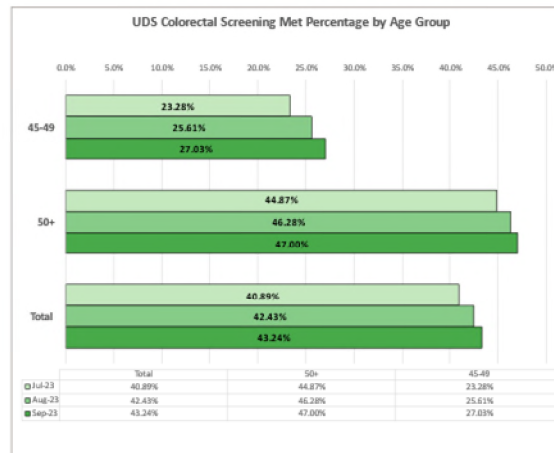


- The slide presents weight assessment and nutrition and physical activity counseling for children and adolescents, meeting the milestone set last year.

Ambulatory Performance Improvement Actions



- The slide displays the successful completion of colorectal cancer screening, meeting the required standards.



New Benchmark
> 42.82%

| Month | Met | Not Met | Grand Total | Percentage |
|---------|-------|---------|-------------|------------|
| July-23 | 1040 | 3427 | 4467 | 23.28% |
| Aug-23 | 8870 | 10900 | 19770 | 44.87% |
| Sept-23 | 1371 | 3701 | 5072 | 27.03% |
| Aug-23 | 9707 | 11267 | 20974 | 46.28% |
| Sept-23 | 11642 | 15285 | 26927 | 43.24% |
| All | 9910 | 14327 | 24237 | 40.89% |
| All | 10917 | 14840 | 25757 | 42.43% |
| All | 11642 | 15285 | 26927 | 43.24% |

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- The slide indicates that the age group for the measure was adjusted to include individuals aged 45 and above, excluding the 45 to 49 age group last year.

New Ambulatory Report to Monitor Blood Pressure Rechecks

★ **AMB High Pressure Warning BPA tracking (SQL) (Prior Month)**
 AMB High Pressure Warning BPA tracking (SQL) (Prior Month) – first BP and 2nd BP after BPA warning

| BPA Actions: | See Comments | Will Retake BP | (blank) | Grand Total |
|------------------------------|--------------|----------------|-------------|-------------|
| Acknowledge/Override Warning | 21 | 27 | 2360 | 2408 |
| Cancel BPA | | | | 198 |
| Grand Total | 21 | 27 | 2360 | 2606 |

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- The slide displays BPA tracking to ensure staff retakes blood pressure if initially high, ensuring staff is aware of the warning.

| Department Name | 1st Systolic Count | 2nd Systolic Count | % 2nd BP Taken | Quantity | % 2nd BP NOT Taken | Quantity |
|------------------------|--------------------|--------------------|----------------|-------------|--------------------|------------|
| AVD FAMILY PRACTICE | 306 | 200 | 85.0% | 200 | 15.0% | 46 |
| CHD FAMILY PRACTICE | 131 | 85 | 64.9% | 85 | 35.1% | 46 |
| CHD INTERNAL MEDICINE | 103 | 49 | 47.6% | 49 | 52.4% | 54 |
| GDL FAMILY PRACTICE | 114 | 96 | 84.2% | 96 | 15.8% | 18 |
| MCD FAMILY PRACTICE | 53 | 23 | 43.4% | 23 | 56.6% | 30 |
| MESA FAMILY PRACTICE | 134 | 157 | 80.2% | 157 | 9.8% | 17 |
| MESA INTERNAL MEDICINE | 108 | 37 | 34.3% | 37 | 65.7% | 71 |
| NPX FAMILY PRACTICE | 229 | 170 | 74.2% | 170 | 25.8% | 59 |
| NPX INTERNAL MEDICINE | 30 | 27 | 90.0% | 27 | 10.0% | 3 |
| PEC FAMILY PRACTICE | 292 | 212 | 72.6% | 212 | 27.4% | 80 |
| PEC INTERNAL MEDICINE | 43 | 9 | 20.9% | 9 | 79.1% | 34 |
| PXC INTERNAL MEDICINE | 260 | 175 | 67.3% | 175 | 32.7% | 85 |
| SPL FAMILY PRACTICE | 77 | 57 | 74.0% | 57 | 26.0% | 20 |
| SPL INTERNAL MEDICINE | 108 | 75 | 69.4% | 75 | 30.6% | 33 |
| SPX FAMILY PRACTICE | 331 | 209 | 63.1% | 209 | 36.9% | 122 |
| YPMV FAMILY PRACTICE | 1 | 1 | 100.0% | 1 | 0.0% | 0 |
| Grand Total | 2360 | 1642 | 69.6% | 1642 | 30.4% | 718 |

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- The slide highlights areas clinics may need to enhance their focus on and highlights those that are performing well.

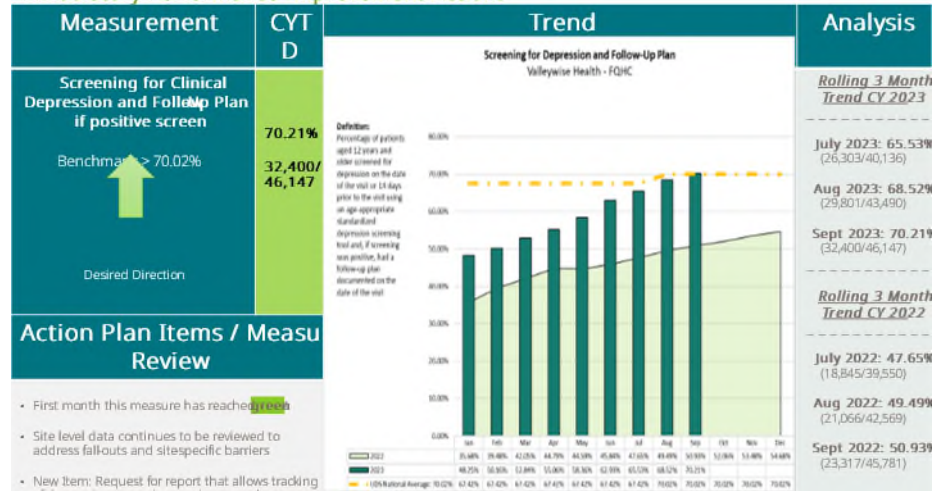
September 2023 Blood Pressure Re-Check Leaders

| Row Labels | 1st Systolic Count | 2nd Systolic Count | % 2nd BP Taken | Quantity | % 2nd BP NOT Taken | Quantity | Row Labels | 1st Systolic Count | 2nd Systolic Count | % 2nd BP Taken | Quantity | % 2nd BP NOT Taken | Quantity |
|--------------------------------|--------------------|--------------------|----------------|----------|--------------------|----------|------------------------------|--------------------|--------------------|----------------|----------|--------------------|----------|
| ADULT FAMILY PRACTICE | | | | | | | NP/INTERNAL MEDICINE | | | | | | |
| VALBUENA, FANIA | 43 | 42 | 97.7% | 42 | 0.0% | 0 | DELAZAR, VERONICA A | 25 | 24 | 96.0% | 24 | 4.0% | 1 |
| WENZ, JOSHUA | 37 | 36 | 97.3% | 36 | 2.7% | 1 | PCP FAMILY PRACTICE | | | | | | |
| WHA, SAMANTHA | 17 | 16 | 94.1% | 16 | 5.9% | 1 | ARMSTRONG, PATRICIA | 40 | 37 | 92.5% | 37 | 7.5% | 3 |
| WU, EUPHROSINE, LEIFEM | 52 | 46 | 88.5% | 46 | 11.5% | 4 | RYAN SALAZAR, RICARDO | 77 | 66 | 85.7% | 66 | 14.3% | 11 |
| WELDON, PATRICIA G | 17 | 15 | 88.2% | 15 | 11.8% | 2 | STANLEY, FELICIA | 20 | 17 | 85.0% | 17 | 15.0% | 3 |
| WU, EUPHROSINE, NORMA I | 11 | 11 | 100.0% | 11 | 0.0% | 0 | PCP/INTERNAL MEDICINE | | | | | | |
| ADULT FAMILY PRACTICE | | | | | | | NP/INTERNAL MEDICINE | | | | | | |
| N/A - no users identified | | | | | | | N/A - no user list unit | | | | | | |
| ADULT INTERNAL MEDICINE | | | | | | | PCP/INTERNAL MEDICINE | | | | | | |
| N/A - no users identified | | | | | | | GARCIA, VERONICA J | | | | | | |
| N/A - no users identified | | | | | | | ROSA GUERRA, MARIAL | | | | | | |
| ADULT FAMILY PRACTICE | | | | | | | NP/INTERNAL MEDICINE | | | | | | |
| MERCADO CAUSADO, CANDIA M | 46 | 44 | 95.7% | 44 | 4.3% | 2 | EDMONSON, LYNN R M | 25 | 23 | 92.0% | 23 | 8.0% | 2 |
| ADULT FAMILY PRACTICE | | | | | | | NP/INTERNAL MEDICINE | | | | | | |
| N/A - no users identified | | | | | | | VALBUENA, ALFONSO | | | | | | |
| ADULT FAMILY PRACTICE | | | | | | | RIVERA, CRISTINA | | | | | | |
| GARCIA, ROSA | 14 | 13 | 92.9% | 13 | 0.0% | 0 | GRANADA, NELSON | 10 | 8 | 80.0% | 8 | 20.0% | 2 |
| LOPEZ, LOURDES | 52 | 48 | 92.3% | 48 | 7.7% | 1 | NP/INTERNAL MEDICINE | | | | | | |
| ADULT INTERNAL MEDICINE | | | | | | | NP/INTERNAL MEDICINE | | | | | | |
| N/A - no users identified | | | | | | | BENITEZ, ROSA CRISTINA | | | | | | |
| ADULT FAMILY PRACTICE | | | | | | | NP/INTERNAL MEDICINE | | | | | | |
| RODRIGUEZ, MARICELA | 27 | 27 | 100.0% | 27 | 0.0% | 0 | VALBUENA, CRISTINA | 16 | 13 | 81.3% | 13 | 18.8% | 3 |
| RINO, ANABELENA | 76 | 76 | 100.0% | 76 | 0.0% | 0 | NP/INTERNAL MEDICINE | | | | | | |
| ADULT FAMILY PRACTICE | | | | | | | N/A - no user list unit | | | | | | |

