

BOARD OF TRUSTEES -- OPEN SESSION AGENDA

November 20, 2020 @ 9:00 AM

https://hsc-unm.zoom.us/j/94167436939 / Passcode: 851498 1-669-900-6833 / 941 674 369 39#,,,,,,0#,,851498# US (San Jose) 1-253-215-8782 / 941 674 369 39#,,,,,0#,,851498# US (Tacoma)

- I. CALL TO ORDER Terry Horn, Chair, UNM Hospital Board of Trustees
- II. ANNOUNCEMENTS (Informational 5 Minutes)
 - · Welcome and Introduction of Dr. Doug Ziedonis Kate Becker, UNM Hospital Chief Executive Officer
- III. ADOPTION OF AGENDA (Approval/Action 5 Minutes)
- IV. CONSENT ITEMS Bonnie White, UNMH CFO (Approval/Action 5 Minutes)
 - Consent Item Colburn Hill \$14,250,000
 - Consent Item Telehealth Platform and Platform Software Support \$2,250,000
- V. PUBLIC INPUT (Informational)
- VI. APPROVAL OF THE MINUTES
 - September 25, 2020 UNMH Board of Trustees Meeting Minutes Mr. Terry Horn, Chair (Approval/Action 5 Minutes)
- VII. MISSION MOMENT COVID TEAM -- Mrs. Kate Becker, UNM Hospital CEO (Informational 10 Minutes)
- VIII. BOARD INITIATIVES
 - <u>Carrie Tingley Hospital (CTH)</u> Doris Tinagero, Executive Director CTH & Peds Ambulatory (Approval/Action 15 Minutes)
 - Second Term Assignments:
 - Margaret Armstrong (Healthcare Member)
 - Sandra Whisler (Healthcare Member)
 - Mary Blessing (Parent Member)
 - o Approval of Thomas Todd Trautwein as CTH Foundation Board Representative
 - CTH Advisory Board Bylaws
 - Executive Committee Recommendations for Chair, Co-Chair, and Secretary Mr. Terry Horn (Approval/Action 5 Minutes)
- IX. ADMINISTRATIVE REPORTS (Informational 15 Minutes)
 - Interim EVP Update Dr. Michael Richards
 - HSC Committee Update Dr. Michael Richards
 - <u>UNMH CEO Report</u> Mrs. Kate Becker
 - o Uptown Clinic Lease
 - <u>UNMH CMO Report</u> Dr. Irene Agostini
 - Chief of Staff Update Dr. Davin Quinn
- X. UNMH BOT COMMITTEE REPORTS (Informational 10 Minutes)
 - <u>Finance Committee</u> Mr. Terry Horn
 - <u>Audit & Compliance Committee</u> Mr. Terry Horn
 - Quality and Safety Committee Mr. Erik Lujan
 - Native American Services Committee Mr. Erik Lujan
 - Community Engagement Committee Mr. Joe Alarid
- XI. OTHER BUSINESS
 - Financials Mrs. Bonnie White, UNMH CFO (Informational 10 Minutes)
- XII. CLOSED SESSION: Vote to close the meeting and to proceed in Closed Session (Approval/Action Roll Call Vote)
 - a. Discussion of limited personnel matters pursuant to Section 10-15-1.H (2), NMSA pertaining to the appointment and reappointment of medical providers to the medical staff of UNM Hospital and expansion of medical staff privileges for certain UNM Hospital medical staff providers, including the discussion of matters deemed confidential under the New Mexico Review Organization Immunity Act, Sections 41-9-1E(7) and 41-9-5, NMSA.
 - b. After discussion and determination where appropriate, of limited personnel matters per Section 10-15-1.H (2); and discussion and determination, where appropriate of matters subject to the attorney-client privilege regarding pending or threatened litigation in which UNMH is or may become a participant, pursuant to Section 10-15-1.H (7); and discussion of matters involving strategic and long-range business plans or trade secrets of UNMH pursuant to Section 10-15-1.H (9), NMSA, the Board certified that no other items were discussed, nor were actions taken.
- XIII. Certification that only those matters described in Agenda Item IX were discussed in Closed Session; consideration of, and final action on the specific limited personnel matters discussed in Closed Session. (Approval/Action Roll Call Vote)
- XIV. Adjourn Meeting (Approval/Action)

Consent Item - Colburn Hill - \$14,250,000



UNM Hospital Board of Trustees Recommendation to HSC Committee November 2020

Approval

(1) Colburn Hill Group is a d/b/a for Advance Revenue Cycle, Inc.

Ownership: 10S180 Madison St. Burr Ridge, IL 60527 **Officers Information:**

Jeff Means, CEO

Source of Funds: UNM Hospital Operating Budget for UNMH and Cancer Center / Sandoval Regional Operating Budget for SRMC

Description: Request approval to purchase accounts receivables insurance follow up services ("AR Services") which includes, but is not limited to, the management of high volume, low dollar insured accounts receivables for facility and professional billing, collections, denials, account follow-up and account clean-up to ensure claims are paid. UNMH parties will place daily with the vendor accounts with insurance that are greater than 60 days from bill date and for UNMH are less than \$1,000, for CRTC are less than \$300, and for SRMC are less than \$500. Vendor will provide billing of secondary insurances. Vendor will work denials related to these small dollar claims. Payments will be made to the vendor on contingency based on collections made.

Process: Request for Proposal; RFP # P411-20

Previous Contract: nThrive Revenue Systems, LLC

Previous Term: For UNMH only, as per the Twenty-First Amendment to the Master Agreement, new term commenced October 1, 2019 for 12 months with a 12-month auto extension. SOW can be terminated with 120 days prior written notice following the initial 12 month term. For SRMC only, as per the Fourth Amendment to the Agreement, term commenced October 1, 2019 for 18 months with a 12-month auto extension.

Previous Contract Amount: UNMH: rate of 24.7% for all collections / SRMC: rate of 25.1% for all collections

Contract Term: Five (5) year term

Termination Provision: Either party may terminate this Agreement by delivering written notice to the other parry at least 30 day advance notice of proposed date of termination

Contract Amount: Rate of 15% for all collections. Estimated annual cost of \$2,850,000 based on prior year receivables; \$14,250,000 for the five year term. Additionally, Cancer Center has been added to the scope of accounts to be worked for UNMH. Contract reflects a rate reduction of 9.7% for UNMH and a rate reduction of 10.1% for SRMC.

Consent Item – Telehealth Platform and Platform Software Support - \$2,250,000



UNM Hospital Board of Trustees Recommendation to HSC Committee November 2020

Approval

Telehealth Platform and Platform Software Support

Requested action: As required by Section 7 of the Board or Regents Policy Manual, consent item approval is requested. For the project described below, UNM Hospitals requests the following actions, with action requested upon requisite sequential approval and recommendation by any and all committees and bodies:

- Board of Trustee Finance Committee approval of and recommendations of approval to the UNMH Board of Trustees.
- UNMH Board of Trustees approval of and recommendation of approval to the UNM Board of Regents HSC Committee.
- UNM Board of Regents HSC Committee approval and recommendations of approval to the UNM Board of Regents.
- UNM Board of Regents approval.

Source of Funds: UNM Hospitals Operating and Capital Budget

Description: Request a three (3) year contract with RFP awarded vendor for integrated telehealth delivery platform and software support, which includes Equipment, Software Licenses, Professional and Educational Services and Maintenance for the UNM Hospitals ("UNMH"). This system will support health delivery via telehealth to improve access to care for our patients and improved quality outcomes while ensuring the platform integrates with the current clinical systems and processes.

Process: RFP 421-20 TELEHEALTH PLATFORM AND PLATFORM SOFTWARE SUPPPORT

SERVICES

Previous Contract: None **Previous Term:** N/A

Previous Contract Amount: N/A

RFP Respondents: There were respondents to the RFP:

- 1. VeeMed
- 2. MDS Global
- 3. Teladoc
- 4. Acetiam Corp
- 5. NetMedical Xpress
- 6. Tiger Connect
- 7. Cerner
- 8. MD Live

Selection Criteria:

Selection was based upon highest scores for the following characteristics: Organization Experience, Quality and Stability, Technical Approach, Integration and Implementation Work Plan, Services, and Ongoing Support Model, IT Security Requirements, and Cost Proposal. Based upon above criteria, the RFP committee members are reviewing and scoring all vendors, completed vendor oral presentation, interview and product/software / service demonstration of written proposal submittals and will select via highest score the vendor that brought the best value to UNM Hospitals.

