



QUARTERLY REPORT September, 2023

Bernalillo County Commissioner Trend Report

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A. ACCOUNTABILITY

Balance Sheet

Statements of Net Position

(In Thousands)

| | September 2023 | unaudited June 2023 |
|---|-----------------------|--------------------------------|
| Assets | | |
| Cash and marketable securities | \$ 276,631 | \$ 219,355 |
| Cash restricted by management for capital replacement | - | 16,519 |
| Cash restricted for donor specified expenses | 21,462 | 20,928 |
| Patient receivables, net | 171,246 | 160,924 |
| Other receivables and current assets | 159,559 | 162,093 |
| Capital initiatives receivable | 16,000 | 46,000 |
| Capital assets, net | 771,190 | 738,879 |
| Restricted for mortgage reserve, bonds | 21,298 | 18,844 |
| Other noncurrent assets | 36,969 | 37,848 |
| Total assets | 1,474,355 | 1,421,390 |
| Liabilities | | |
| Accounts payable | 70,232 | 67,842 |
| Payable to related parties (UNM) | 86,572 | 56,731 |
| Interest payable bonds | 649 | 65 |
| Other accrued current liabilities | 196,605 | 173,283 |
| Bonds payable, non current | 61,485 | 61,485 |
| Mortgage Payable - NHT | 192,841 | 166,500 |
| Other long term liabilities | 43,062 | 45,155 |
| Total liabilities | 651,446 | 571,061 |
| Net Position | | |
| Restricted for expendable grants, bequests, and contributions | 21,462 | 20,928 |
| Restricted by management for capital replacement | 16,000 | 62,519 |
| Restricted for trust indenture and debt agreement | 21,298 | 18,844 |
| Assets invested in capital | 473,202 | 465,139 |
| Unrestricted from operations | 290,947 | 282,899 |
| Total net assets | \$ 822,909 | \$ 850,329 |
| Current Ratio | 1.78 | 1.89 |
| Days Cash on Hand** | 66.53 | 54.39 |

* Net Assets have been reclassified to expanded categories to reflect operational intentions

**Days cash on hand is calculated on unrestricted cash

*** Cash set aside to repay Medicare Advances but available for use in operations

Income Statement

UNM HOSPITALS

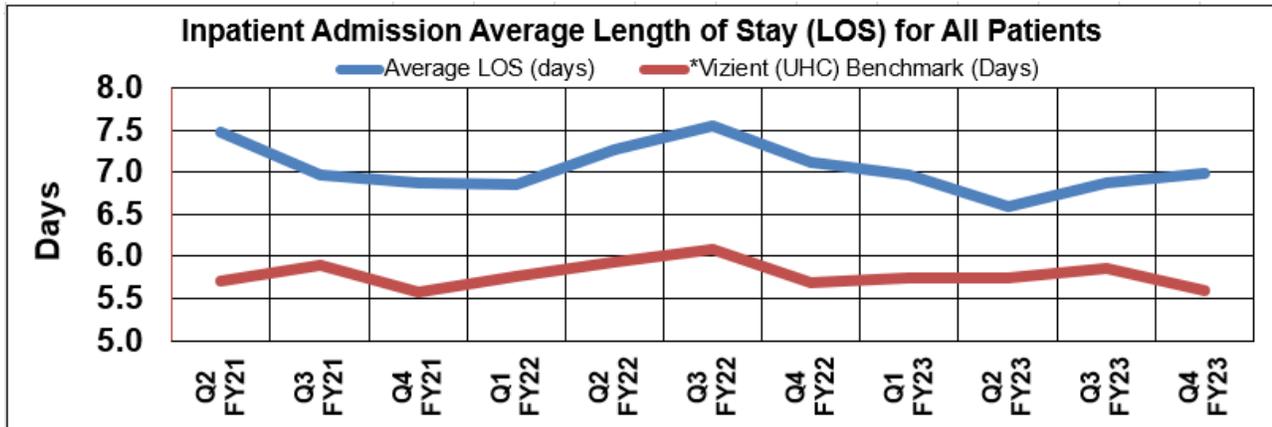
Statements of Revenues, Expenses, and Changes in Net Assets
For the three (3) months ended September 30, 2023