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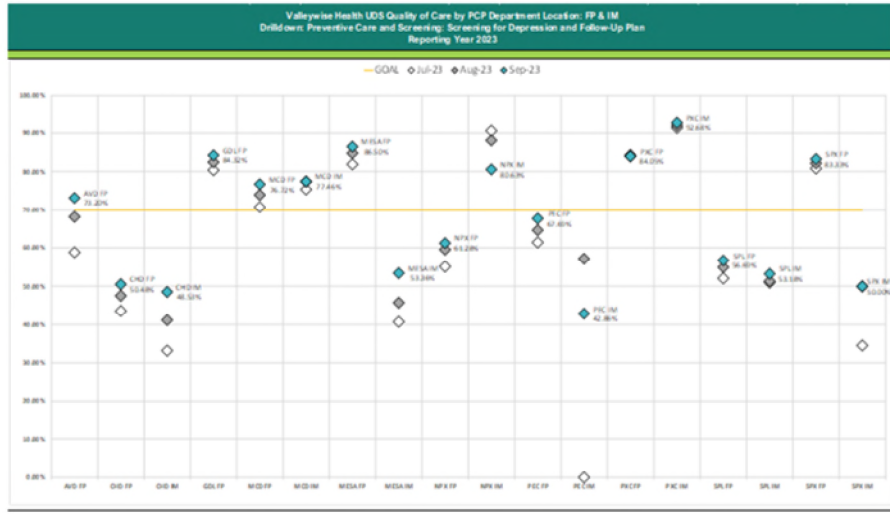
- The slide provides a different approach for employees to determine if individual training is necessary.

Ambulatory Performance Improvement Actions



- First month this measure has reached goal
- Site level data continues to be reviewed to address fallouts and sitespecific barriers
- New Item: Request for report that allows tracking

- The slide shows that the screening for depression and follow-up plan is meeting the benchmark, updated by UDS in August from 68.5 to 70.2, demonstrating the hard work put into it.



- The slide presents a different approach based on a clinic.

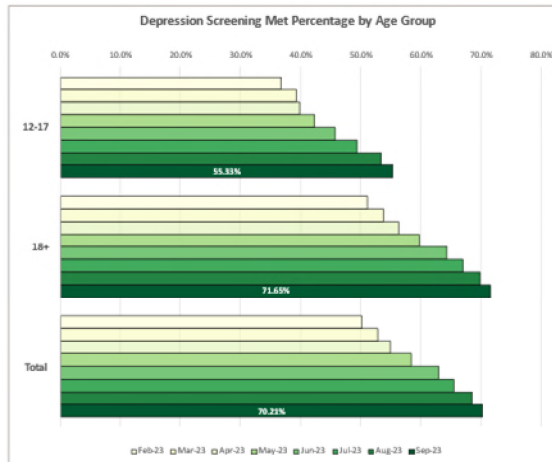
Valleywise Health UDS Quality of Care by PCP Department Location: FP & IM
Drilldown: Preventive Care and Screening: Screening for Depression and Follow-Up Plan
Reporting Year 2023

| Department | GOAL | Jul-23 | Aug-23 | Sep-23 |
|------------------------|-------|--------|--------|--------|
| AVG FAMILY PRACTICE | 70.0% | 73.2% | 73.2% | 73.2% |
| AVG FAMILY PRACTICE | | 1,036 | 1,036 | 1,036 |
| AVG FAMILY PRACTICE | | 2,198 | 2,198 | 2,198 |
| CHD FAMILY PRACTICE | 70.0% | 50.4% | 50.4% | 50.4% |
| CHD FAMILY PRACTICE | | 1,120 | 1,120 | 1,120 |
| CHD FAMILY PRACTICE | | 2,288 | 2,288 | 2,288 |
| CHD INTERNAL MEDICINE | 70.0% | 46.3% | 46.3% | 46.3% |
| CHD INTERNAL MEDICINE | | 748 | 748 | 748 |
| CHD INTERNAL MEDICINE | | 1,496 | 1,496 | 1,496 |
| GOV FAMILY PRACTICE | 70.0% | 81.3% | 81.3% | 81.3% |
| GOV FAMILY PRACTICE | | 832 | 832 | 832 |
| GOV FAMILY PRACTICE | | 1,664 | 1,664 | 1,664 |
| MID FAMILY PRACTICE | 70.0% | 77.4% | 77.4% | 77.4% |
| MID FAMILY PRACTICE | | 1,440 | 1,440 | 1,440 |
| MID FAMILY PRACTICE | | 2,880 | 2,880 | 2,880 |
| MID INTERNAL MEDICINE | 70.0% | 77.4% | 77.4% | 77.4% |
| MID INTERNAL MEDICINE | | 1,312 | 1,312 | 1,312 |
| MID INTERNAL MEDICINE | | 2,624 | 2,624 | 2,624 |
| MESA FAMILY PRACTICE | 70.0% | 86.5% | 86.5% | 86.5% |
| MESA FAMILY PRACTICE | | 1,436 | 1,436 | 1,436 |
| MESA FAMILY PRACTICE | | 2,872 | 2,872 | 2,872 |
| MESA INTERNAL MEDICINE | 70.0% | 86.5% | 86.5% | 86.5% |
| MESA INTERNAL MEDICINE | | 1,732 | 1,732 | 1,732 |
| MESA INTERNAL MEDICINE | | 3,464 | 3,464 | 3,464 |
| MPX FAMILY PRACTICE | 70.0% | 61.2% | 61.2% | 61.2% |
| MPX FAMILY PRACTICE | | 824 | 824 | 824 |
| MPX FAMILY PRACTICE | | 1,648 | 1,648 | 1,648 |
| MPX INTERNAL MEDICINE | 70.0% | 61.2% | 61.2% | 61.2% |
| MPX INTERNAL MEDICINE | | 1,088 | 1,088 | 1,088 |
| MPX INTERNAL MEDICINE | | 2,176 | 2,176 | 2,176 |
| PEC FAMILY PRACTICE | 70.0% | 67.8% | 67.8% | 67.8% |
| PEC FAMILY PRACTICE | | 1,168 | 1,168 | 1,168 |
| PEC FAMILY PRACTICE | | 2,336 | 2,336 | 2,336 |
| PEC INTERNAL MEDICINE | 70.0% | 42.8% | 42.8% | 42.8% |
| PEC INTERNAL MEDICINE | | 1,072 | 1,072 | 1,072 |
| PEC INTERNAL MEDICINE | | 2,144 | 2,144 | 2,144 |
| PEC FP | 70.0% | 84.0% | 84.0% | 84.0% |
| PEC FP | | 1,120 | 1,120 | 1,120 |
| PEC FP | | 2,240 | 2,240 | 2,240 |
| PEC IM | 70.0% | 42.8% | 42.8% | 42.8% |
| PEC IM | | 1,072 | 1,072 | 1,072 |
| PEC IM | | 2,144 | 2,144 | 2,144 |
| SLV FAMILY PRACTICE | 70.0% | 58.8% | 58.8% | 58.8% |
| SLV FAMILY PRACTICE | | 1,176 | 1,176 | 1,176 |
| SLV FAMILY PRACTICE | | 2,352 | 2,352 | 2,352 |
| SLV INTERNAL MEDICINE | 70.0% | 51.0% | 51.0% | 51.0% |
| SLV INTERNAL MEDICINE | | 1,020 | 1,020 | 1,020 |
| SLV INTERNAL MEDICINE | | 2,040 | 2,040 | 2,040 |
| SPR FAMILY PRACTICE | 70.0% | 83.0% | 83.0% | 83.0% |
| SPR FAMILY PRACTICE | | 1,304 | 1,304 | 1,304 |
| SPR FAMILY PRACTICE | | 2,608 | 2,608 | 2,608 |
| SPR INTERNAL MEDICINE | 70.0% | 43.0% | 43.0% | 43.0% |
| SPR INTERNAL MEDICINE | | 1,076 | 1,076 | 1,076 |
| SPR INTERNAL MEDICINE | | 2,152 | 2,152 | 2,152 |

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- The slide presents a format for individual clinics to determine if they need to be emphasized due to collective meetings, or if some clinics require more attention.