Total Cost: Estimated total cost per year \$750,000; total 3 year amount \$2,250,000

September 25, 2020 UNMH Board of Trustees Meeting Minutes



		Via Zoom Conference Call
Agenda Item	Subject/Discussion	Action/Responsible Person
Voting Members Present	Terry Horn, Jennifer Phillips, Joseph Alarid, Erik Lujan, Del Archuleta, Tamra Mason, Kurt Riley, Trey Hammond, Michael Brasher,	
Ex-Officio Members Present	Kate Becker, Michael Richards, Garnett Stokes, and Irene Agostini	
Staff Members Present	Martha McGrew, Kori Beech, Ryan Randall, Sara Frasch, Scot Sauder, Jessica Kelley, Kim Wagner, Rohini McKee, Melissa Romine, Davin Quinn, Doug Brooks, Arthur Culpepper, Meaghan Carey-Eiland, Doris Tinagero, Jennifer James, Alex Rankin, Bonnie White, Dawn Harrington, Patti Kelley, Rodney McNease, Kris Sanchez, Chamiza Pacheco de Alas, and Fontaine Whitney	
County Officials Present	Clay Campbell	
I. Call to Order	A quorum being established, Mr. Terry Horn, Chair, called the meeting to order at 9:02 AM	
II. Announcements	Mrs. Jennifer James stated that Mr. Scot Sauder, Legal, would be joining the Open and Closed Session and Mrs. Loretta Martinez, Legal, will be joining the Closed Session.	
	Mrs. Kate Becker introduced Dr. Rohini McKee, Chief Quality and Safety Officer, as of September 21 st to replace the position held by Dr. Richard Crowell after his retirement in August 2020. Dr. McKee attended medical school at The St. Johns National Academy of Health Sciences in India. She completed her general surgery residence and colorectal fellowship training at Brown University. She joined UNMH in 2011 in the Surgery Department. Dr. McKee will work as a DYAD Partner with Dr. Michael Chicarelli, UNMH COO. Dr. McKee gave a brief overview of her experience and expertise and appreciation of Mrs. Becker and her team. Dr. McKee said she was the Vice Chair of Quality and Safety for Surgery and worked closely alongside Dr. Crowell.	
III. Adoption of Agenda	Mr. Terry Horn, Chair, requested a motion to adopt the Agenda.	Dr. Tamra Mason made a motion to adopt the agenda. Mr. Joseph Alarid seconded the motion. Motion passed with no objections.
IV. Consent Items	Dr. Sara Frasch, UNM Hospital Chief Human Resource Officer, presented the below identified Consent Items (documents in BoardBook) for review and approval. Mr. Terry Horn, Chair, indicated the UNMH BOT Finance Committee discussed/reviewed the Resolutions in detail and recommend approval by the full UNMH Board of Trustees. After discussion, Chair Horn requested a motion to approve the Resolution Consent Items as listed below. • Consent Item – Resolution for 401(a) Allocation Plan Year 2019-2020	Mr. Erik Lujan made a motion to approve the Consent Items - Resolution for 401(a) and 415(m) as presented and discussed by Dr. Sara Frasch. Mr. Trey Hammond seconded the motion. Motion passed with no objections
	Consent Item – Resolution for 401(a) Allocation Plan Year 2019-2020 Consent Item – Resolution for 415(m) Allocation Plan Year 2019-2020	
	Mrs. Bonnie White, UNM Hospitals Chief Financial Officer, presented Consent Item – Kronos in the amount of \$6,983,759 (document in BoardBook) for review and approval. Mr. Terry Horn, Chair, indicated the UNMH BOT Finance Committee discussed/reviewed the Consent Item in detail and recommend approval by the full UNMH Board of Trustees. After discussion, Chair Horn requested a motion to approve the Consent Item listed below.	Dr. Tamra Mason made a motion to approve the Consent Item - Kronos as presented and discussed by Mrs. Bonnie White. Mr. Trey Hammond seconded the motion. Motion passed with no objections



motion to approve the as presented and unie White. Dr. Jennifer motion. Motion passed
motion to approve the pital Board of Trustees Del Archuleta seconded assed unanimously.
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based year, would	T. Terry Horn stated that the Executive Committee met and formalized its recommendation used on approval of reappointment to the following. Mr. Terry Horn remain Chair for one more ar, Mr. Del Archuleta to become Co-Chair, and Mr. Kurt Riley to become Secretary, which could allow sufficient time for Mr. Archuleta and Mr. Riley to become more familiar with UNM pospital prior to assuming the role of Chair and Co-Chair. Mr. Terry Horn requested a motion for	Mr. Trey Hammond made a motion to approve tabling the voting/approval of the Executive Committee Recommendations until the November meeting. Mr. Joseph Alarid seconded
the E. Hospi Dr. Sa Reso comp Team	e Executive Committee Recommendations voting/approval be tabled until the November UNM ospital Board of Trustees Meeting. Sara Frasch, Chief Human Resources Officer, presented the UNM Hospital's Human esources Update. Dr Frasch's report reviewed current employment numbers, benefits, impensation, employee communications/events, employee and labor relations, HR Access eam, Organizational and Professional Development, Talent Acquisition, and Taking Care of the ack during COVID (presentation BoardBook)	the motion. Motion passed unanimously.
IX. Administrative Reports Chan	nancellor for Health Sciences: Dr. Michael Richards' report is included in the BoardBook.	
HSC	SC Committee Update: Dr. Michael Richards' report is included in the BoardBook.	
UNM	NM Hospital CEO Update: Mrs. Kate Becker's report is included in the BoardBook.	
UNM	NM Hospital CMO Update: Dr. Agostini (report in BoardBook)	
Dr. Da annou	. Davin Quinn reported that at the Annual Medical Executive Committee Staff Meeting they will nounce a new Chief Staff.	
	T. Terry Horn, Chair, reporting the UNMH BOT Finance Committee received a status report on the w hospital tower project, which is on schedule and budget.	
	T. Terry Horn stated the UNMH BOT Audit and Compliance Committee met with KPMG to review dit findings and also received an IT update presentation.	
crede in the	r. Erik Lujan stated the UNMH BOT Quality and Safety Committee reviewed and approved edentialing, received a COVID-19 update and had a briefing on the UNM Medical Bylaws which are the process of being amended and will be brought back to the committee for review and approval a future date.	
comm	T. Erik Lujan stated the UNMH BOT Native American Services Committee welcomed two new mmittee members. They reviewed the 1952 Contract and background items at their meeting. The mmittee also discussed the upcoming October Annual Consultative Meeting.	
and n Mr. A	T. Joseph Alarid stated the UNMH BOT Community Engagement Committee went over the Charter d may have some amendments in the near future for review and approval at the full Board. T. Alarid thanked Kris Sanchez and Kim Wagner for their support. Mr. Terry Horn thanked T. Alarid for taking on the task of chairing this committee.	
XI. Other Business Mrs. I	rs. Bonnie White presented the Financial Update through August 2020 (report in BoardBook).	





		Via Zoom Conference Call
XII. Closed Session	At 11:06 AM Mr. Terry Horn, Chair, requested a motion to close the Open Session of the meeting and move into Closed Session.	Mr. Kurt Riley made a motion to close the Open Session and move to the Closed Session. Mr. Michael Brasher seconded the motion. Per Roll Call, the motion passed. Roll Call: Mr. Terry Horn – Yes Dr. Jennifer Phillips – Yes Mr. Joseph Alarid Yes Mr. Erik Lujan - Yes Mr. Del Archuleta – Yes Mr. Kurt Riley – Yes Dr. Tamra Mason – Yes Mr. Trey Hammond – Yes Mr. Michael Brasher Yes
XIII. Certification	After discussion and determination where appropriate, of limited personnel matters per Section 10-15-1.H (2); and discussion and determination, where appropriate of matters subject to the attorney-client privilege regarding pending or threatened litigation in which UNMH is or may become a participant, pursuant to Section 10-15-1.H (7); and discussion of matters involving strategic and long-range business plans or trade secrets of UNMH pursuant to Section 10-15-1.H (9), NMSA, the Board certified that no other items were discussed, nor were actions taken.	
Vote to Re-Open Meeting	At 1:11 PM Mr. Terry Horn, Chair, requested a roll call motion be made to close the Closed Session and return the meeting to the Open Session.	Dr. Tamra Mason made a motion to close the Closed Session and return to the Open Session. Mr. Michael Brasher seconded the motion. Per Roll Call, the motion passed. Roll Call: Mr. Terry Horn – Yes Dr. Jennifer Phillips – Yes Mr. Joseph Alarid Yes Mr. Erik Lujan - Yes Mr. Del Archuleta – Yes Mr. Kurt Riley – Yes Dr. Tamra Mason – Yes Mr. Michael Brasher Yes Mr. Trey Hammond – Not Present
	Mrs. Kate Becker, UNM Hospital CEO, provided a COVID-19 Update.	