| <i>(In Thousands)</i> | <u>September</u> |
|---|------------------|
| Operating revenues: | |
| Net Patient Service | \$ 309,667 |
| Other | 14,307 |
| Total Operating Revenues | <u>323,974</u> |
| Operating expenses: | |
| Employee Compensation and Benefits | 180,274 |
| UNM School of Medicine Medical Services | 52,903 |
| Medical Services Oncology | 7,145 |
| Medical Services non-SOM | 10,992 |
| Medical Supplies | 55,453 |
| Oncology Drugs | 14,960 |
| Occupancy/Equipment | 19,514 |
| Depreciation | 8,569 |
| Purchased Services | 21,294 |
| Health System Expenses | 5,388 |
| Gross Receipts Tax | 6,358 |
| Other | 5,128 |
| Total Operating Expenses | <u>387,978</u> |
| Operating loss | <u>(64,004)</u> |
| Nonoperating Revenues (Expenses): | |
| Bernalillo County Mill Levy | 30,162 |
| State Appropriation | 4,938 |
| Capital Appropriation | 325 |
| Interest Expense | (584) |
| Other Revenue and (Expense) | 1,743 |
| Net Nonoperating Revenues | <u>36,584</u> |
| Total Increase in Net Assets | <u>(27,420)</u> |

Mill Levy Distribution Detail by Department FY2023

| | | (Unaudited) |
|---|-----------|-----------------------|
| 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 |
| <i>Facilities</i> | | |
| 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 |
| <i>Information Technology</i> | | |
| IT - Open Clinic/Mgt | | 7,112,894 |
| IT - Patient Financial Services | | 3,034,683 |
| Communications | | 5,845,835 |
| IT Cemer 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 |
| <i>Revenue Cycle</i> | | |
| 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 |
| <i>Other</i> | | |
| 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 |

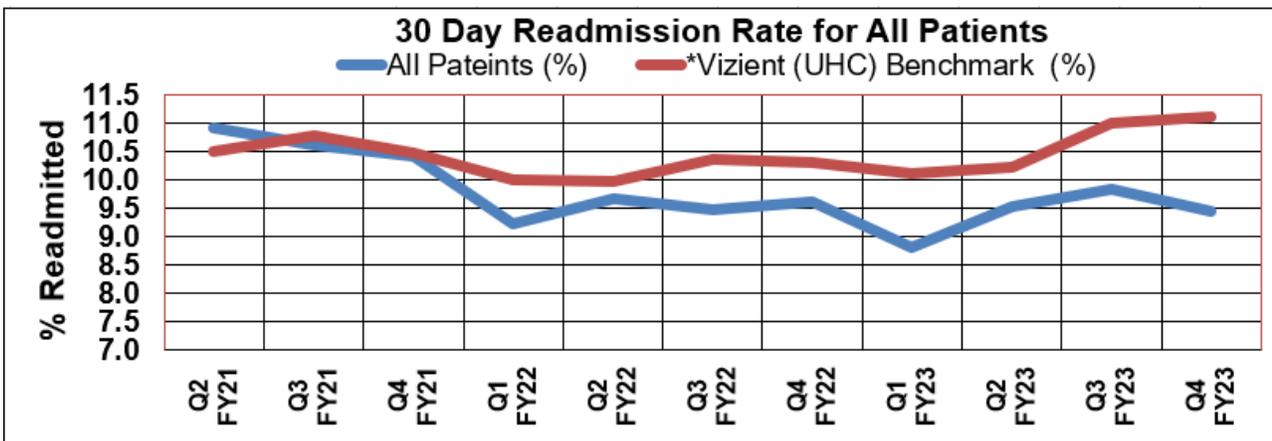
Average Length of Stay (LOS) for Inpatient Admissions