Benchmark: >70.02%

| July-23 | Met | Not Met | Grand Total | Percentage |
|------------|--------------|--------------|--------------|---------------|
| 12-17 | 1642 | 1676 | 3318 | 49.49% |
| 18+ | 24661 | 12157 | 36818 | 66.98% |
| All | 26303 | 13833 | 40136 | 65.53% |

| Aug-23 | Met | Not Met | Grand Total | Percentage |
|------------|--------------|--------------|--------------|---------------|
| 12-17 | 2020 | 1759 | 3779 | 53.45% |
| 18+ | 27781 | 11930 | 39711 | 69.96% |
| All | 29801 | 13689 | 43490 | 68.52% |

| Sept-23 | Met | Not Met | Grand Total | Percentage |
|------------|--------------|--------------|--------------|-----------------|
| 12-17 | 2256 | 1821 | 4077 | 55.33% |
| 18+ | 30144 | 11926 | 42070 | 71.65% |
| All | 32400 | 13747 | 46147 | 70.21% ✓ |

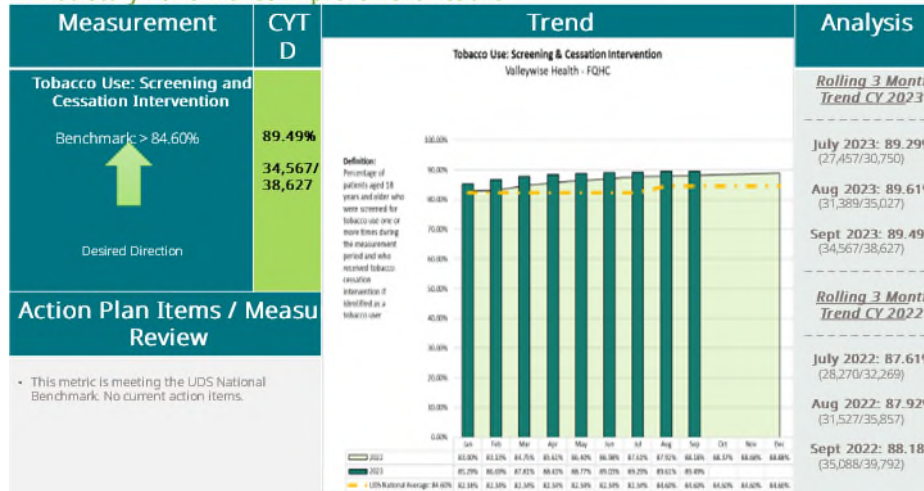
- The slide displays the age group being viewed.

Ambulatory Performance Improvement Actions

| Measurement | CYT D | Trend | Analysis |
|--|---------------------------------------|--|--|
| Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic Benchmark > 76.83% Desired Direction ↑ | 76.83% 1,738 / 2,262 | Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic Valleywise Health - FQHC Definition: Percentage of patients 66 years of age and older who were diagnosed with acute myocardial infarction (AMI), or who had a coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCI) in the 12 months prior to the measurement period or who had an active diagnosis of IVD during the measurement period, and who had documented use of aspirin or another antithrombotic during the measurement period. | Rolling 3 Month Trend CY 2023 July 2023: 76.87% (1,592/2,071) Aug 2023: 76.53% (1,683/2,199) Sept 2023: 76.83% (1,738/2,262) Rolling 3 Month Trend CY 2022 July 2022: 78.85% (1,633/2,071) Aug 2022: 78.50% (1,694/2,158) Sept 2022: 78.25% (1,770/2,262) |
| Action Plan Items / Measure Review • This metric is meeting the UDS National Benchmark. • Pending Action Item - review of random chart sample to better assess why patients are NOT meeting this measure. | | | |

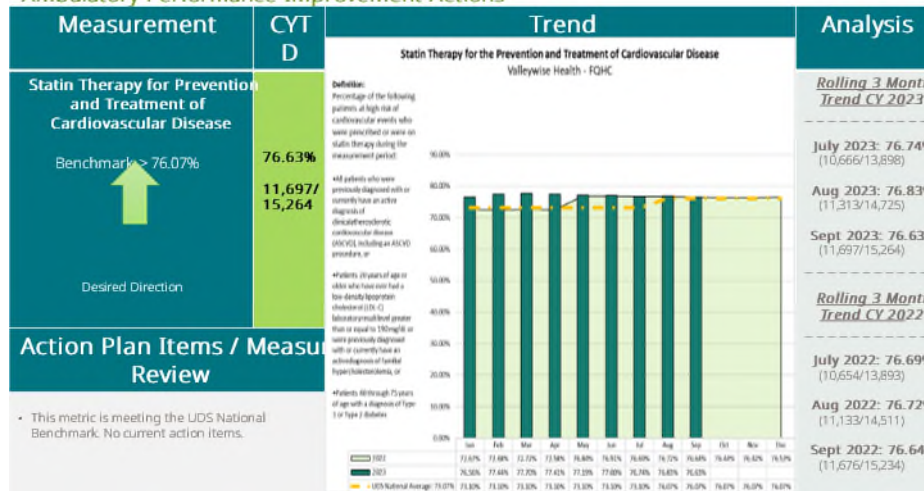
- The slide displays the use of aspirin in treating Ischemic Vascular Disease, meeting the benchmark.

Ambulatory Performance Improvement Actions



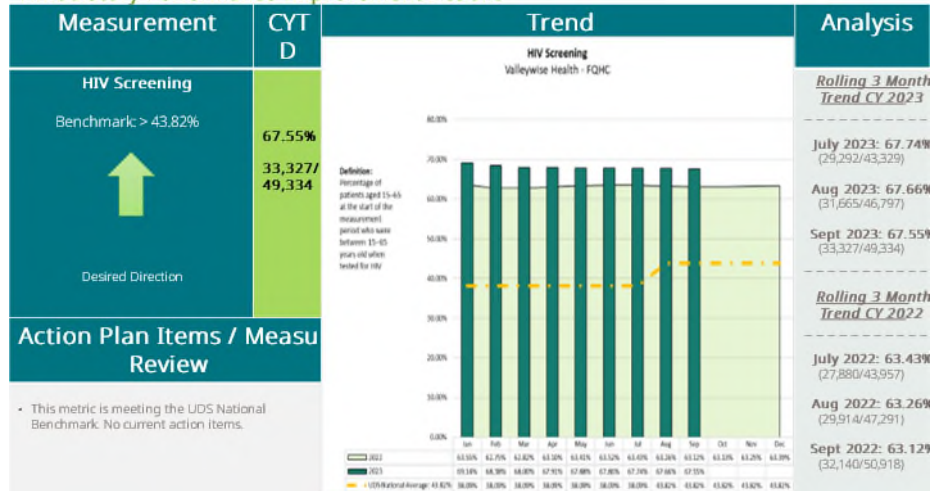
- The slide indicates that tobacco use screening measures are consistently above the benchmark and have been sustained.

Ambulatory Performance Improvement Actions



- The slide showcases statin therapy as a promising method for preventing and treating cardiovascular disease, meeting the benchmark.

Ambulatory Performance Improvement Actions



- The slide demonstrates that HIV Screening is performing above the benchmark and is performing exceptionally well.

Upcoming Meetings:

- Quality Focus Teams:
 - BMI & Diabetes & A1C Management- monthly meeting 11/7
 - Hypertension High Blood Pressure- 2x monthly Friday meetings; upcoming 10/27
 - Cervical & Breast Cancer Screening monthly meeting; upcoming 11/13
 - Childhood Immunization & Weight Assessment Screening- monthly; upcoming 11/1

© 2019 Valleywise Health - Weight & Blood Pressure
 ○ Colorectal Cancer Screening monthly meeting; upcoming 11/27

- The slide displays meetings and breakdowns of work groups, some meeting twice a month or monthly, with physician champions and accountable leaders for each measure, and some meetings are twice a month or monthly.

