QUARTERLY REPORT
December, 2023

Bernalillo County Commissioner Trend Report

UNM HOSPITALS

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A. ACCOUNTABILITY

Balance Sheet
Statements of Net Position

(In Thousands) Assets	December 2023	audited June 2023
Cash and marketable securities	$ 296,359	$ 219,355
Cash restricted by management for capital replacement	-	16,519
Cash restricted for donor specified expenses	21,704	20,928
Patient receivables, net	169,549	160,924
Other receivables and current assets	239,255	162,093
Capital initiatives receivable	-	46,000
Capital assets, net	824,284	738,879
Restricted for mortgage reserve, bonds	22,602	18,844
Other noncurrent assets	35,849	37,848
Total assets	1,609,602	1,421,390
Liabilities		
Accounts payable	74,462	67,842
Payable to related parties (UNM)	124,069	56,731
Interest payable bonds	65	65
Other accrued current liabilities	224,077	173,283
Bonds payable, non current	61,485	61,485
Mortgage Payable - NHT	224,804	166,500
Other long term liabilities	41,010	45,155
Total liabilities	749,972	571,061
Net Position		
Restricted for expendable grants, bequests, and contributions	21,704	20,928
Restricted by management for capital replacement **	-	62,519
Restricted for trust indenture and debt agreement	22,602	18,844
Assets invested in capital	496,258	465,139
Unrestricted from operations	319,066	282,899
Total net assets	$ 859,630	$ 850,329
Current Ratio	1.72	1.89
Days Cash on Hand**	70.47	54.39

* Net Assets have been reclassified to expanded categories to reflect operational intentions
**Days cash on hand is calculated on unrestricted cash

Income Statement

UNM HOSPITALS

Statements of Revenues, Expenses, and Changes in Net Assets
For the six (6) months ended December 31, 2023

(In Thousands)		December
Operating revenues:		
Net Patient Service	$	642,241
Other		27,306
Total Operating Revenues		669,547
Operating expenses:		
Employee Compensation and Benefits		375,351
UNM School of Medicine Medical Services		99,845
Medical Services Oncology		13,980
Medical Services non-SOM		23,935
Medical Supplies		106,729
Oncology Drugs		28,898
Occupancy/Equipment		41,972
Depreciation		17,037
Purchased Services		46,690
Gross Receipts Tax		13,248
Other		16,889
Total Operating Expenses		784,574
Operating loss		(115,027)
Nonoperating Revenues (Expenses):		
Bernalillo County Mill Levy		61,825
State Appropriation		9,875
Capital Appropriation		680
Interest Expense		(1,167)
Other Revenue and (Expense)		53,113
Net Nonoperating Revenues		124,326
Total Increase in Net Assets		9,299

Mill Levy Distribution Detail by Department FY2023

		(Audited)
Total Bernalillo County Mill Levy	$	120,649,639.00

Note: 15% of the Mill Levy is allocated to Behavioral Health (see pg. 43)

	UNMH - 85%	
Mill Levy	$	102,552,193

Expenses	Total Spending	
Facilities		
Facilities Maintenance	$ 13,885,052	
Environmental Services	13,103,691	
Insurance	5,274,137	
Plant Operations & Maintenance	6,330,824	
Utilities	5,636,155	
Clinical Engineering	2,195,122	
Parking Structure and Support	5,706,393	
Security	5,719,064	
Off Site/Ambulatory Maintenance	4,910,386	
Life Safety/Fire Protection	2,346,028	
Facilities Planning	2,717,194	
Facilities Other	880,762	
Total Facilities		68,704,808
Finance		9,291,897
HR		19,232,843
Information Technology		
IT - Open Clinic/Mgt	7,112,894	
IT - Patient Financial Services	3,034,683	
Communications	5,845,835	
IT Cerner Millennium RHO	5,134,950	
Clinical Applications	3,417,762	
Customer Service	3,821,079	
Network & Infrastructure	3,302,184	
Systems Support	4,052,875	
System Develop and Applications	2,471,066	
Network & Cyber Security	3,460,842	
IT Non Capital Equipment	820,365	
Computer Learning Technologies	1,455,413	
Medical Records	1,850,649	
IT - EVOLVE3	622,448	
IT Admin, Oversight and Support	911,978	
IT Other	5,613,782	
Total Information Technology		52,928,805
Revenue Cycle		
Patient Financial Services	12,542,732	
Coding	11,272,597	
Revenue Cycle Initiatives	2,765,416	
Medical Records Support Svcs	4,128,830	
HIM Clinical Documentation	2,383,608	
Collection Agencies	1,358,881	
Revenue Other	507,008	
Total Revenue Cycle		34,959,072
Food & Nutrition		9,966,597
Other		
Administration	8,073,867	
FHA Bonds	5,409,406	
Admin Support for Facilities/Planning	3,029,270	
Admin Other	6,561,233	
Total Other		23,073,776
Total Mill Levy Expenditures		**$ 218,157,798**

Average Length of Stay (LOS) for Inpatient Admissions
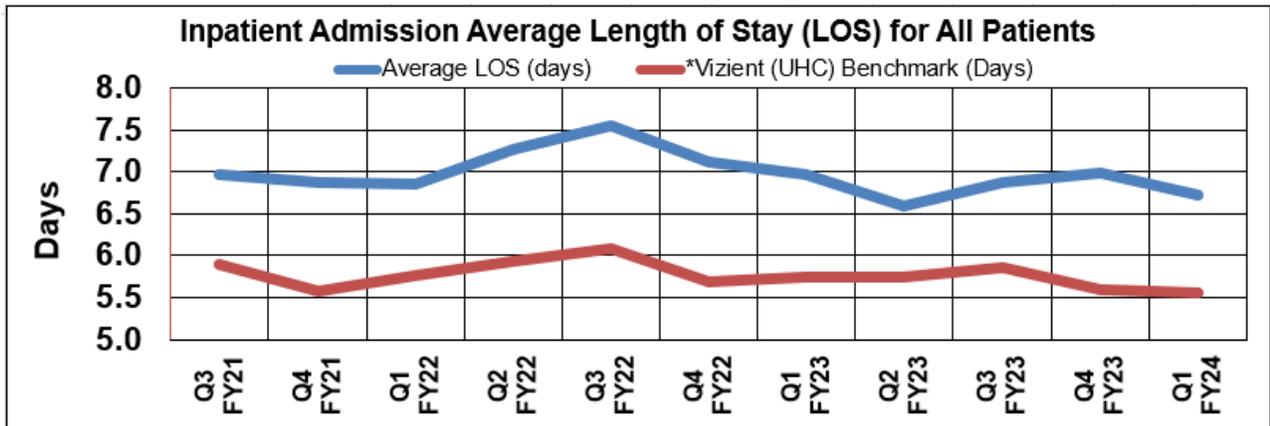
Inpatient Admission Average Length of Stay (LOS) for All Patients

Fiscal Quarter	Q3 FY21	Q4 FY21	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24
Average LOS (days)	6.98	6.88	6.85	7.27	7.55	7.12	6.96	6.60	6.87	6.99	6.73
*Vizient (UHC) Benchmark (Days)	5.90	5.58	5.76	5.94	6.09	5.70	5.75	5.74	5.85	5.60	5.55

(There is a three-month delay in Vizient data.)

30 Day Readmission for All Patients
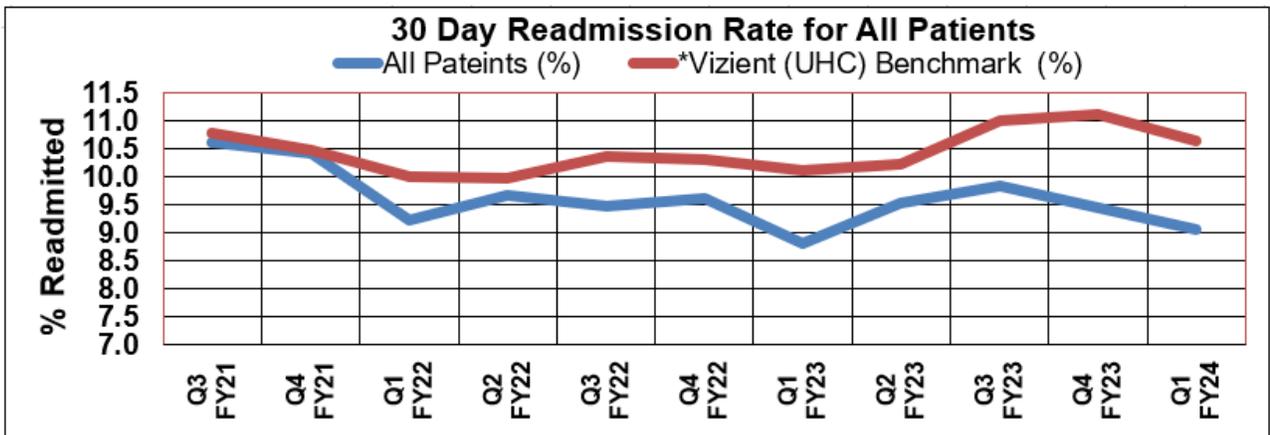
30 Day Readmission Rate for All Patients

Fiscal Quarter	Q3 FY21	Q4 FY21	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24
All Pateints (%)	10.61	10.41	9.22	9.67	9.48	9.62	8.82	9.53	9.83	9.46	9.06
*Vizient (UHC) Benchmark (%)	10.77	10.47	9.99	9.97	10.36	10.31	10.13	10.22	10.99	11.12	10.64

(There is a three-month delay in Vizient data.)

*Vizient, Inc. (formerly, "UHC") is an alliance of the nation's leading academic medical centers ("AMCs") and associate member institutions affiliated with those academic medical centers, which represents over 90% of the nonprofit academic medical centers in the United States.

Catheter Central Line-associated Bloodstream Infection

Central Line-associated Bloodstream Infection (CLABSI)	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24
CLABSI SIR (Facility Wide)	0.53	0.94	1.10	0.90	0.50	0.70	0.30	0.50	0.69
National SIR Benchmark	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
CLABSI Count	6	11	13	10	4	8	3	5	7
*NHSN Expected	11.4	12.5	11.9	11.5	8.1	11.1	10.1	10.2	10.2
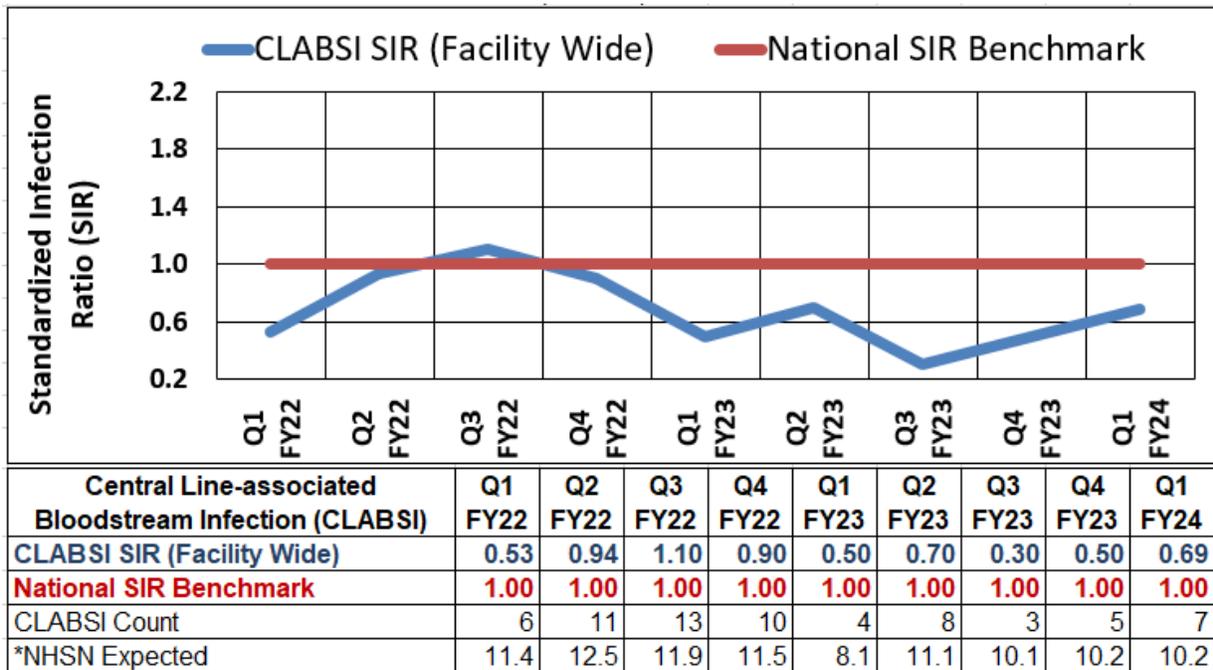
Catheter data is delayed by one quarter.

Catheter Associated Urinary Tract Infection

Catheter-Associated Urinary Tract Infection (CAUTI)	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24
CAUTI SIR (Facility Wide)	0.63	1.06	0.91	0.80	1.04	0.90	0.60	0.70	0.69
National SIR Benchmark	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
CAUTI Count	9	17	14	12	11	11	7	8	9
*NHSN Expected	14.2	16.0	15.3	15.3	10.5	12.5	12.1	12.2	13.0

Catheter data is delayed by one quarter.

*NHSN = National Healthcare Safety Network.
NHSN provides the figure for Expected. The SIR ratio is calculated by dividing UNMH **Observed** by the NHSN **Expected**, where observed is the count.

MRSA Bloodstream Standardized Infection Rate

For Methicillin-resistant Staphylococcus Aureus (MRSA) Bloodstream Standardized Infection Rate, lower is better.
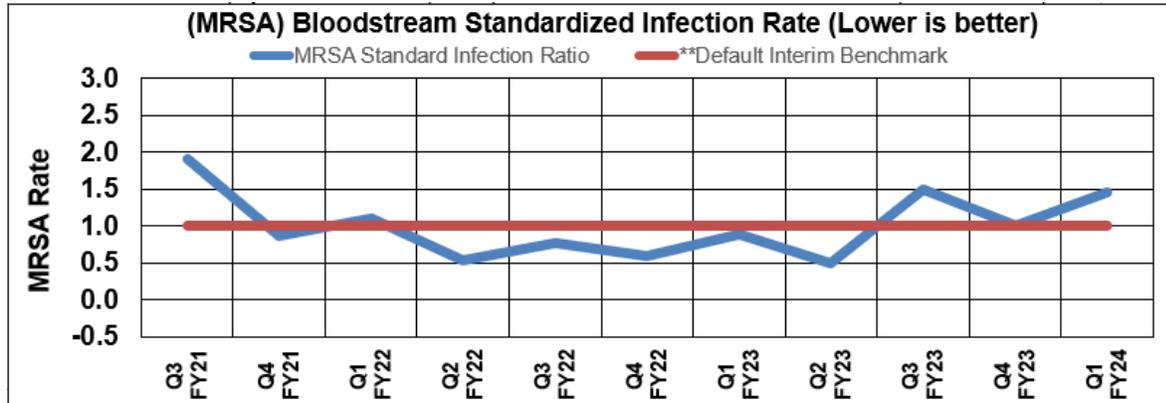
Fiscal Quarter	Q3 FY21	Q4 FY21	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24
MRSA Standard Infection Ratio	1.91	0.87	1.11	0.54	0.78	0.60	0.88	0.50	1.50	1.00	1.46
**Default Interim Benchmark	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
Raw Count of Infections	7	3	3	2	4	2	3	2	4	4	4

MRSA data is delayed by one quarter.

**Default Interim Benchmark is a temporary measure until a national benchmark is defined.

Total Number of Inpatient Days

FY23 Actual based on the twelve (12) months ended June 30, 2023
FY24 Actual YTD is based on the six (6) months ended December 31, 2023
FY24 Projected is based on the twelve (12) months ended December 31, 2023

Inpatient Days	FY23 Actual	FY24 Actual YTD	FY24 Projected
Adult	133,431	69,071	135,525
Pediatric	38,961	18,892	36,866
Newborn	5,057	2,621	4,917
Total Inpatient Days	177,449	90,584	177,308

Nursing Hours of Care

	FY22 June, 2022	FY23 June, 2023	FY24 December, 2023
UNMH Nursing Hours of Care Per Patient*	15.78	15.38	15.95

*Nursing Hours of Care includes all paid hours in the inpatient nursing departments (Adult ICU, SAC/Med Surg, Pediatrics, OB and Newborn nursery) divided by the total statistics for each department.

Number of RN FTE's and Retention Rate

Category	Number of FTES as of June 2023	Number of FTES as of December 2023	FY2024 Hires (Headcount)	FY2024 Terms (Headcount)	Rolling Retention Rate
RN's	1,738	1,836	102	176	80.8%
*National Retention Rate Benchmark					78.3%

* Per the 2023 National Healthcare Retention & RN Staffing Report Published by: NSI Nursing Solutions, Inc., the 2022 national RN turnover rate is 21.7%.

Press Ganey Inpatient Experience Score

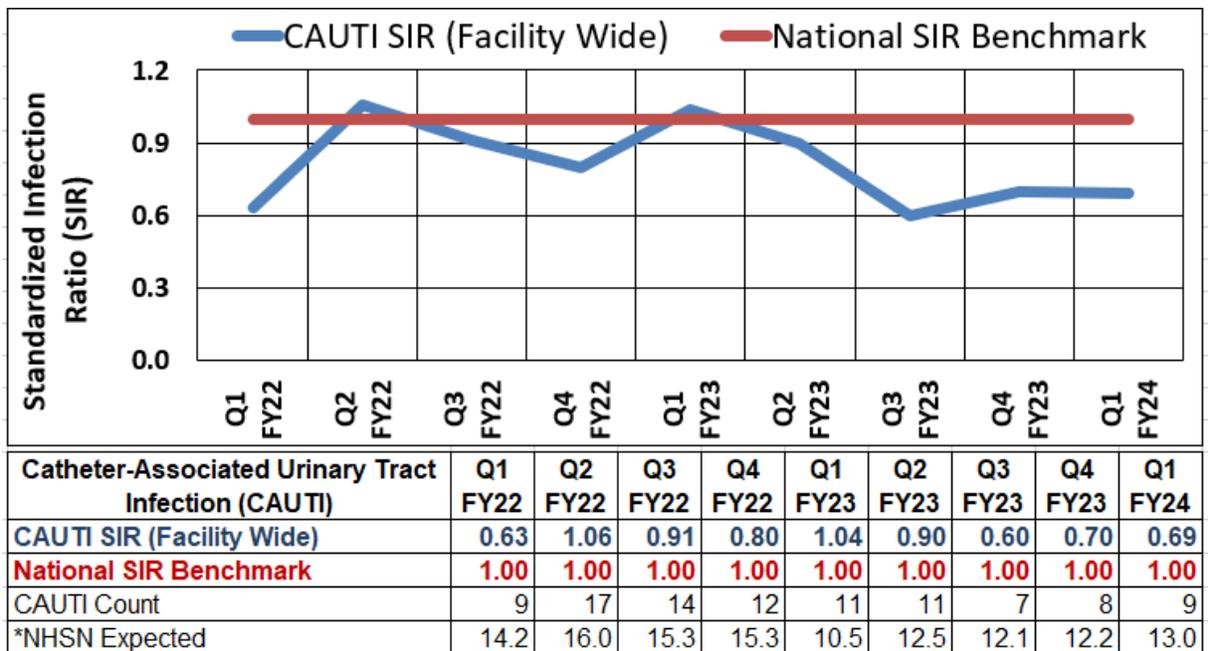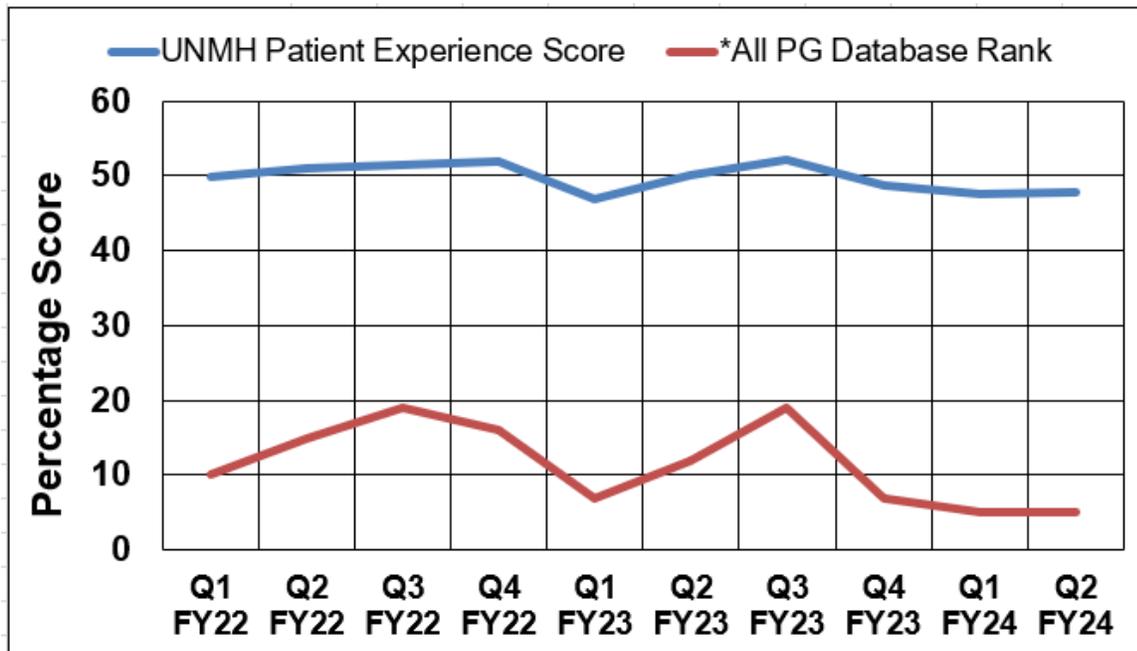| Quarter	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24	Q2 FY24
UNMH Patient Experience Score	49.9	51.0	51.5	52.0	46.9	50.0	52.1	48.8	47.6	47.9
*All PG Database Rank	10.0	15.0	19.0	16.0	7.0	12.0	19.0	7.0	5.0	5.0

*The University Health System Consortium ("UHC") is an alliance of 98 of the nation's leading academic medical centers ("AMCs"), and 143 associate member institutions affiliated with those academic medical centers, which represents over 90% of the nonprofit academic medical centers in the United States.