| Fiscal Quarter | Q2 FY21 | Q3 FY21 | Q4 FY21 | Q1 FY22 | Q2 FY22 | Q3 FY22 | Q4 FY22 | Q1 FY23 | Q2 FY23 | Q3 FY23 | Q4 FY23 |
|---------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| Average LOS (days) | 7.48 | 6.98 | 6.88 | 6.85 | 7.27 | 7.55 | 7.12 | 6.96 | 6.60 | 6.87 | 6.99 |
| *Vizient (UHC) Benchmark (Days) | 5.70 | 5.90 | 5.58 | 5.76 | 5.94 | 6.09 | 5.70 | 5.75 | 5.74 | 5.85 | 5.60 |

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

30 Day Readmission for All Patients

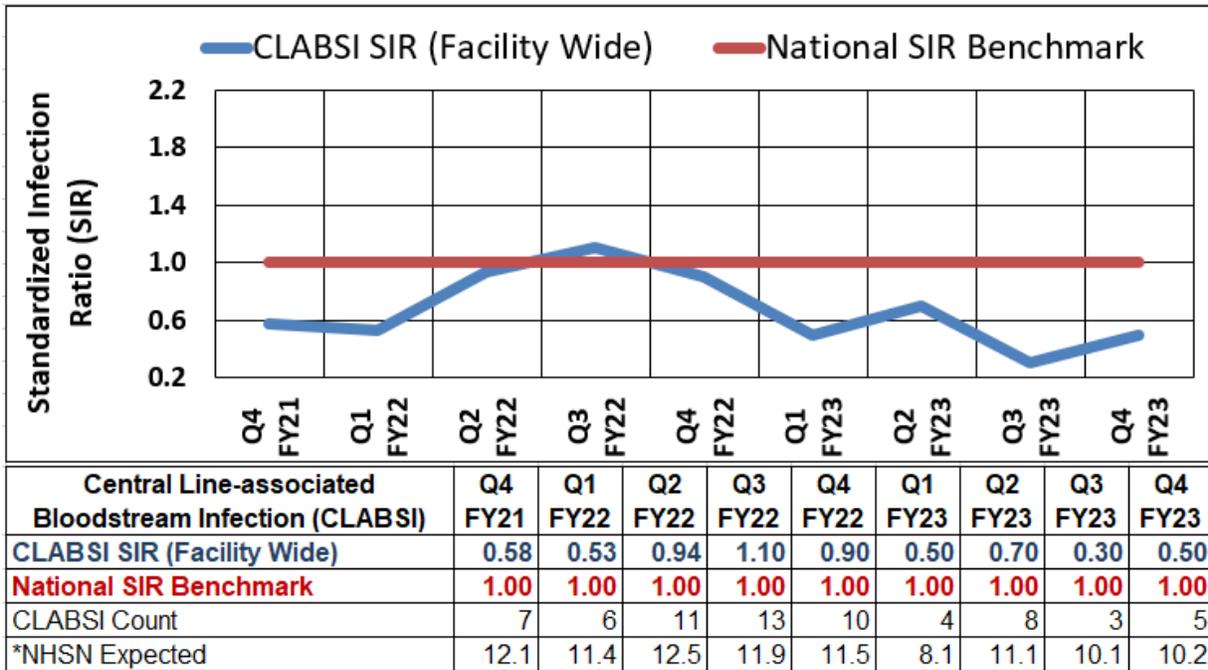


| Fiscal Quarter | Q2 FY21 | Q3 FY21 | Q4 FY21 | Q1 FY22 | Q2 FY22 | Q3 FY22 | Q4 FY22 | Q1 FY23 | Q2 FY23 | Q3 FY23 | Q4 FY23 |
|------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| All Patients (%) | 10.92 | 10.61 | 10.41 | 9.22 | 9.67 | 9.48 | 9.62 | 8.82 | 9.53 | 9.83 | 9.46 |
| *Vizient (UHC) Benchmark (%) | 10.51 | 10.77 | 10.47 | 9.99 | 9.97 | 10.36 | 10.31 | 10.13 | 10.22 | 10.99 | 11.12 |