2023 Quality Task Force Focus Teams

Metrics of special interest:

- ✓ Depression Screening and F/U Plan
- ✓ Controlling High BP
- ✓ Breast Cancer/Cervical Cancer Screening
- ✓ Diabetes Control

| | Physician | Accountable Leader | | Physician | Accountable Leader |
|---------------------------------------|---|--------------------|--|-----------------------|--------------------|
| IM & Diabetes ASC Management | Dr. Sandra Yuh | Kelly Nightengale | Colorectal Cancer Screening | Dr. Sunita Bandlamuri | Fernando Reyes |
| Hypertension High Blood Pressure | Dr. Baharak Tabarsi | Nelson Silva-Craig | Childhood Immunizations & Weight Assessment Screening | Dr. Jodi Carter | Jeffrey Spacht |
| Cervical & Breast Cancer Screening | Dr. Christina Searls-Snyder Dr. Patricia Habak | Georgette Lindner | Depression Screening | Dr. Lenore Encinas | Vicki Staples |

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- The slide displays the 2023 quality task force focus teams' metrics of special interest.



Measures Meeting Benchmark

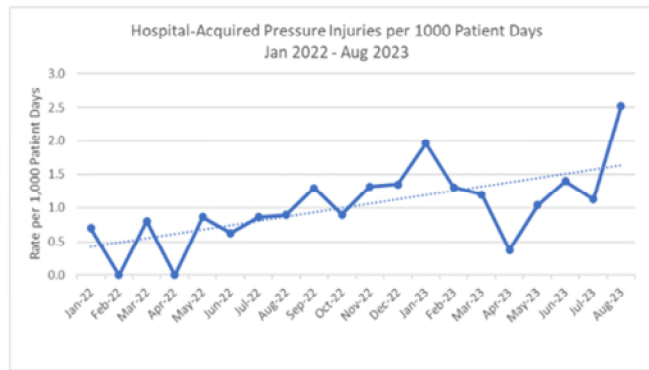
| Measure | Benchmark | Sept 2023 | Aug 2023 | FY23 | FY24 TD |
|---|-----------|-----------|-----------|-------|---------|
| Bar Code Medication Administration (% Compliance) | > 95% | 97% | Quarterly | 95% | 97% |
| Rapid Response Average Call to Arrival Time (minutes) | ≤ 5.0 | 0.9 | 1.5 | 1.7 | 0.9 |
| Elopement-Aggressive Patient Safety Program Patient Elopement (Absolute Number) | 0 | 0 | 0 | 2 | 0 |
| Blood Bank Specimen Labeling Errors, (% Cancellation) | ≤ 1.12% | 1.12% | 0.93% | 1.42% | 0.90% |
| Pain Reassessment (% Compliance) | ≥ 90% | 93% | 92% | 91% | 92% |
| OptiLink Compliance - Patient Acuity (%) | ≥ 98% | 100% | 100% | 99% | 100% |
| OptiLink Compliance - Patient Assignment (%) | ≥ 98% | 99% | 100% | 98% | 99% |
| OptiLink Compliance - Census Projection (%) | ≥ 98% | 99% | 99% | 98% | 99% |

- The slide displays PNC information from our nursing perspective, showing that all measures have met benchmarks for September and fiscal year 2024.

Patient Safety Officer Report

Hospital-Acquired Pressure Injuries

Inpatient HAPIs

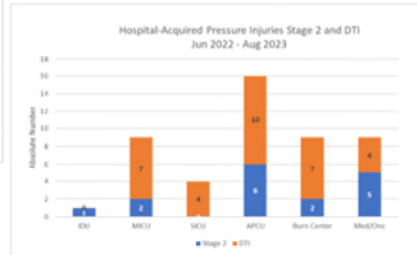
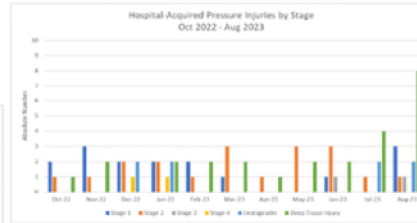
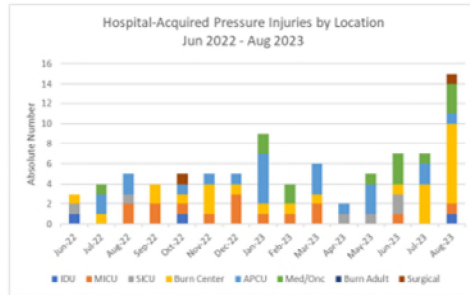


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- The slide indicates an increase in acquired pressure injuries per 1000 patient days from January 22 to August 2023, encompassing all pressure injuries.

Crystal Garcia

Inpatient HAPIs



- The slide displays acquired pressure injuries by location, with a patient safety indicator focusing on stage 3, 4 and unstageables. The organization should ensure all injuries are monitored throughout. A process is in place to inform the quality department about pressure injuries to accurately capture them.

Inpatient HAPIs

Analysis:

- Healthcare -acquired pressure injuries are trending up in rate. HAPI trending up in July and Aug.
 - July = 7 HAPI
 - 4 Deep Tissue (2 BURN, 1 MED/ONC/ORTHO, 1 MICU)
 - 2 Unstageable (2 BURN)
 - Aug = 14 HAPI
 - 8 Deep Tissue (5 BURN, 2 MED/ONC/ORTHO, 1 4E)
 - 2 Unstageable (2 BURN)
 - 1 Stage III (1 Surg/Trauma)

Action:

- Cultural change in preventative care, not just nursing, but also providers.
 - Appropriate physical assessments, prevention and treatment orders, early consults in hospital stay.
- Direct impact includes frequent turning, support surfaces, implementing appropriate prevention techniques (foam vs skin care line).
 - WOCN not 24/7, thus the bedside nurse and provider are first line of defense in HAPI.
 - Preventative techniques are not implemented until after skin injuries.
- Daily Care Flowsheet documentation lacking
- Rollout for new skin care line completed and positive feedback from nursing staff. Same for standardization of foam dressing. Both completed in September. Future in-services planned for November.
- No follow-up for linen consolidation.

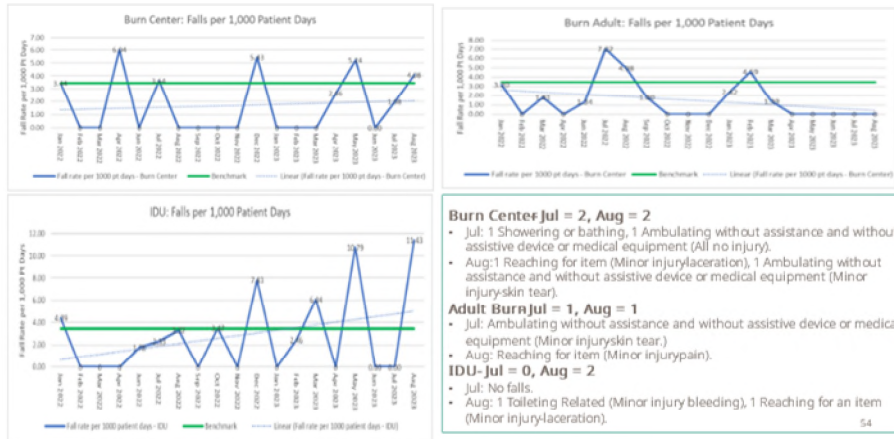
Assessment Recommendations:

- Focus group to be developed for HAPI reduction.
- Follow up with WOCN for linen consolidation plan and new vendor.

- The slide outlines action items being addressed, including daily care flow sheet documentation, skin assessment, and preventative care education, which are being monitored by a small group.

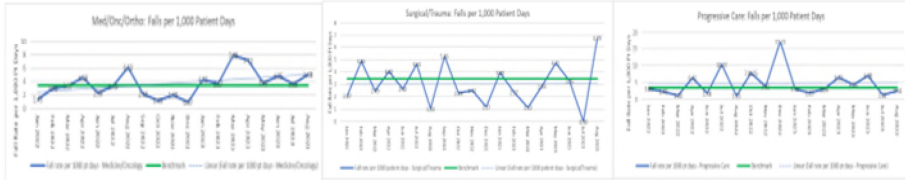
Falls

Inpatient Falls per 1,000 Patient Days



- The slide shows inpatient falls per 1,000 patient days, with two falls per month in the burn center in July and August, one in Adult Burn, and two in IDU.

Inpatient Falls per 1,000 Patient Days



Analysis: All are above benchmark.
Med/Ortho Total for Jul = 3, Aug = 4

- Jul: 2 Ambulating without assistance and without assistive device or medical equipment. (Minor injury/ laceration, one abrasion), 1 Suspected intentional fall (No injury).
- Aug: 2 Toileting Related (one with minor injury/pain), 1 fall due to participating in an activity, 1 suspected intentional fall (all others no injury)

Surgical Trauma Total for Jul = 4, Aug = 4

- Jul: 1 Ambulating without assistance and without an assistive device or medical equipment, 1 Ambulating with assistance and/or assistive device or medical equipment, 1 Toileting Related, 1 Changing position (All no injury)
- Aug: 2 Transferring to or from bed, chair, or wheelchair (1 Minor injury-pain/1 No injury), 1 changing position (Minor injury-pain), 1 Ambulating without assistance and without an assistive device or medical equipment (No injury).