HCAHPS Satisfaction – Communications with Nurses
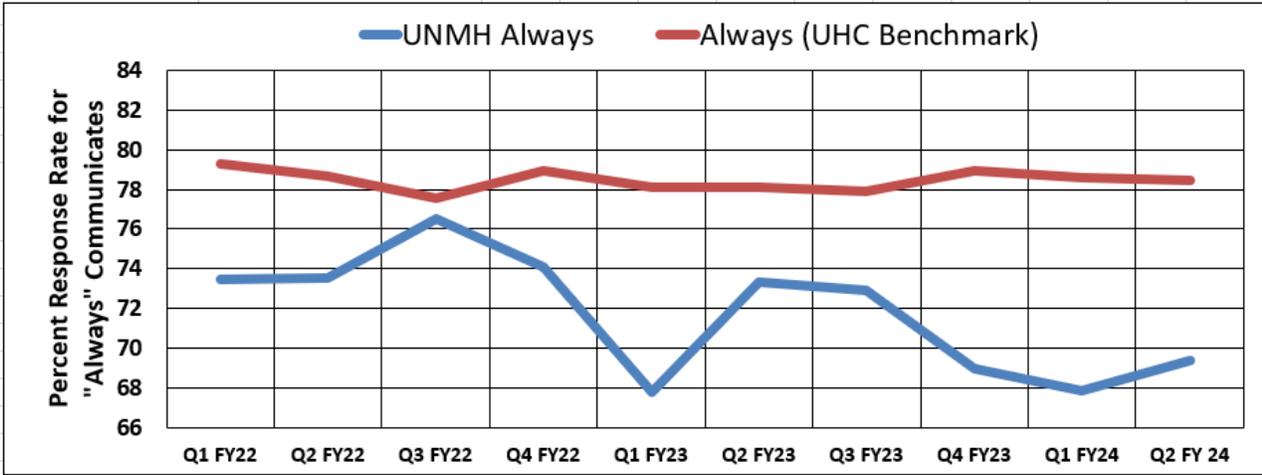
Communication with Nurses	Response	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24	Q2 FY 24
H-COMP-1-A-P	UNMH Always	73.5	73.5	76.5	74.1	67.8	73.3	72.9	69.0	67.9	69.4
H-COMP-1-U-P	UNMH Usually	18.4	18.8	17.0	18.4	22.3	17.3	20.3	22.6	22.5	20.6
H-COMP-1-SN-P	UNMH Sometimes/Never	8.1	7.7	6.5	5.8	9.9	9.4	6.8	8.5	9.7	10.0
UHC Benchmark	Always (UHC Benchmark)	79.3	78.7	77.6	78.9	78.1	78.1	77.9	78.9	78.6	78.5

HCAHPS Satisfaction – Communications with Doctors
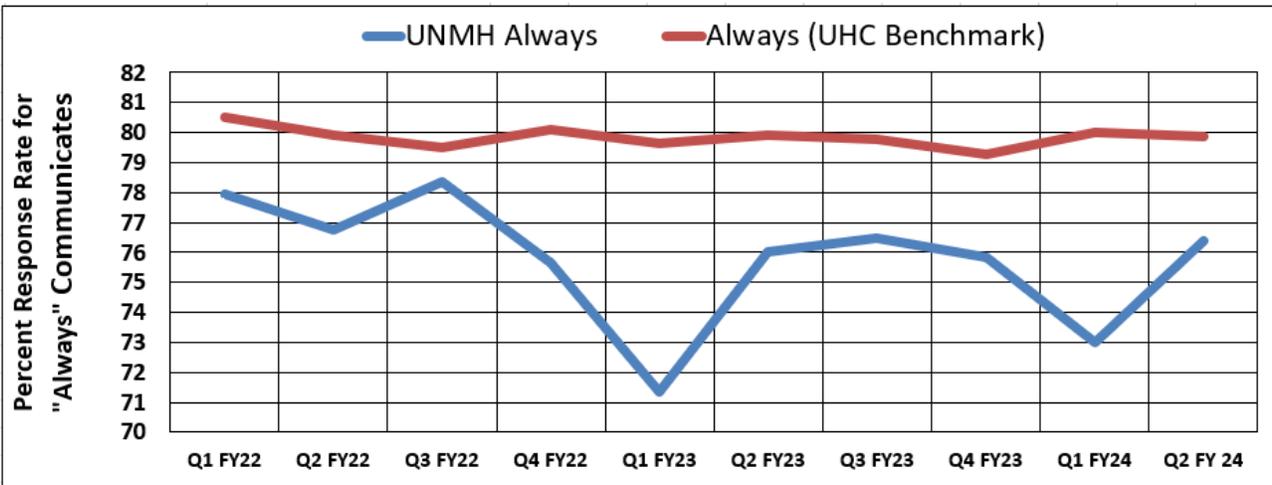
Communication with Doctors	Response	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24	Q2 FY 24
H-COMP-2-A-P	UNMH Always	77.9	76.8	78.4	75.7	71.3	76.0	76.5	75.8	73.0	76.4
H-COMP-2-U-P	UNMH Usually	15.8	14.5	15.7	16.0	18.2	15.0	16.5	16.3	19.2	16.7
H-COMP-2-SN-P	UNMH Sometimes/Never	6.3	8.7	6.0	8.3	10.4	9.0	7.0	7.8	7.8	6.9
UHC Benchmark	Always (UHC Benchmark)	80.5	79.9	79.5	80.1	79.6	79.9	79.8	79.3	80.0	79.8

Grievances
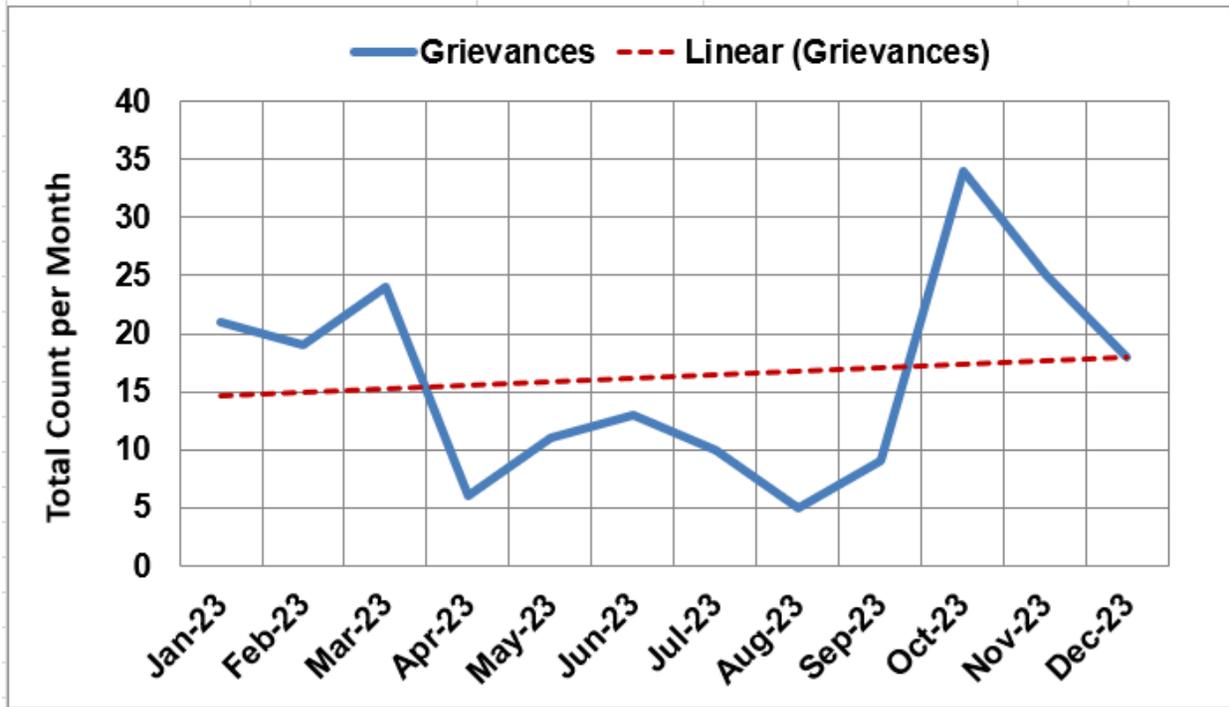
Month-Year	Grievances
Jan-23	21
Feb-23	19
Mar-23	24
Apr-23	6
May-23	11
Jun-23	13
Jul-23	10
Aug-23	5
Sep-23	9
Oct-23	34
Nov-23	25
Dec-23	18

Average time for a New Patient Appointment for Primary and Specialty Care

Average 1st Available* Day out for Appointments.
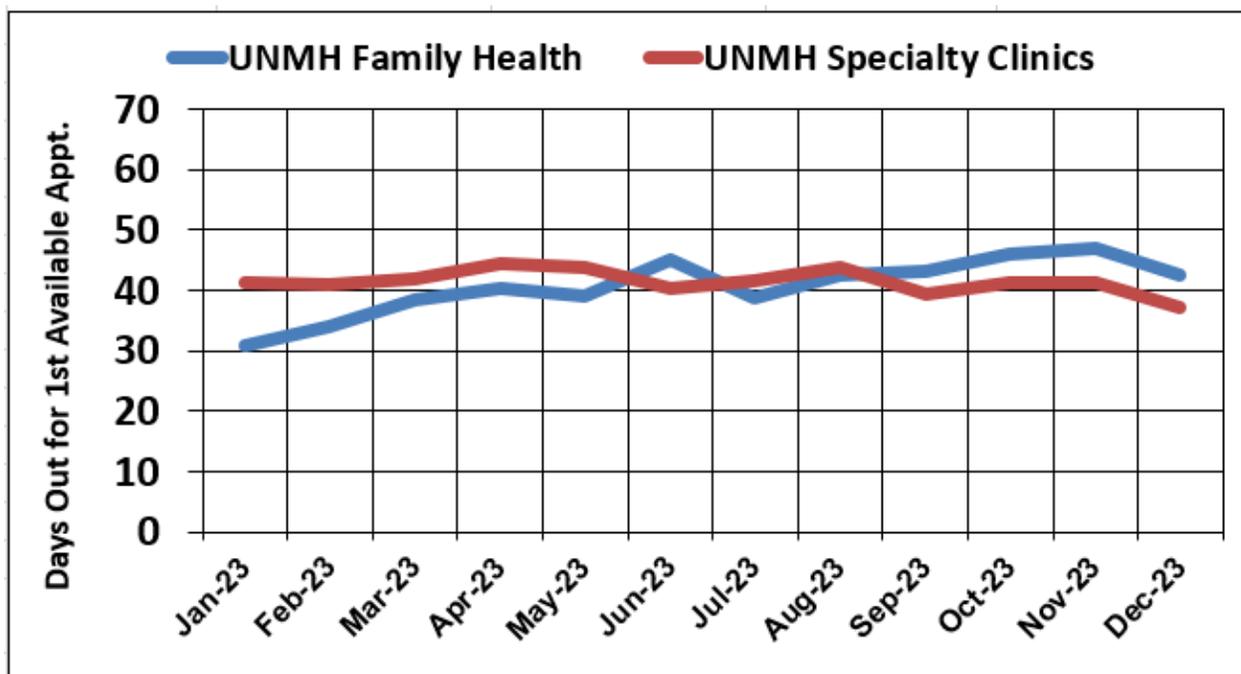
Month	UNMH Family Health	UNMH Specialty Clinics
Jan-23	30.8	41.2
Feb-23	34.1	40.9
Mar-23	38.5	41.8
Apr-23	40.4	44.5
May-23	39.1	43.7
Jun-23	45.0	40.2
Jul-23	38.8	41.6
Aug-23	42.4	43.8
Sep-23	43.1	39.3
Oct-23	46.0	41.2
Nov-23	46.8	41.2
Dec-23	42.6	37.3

Number of Emergency Department (ED) Visits

Adult and Pediatric Emergency Department (ED) Visits, not including Urgent Care visits.
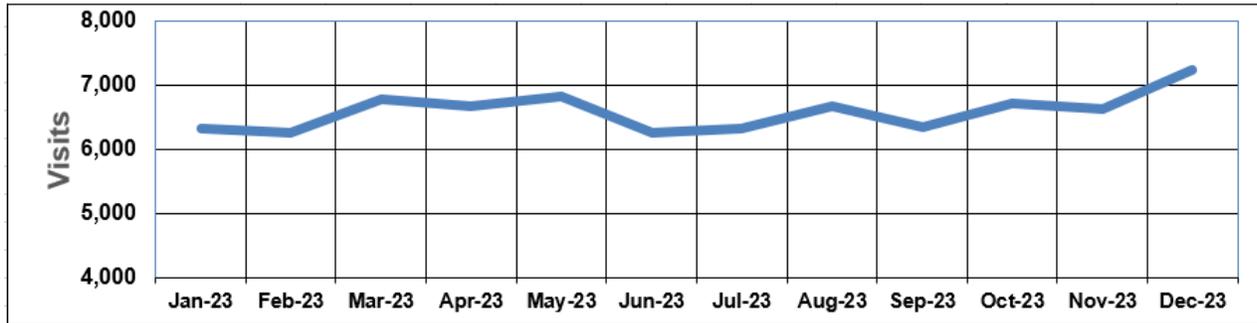
Month	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
Visits	6,325	6,264	6,792	6,678	6,835	6,254	6,333	6,668	6,337	6,720	6,631	7,249

Total ED Patients Left without Being Seen

Patients who "Left Without Being Seen" (LWBS), including all Adult and Pediatric Emergency Department (ED) Visits, not including Urgent Care visits.
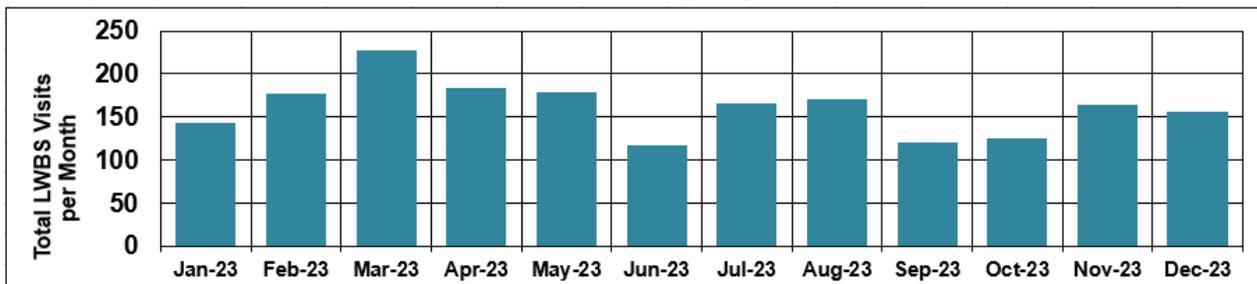
Month	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
UH LWBS	144	178	227	183	179	117	166	171	120	125	164	156

ED Average Hours from Arrival to Disposition
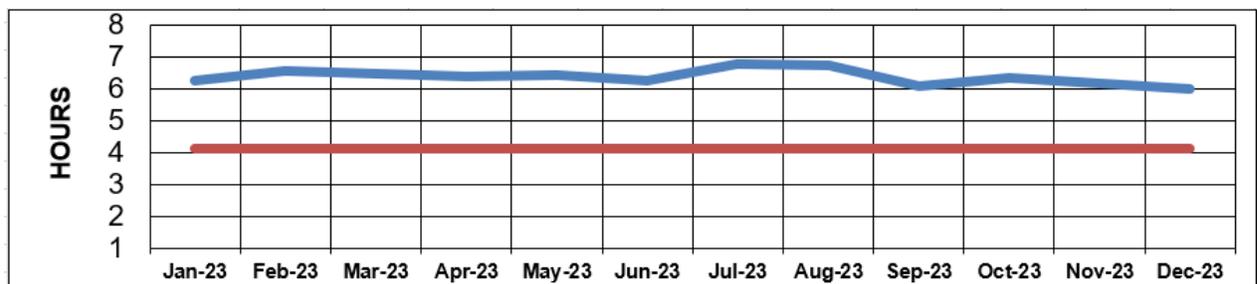
Month	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
Arrival to Disposition	6.28	6.58	6.47	6.40	6.45	6.27	6.80	6.73	6.08	6.37	6.17	6.02
*National Average	4.11	4.11	4.11	4.11	4.11	4.11	4.11	4.11	4.11	4.11	4.11	4.11

* Press Ganey, ED Pulse Report, 2010 - Average LOS in ED: 4 hours, 7 minutes.