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	 Mr. Terry Horn, Chair, requested the Board accept receipt of the following as presented in the Closed Session to acknowledge, for the record, that those minutes were, in fact, presented to, reviewed, and accepted by the Board. In addition, for the Board to accept the recommendations of those Committees as set forth in the minutes of those Committee's meetings and to ratify the actions taken in Closed Session. Medical Executive Committee June 17th, July 15th, and August 19, 2020 Meeting Minutes UNMH BOT Quality and Safety Committee June 19th, July 17th, and August 21, 2020 Meeting Minutes 	The Board of Trustees acknowledged receipt of the UNMH Committee Meeting Minutes.
	Mr. Terry Horn, Chair, requested the Board acknowledge approval of the Credentialing and the Clinical Privileges as presented and approved at the UNMH BOT Quality and Safety Committee Meetings of July, August and September 2020 and as reviewed by Dr. Davin Quinn, Chief of Staff, in today's Closed Session of the UNMH Board of Trustees Meeting.	The Board of Trustees acknowledged approval from the UNMH BOT Quality and Safety Committee's July, August, and September, 2020 Meetings of the Credentialing and Clinical Privileges as identified in Closed Session.
XIV. Adjournment	The next scheduled Board of Trustees Meeting will take place Friday, November 20, 2020 at 9:00 AM via Zoom Conference Call. There being no further business, Mr. Terry Horn, Chair, requested a motion to adjourn the meeting.	Mr. Joseph Alarid made a motion to adjourn the meeting. Mr. Kurt Riley seconded the motion. The motion passed unanimously. The meeting was adjourned at 1:13 PM.

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Mr. Joseph Alarid, Secretary UNM Hospitals Board of Trustees



Mission Moment

FRIDAY, NOVEMBER 20, 2020





COVID Team

- EOC Operational Period 260
- Flexing to find physical space, logistical support, and staffing for multiple additional beds
- Continuing committees and strategies for personal protective equipment, testing, and now vaccine distribution
- Supporting more than 7,000 employees in the most challenging healthcare environment of our lifetimes



Non-Clinical Support

- Sara Frasch Overseeing human resources, implementing salary structure and retirement plan improvements, and serving as the EOC Planning Section Chief for more than 200 days
- Bonnie White Overseeing financial operations, including preparing our feasibility study for HUD financing of the new hospital tower, managing the complexities of Covid accounting, and serving as the EOC Finance Section Chief
- Kris Sanchez Overseeing business development, our community health needs assessment, and Native American Health Services, and serving as the EOC Business Continuity lead



Clinical Support

- Patti Kelley and Dr. Irene Agostini Overseeing nursing and medical operations, serving as EOC Operations Section Chief and Medical Branch Director
- Kori Beech and Dr. Sireesha Koppula Overseeing ambulatory operations, implementing Huron outpatient access improvements and a conversion to virtual visits, serving on EOC Operations and Medical Branch
- Mike Chicarelli and Dr. Rohini McKee Overseeing quality and safety efforts, serving on EOC Operations and Medical Branch
- Dawn Harrington and Dr. Dusadee Sarangarm Overseeing IT, responding to cyberattacks, serving on EOC Logistics and Medical Branch



More Clinical Support

 Mike Chicarelli – Overseeing hospital operations, including logistics and supply chain, overseeing the construction of the new hospital tower, serving daily on the State Medical Advisory Team since March, supporting the opening of the Gibson facility



Carrie Tingley Hospital (CTH)



Memorandum

To:

UNM Hospitals Board of Trustees

From:

Carrie Tingley Hospital Advisory Board

Date:

October 7, 2020

Re:

September meeting action items

Below are the actions taken and approved by the Carrie Tingley Hospital Advisory Board in the regular September 28, 2020 board meeting.

Action Item One:

Second term assignments for the following:

- Margaret Armstrong as Healthcare Member
- Sandra Whisler as Healthcare Member
- Mary Blessing as Parent Member

Action Item Two:

Approval of nomination for Thomas Todd Trautwein, member of the Carrie Tingley Hospital Foundation Board, to serve as the Foundation representative.

Action Item Three:

Approval of the revised Carrie Tingley Hospital Advisory Board Bylaws.

We respectfully request approval of the above action items by the UNM Hospitals Board of Trustees.

Sincerely,

Doris Tinagero, DNP, RN, NEA-BC

Executive Director, CTH & Pediatric Ambulatory

CTH Advisory Board Ex-Officio

Attachments: Action Item Two – Letter of recommendation and resume for Thomas Todd Trautwein Action Item Three – Overview of changes and revised Bylaws

BOARD OF DIRECTORS EXECUTIVE COMMITTEE

Andres Sisneros

President

Todd Trautwein Vice President

Lori Steward Treasurer

Dan Westbrook Secretary

Erika Swan Past President

DIRECTORS

Allen Bassett

Buzz Biernacki

Justine Deshayes

Brent Franken

Stan E. Hubbard

Will Martinez

Tony Ramirez

Mario Sanchez

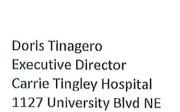
Paul Sanchez

Kevin Shannon

Ex-Officio

Doris Tinagero, RN, MSN

Executive Director Connie Chavez August 20, 2020



Albuquerque, NM 87106

Dear Doris,

The Carrie Tingley Hospital Foundation (CTHF) Board and Executive Director are recommending Todd Trautwein to be CTHF's representative on the CTH Advisory Board. I respectfully request that you present Todd's resume to the UNM Board of Regents for review and approval.

We are grateful to Todd for agreeing to have his name put forward as a candidate. Todd brings a wealth of knowledge, experience, and passion to our organization, and know he will bring the same energy and experience to the CTH Advisory Board.

If you need additional information, please do not hesitate to contact me via email at andres@sisnerosbros.com or by phone at (505) 859-9811. You may also reach CTHF Executive Director, Connie Chavez at (505) 321-2844 or via email at cchavez@cthf.net.

Sincerely,

Andres Sisneros Board President

Carrie Tingley Hospital Foundation

Carrie Tingley Hospital Foundation is a 501(c)3 nonprofit organization. EIN 85-6012236

Thomas Todd Trautwein

OBJECTIVE

A MBA level leadership position to provide overall direction to make gainful contribution toward achieving the mission and vision of your organization.

EDUCATION

Master of Business Administration, GPA 3.94, [July 2005] University of New Mexico/ Albuquerque, New Mexico Bachelor of Arts in Biology and Psychology, [1991] University of California/ Santa Cruz, California

PROFILE

Creation and oversight of multimillion dollar budgets

Strategic positioning of departments to make meaningful contributions to organizations

Director level leader over Revenue/Financial operations and Clinical operations

Compliance and Regulatory oversight over medical billing operations including Sarbanes Oxley controls

Management over joint venture vendor contracts

Process optimization leading to improved operations, improved revenue

Seasoned leadership over 100 staff including up to 6 managers/supervisors

Seasoned working relationship with C – Suite leaders

Sophisticated analysis of relative data to aid in strategic decision making.

PROFESSIONAL EXPERIENCE.

Intermountain Healthcare of Nevada, Las Vegas NV [March 2017 - Present] Director of Revenue Cycle Management

Reporting to the Market COO and Market President, coordinate all functions of market's \$110-million-dollar central billing office department of over 100 employees. Oversight over benefit and eligibility functions, service coding, claim submission, payment posting, denials management and resolution, and payer interactions, of multispecialty medical practice, including PCP, Pediatrics, OB, Anesthesia, Cardiology, Oncology, Endocrinology and Urgent Care. Responsible for the leadership and the direction of the department, evaluating cost savings opportunities, vendor management and joint ventures with internal and external customers. Responsible for exceeding company set KPI metrics and correcting areas that fall short. Responsible for oversight of compliance programs including maintenance of Sarbanes-Oxley financial controls. **Key Success**

- - o Data Integrity, led initiative to validate billing and financial data, leading to increase accuracy of A/R reporting and increased allocation accuracy
 - Fine tune Denials reporting leading to actionable clinical activities. Led to reduction of overall denial rate from 15% to 9% and increase use of metrics by clinical operations
 - Successful outsourcing of benefit and eligibility functions leading to cost savings of over 800K over one year (projected).
 - Partner with Clinical Operations to deliver a Point of Service initative, leading to better cash collections, increased compliance with payment of patient balances and increased compliance with co-payments and co-insurance resulting in an increase of 20% cash collected.
 - Successful participation in National initiatives with Revenue Cycle projects, Research projects, Coding projects.
 - Active engagement with payers to resolve billing issues, comply with data requirements, contract oversight.