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

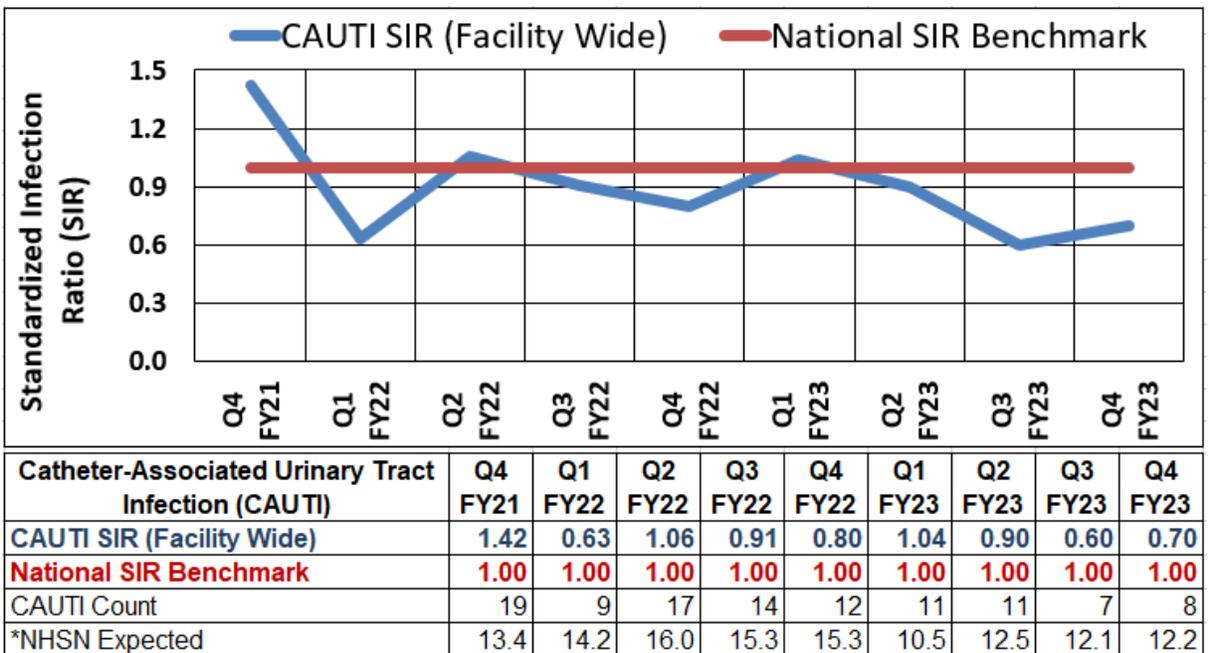
*Vizient, Inc. (formerly, "UHC") is an alliance of the nation's leading academic medical centers ("AMCs") and associate member institutions affiliated with those academic medical centers, which represents over 90% of the nonprofit academic medical centers in the United States.

Catheter Central Line-associated Bloodstream Infection



Catheter data is delayed by one quarter.