MDC Inmates Receiving Hospital Services
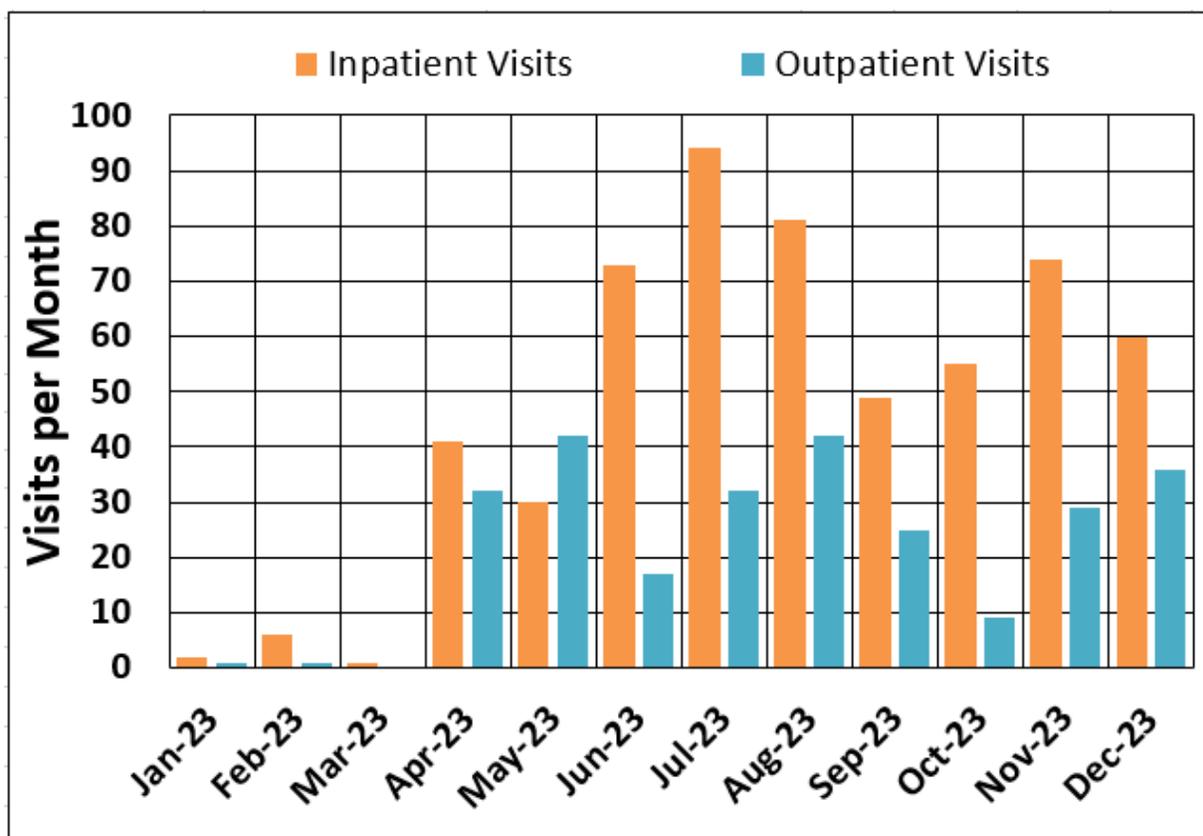
Month	Inpatient Visits	Outpatient Visits
Jan-23	2	1
Feb-23	6	1
Mar-23	1	0
Apr-23	41	32
May-23	30	42
Jun-23	73	17
Jul-23	94	32
Aug-23	81	42
Sep-23	49	25
Oct-23	55	9
Nov-23	74	29
Dec-23	60	36

Bernalillo County Metropolitan Detention Center (MDC) inmates receiving care at UNM Hospitals and registered as Metro BCDC (MDC ABQ Metro).

Typically, patients use their own insurance when possible.

Bernalillo County Encounters by Funding Source

All Bernalillo County encounters for the six (6) months ended December 31, 2023, broken down by funding source.

Source	Bernalillo County Encounters
Charity Care - Bernalillo County	11,977
EMSA	152
IHS	1,790
Medicaid	143,328
Medicare	145,517
Uninsured	20,287
HMO's & Insurance	132,729
All Other *	23,194
Total Encounters	**478,974**
**Native American Encounters **	**54,824**

Encounters:

Bernalillo County consist of Inpatients and Outpatients who provided a Bernalillo County zip code during their registration. Categories are based on Primary Payer Code. Native American Encounters are based on race as provided during registration, are not restricted to only Bernalillo County zip codes and could be duplicate of the Bernalillo encounters by payer above. Includes Acute and Behavioral Health.

*All Other includes: Champus, Veteran Affairs, Tricare and Out of State Medicaid

**Native American Encounters are based on race as provided during registration, are not restricted to only Bernalillo County zip codes and could be duplicate of the Bernalillo encounters by payer above.

Financial Assistance to Patients by County

Total financial assistance for the six (6) months ended December 31, 2023, based on primary and secondary coverage.

County	Charity Care Cost	Uninsured Cost	Total Uncompensated Care Cost
Bernalillo	$ 18,524,625	$ 9,188,146	$ 27,712,771
Catron	31,007	33,113	64,121
Chaves	166,452	39,538	205,990
Cibola	267,889	247,964	515,853
Colfax	26,001	8,634	34,636
Curry	3,087	54,082	57,169
De Baca	2,708	141	2,849
Dona Ana	139,261	21,195	160,456
Eddy	61,289	37,588	98,877
Grant	30,111	8,995	39,107
Guadalupe	156,820	20,831	177,651
Harding	4,614	-	4,614
Hidalgo	-	-	-
Lea	173,884	3,134	177,018
Lincoln	59,730	14,435	74,165
Los Alamos	3,464	21,497	24,960
Luna	207,915	3,731	211,647
Mc Kinley	413,931	282,035	695,966
Mora	61,695	8,287	69,982
Otero	18,606	4,135	22,741
Quay	18,249	924	19,173
Rio Arriba	141,269	142,486	283,756
Roosevelt	-	2,994	2,994
San Juan	386,619	104,902	491,522
San Miguel	115,351	74,044	189,395
Sandoval	1,047,895	596,099	1,643,993
Santa Fe	1,675,029	390,309	2,065,338
Sierra	27,178	7,008	34,186
Socorro	494,115	51,997	546,112
Taos	199,123	68,789	267,912
Torrance	377,414	171,098	548,512
Union	151	7,211	7,362
Valencia	3,207,712	783,159	3,990,871
Out Of State	-	1,270,705	1,270,705
Grand Total	**$ 28,043,195**	**$ 13,669,210**	**$ 41,712,405**

Total Uncompensated Care Cost: Cost of care for UNM Hospitals is the actual cost of providing care - salary, benefits, supplies, drugs, blood, organs, utilities, depreciation, contracts, services.

Financial Assistance to Bernalillo County Patients by Zip Code

Totals for the six (6) months ended December 31, 2023

Bernalillo County Zip	Inpatient Encounter Count	Inpatient Charity Care and Uninsured Cost	Outpatient Encounter Count	Outpatient Charity Care and Uninsured Cost	Total Encounter Count	Total Patient Charity Care and Uninsured Cost
87008	1	$1,620	32	$ 6,895	33	$ 8,515
87022	7	2,185	57	10,018	64	12,202
87047	1	690	88	27,114	89	27,803
87059	10	40,914	213	57,780	223	98,694
87100	-	-	-	-	-	-
87101	1	12,952	10	2,853	11	15,806
87102	76	363,683	1,827	692,248	1,903	1,055,932
87103	3	12,737	19	5,468	22	18,205
87104	22	420,984	582	219,544	604	640,528
87105	177	2,024,471	5,311	2,442,032	5,488	4,466,503
87106	86	747,329	1,800	817,020	1,886	1,564,349
87107	55	335,676	1,860	737,561	1,915	1,073,237
87108	148	1,105,526	3,566	1,606,882	3,714	2,712,408
87109	39	256,186	1,268	393,877	1,307	650,063
87110	78	480,283	1,762	551,117	1,840	1,031,400
87111	40	471,928	975	329,195	1,015	801,123
87112	70	363,036	1,886	555,700	1,956	918,735
87113	15	61,791	437	168,079	452	229,870
87114	57	316,399	1,503	709,212	1,560	1,025,611
87115	1	11,768	3	524	4	12,293
87116	2	2,442	16	5,552	18	7,994
87117	-	-	2	282	2	282
87119	-	-	18	3,195	18	3,195
87120	81	699,445	1,716	644,231	1,797	1,343,676
87121	243	2,843,029	8,279	4,300,716	8,522	7,143,746
87122	7	29,461	185	79,051	192	108,512
87123	105	886,295	3,109	1,569,569	3,214	2,455,865
87125	2	6,134	71	19,932	73	26,066
87128	-	-	-	-	-	-
87130	-	-	-	-	-	-
87131	-	-	13	1,969	13	1,969
87140	-	-	-	-	-	-
87151	11	137,764	96	34,288	107	172,052
87153	-	-	14	724	14	724
87154	1	10	28	1,515	29	1,526
87158	-	-	-	-	-	-
87176	3	2,578	30	3,795	33	6,372
87181	-	-	9	3,278	9	3,278
87184	1	28	8	457	9	485
87185	-	-	3	1,094	3	1,094
87187	-	-	3	365	3	365
87190	-	-	8	686	8	686
87191	-	-	7	2,362	7	2,362
87192	-	-	17	4,676	17	4,676
87193	1	394	29	3,610	30	4,004
87194	-	-	29	2,689	29	2,689
87195	4	3,438	39	2,954	43	6,392
87196	-	-	26	9,132	26	9,132
87197	1	34,782	40	1,942	41	36,724
87198	-	-	61	2,605	61	2,605
87199	1	1,261	21	1,765	22	3,026
Grand Total	**1,350**	**$ 11,677,219**	**37,076**	**$ 16,035,552**	**$ 38,426**	**$ 27,712,771**

Financial Assistance to Bernalillo County Patients by Service Type

Totals for the six (6) months ended December 31, 2023.

Bernalillo County Zip	Medicine Count	Surgery Count	Cancer Count	Ortho-pedics Count	Womens Health Count	Cardio-vascular/ Respiratory/ Cardiac Care Count	Neuro-sciences/ Neuro-logical Count	Spine Count	Other Count	Neo-natology/ Normal Newborn/ Childrens Count	Behavioral Health Count	Trauma Count	Total Count
87008	13	6	2	2	1	1	3	3	-	1	1	-	33
87022	25	5	10	5	1	5	6	2	-	-	5	-	64
87047	17	16	10	17	4	4	8	6	-	-	7	-	89
87059	90	20	6	35	10	16	22	4	1	-	19	-	223
87100	-	-	-	-	-	-	-	-	-	-	-	-	-
87101	4	1	-	2	1	2	-	-	-	-	1	-	11
87102	645	257	134	176	151	98	95	65	22	2	258	-	1,903
87103	8	1	-	-	8	1	1	1	-	-	2	-	22
87104	189	95	46	71	45	35	27	13	1	5	77	-	604
87105	1,872	745	386	626	691	308	251	141	57	14	397	-	5,488
87106	658	241	65	158	172	82	130	51	22	7	300	-	1,886
87107	659	258	130	225	213	99	97	40	11	2	181	-	1,915
87108	1,341	416	233	305	447	178	156	72	30	15	521	-	3,714
87109	431	151	80	185	63	70	66	56	19	1	185	-	1,307
87110	663	229	111	189	77	111	131	44	17	1	267	-	1,840
87111	311	132	100	98	43	55	85	24	10	1	156	-	1,015
87112	628	232	197	209	130	103	122	54	14	4	263	-	1,956
87113	172	64	34	39	41	31	10	16	5	1	39	-	452
87114	531	188	141	153	156	66	121	39	10	5	150	-	1,560
87115	-	1	1	2	-	-	-	-	-	-	-	-	4
87116	7	2	-	1	2	1	-	-	-	-	5	-	18
87117	2	-	-	-	-	-	-	-	-	-	-	-	2
87119	3	4	-	2	2	6	-	-	1	-	-	-	18
87120	637	203	126	151	213	66	95	51	11	3	241	-	1,797
87121	2,928	1,142	763	742	1,429	412	405	192	73	17	419	-	8,522
87122	80	36	17	29	4	6	9	3	84	-	8	-	276
87123	1,182	412	260	280	331	161	206	78	33	9	262	-	3,214
87125	23	7	-	6	2	5	7	4	-	-	19	-	73
87128	-	-	-	-	-	-	-	-	-	-	-	-	-
87130	-	-	-	-	-	-	-	-	-	-	-	-	-
87131	5	3	-	-	-	-	-	1	4	-	-	-	13
87140	-	-	-	-	-	-	-	-	-	-	-	-	-
87151	24	32	1	30	-	3	5	-	2	-	10	-	107
87153	1	1	-	2	-	-	-	4	-	-	6	-	14
87154	11	4	9	1	1	2	-	-	-	-	1	-	29
87158	-	-	-	-	-	-	-	-	-	-	-	-	-
87176	16	7	-	1	-	3	-	4	-	-	2	-	33
87181	3	2	2	2	-	-	-	-	-	-	-	-	9
87184	4	2	1	-	1	-	1	-	-	-	-	-	9
87185	-	-	-	-	2	-	1	-	-	-	-	-	3
87187	2	-	-	-	-	1	-	-	-	-	-	-	3
87190	4	1	-	-	1	-	-	-	-	-	2	-	8
87191	3	-	-	-	-	1	1	-	-	-	2	-	7
87192	5	-	-	3	3	4	-	-	-	-	2	-	17
87193	12	5	-	2	1	3	3	1	-	-	3	-	30
87194	12	4	-	3	1	-	5	2	-	-	2	-	29
87195	17	4	3	8	2	1	4	1	-	-	3	-	43
87196	8	11	-	-	1	3	1	-	-	-	2	-	26
87197	15	5	2	10	-	5	3	-	1	-	-	-	41
87198	23	11	3	1	1	13	1	6	-	-	2	-	61
87199	11	1	1	2	1	2	-	1	-	-	3	-	22
Grand Total	13,295	4,957	2,874	3,773	4,252	1,963	2,078	979	344	88	3,823	-	38,426

# Primary Reason for Bernalillo County Indigent Resident Visits

Totals are for each of the eight (8) quarters ended December 31, 2023.

Description	2024Q2	2024Q1	2023Q4	2023Q3	2023Q2	2023Q1	2022Q4	2022Q3
Factors influencing health status and contact with health services	216	209	266	371	337	218	220	214
undefined	664	693	738	1,044	1,004	670	603	671
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	118	124	133	179	169	118	108	122
Diseases of the musculoskeletal system and connective tissue	1,009	1,078	1,115	1,538	1,305	950	866	940
Endocrine, nutritional and metabolic diseases	887	891	924	1,239	1,090	791	693	737
Injury, poisoning and certain other consequences of external causes	828	905	973	1,355	1,276	924	879	981
Diseases of the circulatory system	904	903	1,002	1,453	1,226	887	831	909
Diseases of the nervous system	694	507	652	1,117	1,323	557	623	618
Mental and behavioural disorders	558	601	640	903	812	575	561	552
Diseases of the genitourinary system	493	526	560	769	685	524	455	472
Neoplasms	237	200	243	398	394	225	211	205
Diseases of the digestive system	1,579	1,648	1,780	2,390	2,222	1,599	1,490	1,576
Diseases of the skin and subcutaneous tissue	649	690	700	958	874	602	572	610
Diseases of the respiratory system	317	372	399	558	482	342	318	338
Pregnancy, childbirth and the puerperium	438	475	503	646	585	436	409	475
Diseases of the eye and adnexa	13	17	18	26	25	31	28	31
Certain infectious and parasitic diseases	1,668	1,781	1,850	2,590	2,293	1,640	1,537	1,661
Diseases of the ear and mastoid process	127	129	156	208	193	129	125	124
Congenital malformations, deformations and chromosomal abnormalities	882	1,022	1,067	1,320	1,325	997	908	870
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	2,972	2,467	2,328	3,258	3,150	2,102	1,923	1,949
Codes for special purposes	100	51	60	103	240	163	123	315
Certain conditions originating in the perinatal period	1	1	0	0	0	1	0	0
External causes of morbidity and mortality	3,813	3,969	4,259	6,039	5,908	4,195	3,898	4,372
	19,167	19,259	20,366	28,462	26,918	18,676	17,381	18,742

The visit count consists of indigent patients who provided a Bernalillo County zip code during their registration. Categories are based on CMS diagnosis codes.

Revenues by Payor Source

FY2023 REVENUE (AUDITED)
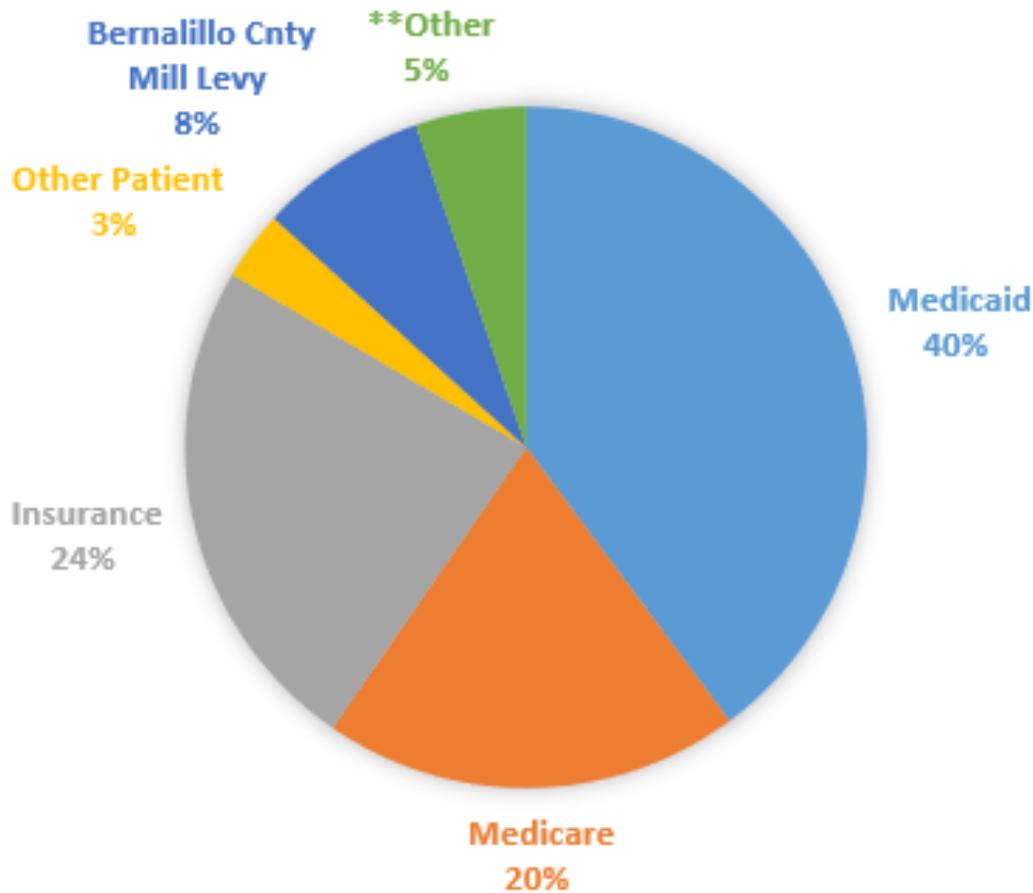
FY2023	
Medicaid	$ 600,072,470
Medicare	298,044,701
Insurance	359,404,802
*Other Patient	49,264,303
Bernalillo Cnty Mill Levy	120,649,639
**Other	79,139,291
Total Revenues	**$ 1,506,575,206**

*Other Patient: Champus, Veteran Affairs, Tricare and Out of State Medicaid

**Other: All other revenues that are not patient related. Such as State and Local Contracts, Other Operating Revenue, State Appropriations, Capital Appropriations, and Investment Income.

B. GOOD PRIMARY CARE SYSTEM

Total Number of Outpatient Clinic Visits

FY22 is based on the twelve (12) months ended June 30, 2022.
FY23 is based on the twelve (12) months ended June 30, 2023.
FY24 is based on the previous six (6) months ended December 31, 2023.

562,253	**FY22 Actual (12 Months)**
549,832	**FY23 Actual (12 Months)**
266,157	**FY24 Actual (6 Months)**

Outpatient visit total by Fiscal Year, including all Primary and Specialty clinics.