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Successful integration of second billing department through acquisition.

New Mexico Heart Institute, Albuquerque NM [Nov 2015 - March 2016] Service Line Director MSA, (lay off, completed work)

Reporting to the COO, act as liaison between NMHI and Lovelace Health System, and to facilitate the functions of a formal Management Service Agreement. Oversight of contract incentive metrics including development and execution of action plans to meet stated goals. Manages all aspects of the company's service contract functions, Prepares proposals, negotiates contracts and ensures that the company fulfills all obligations and conditions of the management contract. Familiar with a variety of healthcare industry's concepts, practices, and procedures. Relies on extensive experience and judgment to plan and accomplish goals. Performs a variety of tasks, to ensure success of both NMHI as well as key business partners.

Key Successes

- o Implemented process to ensure timely documentation and billing of claims
- o Implemented a data review process and appeal function to insure data integrity
- o Standardized process for onsite / hands on physician training.

Presbyterian Healthcare Services, Albuquerque, NM [Dec 2013 - Jan 2015] Director PMG Practice Operations - Heart Group (Completed assigned work)

Matrix model reporting to COO and Service line Administrator, responsible for assisting with the analysis, planning, implementation and evaluation of new business models and processes involved in clinic operations in the Presbyterian Health Services system. Responsible for leading and participating in cross functional, strategic, tactical and performance improvement planning. Oversees implementation and ongoing measures of the same improvement plans. Provide support to the Service Line operation model. Oversee a clinic staff of over 120, provide support to over 23 practicing Cardiologists, Interventional Cardiologists, Thoracic and Vascular Surgeons and Mid - Level Practitioners. Creating and maintaining operational budgets. Key Successes:

- - o Implemented clinic structure that increase patient access by 25%
 - Settlements of A/P accounts at 50% discount
 - Physician Manpower assessment and retirement succession plan

Steward Health System. Boston, MA, [Jan 2013 - June 2013] Corporate Director - Revenue Management, Denials Management

Reporting to the VP of Revenue Operations provided overall direction and leadership for denial management and prevention of 10 hospital system, seeking to address current denials and implement sustainable programs to prevent denials. Served as direct liaison between central business office, corporate headquarters and hospital leaders. Directed all RAC activities and Audit and Appeal functions, including vendor management. Directed and published all denial related metrics for the organization.

- Key Successes:
 - Improvements in data integrity, leading to elimination of reporting of false denials, this lead to overall reduction of 4% of overall denials
 - Through data analysis and operational root cause analysis, developed pilot to reduce/eliminate level of service denials, projected 3% reduction in level of care denials, reduction in RAC exposure, increased compliance with billing regulations.

Albuquerque Health Partners LLC. Albuquerque, NM, [March 2009 - Dec 2012] **Director Revenue Cycle**

Reporting to the CFO, responsible for the improvement of key revenue cycle performance indicators and improving cash collection by of a 300+ provider multi-specialty physician owned practice by: improving the clean

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claim rate, increasing gross collection rate, improving bad debt ratio, reducing days in Accounts receivable, improving data entry and edit resolution lags, reducing accounts receivable greater than 90 days, identify and resolve unbilled claims and reduce denials from payers. Maintain and foster strong relationships with third party billers and adhere to vendor service level agreements. Recommendation and implementation of processes that support the strategic initiatives of ABQ HP which include improvement of patient satisfaction, implementation of Electronic Medical Record, improve physician and midlevel productivity and coding, and maximize revenue. Perform complex and comprehensive financial and operating analysis to be used directly in senior management decision making, and providing appropriate recommendations and conclusions. Participation in strategic planning process for new lines of business. Develops, implements, directs and evaluates revenue cycle practices, providing direction for improvement and coordination in the formulation, interpretation, and administration of current and long range policies, procedures and programs. Development or revenue cycle goals for clinical services and track progress against goal. Interact with clinical operations concerning revenue cycle activities and strategies. Creation and maintenance of multimillion dollar operational budget, including weekly budget variance reporting to Chief Financial Officer.

Key Successes:

- Outsourcing of multimillion dollar Bad Debt accounts and oversees vendor management of Extended Business Office and Bad Debt collections, monitored and developed performance metrics of over 5M of AR accounts, leading to increased recovery rates of over 14% (2009) and 8.5% (2010.)
- Implemented revised time of service collection process resulting in excess of 2 Million of self-pay balances collected an increase of over 20% in one year.

 Redesigned billing statements following patient friendly billing principals in concert with the creation of in-house self-pay follow up team, successfully collected over 1.5 M dollars in 2010
- Worked closely with business units to increase efficiencies within their operations from increasing accuracy of charge capture to decrease 'wasteful' work involved in patient access of services leading to first pay rate of over 94% and Gross collection Rate of 53.6%
- Negotiation of acquisition of Customer Service Center, and Credit Balance Resolution team from fortune 500 company.
- Developed and participated in ongoing joint operation meeting with payers to quickly identify and resolve billing issues. Adapt at working with multidiscipline groups of professional to achieve overall success of organizational goals.
- Leveraged GE Centricity Business for trending analysis and workflow optimization.

University of New Mexico Health Science Center/ Albuquerque, New Mexico. March 1993 - March 2008

Financial Analyst – Revenue Initiatives, Financial Planning and Analysis, [Feb 2007 – March 2009] With central focus on Revenue Cycle Initiatives, provide overall project management to identified opportunities that will have positive financial results for the organization. Prepares, compiles, analysis and reports financial data of clinical operations using multiple database sources. Links financial performance with clinical processes, provides financial analysis and long term projections, using ratio, graphic and profitability reviews. Provide recommendations to senior management.

Key Successes:

- o Introduction and implementation of new technologies to better manage communications from payer, reduced appeal turnaround time from 3 months to 2 weeks, increased compliance with timely claim filing.
- Full reengineering of patient admission process resulted in recovery of 1.3 Million dollars in lost patient days. Was awarded project of year (2008).

Senior Consultant – Customer Service / Process Improvement, [Sept 2005 – Feb 2007.] Provide overall coordination and implementation of the Hospitals customer/patient/employee and physician satisfaction programs, in effort to build customer service as a source of competitive advantage. Consult with all levels of management and leadership within the organization. Research, design and implement best practice process throughout the organization. Administer satisfaction measurements with a detail and focus on protecting the integrity of the data gathered and the confidentiality of the participants. Market best practices and facilitate customer focused approach in patient areas. Upon request, investigate, map, analyze, and recommend improvements to senior leadership. Utilization of Quality/Process Improvement methodologies, such as Lean, Six Sigma, PDSA, with ultimate goal of improving quality care for customers. Investigate Cash cycles, and Patient through- put times to

recover lost revenue by elimination of idle and wasteful time/work. Business Development and Implementation through exploration of new business practices in Academic Hospital settings. Experienced in delivering multimedia presentations. Ability to work with wide range of professionals from all aspects of healthcare toward the achievement of organizational goals.

Key Successes:

Press Ganey satisfaction score increase of 4 points, significant at the alpha .99 level. Successful in gaining
a customer focused orientation from multidiscipline throughout an academic hospital setting. Adept in
translating statistical data into clear messages, and helpful tools toward process change.

Manager, Residential Treatment [Feb 1998 – Sept 2005]

Developed Community based treatment program to assist teenagers and their families with psychological problems. Oversee fiscal responsibilities of a 10 bed multidisciplinary unit, supervised 12 staff and coordinated efforts of a multi-specialty treatment team. Provided Leadership through organizational redesign focusing on employee involvement and employee ownership of assignments. Managed Information and Services using Continuous Quality Improvement protocols. Interfaced successfully with federal and state regulatory agencies, CYFD, Joint Commission. Successfully developed, trained and supervised, treatment teams with the goal of delivering excellent service. Increased efficiency of admission process. Development of Certification program for child care workers. Developed and Researched Milieu and Individual Acuity with the UNM department of Psychiatry and presented at the 2001 American Psychological Association national conference.

Key Successes:

- Through detailed analysis of organizational and financial processes able to recover over \$100,000 per year in lost revenue.
- o Unit occupancy rates in excess of 90%.
- Ability to negotiate and find creative solutions to meet the demanding needs of healthcare delivery team and aligning this with the needs of the client, this reduced client length of stay from 120 days down to 60 days

Program Coordinator / Recreation Therapist [July 1994 - Sept 1998]

Facilitated and Supervised staff in providing Experiential, Recreational, and Leisure Therapy, including High Ropes Course initiatives. Provided team building hospital units to increase job satisfaction and productivity. Planned, organized and implemented special events, in conjunction with city businesses and community organizations. Developed leadership seminar for Anderson Schools of Management, UNM. Lead Department trough Joint Commission surveys and State Certification processes.