Catheter Associated Urinary Tract Infection



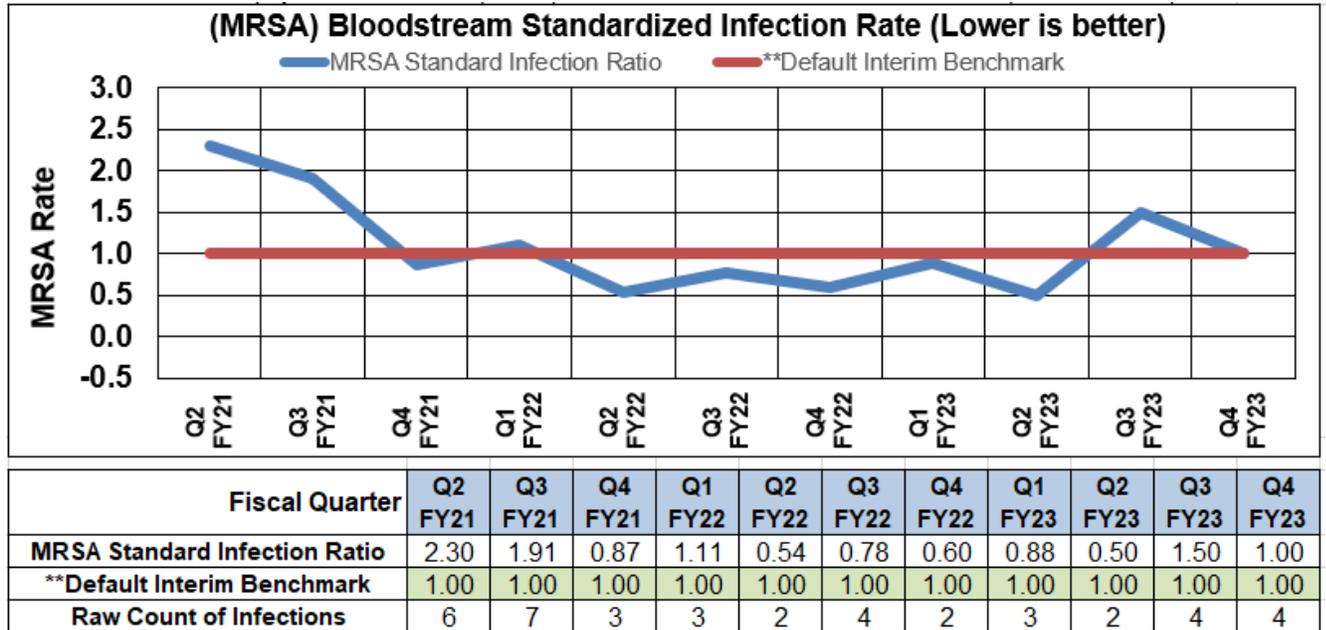
Catheter data is delayed by one quarter.

*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.



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, 2022

FY24 Actual YTD is based on the three (3) months ended September 30, 2023

FY24 Projected is based on the twelve (12) months ended September 30, 2023

| Inpatient Days | FY23 Actual | FY24 Actual YTD | FY24 Projected |
|-----------------------------|----------------|-----------------|----------------|
| Adult | 133,431 | 33,797 | 132,946 |
| Pediatric | 38,961 | 8,837 | 38,140 |
| Newborn | 5,057 | 1,335 | 4,943 |
| Total Inpatient Days | 177,449 | 43,969 | 176,029 |

Nursing Hours of Care

| | FY22 June, 2022 | FY23 June, 2023 | FY24 September, 2023 |
|---|-----------------|-----------------|----------------------|
| UNMH Nursing Hours of Care Per Patient* | 15.78 | 15.38 | 15.96 |