Progressive Care Unit Total for Jul = 3, Aug = 2

- Jul: 2 Ambulating with assistance and/or assistive device or medical equipment (No injury), 1 Toileting Related (Moderate injury-bruising/hematoma, bleeding)
- Aug: Ambulating without assistance and without assistive device or medical equipment. (No injury).

Recommended Action:

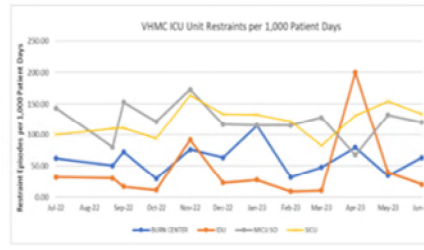
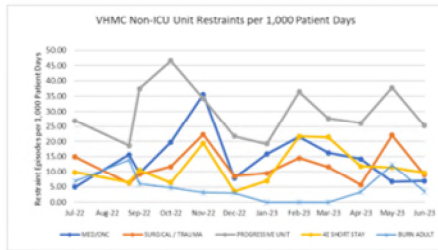
- Re-circulate fall prevention education.
- Continue to track and trend.

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- The slide outlines the frequency of inpatient falls per 1,000 patient days, emphasizing the need for fall prevention education and rounding to prevent falls.



Restraint Episodes per 1,000 Patient Days



Analysis:

- Restraint episodes per 1,000 patient days is showing normal variation.
- Reminder: Discontinued restraints need to be discontinued in EPIC.

Recommended Action:

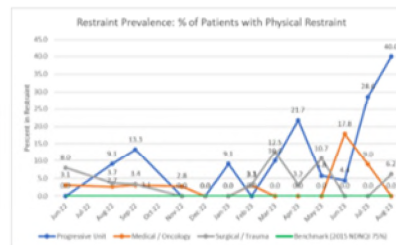
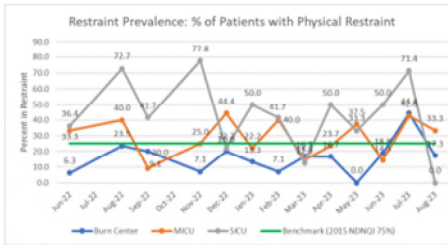
- Track and trend.

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- The slide displays restraint per 1,000 patient days, along with a track and trend.

Restraint Prevalence, Adult



Analysis:

- Restraint prevalence is a one -day snapshot of the percentage of adult patients in restraints.
- Restraint Prevalence and benchmark are higher in critical care areas. SICU has been gradually trending down over the last year, although July show a spike. MICU, shows normal variation around benchmark. Burn Center and MICU are below benchmark.
- Non-critical care areas: Progressive Care has been trending up in July and Aug.

Recommended Action:

- Recommend to continue monitoring restraint prevalence and trend quarterly. Further recommendations to be based on ongoing data trends.

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- The slide outlines a work group examining restraint prevalence in adult patients, ensuring patient safety analysts are involved in data collection. The group is currently gathering a one-day snapshot of the percentage of adult patients with restraints.

4-Point Locked Restraint Review

| LOCKED RESTRAINTS | Cases | NV Ordered | NV Soft Prior | NV Aggressive | NV Agitated | NV SI/HI | NV AMA | V |
|-------------------|------------|------------|---------------|---------------|-------------|-----------|-----------|-----------|
| 4E SS | 2 | 2 | 0 | 2 | 1 | 0 | 1 | 1 |
| Burn Adult | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 1 |
| Burn Center | 4 | 2 | 2 | 1 | 2 | 0 | 0 | 1 |
| ED Adult | 164 | 146 | 12 | 67 | 98 | 45 | 64 | 64 |
| IDU | 4 | 2 | 1 | 0 | 1 | 0 | 0 | 1 |
| Med/Onc | 5 | 4 | 0 | 3 | 4 | 1 | 1 | 1 |
| MICU So | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 |
| MICU W | 5 | 3 | 1 | 3 | 1 | 2 | 1 | 1 |
| Progressive | 17 | 16 | 2 | 9 | 8 | 8 | 8 | 8 |
| SICU | 6 | 6 | 2 | 2 | 5 | 2 | 2 | 2 |
| Surgical/Trauma | 6 | 5 | 2 | 3 | 4 | 0 | 0 | 3 |
| Total | 215 | 188 | 24 | 92 | 126 | 59 | 83 | 83 |

Over 200 IP or ED cases reviewed (Behavior Health was excluded from the data)

188 ordered as NoViolent

- 92 Aggressive
- 126 Agitated
- 59 SI/HI
- 83 AMA Hold
- 24 Soft Restraints prior

12 ordered as Violent.

- 20 Aggressive
- 19 Agitated
- 12 SI/HI
- 13 AMA Hold
- 1 Soft Restraints prior

- Low use of soft restraints prior to locked restraint placement
- High number of non-violent restraints ordered for 4-point locked restraints

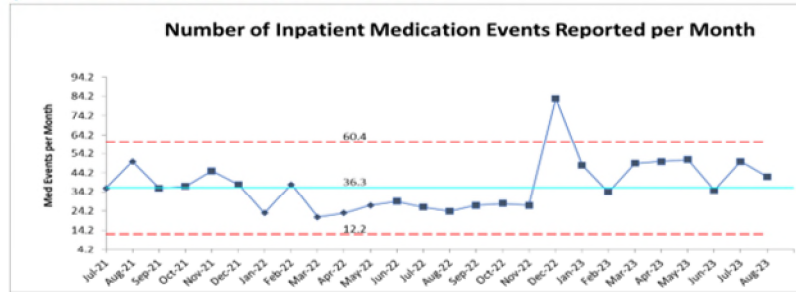
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- The slide presents a 4-point locked restraint review, examining factors like aggression, agitation, and suicide ideation. The AMA holds were placed for various reasons.
- A work group is being formed to review data and determine if softer restraints can be used before the 4 point locked restraints. This is a starting point for improvement.

Medication Safety

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Inpatient Medication Events



Analysis:

- Further drill down on subsequent slides.

Recommended Action:

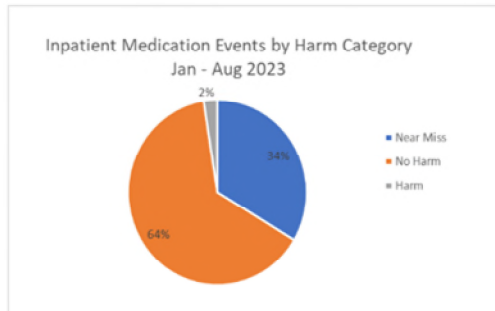
- Continue to track and trend. Identify OFIs as applicable and develop associated mitigating actions.

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- The slide displays continuous tracking and trending of inpatient medication events.

Inpatient Medication Events by Harm Category



Analysis:

July: 18 Near Miss, 26 No Harm, 1 Harm
 • Low Mag level, pt. didn't have IV access, delay in 2nd oral dose and repeat testing level until next day-pt. still low.

Aug: 18 Near Miss, 22 No Harm, 1 Harm
 • Pt. had an allergic/anaphylactic reaction in PACU to ibuprofen given Toradol. Drug list in pt.'s chart.

Recommended Action:

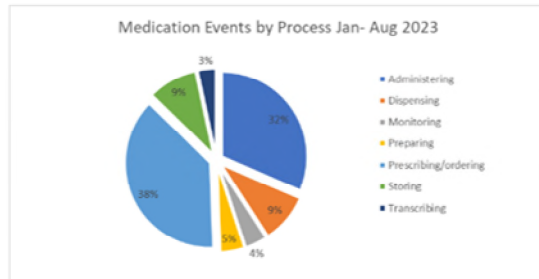
- Continue to track and trend.

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- The slide displays inpatient medication events by harm category, showing eighteen near misses, twenty no harm and one harm in July and eighteen near misses in August, with twenty-two no harm and one harm, continue to track and trend.

Inpatient Medication Events by Process



Analysis:

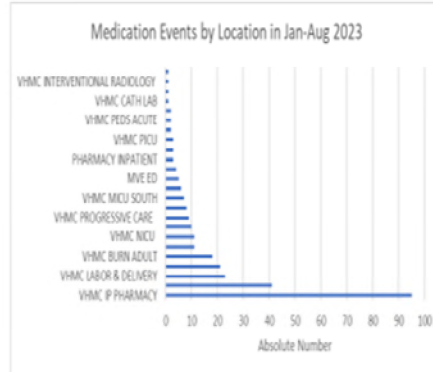
- Administration (38%) of errors and Prescribing/ordering (32%).
- Drill down further on next slide.

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- The slide outlines the process of inpatient medication events, focusing on administration of errors and prescribing orders as major issues.

Inpatient Medication Events by Location



Analysis:

- Largest number of medication events occur in Inpatient Pharmacy followed by Labor and Delivery.

Recommended Action:

- Alaris Pump Task Force met and working on review of library.
- Med Events-continue to meet and work on education and root cause for pharmacy-related issue.

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- The slide shows inpatient medication events by location, with the largest number occurring in Inpatient Pharmacy. The Alaris pump task force is reviewing the library and preparing to roll out new alert pumps in the next few weeks.