Evening Supervisor [March 1993 – July 1994]

Development of evening programs. Maintained consistency of milieu. Fostered teamwork in workplace. Staff development, and direct Supervisor of 8 staff mental health associates and mental health technicians and coordinated with clinical staff. Relief administrative center wide supervisor over six units.

Emergency Room Technician/Mental Health Worker [June 1990 - Jan 1993]

Dominican Santa Cruz Hospital, Santa Cruz, CA

Provided direct patient care with Emergency Room and Psychiatric units under direction of charge RN. Maintained par levels of supplies, Maintained proper documentation of patient charts, logs and check sheets.

Professional and Volunteer Affiliations

Member of Board of Directors, Carrie Tingly Hospital Foundation Member of HFMA professional organization Member of MGMA professional organization Member and Coach of AYSO Challenge United Soccer Club



BYLAWS OF THE ADVISORY BOARD Overview of changes from 2014 to 2020 Bylaws 09-28-2020

Preamble

No Changes

Article One

No Changes

Article Two

• Section 4- Reports to UNMH BOT: frequency of presenting to the UNMH Board of Trustees was changed from quarterly to annually since Advisory written reports are made available to the BOT's bimonthly.

Article Three

No Changes

Article Four

No Changes

Article Five

No Changes

Article Six

No Changes

Article Seven

No Changes

Officers' Certificate

Updated with current year and CTH Advisory Board Chairperson

UNM CARRIE TINGLEY HOSPITAL

AMENDED AND RESTATED BYLAWS OF THE ADVISORY BOARD

PREAMBLE

UNM Carrie Tingley Hospital ("CTH") is established as a state institution by Article XIV, Section 1 of the New Mexico Constitution. The Regents of the University of New Mexico (the "Regents" or the "University") are authorized by statute to administer CTH, and to manage, control and govern CTH under rules, regulations or other directives and policies as the Regents may from time to time prescribe, including the full power to enter into contracts or other agreements as the Regents deem necessary or desirable for the operation and management of CTH. Sections 23-2-1 *et seq.* NMSA 1978, as amended. The statutes also require the Regents to appoint and consult with an advisory board consisting of at least three parents of children with a chronic impairment and two health professionals. Section 23-2-2 NMSA 1978, as amended.

Under the terms of a lease agreement (the "Lease Agreement") with an effective date of July 1, 1999, between the Regents and the County Commissioners of the County of Bernalillo for operation by the Regents of University of New Mexico Hospital and the UNM Mental Health Center, and pursuant to Regents' Policy Manual Section 3.4 Health Sciences Center and Services, the Regents operate all the clinical facilities of the University's Health Sciences Center (the "HSC Clinical Facilities") as an integrated healthcare delivery system. The HSC Clinical Facilities include CTH and all other hospitals and outpatient clinical facilities operated by the HSC ("HSC Clinical Facilities"). Regents' Policy Manual Section 3.4 Health Sciences Center and Services provides for the delegation of certain powers and authority by the Regents to UNM Hospitals Board of Trustees ("UNMH BOT"). The powers and authorities delegated to

the UNMH BOT include, among other powers, (i) coordination with and oversight of any advisory/advocacy boards of the UNM Hospitals for other than research and education purposes, (ii) establishment of reporting mechanisms between those advisory/advocacy boards and the UNMH BOT, and (iii) review of the bylaws of those advisory/advocacy boards, recommendation for approvals, and submission of the bylaws of those advisory/advocacy boards to the Regents for review and approval in accordance with Regents' policy.

The UNM Hospitals, including CTH, are accredited on a system wide basis by The Joint Commission ("TJC") and have a single unified Medical Staff. All Medical Staff members are subject to credentialing, privileging, peer review and other quality assurance provisions of the Medical Staff Bylaws and Rules and Regulations and applicable Regents' policies, and are required to have appointments in the University's School of Medicine.

Day-to-day administration of CTH is conducted by an Executive Director, who reports to the Chief Nursing Officer of UNM Hospitals (who, in turn, reports to the Chief Executive Officer of UNM Hospitals). The Executive Director is responsible for the direction, coordination and day-to-day management of CTH, and for administering and managing all clinical operations of CTH in support of delivery of health care at CTH. The Executive Director is appointed by, and may be removed by, the Chief Executive Officer of UNM Hospitals as designee of the Chancellor for Health Sciences, pursuant to Regents' Policy Manual Section 3.4 Health Sciences Center and Services.

The CTH Medical Director is responsible for medical affairs of CTH and for ensuring Medical Staff compliance at CTH with the UNMH Medical Staff Bylaws, Rules and Regulations and applicable and applicable Regents' Policies, University Business Policies and Procedures, HSC and UNM Hospitals policies and procedures. The UNMH Chief Medical Officer will appoint the CTH Medical Director after consulting with the

Chairpersons of the Department of Orthopaedics and the Department of Pediatrics. The CTH Medical Director will report to the UNMH Chief Medical Officer, or designee.

The Advisory Board, duly appointed by the Regents, hereby adopts these Bylaws of the Advisory Board, consistent with applicable Regents' policies, subject to approval by the UNMH BOT and the Regents, and effective on the date of approval of these Bylaws by the Regents.

ARTICLE ONE

NAME

The name of this body is the Advisory Board of Carrie Tingley Hospital (the "Advisory Board").

ARTICLE TWO

PURPOSE AND AUTHORITY

Section I. Authority. The Advisory Board is authorized to govern itself in accordance with reasonable Bylaws to be adopted by the Advisory Board, and approved by the UNMH BOT and the Regents, and will have all powers reasonably necessary to carry out its express responsibilities. Consistent with constitutional and statutory responsibilities of the Regents, the right is reserved unto the Regents to consider and determine, if in the exercise of sound discretion, it is deemed necessary, any matter relating to CTH. The Advisory Board will exercise its authority consistent with:

- a. Applicable state and federal laws and regulations;
- b. Applicable standards of TJC, CMS Conditions of Participation, the

Liaison Committee for Medical Education of the American Medical
Association and the American Association of Medical Colleges for so long

as resources are reasonably available to make compliance with such standards possible;

- c. The Regents' Delegation, as set forth in Exhibit A to the UNMH BOT Bylaws, as such delegation may be amended and/or restated from time to time;
- d. Applicable policies and other determinations of the UNMH BOT and the Regents, as they may be amended and supplemented from time to time;
- e. The Medical Staff Bylaws, Rules and Regulations.
- f. Applicable policies of the HSC; and
- g. Operational policies specific to CTH as authorized by the Chief Executive Officer of UNM Hospitals.

Section 2. Purpose. The purposes of the Advisory Board are to:

- a. Articulate the uniqueness and value of CTH to the HSC, the University, the community and the state.
- b. Advise the CTH administrative staff regarding such issues as strategic planning, financial management, service delivery, and quality of care, related to the CTH as articulated in the CTH mission statement, and consistent with the articulated HSC mission statement, to ensure that the philosophy of care espoused by CTH and the HSC is achieved.
 - c. Advocate in the best interests of families served statewide by CTH.

Section 3. Conflict of Interest. No member of the Advisory Board will use his or her position on the Advisory Board for the purpose of obtaining undue advantage or personal advantage for the Advisory Board member or for any person or organization in or with which the Advisory Board member is interested or associated. Advisory Board

members will exercise their best judgment for and on behalf of the UNM Hospital, to the exclusion of any personal interest.

Section 4. Reports to UNMH BOT. Representatives of the Advisory Board designated by the Chairperson will make reports to the UNMH BOT at least annually regarding matters of concern to the Advisory Board within its scope of responsibility. In addition, the Advisory Board will provide minutes of its meetings to the UNMH BOT.

ARTICLE THREE MEMBERSHIP AND APPOINTMENTS

Section I. Appointment. The Advisory Board is composed of up to nine (9) members, at least three of whom are parents of children with disabilities and/or special chronic health care needs and at least two of whom are health professionals. One (1) exofficio member shall be a member of the Regents and one (1) member shall be a member of the UNM Carrie Tingley Hospital Foundation Board of Directors appointed by the Board of Regents. All members of the Advisory Board are appointed, and may be removed, by the Regents with cause or as provided in Section 5 of this Article.

Advisory Board members will be appointed for staggered terms of three years or less, and will be appointed in such a manner that the terms of not more than three members expire on June 30 of each year. Advisory Board members who have served one full three-year term may be reappointed for not more than one additional consecutive three-year term. Each member of the Advisory Board will serve until his or her successor is duly appointed and qualified. Vacancies on the Advisory Board will be filled by appointment by the Regents, upon recommendation of the UNMH BOT. A person appointed to fill a vacancy on the Advisory Board will serve for the remainder of the term of the Advisory Board member whose position has become vacant and until his or her successor is duly appointed and qualified.