Number of Evening and Weekend Clinics (To deflect ED visits)

| Clinic:	Location:	Hours:
Adult Urgent Care	Main Hospital - 1st Floor, 2211 Lomas Blvd NE	Mon-Fri: 7am-6pm, Sat, Sun 7am-6pm
Peds Urgent Care	Main Hospital - 3rd Floor, 2211 Lomas Blvd NE	Mon-Fri: 8am-7pm, Sat 9am-2pm
Young Children's Health Center	306 San Pablo ST SE, Suite A	Mon-Thur: 8am-7pm, Fri 8am-5pm, Sat 9am-2pm

Press Ganey Ambulatory Experience Score
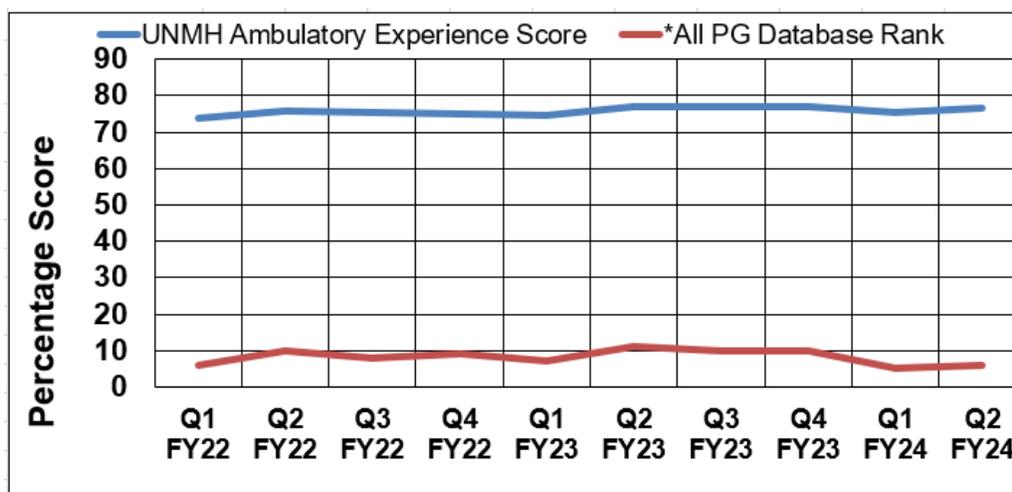
Quarter	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24	Q2 FY24
UNMH Ambulatory Experience Score	73.7	75.8	75.4	75.1	74.5	76.8	77.0	77.0	75.4	76.6
*All PG Database Rank	6.0	10.0	8.0	9.0	7.0	11.0	10.0	10.0	5.0	6.0

*The University Health System Consortium ("UHC") is an alliance of 98 of the nation's leading academic medical centers ("AMCs"), and 143 associate member institutions affiliated with those academic medical centers, which represents over 90% of the nonprofit academic medical centers in the United States.

Percentage of Primary Care Patients with Same Day Clinic Appointments

Average percentage of Same Day Access for Primary Care Clinics.
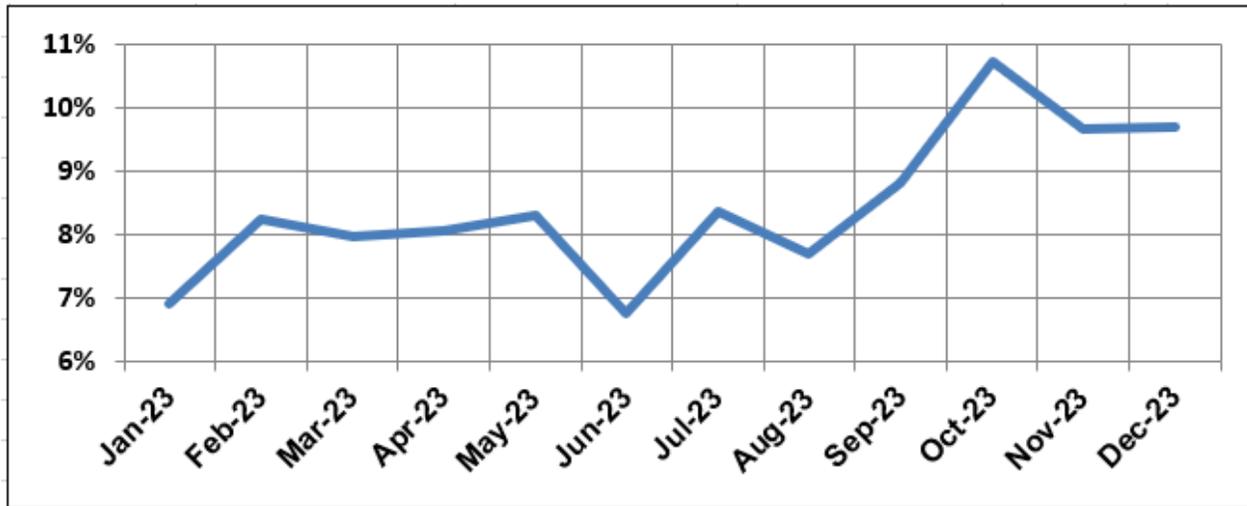
Month	Same Day	Total Arrived	Same Day Rate
Jan-23	1,102	15,976	6.9%
Feb-23	1,256	15,264	8.2%
Mar-23	1,313	16,491	8.0%
Apr-23	1,197	14,828	8.1%
May-23	1,354	16,323	8.3%
Jun-23	1,074	15,866	6.8%
Jul-23	1,194	14,269	8.4%
Aug-23	1,300	16,920	7.7%
Sep-23	1,317	14,926	8.8%
Oct-23	1,764	16,458	10.7%
Nov-23	1,480	15,342	9.6%
Dec-23	1,307	13,498	9.7%

Most recent three (3) month average for Same Day Access by Primary Care Clinic.

Average	Primary Care Clinics
14.6%	1209 Clinic
8.9%	Alamo Primary Care Clinic
5.7%	Family Practice Clinic
4.3%	General Pediatric Clinic
6.9%	Northeast Heights Clinic
10.9%	Senior Health Center
6.6%	Southeast Heights Clinic
11.0%	Southwest Mesa Clinic
4.3%	SRMC FP Clinic
7.3%	UH 4th Street NV Clinic
10.7%	UH Atrisco Heritage
47.8%	UNM Lobocare Clinic
8.2%	UNMMG Family Health Grande
5.7%	Westside Clinic
8.3%	Young Childrens Health Center

Primary Care Outpatient Appointment Dispositions
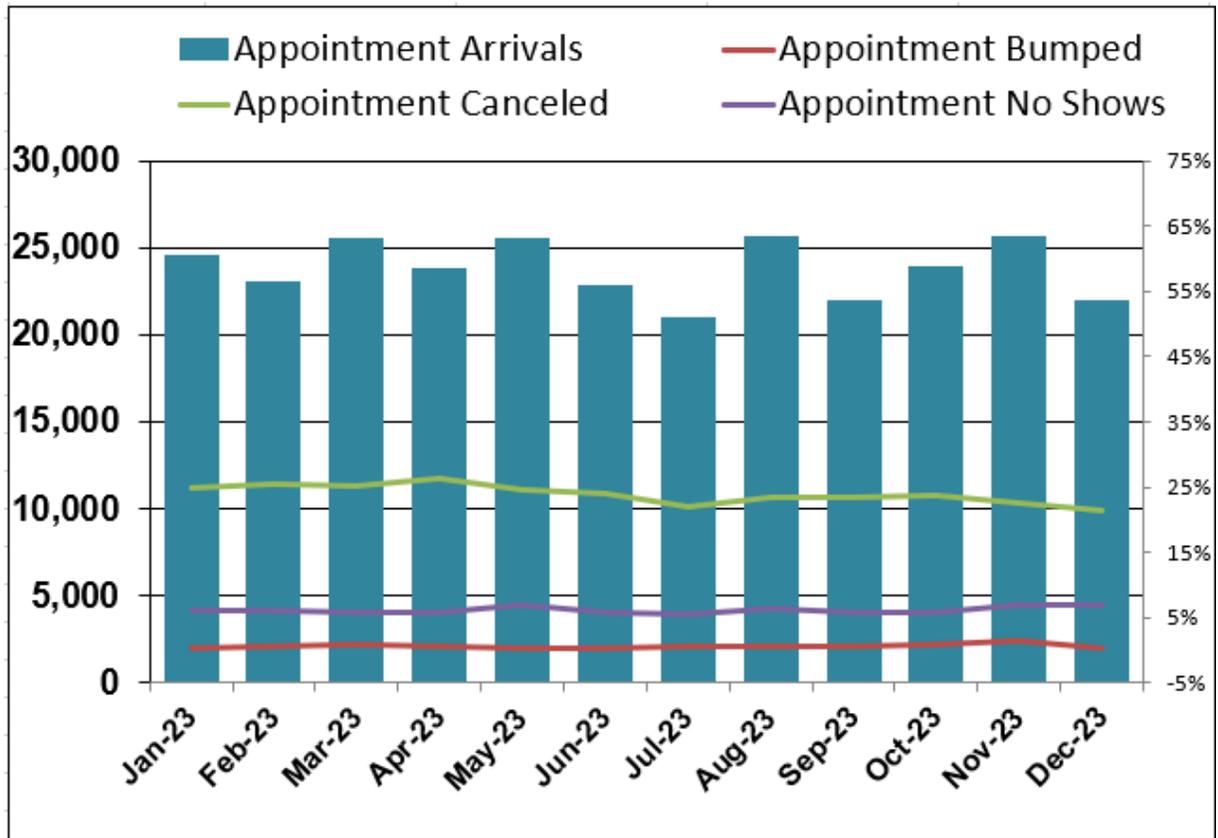
This data includes only Primary Care appointments.
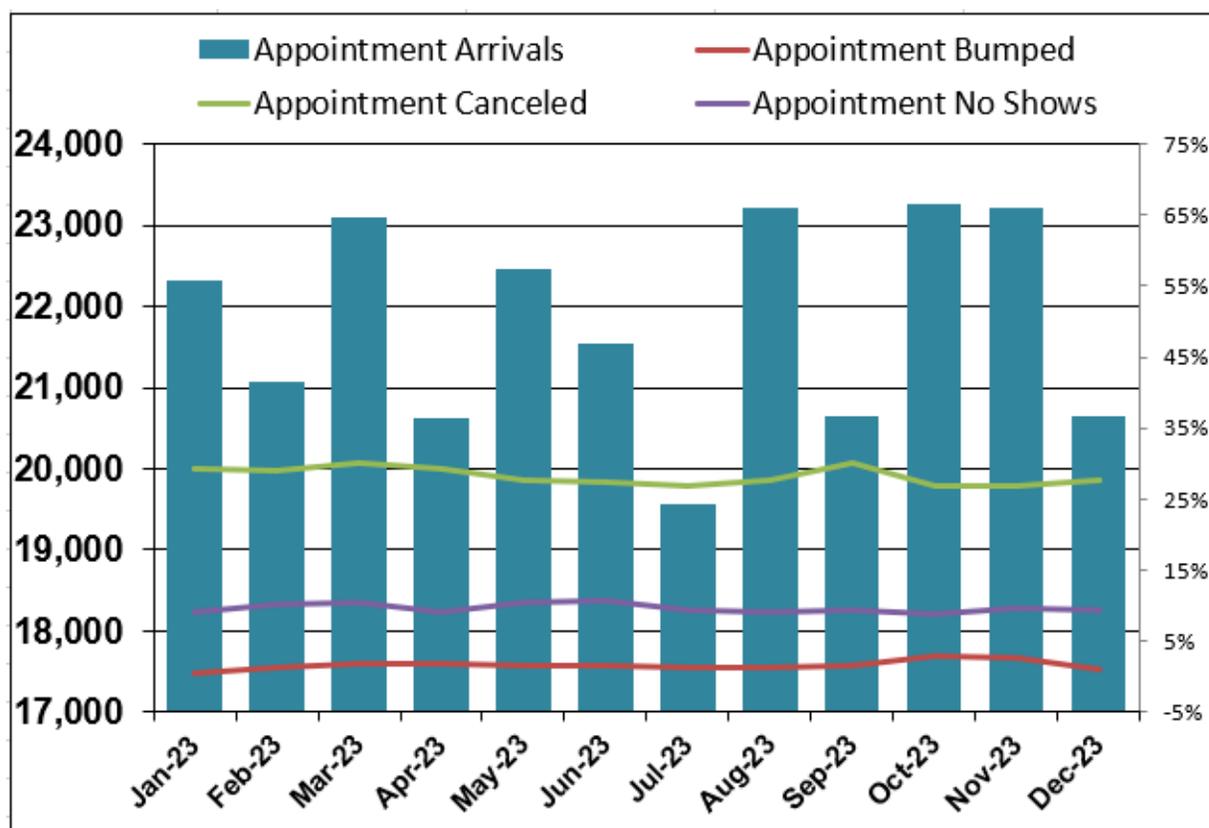
| Month	Appointment Arrivals	Appointment Bumped	Appointment Canceled	Appointment No Shows
Jan-23	22,310	1%	29%	9%
Feb-23	21,077	1%	29%	10%
Mar-23	23,089	2%	30%	10%
Apr-23	20,626	2%	29%	9%
May-23	22,449	2%	28%	10%
Jun-23	21,548	2%	27%	11%
Jul-23	19,563	1%	27%	9%
Aug-23	23,219	1%	28%	9%
Sep-23	20,648	2%	30%	9%
Oct-23	23,254	3%	27%	9%
Nov-23	23,219	3%	27%	10%
Dec-23	20,648	1%	28%	9%

Specialty Care Outpatient Appointment Dispositions

This data includes only Specialty Care appointments.

Month	Appointment Arrivals	Appointment Bumped	Appointment Canceled	Appointment No Shows
Jan-23	24,571	0%	25%	6%
Feb-23	23,053	1%	25%	6%
Mar-23	25,625	1%	25%	6%
Apr-23	23,839	0%	26%	6%
May-23	25,569	0%	25%	7%
Jun-23	22,822	0%	24%	6%
Jul-23	20,986	0%	22%	5%
Aug-23	25,732	1%	24%	6%
Sep-23	22,014	1%	24%	6%
Oct-23	23,976	1%	24%	6%
Nov-23	25,732	1%	22%	7%
Dec-23	22,014	0%	21%	7%

Percentage Abandoned Phone Calls for Primary and Specialty Care
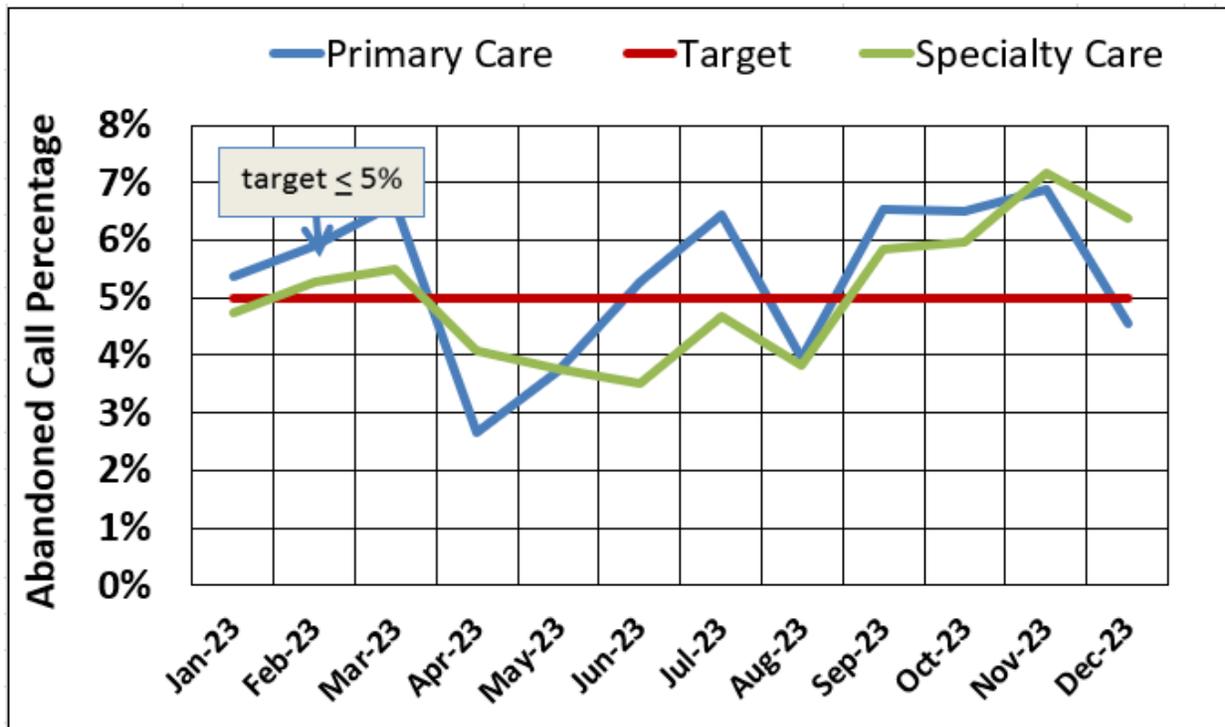
Area: Month	UNMH Primary Care Scheduling ACD	UNMH Specialty Care Scheduling ACD	Goal Standard for Call Center
Jan-23	5.37%	4.75%	5%
Feb-23	5.90%	5.27%	5%
Mar-23	6.62%	5.51%	5%
Apr-23	2.66%	4.07%	5%
May-23	3.74%	3.77%	5%
Jun-23	5.27%	3.51%	5%
Jul-23	6.44%	4.67%	5%
Aug-23	3.95%	3.83%	5%
Sep-23	6.55%	5.83%	5%
Oct-23	6.49%	5.98%	5%
Nov-23	6.87%	7.18%	5%
Dec-23	4.54%	6.37%	5%

Medication Reconciliation Goals Primary and Specialty Care

National Patient Safety Goal :
UNH Medication Reconciliation Rates for Primary Care and Specialty Care.

Medication Reconciliation Rates
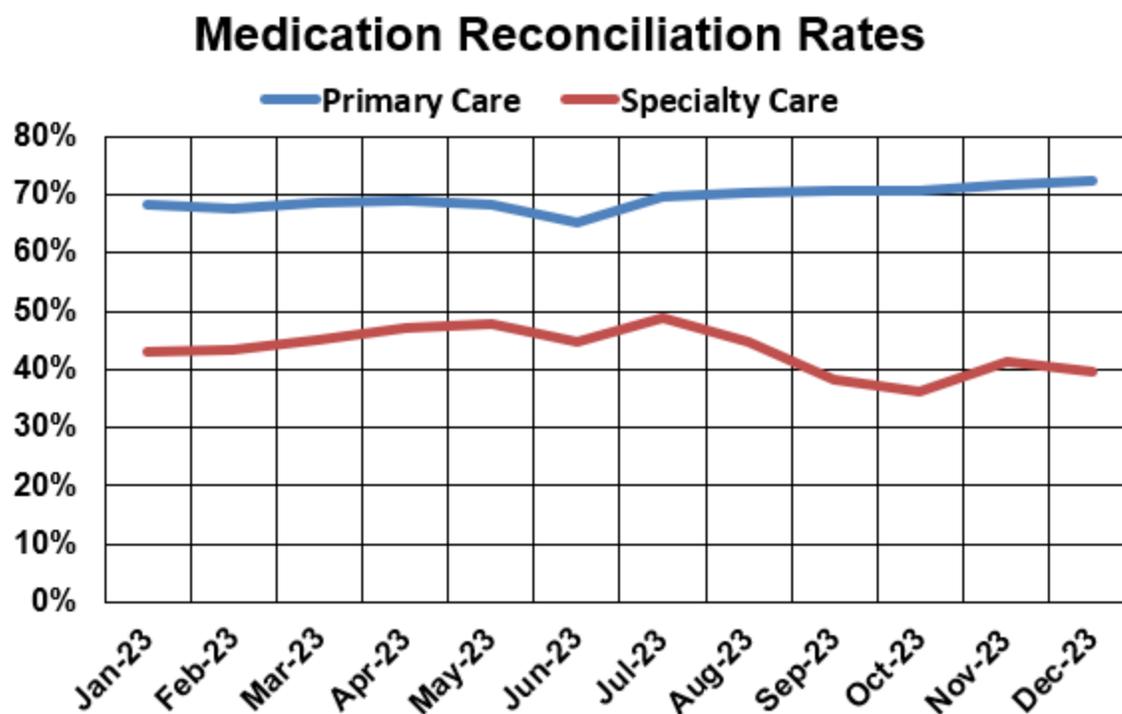
Month	Primary Care	Specialty Care
Jan-23	68.5%	42.9%
Feb-23	67.6%	43.3%
Mar-23	68.6%	45.0%
Apr-23	68.9%	47.1%
May-23	68.5%	47.8%
Jun-23	65.4%	44.7%
Jul-23	69.6%	48.8%
Aug-23	70.5%	44.8%
Sep-23	70.8%	38.3%
Oct-23	70.8%	36.1%
Nov-23	71.7%	41.3%
Dec-23	72.3%	39.5%

Percentage of Patients with Access to Electronic Medical Record

The statistics below are only for online access to medical records.