Glycemic Control

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Hypoglycemic Events (<70 mg/dL)

Pending Report Updates to align with CMS Severe Harm Criteria



Analysis:

- Data is showing normal variation.

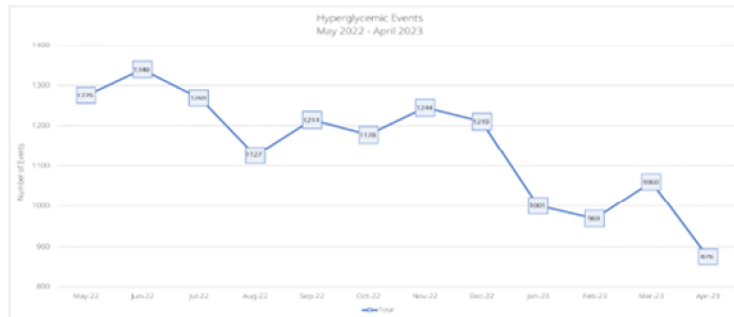
Action Plan:

- Glycemic Committee to identify champions to monitor trends in select units.
- New policy created for insulin pumps
- Reviewing NPO Guidelines for hospital
- Sliding Scale Insulin protocol merged and standardized across hospital.
- Reviewing membership to include varied departments in committee

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- The slide displays hyperglycemic events, which require updates to align with CMS severe harm criteria.

Hyperglycemic Events (>250 mg/dL)



Analysis:

- Decreased in number of hyperglycemic events during the last quarter.

Action Plan:

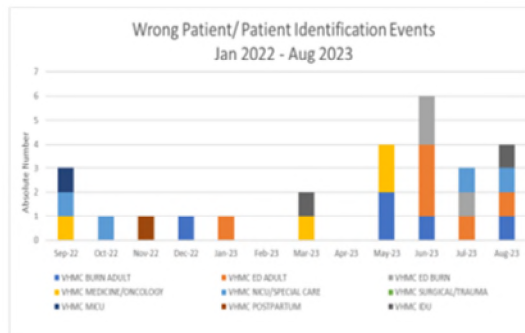
- Glycemic Committee to identify champions to monitor trends in select units.
- New policy created for insulin pumps
- Reviewing NPO Guidelines for hospital
- Sliding Scale Insulin protocol merged and standardized across hospital.
- Reviewing membership to include varied departments in committee

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- The slide displays hyperglycemic events, which require updates to align with CMS severe harm criteria.



Wrong Patient / Patient ID, Acute Medical Center



Analysis:

In July 2023:

- Adult ED Scanned wrong chart for POC glucose.
- BURN Center Photos uploaded to wrong chart.
- NICU Pyxis contained meds for PICU patient in bin for NICU pt.

In Aug 2023:

- NICU Scanned Mom's band for baby's POC glucose.
- PEDS Acute Nystatin order for Mom vs. sending order to retail pharmacy.
- ADULT ED EKG uploaded to wrong chart.
- BURN Adult Photos uploaded to wrong chart.

Action already in process:

- Action Plan in place for photos on wrong chart in Burn.

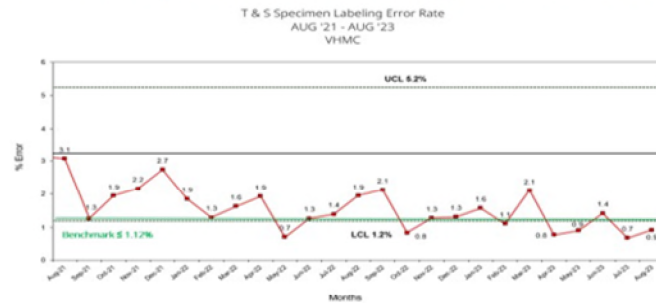
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- The slide shows incorrect patient IDs and incorrect EKG charts in an acute medical center. In August, a mom's band was scanned for a baby's glucose, but the Peds sent an order for the mom instead of the pharmacy. Burn Adult uploaded photos in the wrong chart, causing issues with the implementation of action items.



Blood Bank Specimen Labeling Cancelations



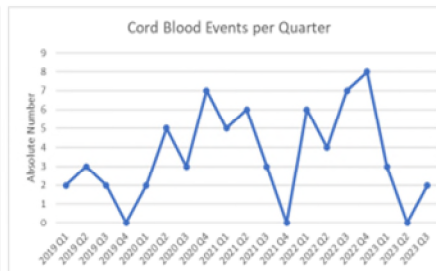
Analysis: Most common errors
Missing BB ID sticker, No BB ID Form, Missing
information on form, **Damaged/Unreadable barcode
label.**

Recommended Action:
• Track and trend.

71

- The slide displays blood bank specimen labeling cancelations below the benchmark in July and August.

Specimen Labeling Events



Analysis:
• Specimen Labeling events
• July =38, Aug = 41
• L&D Cord Blood labeling had 2 events last quarter.

Recommended Action:
Track and Trend

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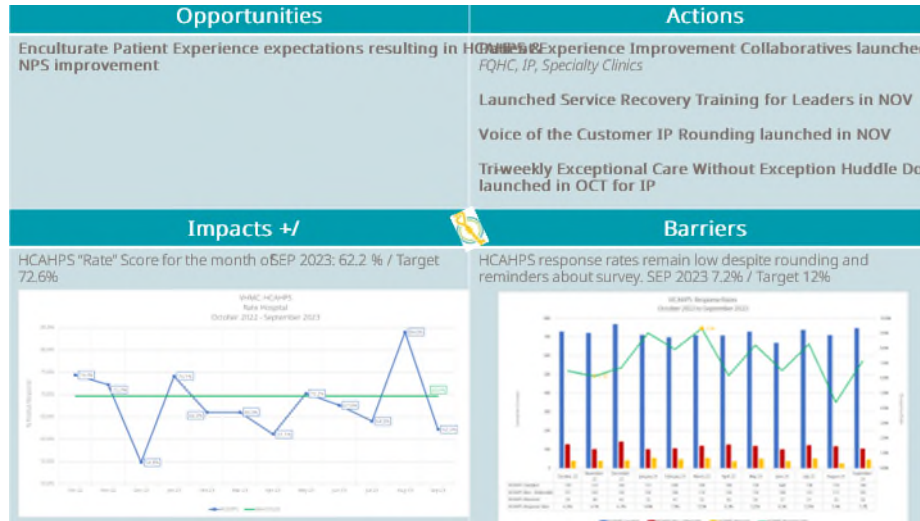
72

- The slide reveals a trend of increased specimen labeling events in Labor and Delivery, starting from 2 events and 0 events at the end of the fiscal year.

Infection Prevention & Control

- Infection Prevention & Control will not be presenting at this meeting

Patient Experience
(Monthly)



- The slide shows August's 84% rate, but a decline to 62%. The primary focus is to maintain the benchmark above it. The goal is 12% response rates, but not close. To improve, the company launched patient experience improvement collaboratives on October 3, focusing on FQHC, Inpatient, and specialty clinics.
- Service Recovery training was launched for leaders, and voice of the customer in patient rounding will continue every Wednesday morning.
- In October, a document called Exceptional Care without Exception was launched, discussing real situations and patient complaints issues to help move forward.

Sherrie Beardsley

Risk Department

- Risk Department will not be presenting at this meeting


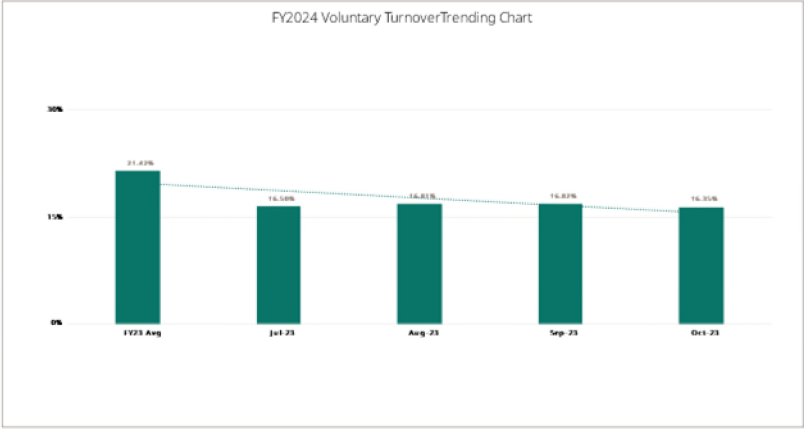
Dale Schultz

VPP/EOC/EH&W

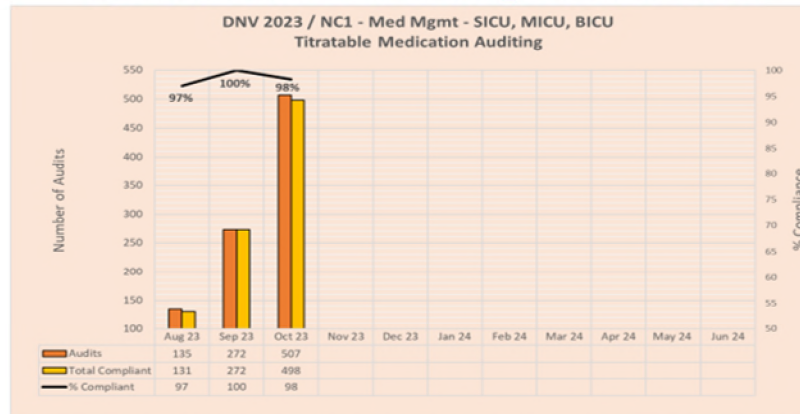
EOC/VPP

- We are submitting data and plan to conduct a survey in 2024, followed by the full accreditation survey.