Section 2. Ex-Officio Members. The CTH Medical Director, the CTH Executive Director, the Executive Medical Director of UNM Children's Hospital, the

Chief Executive Officer of UNM Hospitals, and the Chair of the Department of Pediatrics of UNM Hospitals will serve as ex-officio members of the Advisory Board without vote.

Section 3. Meetings. The Advisory Board will meet at least quarterly at the time and place established by the Advisory Board for regular meetings. Special meetings may be called by the Chairperson of the Advisory Board or at the request of a majority of the Advisory Board members then in office, upon written notice of the time, date, place and purpose of the meeting, delivered to the Advisory Board members at least three business days in advance of the meeting. Meetings will be publicized, conducted, and documented by minutes in compliance with the New Mexico Open Meetings Act, Sections 10-15-1 *et seq.* NMSA (the "Open Meetings Act"), and consistent with an annual resolution adopted by the Advisory Board pursuant to the Open Meetings Act.

Section 4. Attendance and Removal. Advisory Board members are expected to attend regularly all meetings of the Advisory Board and of their respective assigned committees. If an Advisory Board member has three consecutive unexcused absences, the Advisory Board will recommend in writing the removal of that Advisory Board member to the Regents, and will so notify the Advisory Board member.

Section 5. Quorum, Voting. A majority of the members of the Advisory Board then in office will constitute a quorum at Advisory Board meetings. A quorum once attained continues until adjournment despite voluntary withdrawal of enough Advisory Board members to leave less than a quorum. The Advisory Board members may act only as an Advisory Board with each member having one vote. The act of a majority of the Advisory Board members present at a meeting at which a quorum is present will be the act of the Advisory Board.

Section 6. Orientation. All new Advisory Board members will receive an initial orientation to CTH, and will be provided additional educational programs on the operation of CTH by the Administrator, the Medical Director, and other CTH staff, as indicated.

Section 7. Performance. The Advisory Board will periodically evaluate its performance and provide a report on its evaluation to the UNMH BOT, who will, in turn, report the same to the Regents.

ARTICLE FOUR

OFFICERS

Section 1. Number, Tenure, Qualification, Election. The Officers of the Advisory Board will be a Chairperson, a Vice Chairperson, and a Secretary, who will be elected annually by the Advisory Board at the regular meeting in July of each year, to begin their term of office upon election and to serve until their successors are elected and qualified. Vacancies will be filled by the Advisory Board. Officers may serve no more than three (3) terms in succession.

Section 2. Chairperson. The Chairperson will preside at all meetings of the Advisory Board. With the approval of the Advisory Board by a majority vote of a quorum of those members present at a meeting, the Chairperson will have the power to appoint committees and committee chairpersons of the Advisory Board as necessary and appropriate. The Chairperson will represent the Advisory Board in its relations with officials of CTH and the HSC, the UNMH BOT, and with governmental and civic organizations and agencies.

Section 3. Vice Chairperson. The Vice Chairperson will serve in the absence of the Chairperson and perform other duties as assigned by the Chairperson.

Section 4. Secretary. The Secretary will supervise the recording of minutes and perform other duties as assigned by the Chairperson.

ARTICLE FIVE

COMMITTEES

Section 1. Ad Hoc Committees. With the approval of the Advisory Board by a majority vote of a quorum of those members present at a meeting, the Chairperson will have the power to appoint members and chairpersons of ad hoc committees of the Advisory Board as necessary and appropriate, at any time for special purposes, including, but not limited to, committees to evaluate the performance of the Advisory Board and to evaluate and resolve conflict of interest issues.

ARTICLE SIX

TELEPHONIC PARTICIPATION AT MEETINGS

Members of the Advisory Board or any committee designated by the Advisory Board may participate in a meeting of the Advisory Board or committee by means of a conference phone or similar communications equipment by means of which all persons participating in the meeting can hear each other at the same time, and participation by such means will constitute presence in person at the meeting.

ARTICLE SEVEN

ADOPTION; AMENDMENT

Section I. Adoption. These Bylaws will become effective upon approval of a majority of the members then in office of the Advisory Board, the UNMH BOT, and the Regents.

Section 2. Amendments. These Bylaws may be altered, amended, or repealed or new Bylaws may be adopted by an affirmative vote of a majority of the members of the Advisory Board then in office, provided that notice of such alteration, amendment or

repeal is included in the notice of such meeting. Any proposed repeal, amendment or alteration will not become effective until approval by the UNMH BOT and the Regents.

Section 3. Review. These Bylaws will be reviewed by the Advisory Board at least three years from the date of enactment or revision.

OFFICERS' CERTIFICATE

the undersigned Officers of the Advi	sory Board certify that these Bylaws of the
Advisory Board were adopted by the affirma	tive vote of a majority of the Advisory
Board at a meeting held on	, 2020, at which a quorum was present, and
were approved by affirmative vote of a major	rity of the UNMH BOT at a meeting held on
, 2020, at which a quorum wa	as present, and by affirmative vote of a
majority of the Regents at a meeting held on	, 2020, at which a quorum
was present.	
	Ву:
	Mary Blessing
	CHAIRPERSON

Interim EVP Update

UNM Hospital Board of Trustees Interim Executive Vice President for Health Science Report November 20, 2020

COVID-19 Status Report

- Surging cases. Los Alamos National Laboratory estimates New Mexico will reach 2,100 virus deaths within six weeks.
- ICU and bed limitations at UNMH and throughout New Mexico
- Staffing shortages steps to mitigate
- Per the latest public health order, non-essential personnel are being asked to work from home.
- Gibson Medical Center option.

UNMH Frontline Worker Maria Paiz Featured on MSNBC – Last Friday, RN supervisor Maria Paiz appeared on MSNBC to talk about the surge in COVID-19 cases and the impact it is having on frontline health care workers. (Could have the Trustees watch this moving testimony).

GO Bond – We're very pleased that New Mexico voters passed General Obligation Bond C to support higher education in the Nov. 3 election. Here at the Health Sciences Center, GO bond funds will help pay for the construction of a new building to house the Colleges of Nursing and Population Health. Among other things, this added space will enable us to grow our class sizes and help meet the critical need for health care workers in the state.

Cancer Center Project- We have been working with the Higher Education Department and Legislative Finance Committee regarding the UNM Comprehensive Cancer Centers' 22 million dollar request for a new radiation oncology vault. This essential project expands the radiation oncology services, bone marrow and stem cell transplantation services while supporting new treatment modalities. Specifically the project will construct and equip two radiation oncology vaults, construct and equip GMP laboratories in support of new treatment modalities, construct a cell processing laboratory for bone marrow and stem cell transplantation and cell-based immunotherapies and upgrade diagnostics and targeted radioisotope treatments. LFC Staff have worked with New Mexico Finance Authority (NMFA) proposing to use NM Cigarette Tax revenue to fund bonds for the \$22 million UNMCCC project. The bonds would begin June 2021 and mature June 2029. Total debt service would be \$24,092,914. This project will not need state general fund, severance tax bonds or capital outlay funds.

Thanks – I'd like to thank the Board of Trustees for their graciousness and support during this time of transition. I'm looking forward to Dr. Doug Ziedonis taking the reins in 10 days' time.

HSC Committee Update

MEMORANDUM

To: UNMH Board of Trustees

From: Mike Richards, MD

Vice Chancellor, UNM Health System

Date: November 20, 2020

Subject: Monthly Health System Activity Update

This report represents unaudited year to date September 2020 activity and is compared to audited year to date September 2019 activity.

Activity Levels: Health System total inpatient discharges and observation discharges are up 2% as compared to prior year.

Health System total inpatient discharges are stay flat compared to prior year, with discharges are down 1% at UNMH and up 11% at SRMC. Health System adult length of stay (without obstetrics) is up 8% compared to prior year, with length of stay up 9% at UNMH and down 1% SRMC.

Health System observation discharges are up 5% compared to prior year, with observation discharges up 8% at UNMH and down 8% at SRMC.

Case Mix Index (CMI) is up 5% compared to prior year and up 1% compared to FY 21 budget.

Births are down 5% year over year and flat to budget.

Health System total outpatient activity is up 3% compared to prior year. Primary care clinic visits are down 2% compared to prior year. Specialty and Other clinic visits are down 3% compared to prior year. Emergency visits are up 49% than prior year.

Surgeries overall are down 1% year over year, but up 21% over budget. UNM surgical volume is down 1% and community physician surgical volume is down 10%.