As of December 31, 2023.

422,813	Invitations sent out to patients who provided an email address.
194,145	Patients who have claimed invitation to sign up.
3,831	Patients who have self enrolled directly without an invitation.
171,637	*Active Users who have accessed their medical records.
41%	Percentage of patients who can potentially access their medical records electronically .

*The number of Active Users shown is the current number. It does not allow for deceased patients, nor children under age 13 covered under Children's Online Privacy Protection Act (COPPA).

One hundred percent (100%) of all patients may access their medical records in person at UNMH Health Information Management (HIM).

UNMH turned on the **MyHealth** on October 31, 2012 to provide patients on-line access to their medical records. **MyHealth** is UNM's patient portal where you can manage your health care outside of the traditional office visit.

What to expect from MyHealth at UNM:

- See appointment information anytime.

- See your lab results and data.

- HIPAA-compliant, secure way to communicate with your Doctors and Healthcare Providers.

- View, download, and share parts of your UNM health record.

Diabetes Management Indicators for HgbA1C and LDL <100

Percentage of A1c and LDL Checked — % A1c Done — % LDL Done
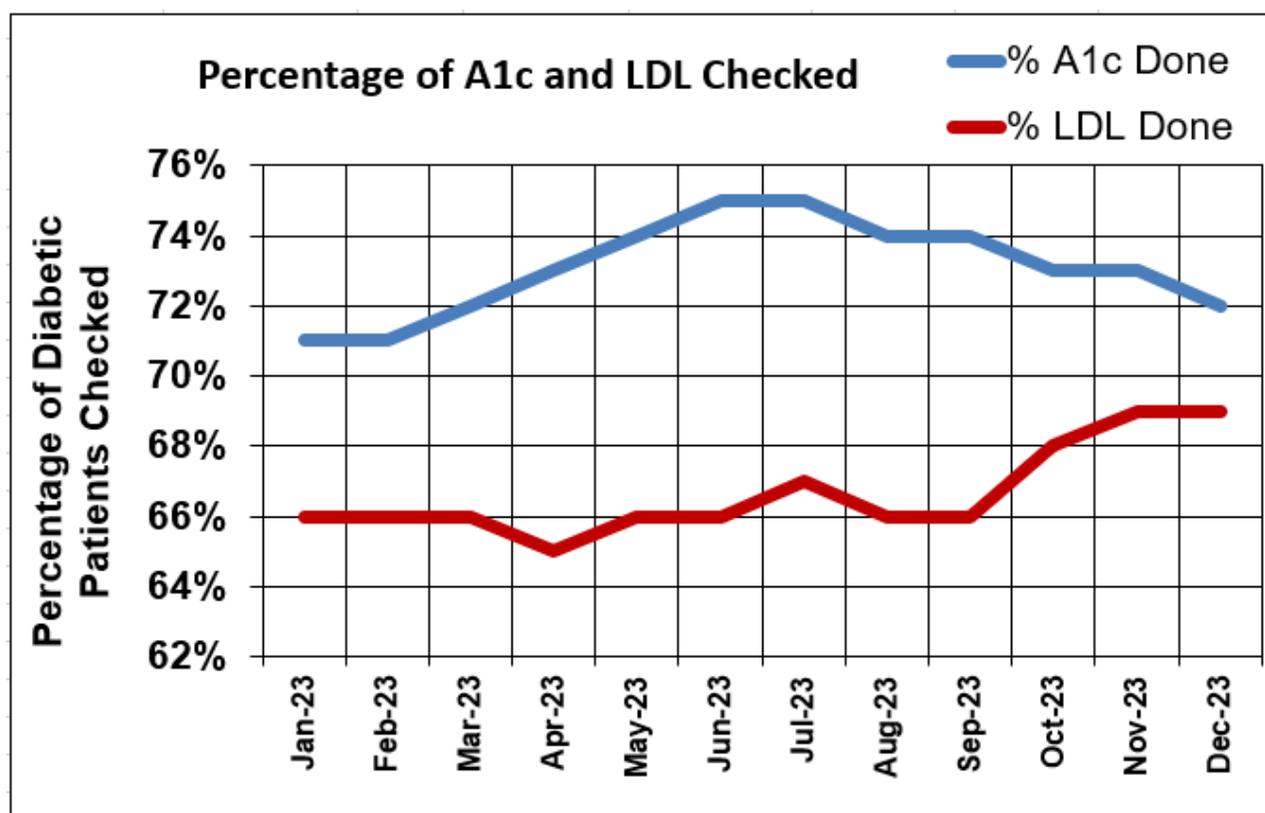
Month	Total Patients		A1c Done	% A1c Done		LDL Done	% LDL Done
Jan-23	8,162		5,810	71%		5,386	66%
Feb-23	8,165		5,826	71%		5,374	66%
Mar-23	8,106		5,841	72%		5,319	66%
Apr-23	8,089		5,924	73%		5,286	65%
May-23	8,097		5,999	74%		5,307	66%
Jun-23	8,081		6,094	75%		5,340	66%
Jul-23	7,955		5,946	75%		5,295	67%
Aug-23	7,974		5,927	74%		5,271	66%
Sep-23	7,970		5,897	74%		5,249	66%
Oct-23	8,247		6,009	73%		5,634	68%
Nov-23	8,277		6,022	73%		5,677	69%
Dec-23	8,447		6,075	72%		5,844	69%

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C. FINANCIAL SERVICES

UNM Care Enrollment, Self-Pay and Medicaid Applications

Month	UNM Care Plan Enrollment Counts	Number of Self Pay Patients Seen on Discount	Number of Medicaid applications completed at UNMH
Jan-23	3,666	4	134
Feb-23	4,809	2	207
Mar-23	4,710	5	162
Apr-23	5,009	3	261
May-23	3,904	6	307
Jun-23	3,782	6	287
Jul-23	4,484	5	283
Aug-23	4,244	9	78
Sep-23	4,195	1	108
Oct-23	4,654	5	130
Nov-23	4,463	5	101
Dec-23	4,797	6	155

## Total Uncompensated Care – Charity Care and Uninsured

For the three (6) months ended December 31, 2023, based on primary and secondary coverage.

Bernalillo County	Charity Care	Uninsured	Total Uncompensated Care
Unduplicated Census	9,966	6,085	16,051
Encounters	27,576	10,634	38,210
Cost	$ 18,524,625	$ 9,188,146	$ 27,712,771

Total Uncompensated Care Cost: Cost of care for UNM Hospitals is the actual cost of providing care - salary, benefits, supplies, drugs, blood, organs, utilities, depreciation, contracts, services.

Number of Unique Patients Sent to Collections

The following trend is the monthly number of unique patient accounts sent to the UNMH contracted collection agency and includes all counties.
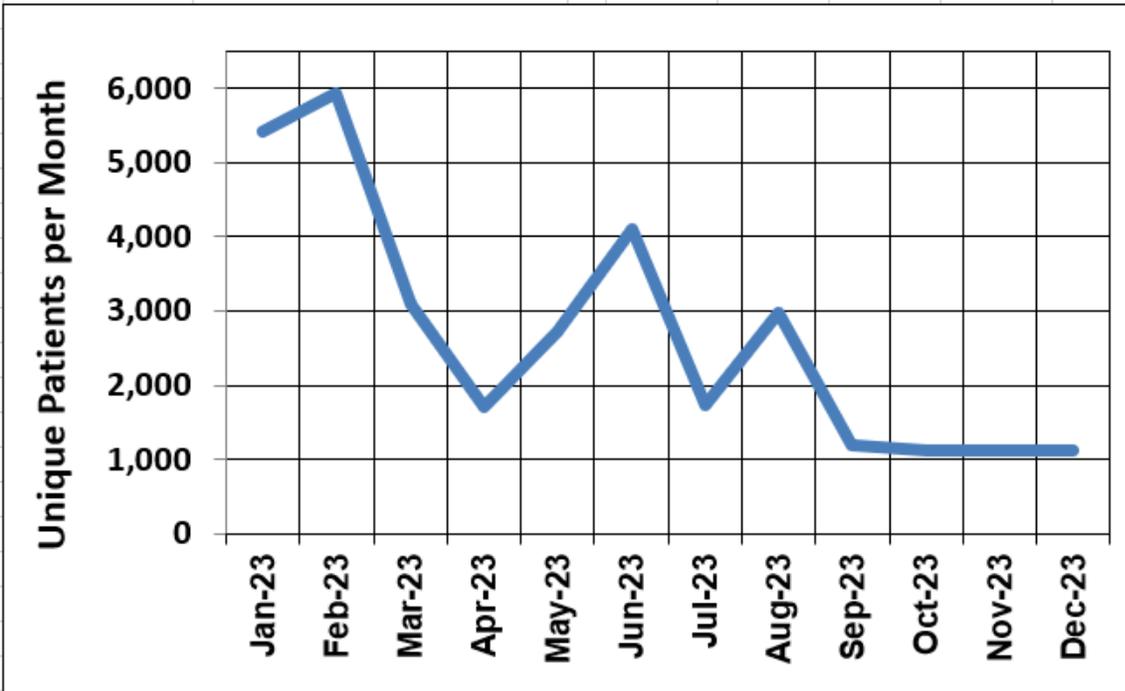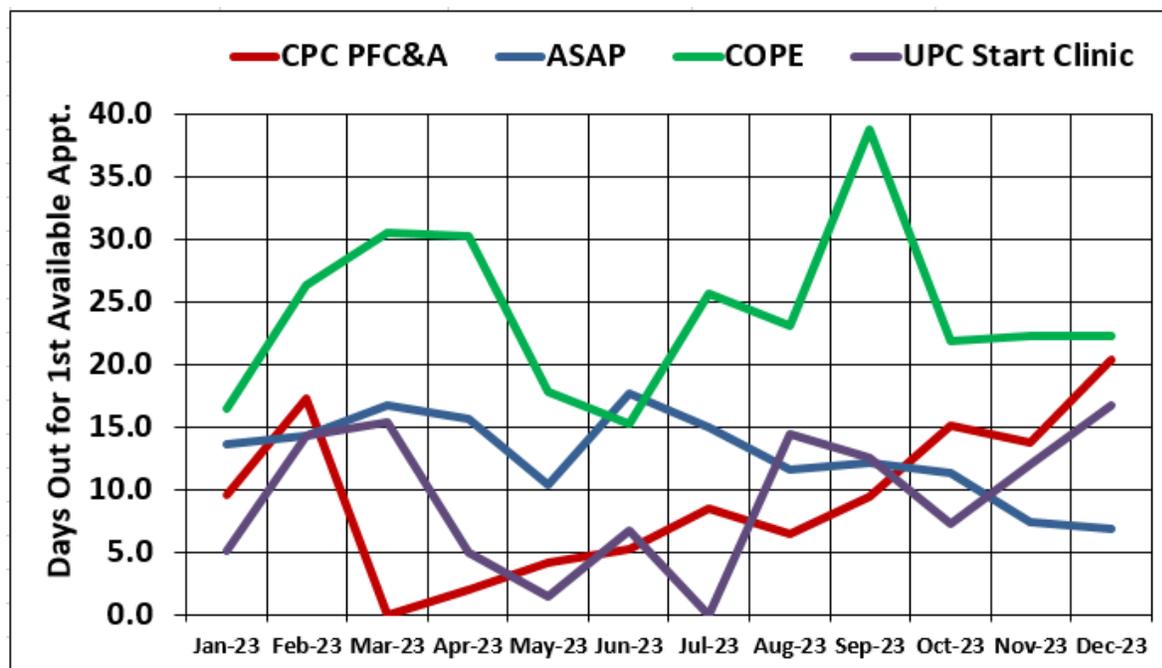

Days Out For Scheduling Financial Assistance Appointment

The statistics below are the average number of "days out" each month for scheduling a financial assistance appointment.
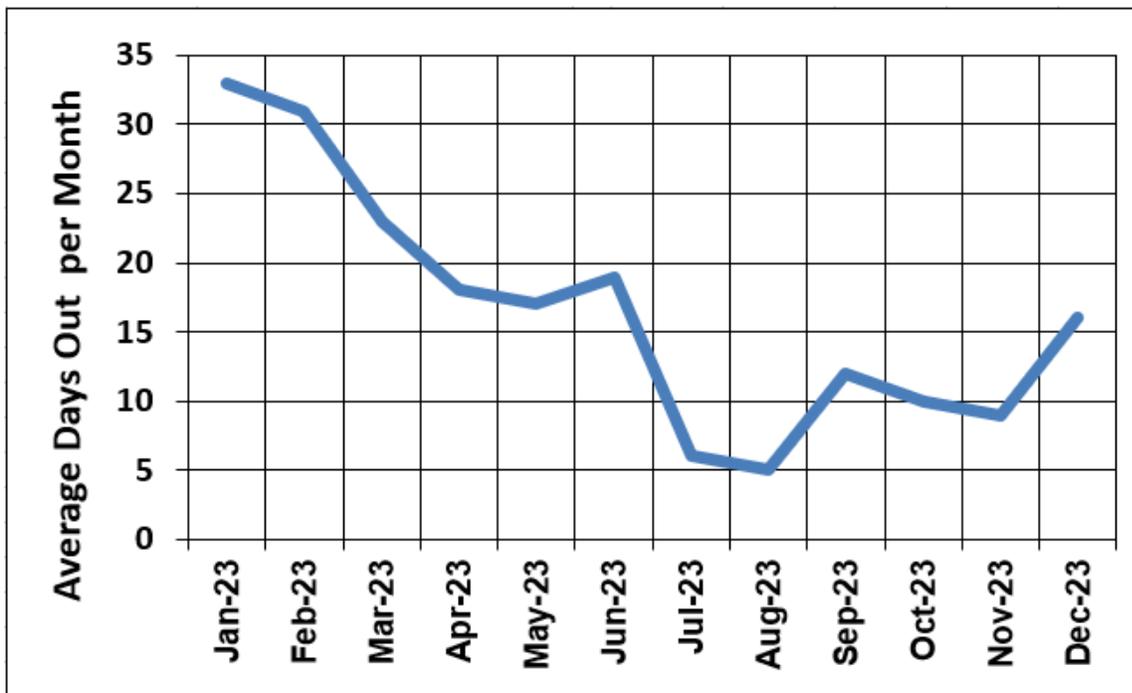
D. BEHAVIORAL HEALTH

Average Appointment Time for BH Outpatient Services

Month	CPC PFC&A	ASAP	COPE	UPC Start Clinic
Jan-23	9.6	13.6	16.5	5.1
Feb-23	17.2	14.3	26.3	14.3
Mar-23	0.0	16.8	30.6	15.4
Apr-23	1.9	15.7	30.2	5.0
May-23	4.2	10.4	17.8	1.5
Jun-23	5.2	17.7	15.2	6.8
Jul-23	8.5	15.0	25.7	0.0
Aug-23	6.5	11.6	23.1	14.4
Sep-23	9.4	12.1	38.7	12.6
Oct-23	15.1	11.3	21.9	7.3
Nov-23	13.8	7.4	22.3	12.0
Dec-23	20.4	6.9	22.3	16.7

Definitions For Above Acronyms

CPC PFC&A	Children's Psychiatric Center Programs for Children and Adolescents
ASAP	Alcohol and Substance Abuse Program
COPE	Chronic Occurrences of Psychotic Episodes Clinic. The Center for Recovery and Resiliency consilidated into COPE
UPC Start Clinic	University Psychiatric - Start Clinic (General Clinic)

BH Specialty Care Outpatient Appointment Disposition

The statistics below are for just Behavioral Health (BH) Specialty Care appointments and does not include any BH Primary Care appointments.
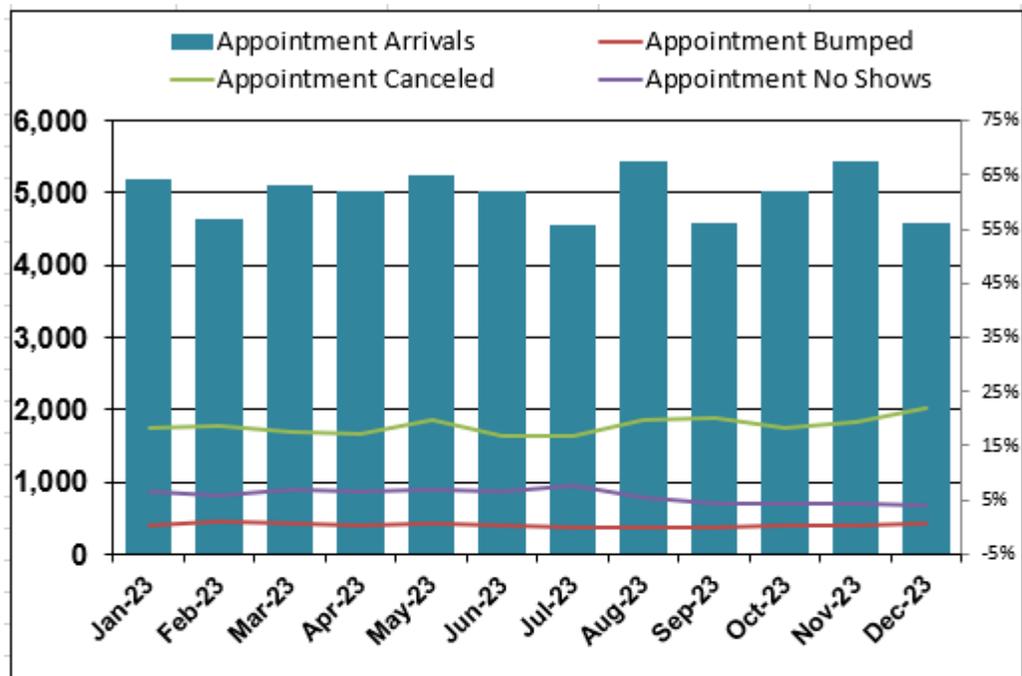

Month	Appointment Arrivals	Appointment Bumped	Appointment Canceled	Appointment No Shows
Jan-23	5,176	0%	18%	7%
Feb-23	4,651	1%	19%	6%
Mar-23	5,101	0%	18%	7%
Apr-23	5,027	0%	17%	7%
May-23	5,231	1%	20%	7%
Jun-23	5,022	0%	17%	7%
Jul-23	4,564	0%	17%	8%
Aug-23	5,428	0%	20%	5%
Sep-23	4,594	0%	20%	4%
Oct-23	5,016	0%	18%	4%
Nov-23	5,428	0%	19%	4%
Dec-23	4,594	1%	22%	4%

Number of Unique Outpatients and Number of Encounters CY2023

Patient Group	Patients Served	Total Encounters
BH UPC Outpatient*	11,083	69,100
BH CPC Outpatient	3,699	22,312