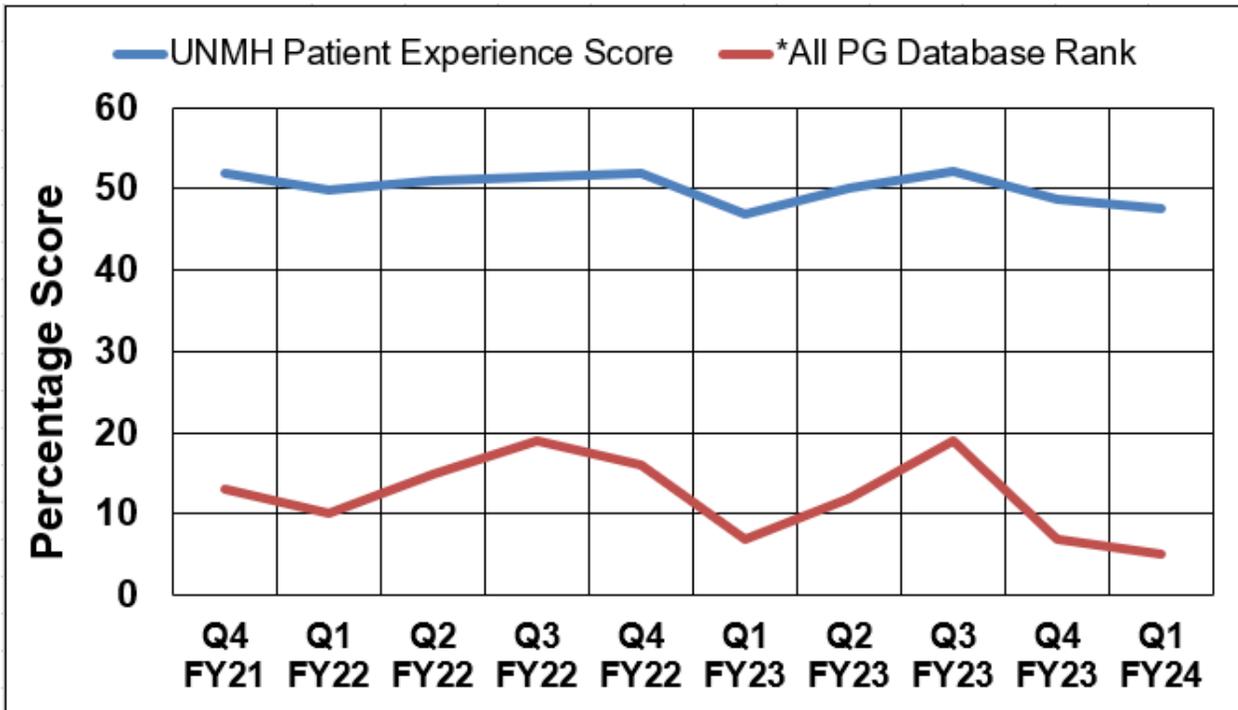
*Nursing Hours of Care includes all paid hours in the inpatient nursing departments (Adult ICU, SAC/Med Surg, Pediatrics, OB and Newborn nursery) divided by the total statistics for each department.

Number of RN FTE's and Retention Rate

| Category | Number of FTES as of June 2023 | Number of FTES as of September 2023 | FY2024 Hires (Headcount) | FY2024 Terms (Headcount) | Rolling Retention Rate |
|------------------------------------|--------------------------------|-------------------------------------|--------------------------|--------------------------|------------------------|
| RN's | 1,738 | 1,826 | 55 | 91 | 78.4% |
| *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%.