Medical Group RVUs are down 8% over prior year, but only 3% under budget.

Finances: Health System had total year-to-date operating revenue of \$395.3 million, representing a 7% increase over prior year. Total non-operating revenue was \$41.5 million, representing a 38% decrease over prior year primarily due to Non-recurring State Appropriations in FY20. Total operating expenses were \$401.8 million, representing a 2% increase over prior year. Health System margin was \$34.9 million as compared to \$45.4 million prior year.

The balance sheet is stable with a current ratio of 1.74 as compared to 1.90 prior year. The cash and cash equivalents for UNM Health System is \$590.8 million as compared to \$422.8 million prior year. Net patient receivables are up 1% and total assets are up 14%. Total liabilities are up 22% over prior year. Total net position is up 6% over prior year.

UNMH CEO Report



MEMORANDUM

To: Board of Trustees

From: Kate Becker

Chief Executive Officer

Date: November 20, 2020

Subject: UNMH Monthly Activity Update

The Hospital has been involved in a variety of activities and this report will focus on operations through August 2020.

Finance: Inpatient adult volume is better than budget by 11% for the month of October and better than budget by 9% year to date. Inpatient pediatric volume is behind budget 2% for the month of October and behind budget by 9% year to date. Observation days are below budget by 21% year to date. Total inpatient discharges are 3% lower than budget year to date. Case mix index is higher than prior year by 6% at 2.18 year to date and average length of stay is up 7.22% compared to prior year. Outpatient clinic visits are 2% better than budget for the month of October and are 5% better than budget for the year. Emergency department arrivals are 15% under budget for the month of October and below year to date budget by 14%. Behavioral health patient days are under budget by 10.4% and behavioral health clinic visits are ahead of budget by 8.8% year to date. Net margin year to date is positive at \$39.9 million with \$31.2 million available for operations after setting aside \$10 million for capital investment. Net patient revenues are positive compared to year to date budget and prior year. Operating expenses are over budget by \$19.5 million, primarily in employee compensation and benefits, medical services and equipment. Non-operating revenues include \$15 million recorded for CARES Act funding received from HHS.

Native American Liaison:

UNMH meet with tribal and other governmental leaders on October 9, 2020 for our Annual consultative meeting with the tribes. We highlighted UNMH performance on the terms of our 1952 contract, Consent to Lease and amendments to these documents. Of note, there was been a significant increase in access to behavioral health services over the past year, as we began implementation of our BH strategic plan. The meeting went well, with questions from tribal leaders mostly centered on COVID19. Tribal communities, and in particular those in the Northwest sector of our state, were disproportionately affected during the first wave of the pandemic. Dr. Jon Femling's talk on COVID19 highlighted not only the current trajectory and expected impacts in New Mexico as we head in to winter months, but additionally highlighted the significant sacrifice and community response implemented during Spring and Summer to flatten the curve among native communities. A follow-up Public Service Announcement link was shared last week with meeting invitees, as we encourage tribal leaders and communities to double down on this commitment to save lives. UNMH has received guidance from our pueblo board members and the Albuquerque Area I.H.S.

office concerning the WC4BIL movement at UNMHSC; as a result, we are seeking guidance from the All Pueblo Council of Governors at their November meeting.

Bernalillo County: The Bernalillo County Commission voted to give consent for the use of UNM Hospital reserves for the purpose of constructing the New Hospital Tower at their October 27th meeting. This approval is required for the submission to HUD as part of the mortgage application for the project. UNM Hospital Management has also met with the Indian Health Service related to the use of hospital reserves for construction of the New Hospital Tower and has sent a request to the All Pueblo Governors Council to review the financing of the project.

At the October 27th County Commission Meeting the new site for the Behavioral Health Crisis Triage Center was announced at 2600 Marble NE just to the east of the UNM Psychiatric Center. A preliminary program plan has been developed and management is working with the county on the steps needed to move the project forward.

New Dyad Partnership- Dr. Koppula

New Hospital Tower Progress: Preconstruction and site preparation work is well underway and the project remains on budget and on schedule. In the next few months, the construction team will begin the demolition of the UNM Physics and Astronomy building to make way for the New Hospital Tower.

If there are any questions on this or other matters, please feel free to contact me.

UNMH CMO Report



Date: November 20, 2020

To: UNMH Board of Trustees

From: Irene Agostini, MD

UNMH Chief Medical Officer

The CMO Board report for November will highlight provider work and collaboration around the recent COVID-19 surge.

Floor Surge Planning

The Department of Internal Medicine is leading our COVID hospitalist teams. They have created five teams which are being run by hospitalists, APPs and other Internal Medicine faculty support. We have faculty and APPs working extra shifts to help care for COVID patients.

In addition, there is a backup schedule in place for non-medicine faculty members to join the COVID teams in caring for more patients, should the census rise. A few weeks ago we did have an acute spike and the Neurohospitalist team stepped up to care for COVID patients. Going forward, we continue to have the backup schedule ready and are working to create further backup schedules of residents and APPs to work on the inpatient COVID teams, if needed.

All of the non-hospitalist medicine providers are on a team with a hospitalist to ensure safe patient care. The hospitalist team has even created a web site with up-to-date information on COVID-19 care.

ICU Surge Planning

Critical Care leadership team has created a surge structure to care for ICU-level patients. With our ICU census running over 100% occupancy, they have been able to care for patients similar to the floor hospitalist teams with faculty and APPs working extra shifts. Should ICU volumes continue to increase, we are working to create a backup schedule run by the Surgery and Anesthesiology departments to care for additional ICU patients. We are also working closely with Surgery and Anesthesiology Leadership to carefully monitor surgical volumes and make changes to surgical schedules if ICU volume continues to increase. The non-critical care providers will also work under the supervision of the critical care providers.

Finance Committee



UNM HOSPITAL BOARD OF TRUSTEES

Finance Committee Meeting

Wednesday, November 18, 2020 10:00 AM via Zoom

Objectives

• Provide financial and human resources oversight of UNM Hospitals.

Finance Committee Meeting:

- Approval of September 23, 2020 meeting minutes
- Consent Items
 - o Consent Item Colburn Hill \$14,250,000
 - o Consent Item Telehealth Platform & Platform Software Support \$2,250,000
- Uptown Clinic Lease
- New Hospital Tower Project Status Report
- Financial Update for the four months ended October 31, 2020
- HR Updates
 - Employee Retirement Plans

Next UNM Hospital Finance Committee meeting is scheduled to convene January 27, 2021.

Audit & Compliance Committee



UNM HOSPITAL BOARD OF TRUSTEES

Audit and Compliance Committee Meeting

Wednesday, November 16, 2020 9:30 am Zoom Video Conference

Objectives

Provide audit and compliance oversight of UNM Hospitals.

Finance Committee Meeting:

- Approval of September 23, 2020 meeting minutes
- Review of annual Audit and Compliance calendar
- HIPAA Privacy Update
- Internal Audits:
 - Internal Audit RFP Status
 - o 2020 Audit Work Plan Status
 - Summary of Prior Audits
- Compliance:
 - o 2021 Compliance Audit Work Plan Update
 - o 340B Audit
- 2021 Audit and Compliance Committee Meeting Calendar

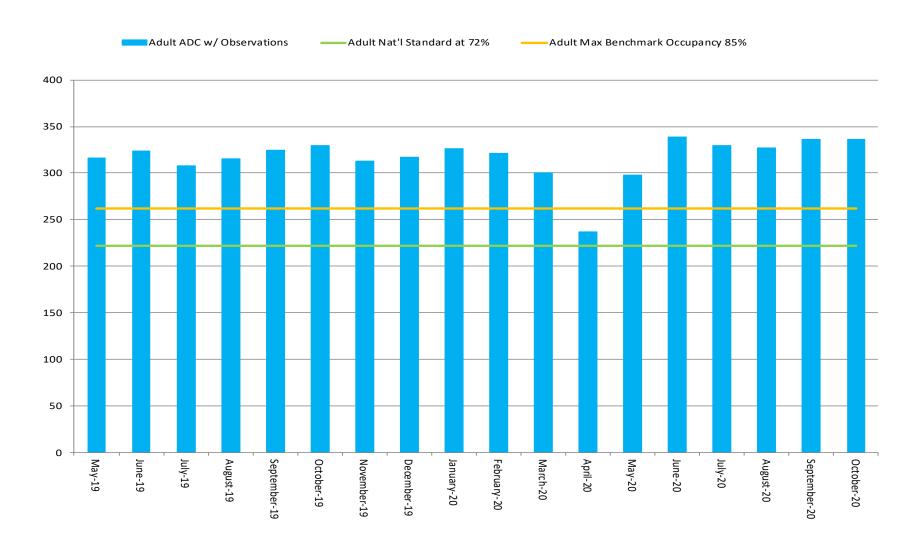
Next UNM Hospital Audit and Compliance Committee meeting is scheduled to convene January 26, 2021