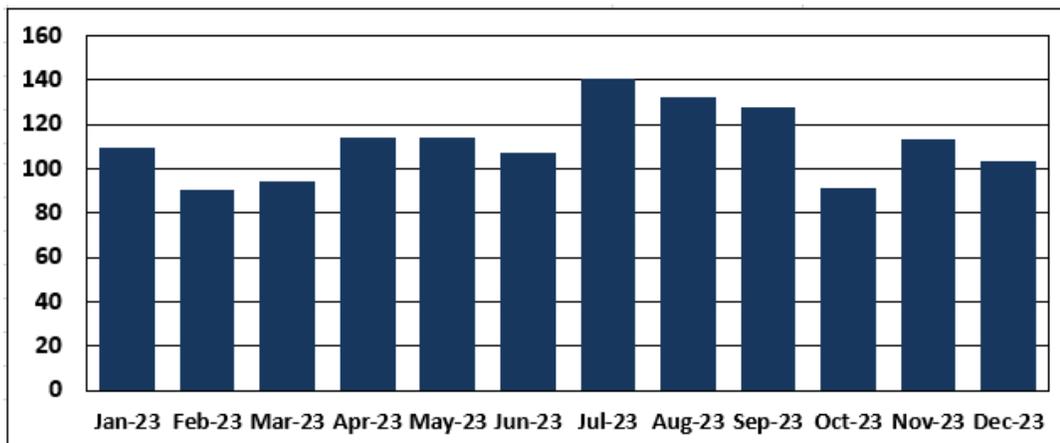* Excluding all Suboxone and Methadone Visits

Psychiatric Emergency Department and Urgent Care Encounters
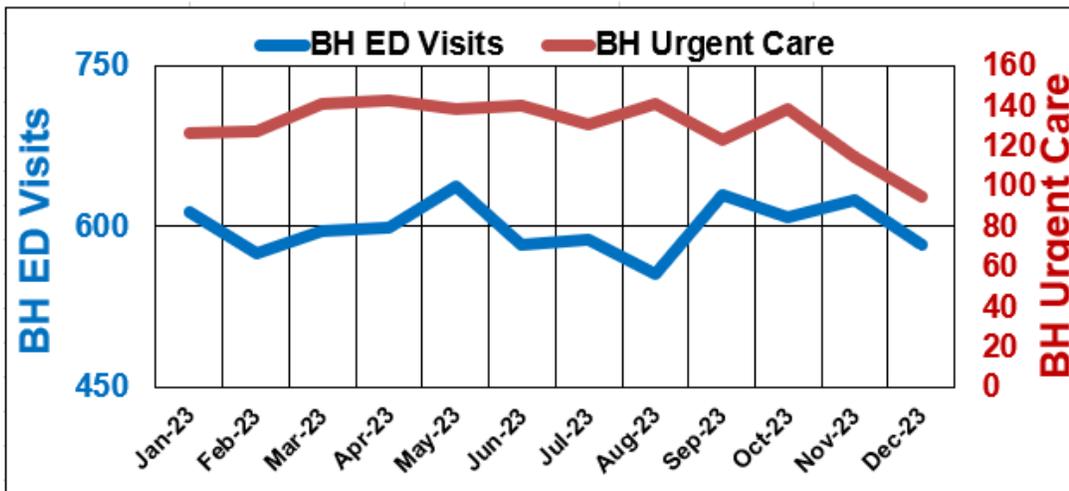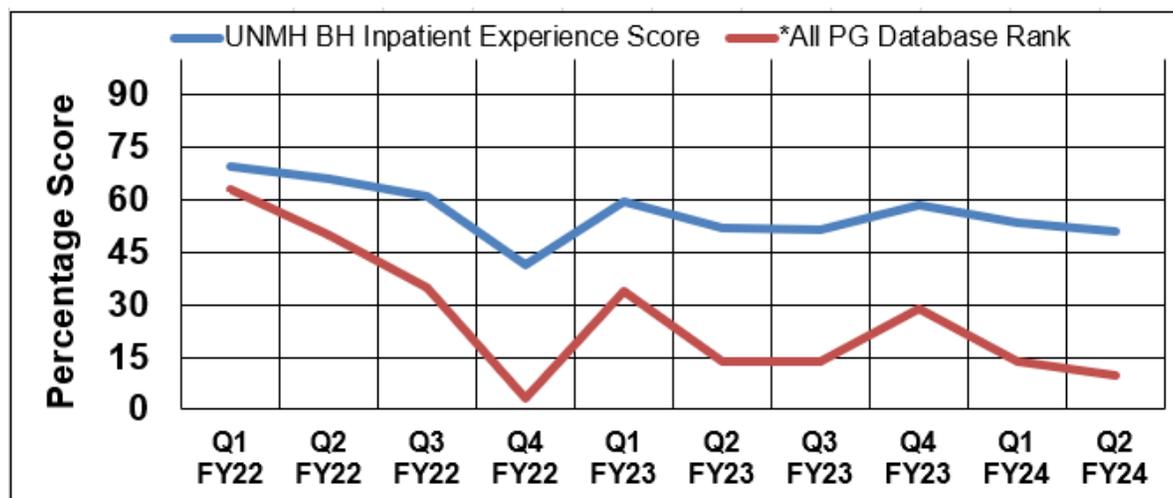

Number of Fast Track Patients Seen
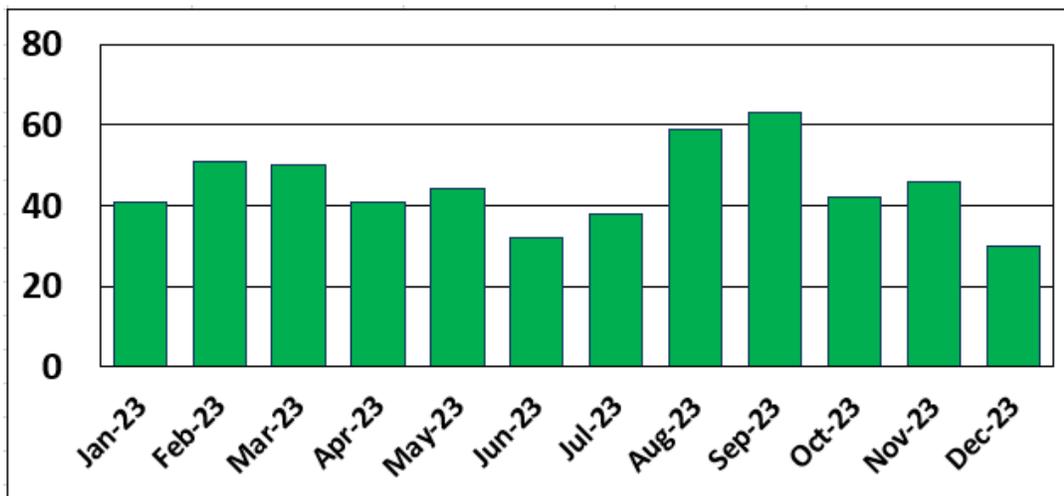
## Law Enforcement Drop offs at Psychiatric Emergency Services

Press Ganey Behavioral Health Inpatient Experience Score

| Quarter	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24	Q2 FY24
UNMH BH Inpatient Experience Score	69.4	65.9	60.9	41.3	59.6	52.1	51.3	58.6	53.5	50.6
*All PG Database Rank	63.0	50.0	35.0	3.0	34.0	14.0	14.0	29.0	14.0	10.0

Press Ganey Behavioral Health Outpatient Experience Score
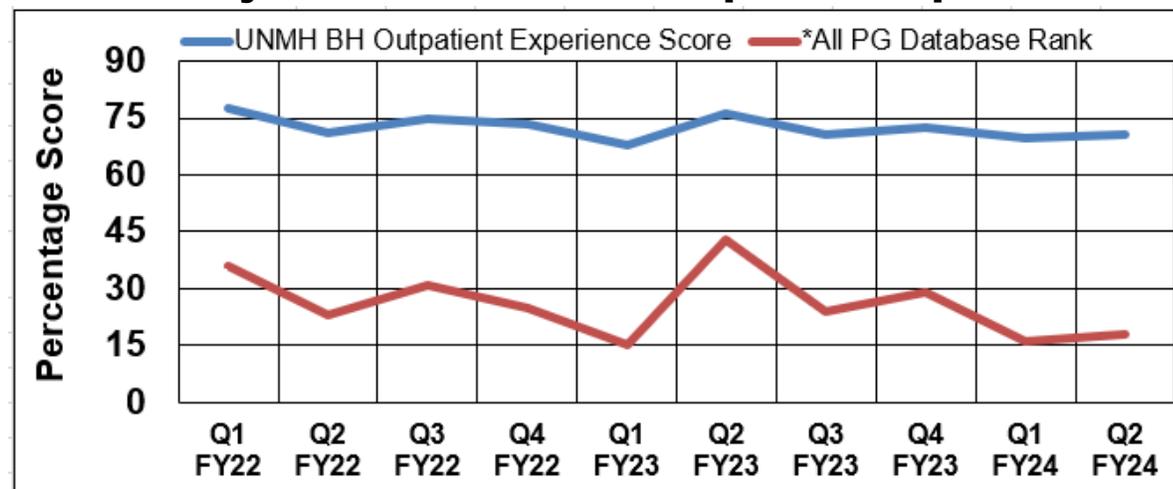
Quarter	Q1 FY22	Q2 FY22	Q3 FY22	Q4 FY22	Q1 FY23	Q2 FY23	Q3 FY23	Q4 FY23	Q1 FY24	Q2 FY24
UNMH BH Outpatient Experience Score	77.5	71.3	74.7	73.5	67.8	76.0	70.6	72.3	69.6	70.7
*All PG Database Rank	36.0	23.0	31.0	25.0	15.0	43.0	24.0	29.0	16.0	18.0

*The University HealthSystem Consortium ("UHC") is an alliance of 98 of the nation's leading academic medical centers ("AMCs"), and 143 associate member institutions affiliated with those academic medical centers, which represents over 90% of the nonprofit academic medical centers in the United States.

Behavioral Health Inpatient Admitted to Non-UNMH Facilities
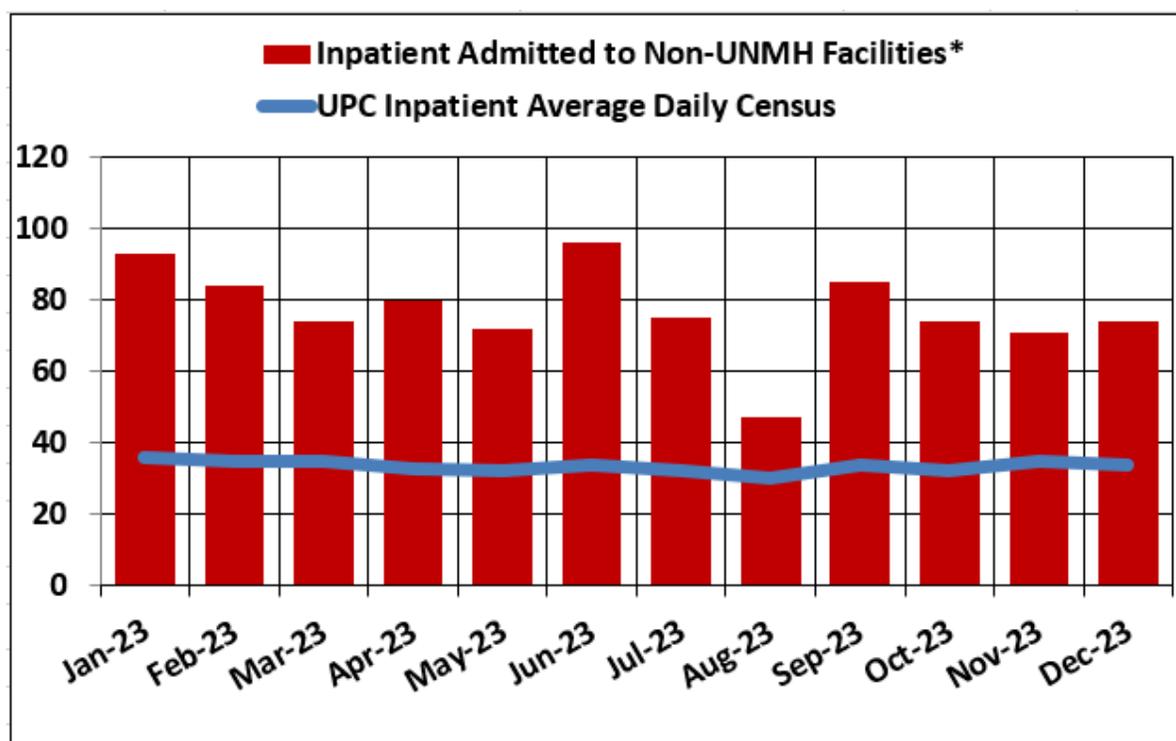
| Month	Inpatient Admitted to Non-UNMH Facilities*	UPC Inpatient Average Daily Census
Jan-23	93	36
Feb-23	84	35
Mar-23	74	35
Apr-23	80	33
May-23	72	32
Jun-23	96	34
Jul-23	75	32
Aug-23	47	30
Sep-23	85	34
Oct-23	74	32
Nov-23	71	35
Dec-23	74	34

*Includes transfers based on patient's network provider, healthcare coverage and clinically appropriate level of care for a patient who may need a different type of bed for which we currently do not have capacity. Behavioral Health has a maximum of 47 licensed inpatient beds.

Behavioral Health Average Length of Inpatient Stay
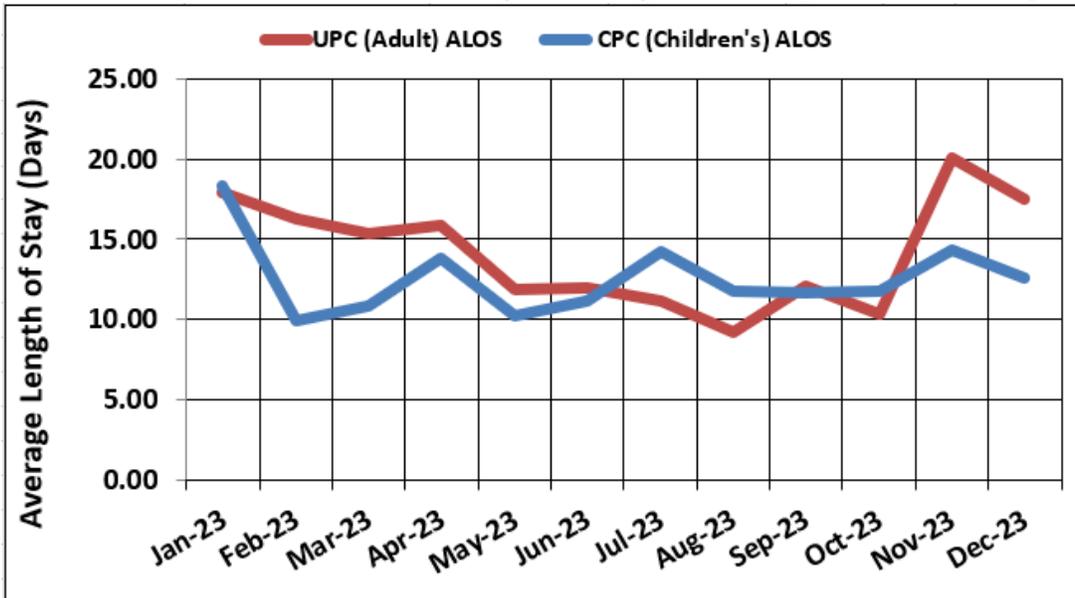
Children's Psychiatric Center (CPC)　　Average Child National Benchmark: **10.97**
University Psychiatric Center (UPC)　　Average Adult National Benchmark: **8.47**

Number of BH Adult and Child/Adolescent Inpatient Days
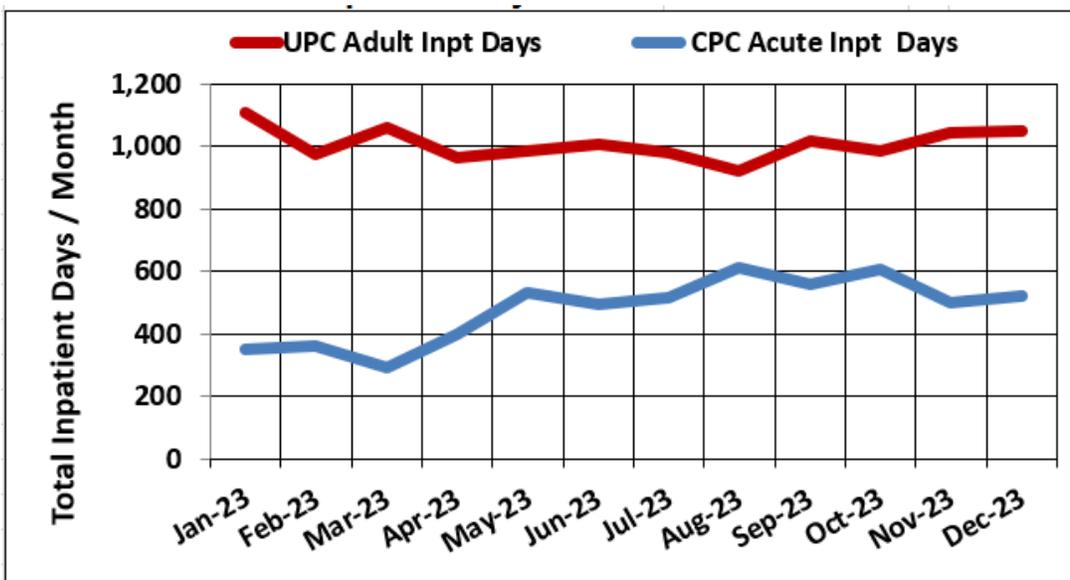
Number of Unique Inpatients and Number of Encounters CY2023

Patient Group	Patients Served	Total Encounters
BH UPC Inpatient	743	1,201
BH CPC Inpatient	550	664

Number of COPE Medical Home Encounters for High Needs Patients

Fiscal Year	Count
FY2021	12,615
FY2022	11,755
FY2023	10,916
FY2024*	10,084

* Projected Count based upon the previous twelve (12) months.

Total Opioid Patients

Month	Census
Jan-23	450
Feb-23	448
Mar-23	450
Apr-23	444
May-23	451
Jun-23	471
Jul-23	428
Aug-23	424
Sep-23	423
Oct-23	409
Nov-23	405
Dec-23	404

Total Methadone Encounters

Month	Count
Jan-23	2,798
Feb-23	2,594
Mar-23	2,803
Apr-23	2,685
May-23	2,834
Jun-23	2,917
Jul-23	2,706
Aug-23	2,827
Sep-23	2,454
Oct-23	2,616
Nov-23	2,457
Dec-23	2,413

Number of Methadone and Suboxone Doses *

Month	Pharmacy Suboxone Rx Filled	Prescription Suboxone Doses	ASAP Methadone Doses
Jan-23	597	31,818	10,649
Feb-23	485	26,326	10,784
Mar-23	580	30,817	10,242
Apr-23	530	29,812	10,972
May-23	549	28,995	10,836
Jun-23	544	29,213	10,796
Jul-23	526	29,075	11,004
Aug-23	600	33,280	8,849
Sep-23	482	27,735	10,823
Oct-23	547	29,347	10,521
Nov-23	589	32,541	10,581
Dec-23	505	27,299	10,317

Total Suboxone Encounters

Month	Count
Jan-23	25
Feb-23	19
Mar-23	20
Apr-23	19
May-23	23
Jun-23	30
Jul-23	32
Aug-23	41
Sep-23	33
Oct-23	27
Nov-23	52
Dec-23	20

*The total number of Methadone and Suboxone doses per month includes all of the Methadone Liquid doses distributed at ASAP, Suboxone Dispensed at ASAP and all of the prescriptions from the UNM System for buprenorphine-naloxone (Suboxone) doses dispensed through the UNMH pharmacies.