Sherry Stotler

| | <ul style="list-style-type: none"> No changes with EOC. <p>Disaster Management</p> <ul style="list-style-type: none"> Last drill will be conducted this month and then we will meet all the requirement for regulatory bodies and will be kicking off in January. <p>EH&W</p> <ul style="list-style-type: none"> EHW has completed the flu vaccines for the month and is currently working on screenings and follow-up efforts. | | | | | | | | | | | | | |
|-----------------|--|-----------------------------|------------------------|----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|---------------|
| HR Updates |  <p>Human Resources</p> <p>© 2019 Valleywise Health. All rights reserved. Internal use.</p>  <p>FY2024 Voluntary Turnover Trending Chart</p> <table border="1"> <thead> <tr> <th>Month</th> <th>Voluntary Turnover (%)</th> </tr> </thead> <tbody> <tr> <td>FY23 Avg</td> <td>21.63%</td> </tr> <tr> <td>Jul 23</td> <td>16.56%</td> </tr> <tr> <td>Aug 23</td> <td>14.81%</td> </tr> <tr> <td>Sep 23</td> <td>15.83%</td> </tr> <tr> <td>Oct 23</td> <td>16.30%</td> </tr> </tbody> </table> <p>© 2019 Valleywise Health. All rights reserved. Internal use. 46</p> <ul style="list-style-type: none"> The slide shows a decrease in employee numbers from September to October, with 30 new hires this week, indicating ongoing HR and Operation Leadership initiatives. | Month | Voluntary Turnover (%) | FY23 Avg | 21.63% | Jul 23 | 16.56% | Aug 23 | 14.81% | Sep 23 | 15.83% | Oct 23 | 16.30% | Susan Willars |
| Month | Voluntary Turnover (%) | | | | | | | | | | | | | |
| FY23 Avg | 21.63% | | | | | | | | | | | | | |
| Jul 23 | 16.56% | | | | | | | | | | | | | |
| Aug 23 | 14.81% | | | | | | | | | | | | | |
| Sep 23 | 15.83% | | | | | | | | | | | | | |
| Oct 23 | 16.30% | | | | | | | | | | | | | |
| Trauma Services | <ul style="list-style-type: none"> Trauma Services will not be presenting at this meeting | Tina Sheppard/Gaby Iskander | | | | | | | | | | | | |

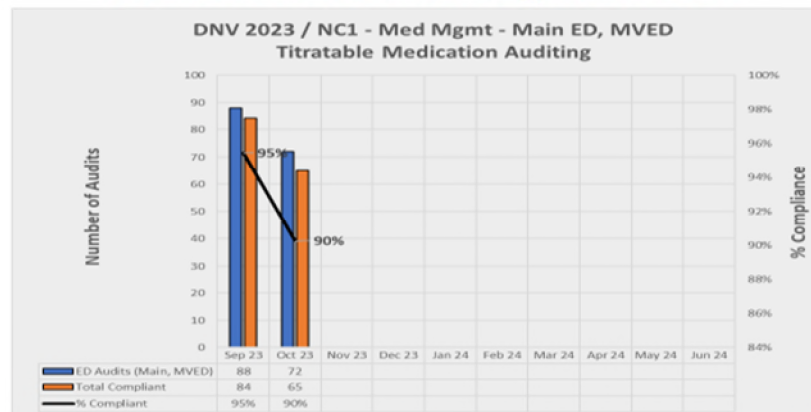
NC-1: Medication Management / ICUs



Nonconformity: Four (4) of four (4) medical records reviewed for titratable medications were not being administered as ordered by the provider.

- The slide demonstrates NC-1 Medication Management/ICUs, which was accepted by DNV, and the goal is to ensure compliance with established processes throughout the year.

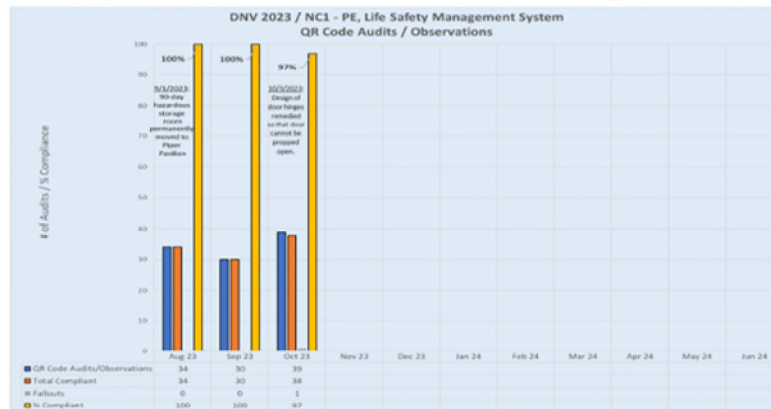
NC-1: Medication Management- EDs



Nonconformity: Four (4) of four (4) medical records reviewed for titratable medications were not being administered as ordered by the provider.

- The slide demonstrates a 90% reduction in NC-1 Medication Management – Ed’s, specifically Titratable medication, and calls for re-education to ensure everyone is on the same page.

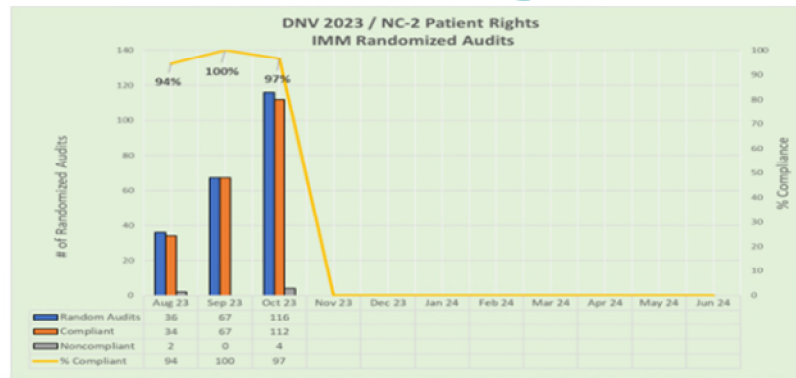
NC-1 Physical Environment, Life Safety Management



Nonconformity: During the Physical Environment/Life Safety tour with staff, the surveyor observed the door to the hazardous collection site being held open by an unapproved device that does not comply with NVPA 101 (2012).

- The slide shows a 97% hazardous collection site at the piper pavilion, with one incident due to an improperly opened door.

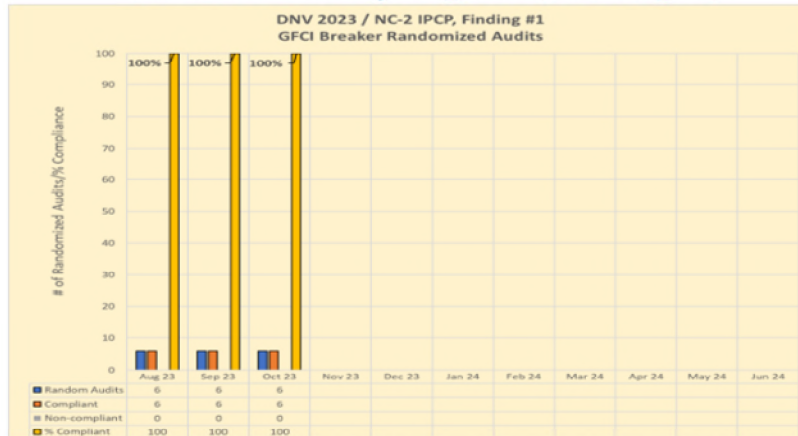
NC-2: Patient Rights



Nonconformity: Hospitals must deliver the first copy of the "Important message from Medicare" (IM) at or near admission, but no later than 2 calendar days following the date of the beneficiary's admission to the hospital.

- The slide highlights the NC-2 Patient Rights message from Medicare, which is rated at 97%.