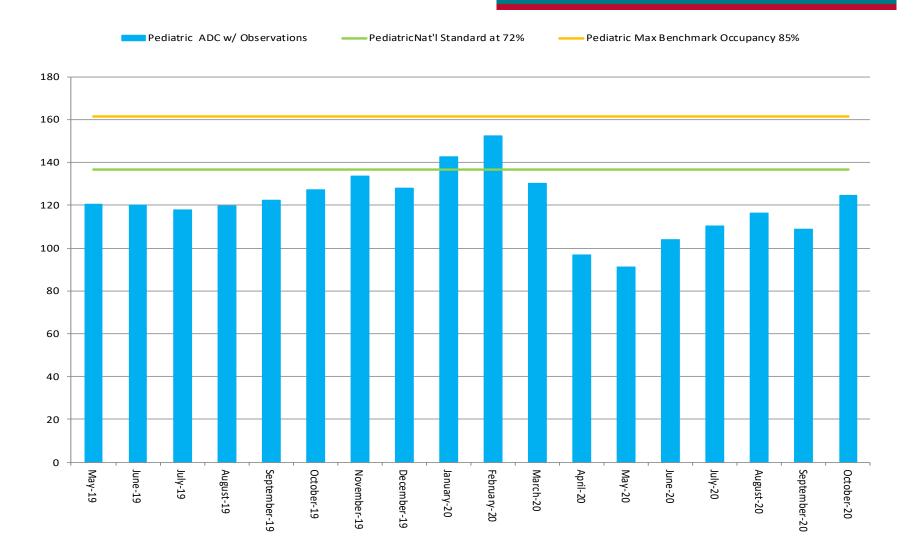
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Financials

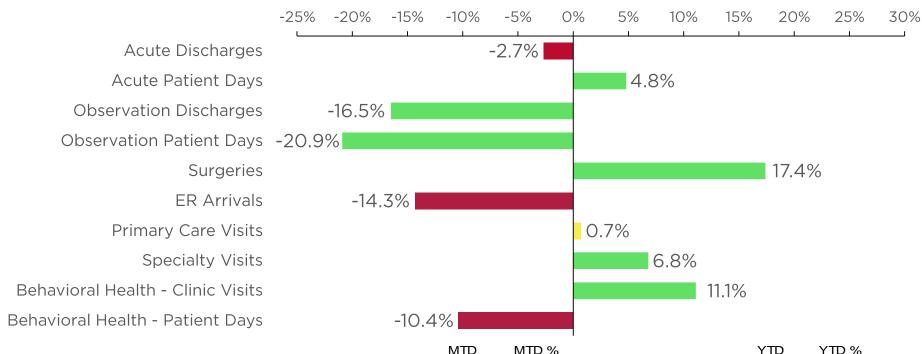
UNM Hospitals

Financial Update
Through October 2020



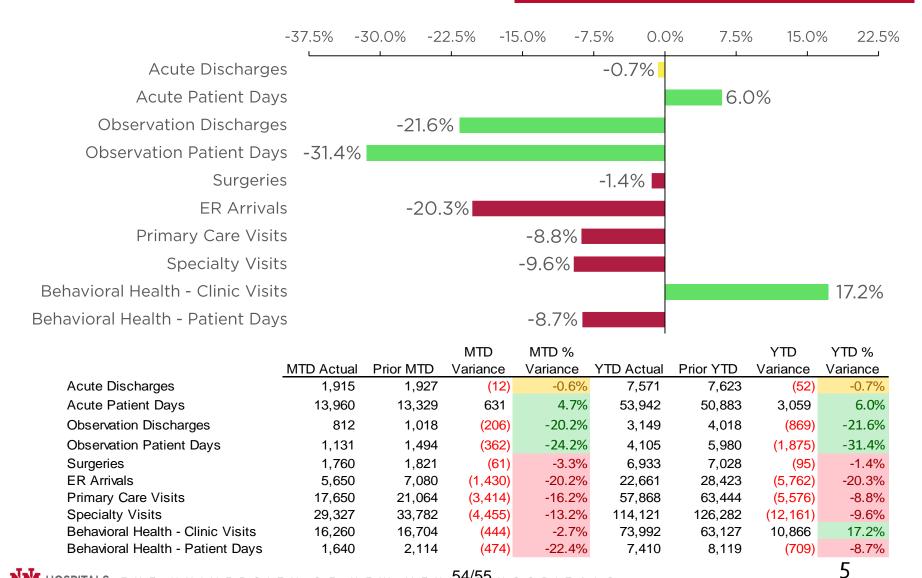


UNM Hospital YTD Stats Variance to Budget **Through October 2020**



			MID	MID %			YID	YID%	
	MTD Actual	MTD Budget	Variance	Variance	YTD Actual	YTD Budget	Variance	Variance	
Acute Discharges	1,915	1,962	(47)	-2.4%	7,571	7,785	(214)	-2.7%	
Acute Patient Days	13,960	12,973	987	7.6%	53,942	51,476	2,466	4.8%	
Observation Discharges	812	942	(130)	-13.8%	3,149	3,769	(620)	-16.5%	
Observation Patient Days	1,131	1,309	(177)	-13.5%	4,105	5,192	(1,087)	-20.9%	
Surgeries	1,760	1,735	25	1.4%	6,933	5,903	1,030	17.4%	
ER Arrivals	5,650	6,663	(1,013)	-15.2%	22,661	26,437	(3,776)	-14.3%	
Primary Care Visits	17,650	16,781	869	5.2%	57,868	57,459	409	0.7%	
Specialty Visits	29,327	30,271	(944)	-3.1%	114,121	106,808	7,313	6.8%	
Behavioral Health - Clinic Visits	16,260	17,482	(1,222)	-7.0%	73,992	66,573	7,419	11.1%	
Behavioral Health - Patient Days	1,640	2,084	(444)	-21.3%	7,410	8,269	(859)	-10.4%	

UNM Hospital YTD Stats Variance to Prior YTD **Through October 2020**



	Acti	on Ol								
UNM Hospitals	Ben	chmark	Oct-20	YTD	ΥT	D Budget	% Budget YTD	P	rior YTD	% Growth
ALOS			7.29	7.12		6.61	-7.75%		6.67	-6.74%
Case Mix Index				2.18		2.08	4.88%		2.06	6.10%
CMI Adjusted Patient Days *		46,412	63,241	244,068		235,585	3.60%		230,898	5.70%
Net Core Patient Revenues (\$ in thousands)			\$ 92,715	\$ 354,061	\$	312,586	13.27%	\$	338,092	4.72%
Total Operating Expenses** (\$inthousands)			\$ 118,904	\$ 433,729	\$	413,818	-4.81%	\$	410,291	-5.71%
Total Operating Expenses*** (\$inthousands)			\$ 118,458	\$ 431,903	\$	410,420	-5.23%	\$	388,731	-11.11%
Net Operating Income (\$inthousands)			\$ (10,229)	\$ (16,951)	\$	(42,097)	59.73%	\$	(30,597)	44.60%
Net Income (\$ in thousands)			\$ 7,864	\$ 39,989	\$	661		\$	44,555	
Net Core Revenue/CMI Adj Patient Day			\$ 1,466	\$ 1,451	\$	1,327	9.33%	\$	1,464	-0.93%
Cost**/CMI Adj Patient Day	\$	2,200	\$ 1,880	\$ 1,777	\$	1,757	-1.17%	\$	1,777	-0.01%
Cost***/CMI Adj Patient Day	\$	2,200	\$ 1,873	\$ 1,770	\$	1,742	-1.58%	\$	1,684	-5.11%
FTEs			6,902	6,690		7,062	5.26%		6,361	-5.18%

^{*} CMI Adjusted Patient Days (Adjusted Patient Days X CMI) is to account for the outpatient activities in the hospital and the relative acuity of the patients. CMI is a relative value assigned to a diagnosis-related group. Adjusted patient days (Patient Days X (Gross Patient Revenue/Gross Inpatient Revenue)) is to account for outpatient and other non-inpatient activities in the Hospital. Action OI benchmark is a quarterly report and for April - June 2020 the 50th percentile is 139,237. The metric above divided by three months for comparative purposes.



^{**} Operating expenses exclude Contract Retail Pharmacy Expense

^{***} Operating expenses exclude Contract Retail Pharmacy & HS Exec Initiatives