30 Day Readmission Rate – Children's Psychiatric Center (CPC)

There is a three (3) month delay in Vizient data, so statistics are one quarter behind.
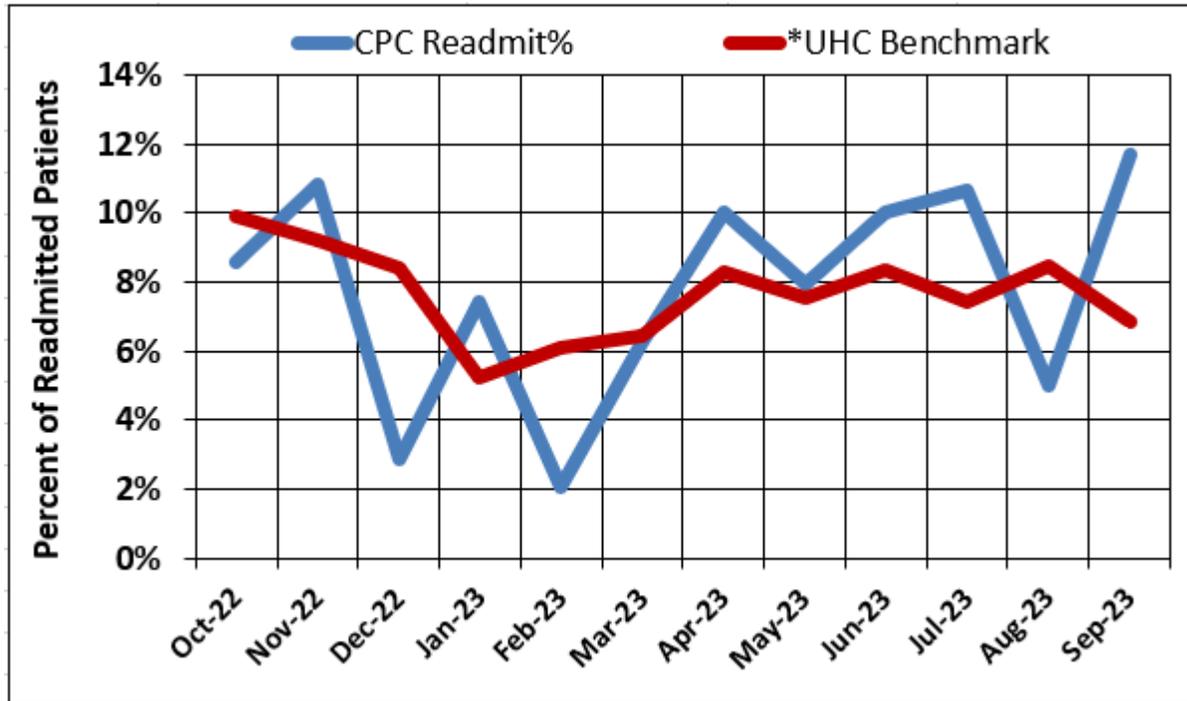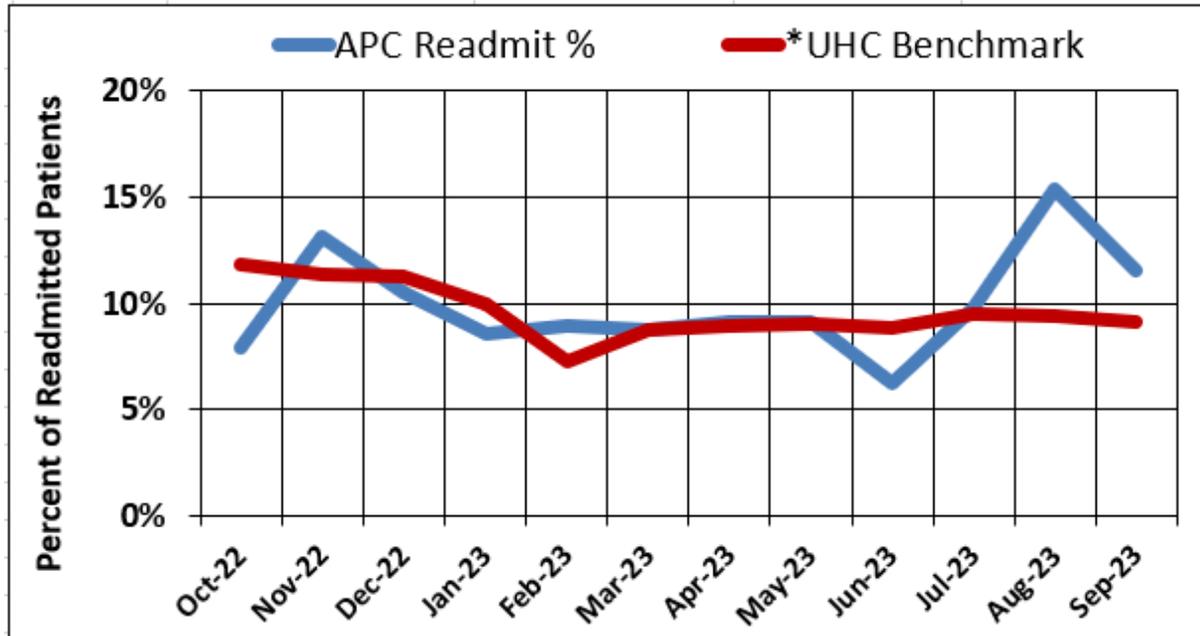

Discharge Month	Total Cases (Denominator Cases)	30 Day (Readmit Cases)	Percent 30 Day Readmit Rate	*UHC Benchmark
Oct-22	35	3	8.6%	9.9%
Nov-22	37	4	10.8%	9.2%
Dec-22	35	1	2.9%	8.4%
Jan-23	27	2	7.4%	5.3%
Feb-23	48	1	2.1%	6.1%
Mar-23	48	3	6.3%	6.4%
Apr-23	40	4	10.0%	8.3%
May-23	63	5	7.9%	7.5%
Jun-23	50	5	10.0%	8.3%
Jul-23	47	5	10.6%	7.4%
Aug-23	60	3	5.0%	8.5%
Sep-23	60	7	11.7%	6.8%

*The University Health System Consortium ("UHC") Benchmark data is based upon only those UHC/Vizient Hospitals with a psychiatric patient volume or greater than the UNM Hospitals facility. Patient population for compare group defined as an assigned MDC code of 19 ("Mental Disease & Disorders) and age of < 18 years old.

30 Day Readmission Rate – Adult Psychiatric Center

There is a three (3) month delay in Vizient data, so statistics are one quarter behind.

Discharge Month	Total Cases (Denominator Cases)	30 Day (Readmit Cases)	Percent 30 Day Readmit Rate	*UHC Benchmark
Oct-22	76	6	7.9%	11.8%
Nov-22	76	10	13.2%	11.3%
Dec-22	57	6	10.5%	11.3%
Jan-23	58	5	8.6%	10.0%
Feb-23	56	5	8.9%	7.3%
Mar-23	57	5	8.8%	8.7%
Apr-23	55	5	9.1%	8.9%
May-23	77	7	9.1%	9.0%
Jun-23	80	5	6.3%	8.9%
Jul-23	82	8	9.8%	9.5%
Aug-23	91	14	15.4%	9.4%
Sep-23	78	9	11.5%	9.1%

*The University Health System Consortium ("UHC") Benchmark data is based upon only those UHC/Vizient Hospitals with a psychiatric patient volume or greater than the UNM Hospitals facility. Patient population for compare group defined as an assigned MDC code of 19 ("Mental Disease & Disorders) and age of > 18 years old.

# 30 Day Readmission Rate – Both Adult and CPC Psychiatric Center

There is a three (3) month delay in Vizient data, so statistics are one quarter behind.
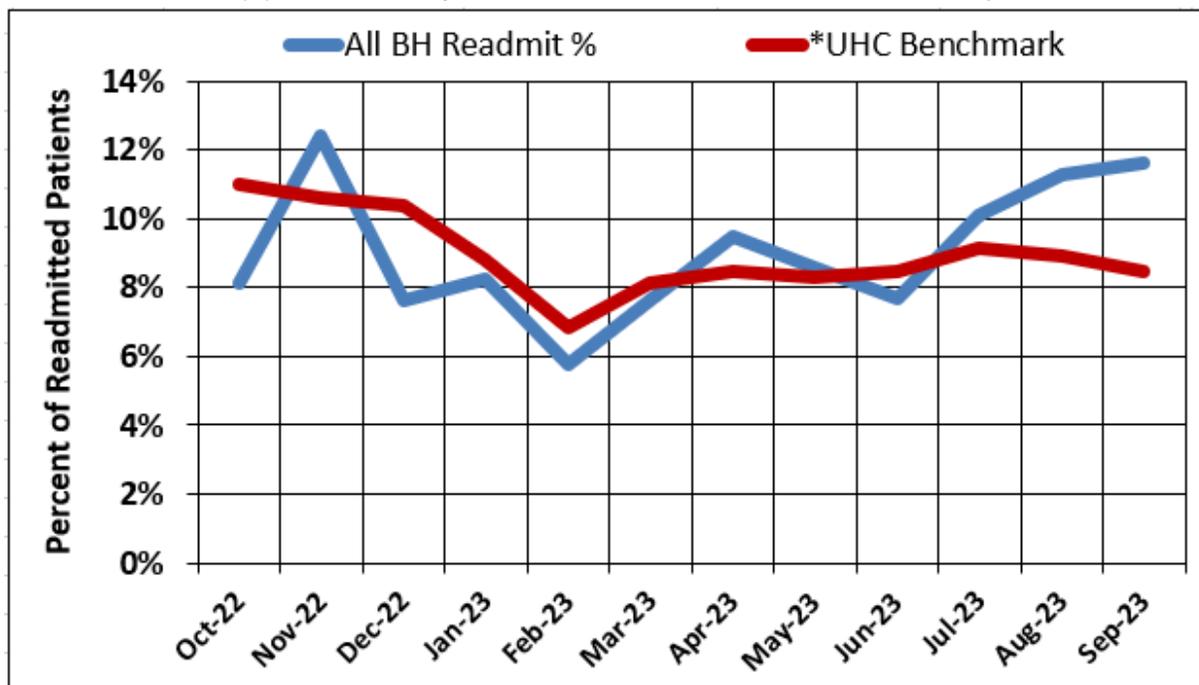
Discharge Month	Total Discharges (Denominator Cases)	30 Day (Readmit Cases)	Percent 30 Day Readmit Rate	*UHC Benchmark
Oct-22	111	9	8.1%	11.0%
Nov-22	113	14	12.4%	10.6%
Dec-22	92	7	7.6%	10.4%
Jan-23	85	7	8.2%	8.8%
Feb-23	104	6	5.8%	6.9%
Mar-23	105	8	7.6%	8.1%
Apr-23	95	9	9.5%	8.4%
May-23	140	12	8.6%	8.3%
Jun-23	130	10	7.7%	8.5%
Jul-23	129	13	10.1%	9.1%
Aug-23	151	17	11.3%	8.9%
Sep-23	138	16	11.6%	8.5%

*The University Health System Consortium ("UHC") Benchmark data is based upon only those UHC/Vizient Hospitals with a psychiatric patient volume or greater than the UNM Hospitals facility. Patient population for compare group defined as an assigned MDC code of 19.

Mill Levy Dollars Allocated to Behavioral Health
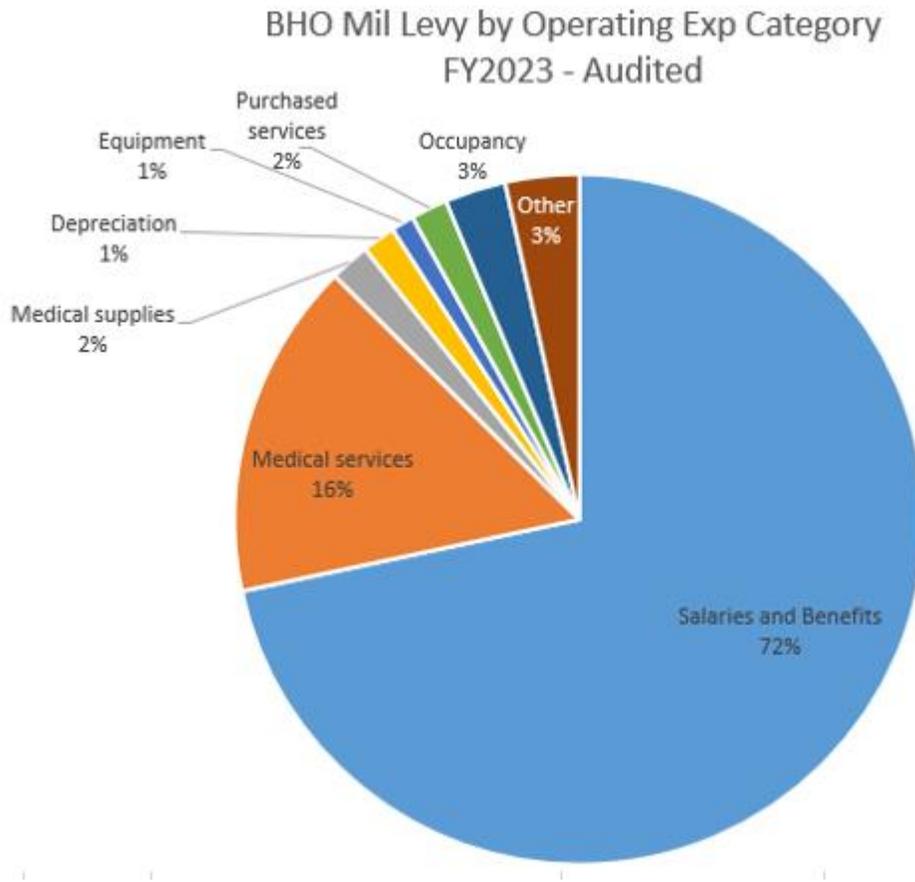
FY2023

Salaries and Benefits	$ 12,969,329
Medical services	2,859,234
Medical supplies	338,054
Depreciation	282,121
Equipment	193,402
Purchased services	311,803
Occupancy	517,443
Other	626,060
Total Expense	**$ 18,097,446**

The Behavioral Health Mill Levy distribution is proportional to the Income Statement.

E. NATIVE AMERICAN SERVICES

Native American UNM Care Enrollment, Outpatient and ED Visits

Native American Outpatient and ED Visits
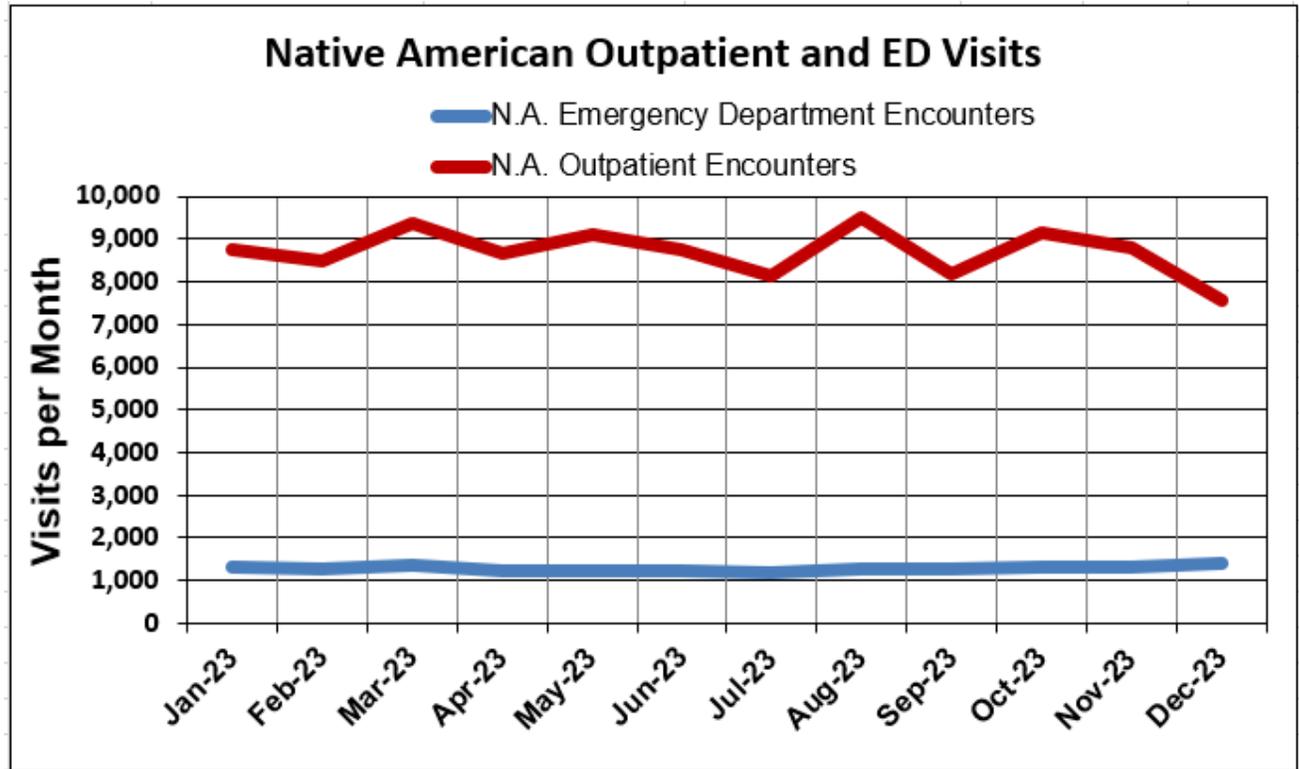
Month	Native American UNM Care Enrollment	N.A. Emergency Department Encounters	N.A. Outpatient Encounters
Jan-23	16	1,298	8,735
Feb-23	25	1,263	8,469
Mar-23	22	1,378	9,372
Apr-23	32	1,224	8,643
May-23	33	1,234	9,085
Jun-23	30	1,244	8,730
Jul-23	31	1,173	8,118
Aug-23	40	1,260	9,489
Sep-23	29	1,285	8,185
Oct-23	34	1,304	9,126
Nov-23	32	1,322	8,797
Dec-23	15	1,414	7,541

Native American Bed Days and Monthly Inpatient Census
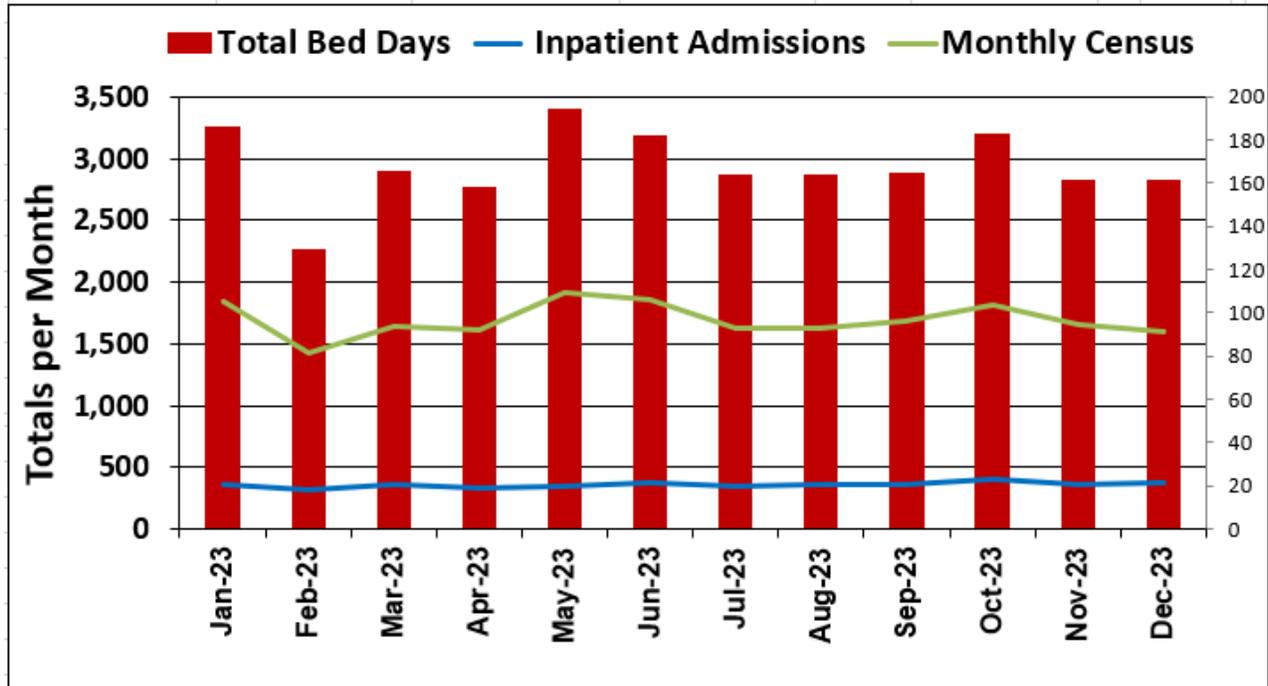
Month	Total Bed Days	Inpatient Admissions	Monthly Census
Jan-23	3,257	356	105
Feb-23	2,273	319	81
Mar-23	2,900	361	94
Apr-23	2,776	339	93
May-23	3,400	345	110
Jun-23	3,190	383	106
Jul-23	2,876	343	93
Aug-23	2,876	365	93
Sep-23	2,881	368	96
Oct-23	3,206	399	103
Nov-23	2,829	368	94
Dec-23	2,833	381	91

Native American Encounter Distribution by Payor Group

The following summary of Native American encounters by payor group is based on the previous 12-month period.