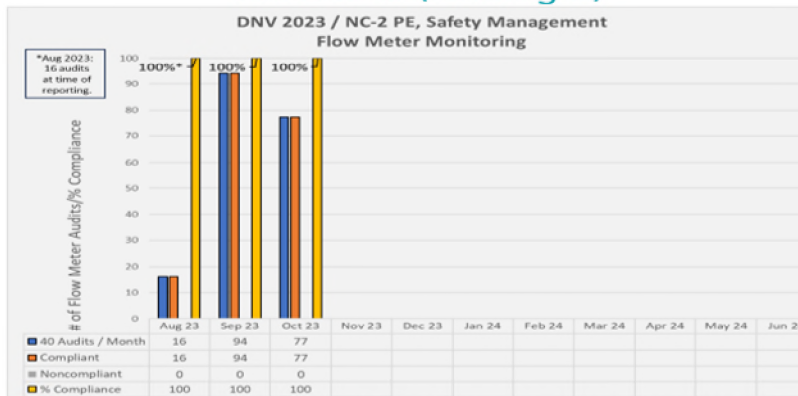
NC-2 PE Safety Mgmt. (Finding 1)



Nonconformity: Surveyor observed that a wet bath casting machine was not plugged into a GFCI receptacle.

- The slide displays a NC-2 Safety Mgmt. (Find 1) GFCI breaker randomized audit, which is at 100% compliance.

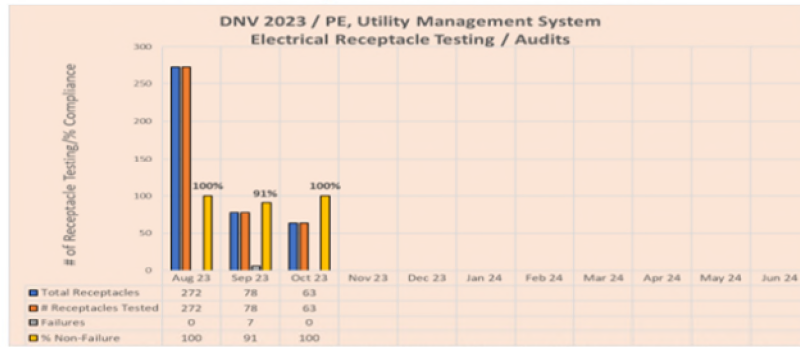
NC-2 IPCP(Finding 2)



Nonconformity: DNV identified that the green O2 nipple adaptors used to deliver oxygen to patients via Nasal cannula, nonrebreather, ventimask, and highflow concentration, were being cleaned with Super,Sani Cloth wipes between patients. There was no objective evidence the manufacturer's IFU was being followed.

- The NC-2 IPCP (Finding 2) flow meter monitoring is currently at 100%, as shown on the slide.

NC-2 Physical Environment



Nonconformities No objective evidence the hospital has conducted a risk assessment to determine the critical or non-critical category of all Hospital facility equipment (1), risk assessment of all facilities systems (2), testing of all electrical outlets in patient care areas (3). There was no refrigerant leak alarm sign placed outside the chiller room in Maryvale (4). Also noted was the annual calibration of the medical air compressor Carbon Monoxide monitor when the manufacturer's instructions recommend monthly calibration (5).⁸⁰

- The slide displays NC-2 Physical Environment electrical receptacle testing and annual calibration of the medical air compressor and carbon monoxide monitor, with a 100% calibration in October.

Action Plans for Serious Events

ADHS Plan of Correction

Incident and Audit

- APEX Lesson Care of the Patient to be completed by 9/22/2023**
 - As of 9/14/2023 73% of employees have completed APEX lesson
 - As of 9/25/2023 98% of employees have completed APEX lesson
 - As of 10/3/2023 99.6% of employees have completed APEX lesson
 - As of 10/27/2023 100% of employees have completed APEX lesson
- APEX Lesson Patient Rights and Responsibilities to be completed by 9/22/2023**
 - As of 10/27/2023 100% of employees have completed APEX lesson

- The slide displays the ADHS Plan of Correction for patient care and rights, ensuring 100% completion of all apex lessons due by September's end.

ADHS Plan of Correction

Incident and Audit:

- Team Steps to be completed by 12/30/2023
 - As of 9/11/2023 37 employees from Maryvale have signed up.
 - As of 9/16/2023 49 employees from Maryvale have signed up.
 - As of 9/13/2023 63 employees from Maryvale have signed up. (Getting list of the number of employees per department at Maryvale to be able to calculate % of completion)
 - As of 9/21/2023 66 out of 110 employees from Maryvale have signed up.
 - As of 10/5/2023 83 out of 110 (75%) employees from Maryvale have signed up and/or taken course.
 - As of 10/20/2023 84 out of 110 (76%) employees from Maryvale have taken course.
 - As of 10/27/2023 verifying specific employees who have taken and/or still need to sign up.
 - 11/7/2023 Spreadsheet sent to Leaders on who still needs to complete team
- CPI Training to be completed by 12/30/2023
 - As of 9/13/2023 6 employees from Maryvale has completed CPI.
 - As of 9/13/2023 4 employees have signed up.
 - As of 9/21/2023 60 out of 110 employees from Maryvale have signed up.
 - As of 10/5/2023 60 out of 110 (75%) employees from Maryvale have signed up and/or taken. (Security has received CPI training within the last two years, awaiting to verify training this would add 24 employees)
 - As of 10/20/2023 93 out of 110 (86%) employees from Maryvale have taken course.
 - As of 10/27/2023 verifying specific employees who have taken and/or still need to sign up.

83

- The slide outlines the ADHS plan for corrections on Team Steps and CPI training, with team steps in the 90s due by 12/31, and a spreadsheet sent to leaders.

ADHS Plan of Correction

Incident and Audit:

- CM/SW Daily Audit of Consults

| MV ED | Summary |
|---|---------|
| ADHHS RN/DCs | |
| Consult Summary | 108 |
| Consults completed | 66 |
| Cancelled during the discharge process but consult was completed before DC by CM or nursing | 42 |
| Total Consults | 108 |
| Total completed consults | 108% |
| Note: All consults were included from this date | |
| We are over 90% completed in being fully staffed | |

| MV ED CM CONSULT SUMMARY | Columns 1 |
|---|-----------|
| 9/5/23-9/13/2023 | |
| Consult Summary | 60 |
| CM/SW Consult Completed | 45 |
| Cancelled during the discharge process but consult was completed before DC by CM or nursing | 15 |
| Total Completed Consults | 100% |

| MV ED CONSULTS SUMMARY | SUMMARY |
|--------------------------|---------|
| WEEK of 10/17-10/24/2023 | |
| Consults | 46 |
| Completed | 46 |
| | 100% |

| WEEK 9/14-9/19 | CONSULTS |
|---|----------|
| Completed | 24 |
| Cancelled by completed by CM or RN at discharge | 23 |
| DME transferred to main not discharge-CM | 1 |
| Total | 48 |

Week of 10/11/23-10/17/2023

| | |
|------------------------------------|------|
| Cancelled by addressed prior to DC | 14 |
| Completed by CM/SW | 39 |
| Total | 53 |
| Compliance | 100% |

Week of 11/15-11/21

Consults=60
Completed 38
DC'd prior to consult being addressed ~2 (late consult patient already DC'd)
Comments: reminders are still needed for consult
We also are updated our pagers so when a consult is entered, we will be paged.

84

- The slide shows a 100% daily audit of consults by CM/SW, with milestones met, and will be continuously monitored to ensure proper execution.

| | | |
|--|--|--|
| | <p>Activities underway to continue to build a Culture of Sensitivity, Safety, and Caring</p> <ul style="list-style-type: none"> • STOP THE LINE Patient Safety written by CEO and distributed to all personnel across the organization • Huddles with focus on Exceptional Care Without Exception <ul style="list-style-type: none"> • Resolving concerns at the point of service • Culture of Safety and Just Culture action plans developed to focus on: <ul style="list-style-type: none"> • Reporting of Patient Safety Events, Response to Error, Handoff and Information Exchange, Communication Openness, and Communication About Error • Working on Culture Sensitivity training <ul style="list-style-type: none"> • Sent a few staff to Training being sponsored by Maricopa County • Just hired HR Director of Workforce Planning who has Diversity and Inclusion as part of her responsibilities <p><small>© 2019 Valleywise Health. All rights reserved. Internal use. 85</small></p> <ul style="list-style-type: none"> • The slide displays a completed Culture of Safety survey with action plans, emphasizing the importance of Stop the Line. Culture training is being developed, and staff attending some sessions with Maricopa County. | |
|--|--|--|

III. Unfinished Business

| | Topic | Findings/Discussion | Conclusion/Action | Responsible |
|---|-------|---------------------|-------------------|-------------|
| B | | | | |
| A | | | | |
| B | | | | |

IV. New Business

| | Topic | Findings/Discussion | Conclusion/Action | Responsible |
|---|-------|---------------------|-------------------|-------------|
| A | | | | |
| B | | | | |

V. Deferred

| | Topic | Findings/Discussion | Conclusion/Action | Responsible |
|---|-------|---------------------|-------------------|-------------|
| A | | | | |
| B | | | | |

VI. Adjourn

NEXT MEETING

Please use n/a if item does not apply.

| | Date | Time | Location | | |
|--|-----------------|-------------------|----------|--|--|
| | January 8, 2024 | 3:30 pm – 4:30 pm | WebEx | | |