12-Month Encounter Distribution

- Medicaid
- Medicare
- Insurance
- USPHS
- HMO
- Other Government
- Uncompensated
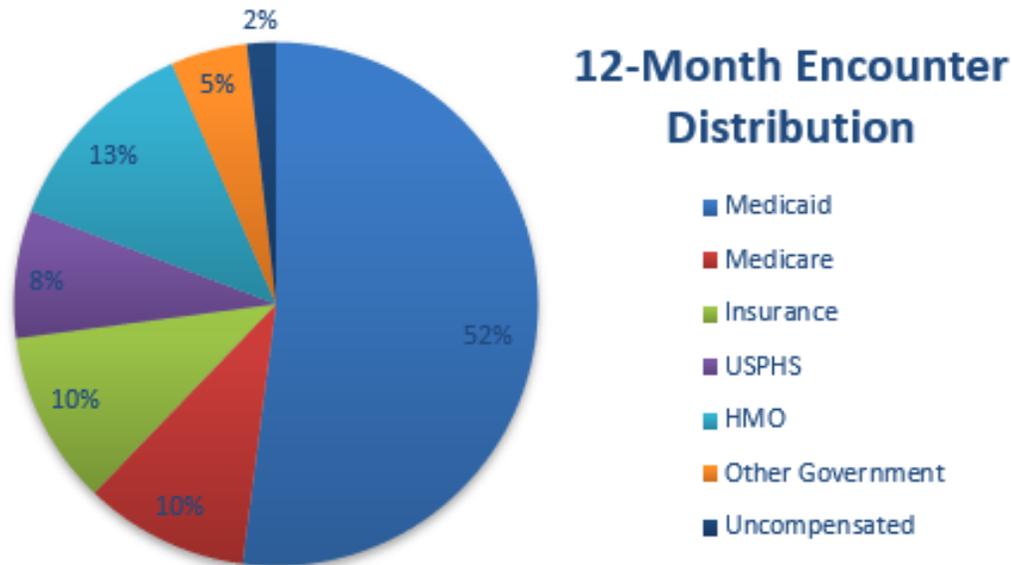
Month	Medicaid	Medicare	Insurance	USPHS	HMO	Other Government	Uncompensated
Jan-23	5,472	1,119	1,072	745	1,294	523	114
Feb-23	5,352	1,091	1,093	686	1,247	456	105
Mar-23	5,800	1,083	1,145	848	1,402	549	173
Apr-23	5,382	1,118	1,024	689	1,298	544	132
May-23	5,608	1,101	1,187	735	1,327	493	141
Jun-23	5,340	993	1,162	742	1,308	515	194
Jul-23	5,083	966	1,061	711	1,201	444	188
Aug-23	5,576	1,091	1,204	928	1,488	542	230
Sep-23	4,922	934	1,111	899	1,226	407	272
Oct-23	5,573	1,117	1,118	979	1,348	527	186
Nov-23	5,360	1,001	1,111	942	1,342	464	258
Dec-23	4,800	929	931	816	1,217	371	209
TOTAL	64,268	12,543	13,219	9,720	15,698	5,835	2,202
	52%	10%	11%	8%	13%	5%	2%

APPENDIX A

MOU Exhibit A Progress Updates

UNM Hospital Memorandum of Understanding with Bernalillo County
UNM/Bernalillo County MOU Deliverables Updated November, 2021

- Covenants:
  - UNMH will allocate at least 15% of the Mill Levy transferred from Bernalillo County to Behavioral Health.
  - UNMH will fund one or more navigational services and a transition planning and case management service (Re-entry Center) at $2,060,000 adjusted annually
  - UNMH will provide efforts in compliance with Exhibit A and B to the Lease MOU

Exhibit A – Reporting

Action Item	Implementation Status	
UNMH will report on a quarterly basis to the County Commission on the items identified in Exhibit B along with national benchmarks	Information requested by Bernalillo County is collected and reported in the Bernalillo County Quarterly Report.	
UNMH will establish mechanisms for public input on Board Committees including representation from the County and IHS consistent with existing Bylaws	Healthcare Taskforce workgroup established with community participation. Native American and Community Engagement Committees of the Board.	
UNMH will establish a mechanism for collaboration with Bernalillo County and IHS on programmatic public and community health initiatives	UNMH completed the 2020 Community Health Needs Assessment with extensive community input in March 2020. Regular meetings with IHS and Bernalillo County.	
Enable the County and the IHS to have input to and comment on the goals for the upcoming year for each area outlined in Exhibit A	Bernalillo County, IHS and UNMH established Semi-Annual goals outlined in Exhibit C.	
UNMH will cooperate with the County's Behavioral Health Initiatives regarding evaluation of needed programs	UNMH is significantly involved in the planning for Behavioral Health Initiatives with the County.	
UNMH will obtain meaningful input to the UNMH Budget from Bernalillo County and IHS prior to the UNMH budget being adopted by the Hospital Board.	UNMH Currently holds periodic budget meetings with County Commissioners and quarterly meetings with IHS.	

Exhibit A - Accountability and Transparency

Action Item	Implementation Status	
UNMH will report on National Patient Safety Goals with Benchmark data.	This information is included in the Bernalillo County Quarterly Report.	
UNMH will provide reports on its financial audits to the County Manager and IHS, and shall participate in meetings as reasonably requested to discuss the information	Audits are provided to Bernalillo County and IHS. Quarterly Financial Information is part of the Quarterly Report.	
UNMH will provide financial information to the County Commission and IHS as to the expenditure of Mil Levy funding by UNMH department.	UNMH and Bernalillo County have developed a methodology for reporting Mil Levy funding by department. Reported as part of the Quarterly Report.	
UNMH will provide additional financial information as reasonably requested by the County Manager or IHS.	Ongoing per discussion topics and requests.	
UNMH will work with the County and IHS to update and change data reporting as requested on a frequency of not greater than semi-annually.	Data and program priorities reviewed and outlined in Exhibit C on a Semi Annual Basis.	
UNMH will publish the data reported to Bernalillo County on its public website unless prohibited by law.	Bernalillo County Report Financial Information, and Financial Audits are available on the UNMH website.	
UNMH will collect all Grievances regarding the patient payment polices and financial assistance programs and will report that information to the County and IHS on a quarterly basis.	Grievance information has been added to the quarterly report.	

Exhibit A – Primary Care

Action Item	Implementation Status	
UNMH will access its current primary care network with the intent to attempt to increase its number of primary care facilities by one per year over the next four (4) years.	UNMH has acquired land and is expected to commence the design phase for a new Primary Care clinic in January 2024. UNMH has expanded both Lobo Care and Senior Health centers in FY2022. UNMH continues to evaluate and explore initiatives to expand Primary Care access in the community.	(yellow)
UNMH will inform the County and IHS prior to any material change to coordinated care delivery programs with other community providers. UNMH will work to provide space to NM Department of Health Clinics at future UNMH clinical sites.	UNMH continues to work to build community partnerships to increase access and coordinate care. No new sites have been added to consider addition of DOH clinics with Hospital sites.	(green)
UNMH will encourage and assist Bernalillo County Residents and Native Americans to access healthcare coverage.	Ongoing outreach through the office of Native American Services at UNMH.	(green)
To reduce Emergency Room wait times UNMH will explore alternative care venues for care consistent with EMTALA.	Active Transfer agreements allow UNM to move low acuity admits to SRMC and Lovelace; alleviates some ER congestion.	(yellow)
UNMH will coordinate with the County to make available secure parking and secure entry for patients from the Metropolitan Detention Center (MDC).	Law enforcement parking dedicated at Psychiatric Emergency. MDC part of planning for new UNMH Tower.	(green)
UNMH will explore the use of Telemedicine Consultation between UNM HSC and the MDC.	UNMH has taken over care at MDC with may include telemedicine or transfers to UNMH.	(green)
UNMH shall provide increased funding to recruit two physician specialists in areas most needed by Native Americans.	IHS continues to identify priority needs to UNMH at quarterly meetings.	(green)
UNMH will consult with the Count, Albuquerque Public Schools and any tribal schools in Bernalillo County on the provision of medical and behavioral health for school based clinics. UNMH may collaborate with UNMMG or other providers as needed.	Initial discussion with Bernalillo County on current school based services currently on hold based on COVID-19.	(yellow)

Exhibit A – Financial Assistance

Action Item	Implementation Status	
UNMH will maintain the current Financial Assistance policy as it relates to Native Americans. Any proposed changes will discussed with IHS prior to the change.	UNMH continues to offer financial assistance for Native Americans with no proposed changes.	
UNMH will adopt patient payment policies and financial assistance program policies that are designed to improve access to healthcare services	UNMH Financial Assistance policies developed and approved by Board in October 2021 including coverage for undocumented patients and elimination of copayments.	
UNMH's financial assistance program will offer financial assistance to medically necessary care for low income patients at UNMH facilities	UNMH Financial Assistance and other programs continue in place with expansion of undocumented patients.	
UNMH will endeavor to assure that any fees, down payments, or co-payments for medically necessary care will be reasonably related to income.	Financial Policy Revisions in October 2021 eliminated all required copayments for patients on financial assistance.	
UNMH will establish patient payment policies for low income patients who are not financial assistance-eligible that do not create a material barrier to such patients' access to medically necessary care.	Financial Assistance program changes approved in October 2021 allowing for coverage of undocumented patients. The change was effective 7/1/2021.	
Patients with income levels that do not meet the requirements for financial assistance or other programs will be given the opportunity to establish re-payment plans which are reasonably related to income.	Patients have the opportunity to create repayment plans with Patient Financial Services.	
UNMH will make reasonable efforts to notify patients with outstanding bills of their right to seek financial assistance or to establish payment plans	Patient bills have information incorporated in them on how to contact financial assistance. Patients also receive other notifications at the time of services.	

Exhibit A – Financial Services

Action Item	Implementation Status	
UNMH will subject to CMS regulations assure that no indigent patient is sent to collections.	Implemented with 2015 policy change. UNMH monitors on ongoing basis.	🟩
UNMH will work with other component entities of the UNMH Health System to look at producing one consolidated bill for services.	UNMH working on tools to have consolidated account information across entities.	🟥
UNMH will coordinate and consult with community organizations and the County to maximize outreach to patients needing financial assistance or having difficulty accessing insurance or Medicaid including those released from incarceration.	UNMH currently works with various community navigator groups around financial assistance issues.	🟩
UNMH will assist the County in Coordinating Care for individuals released from incarceration.	UNMH continues to operate the Fast Track Program and provides discharge planning at MDC and the RRC.	🟩

Exhibit A – Native Americans

Action Item	Implementation Status	
UNMH shall develop a written methodology related to the 100 bed language in the Federal Contract.	UNMH Board has approved the Pueblo Preference Policy related to the Federal Contract language.	🟩
UNMH will provide care to Native Americans consistent with the Federal Contract.	Access to some services remains challenging. UNMH continues to work on improving wait times.	🟩
UNMH will evaluate and improve Native American access to specialty clinics.	Access to specialty care continues to be an issue. Progress made in some areas.	🟨
UNMH will consult with IHS to review compliance with the Federal Contract and for the provision of needed additional services and Native American Service priorities.	Quarterly Federal Contract meetings with IHS.	🟩
UNMH will complete an evaluation of how to sustain and improve Native American healthcare services in primary and specialty care clinics operated by UNMH. The evaluation will be presented to the County and IHS.	Reporting has been reviewed with APCG and IHS as part of quarterly meetings. Data updated quarterly.	🟩
UNMH will establish written procedures for the identification of Native Americans and will ensure Native American patients receive any financial assistance for which they are eligible.	Ongoing through office of Native American Health Services and Financial Services.	🟩

Exhibit A - Behavioral Health

Action Item	Implementation Status	
UNMH will work with the SOM to provide medical staff for the MDC Triage Center and will provide case management services for the RRC.	UNMH is staffing the RRC in conjunction with the pathways program.	
UNMH will evaluate the expansion of Behavioral Health services within its own operation and with other community providers	UNMH has worked with the County on service expansion at the Care Campus and is in the process of Development of a Crisis Center at UNM including expanded PES capacity.	
UNMH shall engage with County and IHS on the programming and design of future space for UNMH Behavioral Health Services including Crisis Services.	UNMH and Bernalillo County are actively working on short and long-term planning on crisis services.	
Any changes impacting integrated behavioral health and primary care integrated services or peer services will be discussed with the County and IHS prior to implementation	No current planned changes with these services.	
UNMH will evaluate the ability to provide identifiable patient information to first responders consistent with applicable laws.	MOU completed with City related to providing information to APD Crisis response from Psychiatric Emergency Services.	
Evaluate the viability of expanding behavioral health services in school based clinics	TBD on hold based on COVID-19.	
UNMH will evaluate the possible provision of expanding existing BH services or new programs in a wide range of service categories.	UNMH continues to evaluate service expansion within provider availability.	
UNMH will evaluate data sharing with the County for analyzing outcome data for behavioral health patients and to track utilization of behavioral health patients across programs consistent with State and Federal law.	Legal issues created by New Mexico Mental Health code limit providing identifiable information.	

APPENDIX B

UNM Hospital Semi-Annual Report on the Status of Deliverables

Period January 2023 - June 2023
UNM Lease MOU with Bernalillo County - Exhibit C

The following semi-annual goals are prepared in response to Exhibit A, item A4 that enables Bernalillo County and the Indian Health Services to have input and to comment on the semi-annual goals for each section of Exhibit A. (Priorities from previous period are continued forward after all parties reviewed June 2023)

Exhibit A Reporting Area - Reporting and Interaction

Semi- Annual Focus Areas January 2023-June 2023	Status Update as of June 2023
A.2 UNMH Will establish mechanisms for the public to provide input on medical and behavioral health operations, planning and development.	The UNMH Community Health Needs Assessment was completed in the spring of 2020 and is available online at: https://hsc.unm.edu/health/about/community-health-needs-assessment.html. UNMH is in the process of updating the Community Health Needs Assessment for 2023 and is holding public listening sessions in 2023 with Bernalillo County related to the upcoming 2024 Mil Levy.
A.3 UNMH will establish a mechanism for collaboration with Bernalillo County and IHS on programmatic public and community health initiatives.	IHS, UNMH and Bernalillo County have established a small working group with representatives from the three organizations to meet periodically around programmatic public and community health initiatives.
A.6 UNMH will establish procedures related to it budget development, which will allow meaningful input into the budget by the County and IHS.	UNMH established budget planning meetings with both the County and IHS for updates and input related to the Budget and Capital process.

Exhibit A Reporting Area - Accountability and Transparency

Semi- Annual Focus Areas	Status Update
B.2 UNMH will report on national patient safety goals for the hospital with comparative benchmark information.	UNMH continues to produce the Bernalillo County Quarterly Report outlining patient safety, quality, operational and financial data with corresponding benchmark data where available. The report is provided to Bernalillo County, IHS and APCG. The report is publically available on the UNMH and Bernalillo County Websites.
B.4 UNMH will provide financial information to the County Commission and IHS as to the expenditure of mill levy funding by UNMH Departments.	UNMH currently published financial, quality and operational data on the UNMH intranet site that include mill levy funding by department as part of the Bernalillo County Quarterly Report. The format and information were agreed to by Bernalillo County.
B.7 Subject to applicable laws UNMH will publish data required under Subsection B of the MOU on its public website.	Bernalillo County Quarterly Reports are available online at: https://hsc.unm.edu/health/about/financial-reports/bernalillo-county-reports.html

Exhibit A Reporting Area - Primary Care

Semi- Annual Focus Areas	Status Update
C.3 UNMH will encourage and assist Bernalillo County residents and Native Americans to access health care coverage.	UNMH has opened a multi-specialty clinic in Gallup that is well positioned to serve areas with larger Native American patients. UNMH is in the process of developing a new primacy care site in Bernalillo County that will be located in the southwest mesa area. UNMH will complete the new Behavioral Health Crisis Triage Center in January 2024 and is partnering with Bernalillo County to provide medical services at the Metropolitan Detention Center (MDC). The UNMH Hospital Tower project is on target to Open in October 2024. UNMH offers financial assistance through the UNM Care and other programs to patients.
C.7 UNMH shall provide increased funding to either the UNM School of Medicine or UNM Medical Group to recruit and retain specialist for a minimum of two medical specialties most needed by Native Americans.	UNMH continues to discuss need specialty access at ongoing quarterly lease compliance meetings with representation from IHS and the Tribes. Reporting is provided quarterly on access and services to Native Americans.

Exhibit A Reporting Area - Native American Care

Semi- Annual Focus Areas	Status Update
E1. UNMH in collaboration with the IHS, the All Pueblo Council of Governors and the county shall develop a written methodology acceptable to the parties on the 100 bed Native American patients' provision in the Federal Contract.	UNMH in conjunction with the All Pueblo Council of Governors and with review by IHS has developed an operational guideline for addressing access issues for Native American patients under the requirements of the Federal Contract. UNMH has started reporting Inpatient Utilization by tribe at the request of IHS.
E.4 UNMH will consult with the IHS to review compliance with the Federal Contract and for the provision of additional services, the quality of care for Native Americans, and priorities for additional services.	UNMH has ongoing quarterly operational meetings with IHS to discuss compliance with the Federal Contract and operational issues affecting Native Americans. UNMH also participates in Semi-annual Consultations with IHS and the APGC.
E.5 UNMH will evaluate the opportunity to sustain and improve healthcare services available to Native Americans.	UNMH meets with the IHS quarterly to review utilization and access data for Native American patients and to discuss opportunities for improved performance. Reporting on access and utilization by tribe is provided as a part of these meetings.

Exhibit A Reporting Area - Behavioral Health Services

Semi- Annual Focus Areas	Status Update
F1. UNMH will work with UNM School of Medicine to coordinate with the county to provide medical staff for the MDC triage center. UNMH will provide case management services to the Resource Re-entry Center for individuals released from MDC.	UNMH continues to provide staffing for discharge planning activities for the MDC and to assist with staffing the Resource Re-entry Center. UNMH will also begin providing Medical and Behavioral Health services at MDC on July 26, 2023.
F2. UNMH will evaluate the opportunity to expand behavioral health services to County residents and Native Americans, both within its own operations as well as with other community providers, subject to inclusion of IHS in the process.	UNMH is currently working on expanded Behavioral Health programing within the UNMH infrastructure in the forms of health home implementation, Crisis Triage Center Development with the County and expanded Psychiatric Emergency Capacity. UNMH will assume operations of the Behavioral Health services at MDC on July 26, 2023.