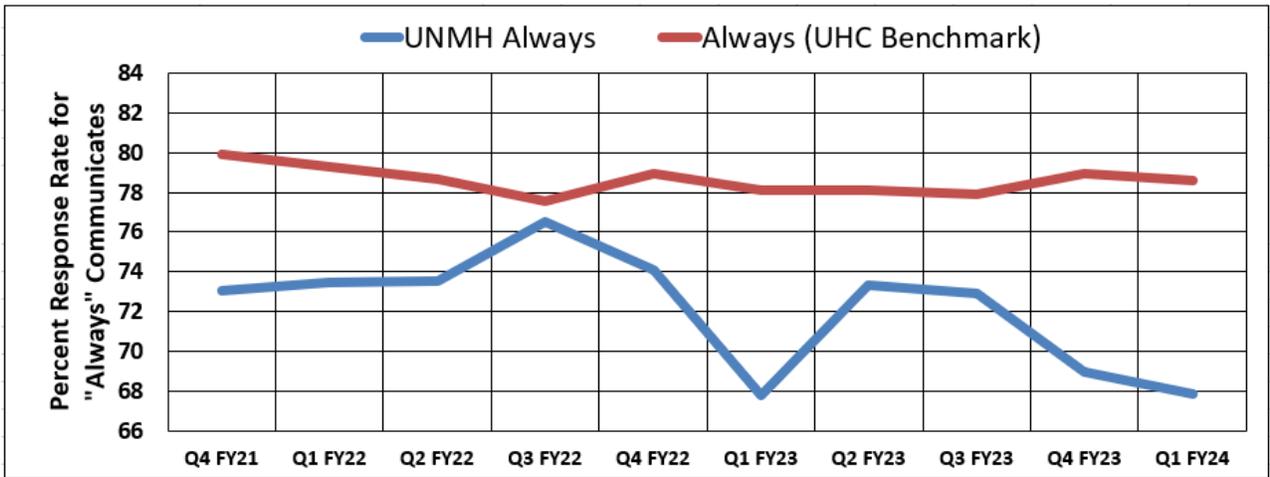
Press Ganey Inpatient Experience Score



| Quarter | Q4 FY21 | Q1 FY22 | Q2 FY22 | Q3 FY22 | Q4 FY22 | Q1 FY23 | Q2 FY23 | Q3 FY23 | Q4 FY23 | Q1 FY24 |
|-------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| UNMH Patient Experience Score | 52.0 | 49.9 | 51.0 | 51.5 | 52.0 | 46.9 | 50.0 | 52.1 | 48.8 | 47.6 |
| *All PG Database Rank | 13.0 | 10.0 | 15.0 | 19.0 | 16.0 | 7.0 | 12.0 | 19.0 | 7.0 | 5.0 |

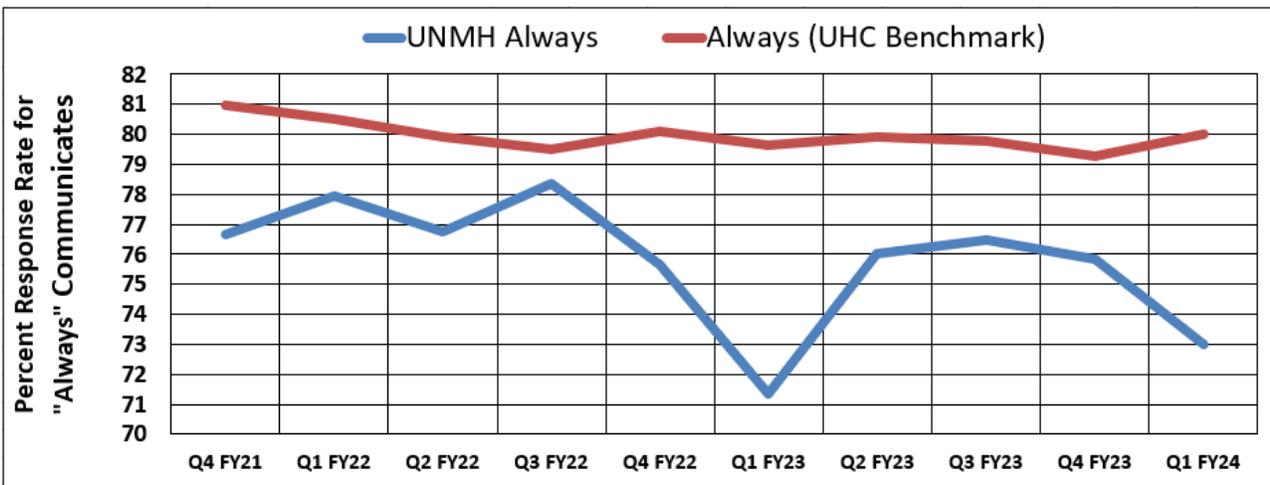
*The University Health System Consortium ("UHC") is an alliance of 98 of the nation's leading academic medical centers ("AMCs"), and 143 associate member institutions affiliated with those academic medical centers, which represents over 90% of the nonprofit academic medical centers in the United States.

HCAHPS Satisfaction – Communications with Nurses



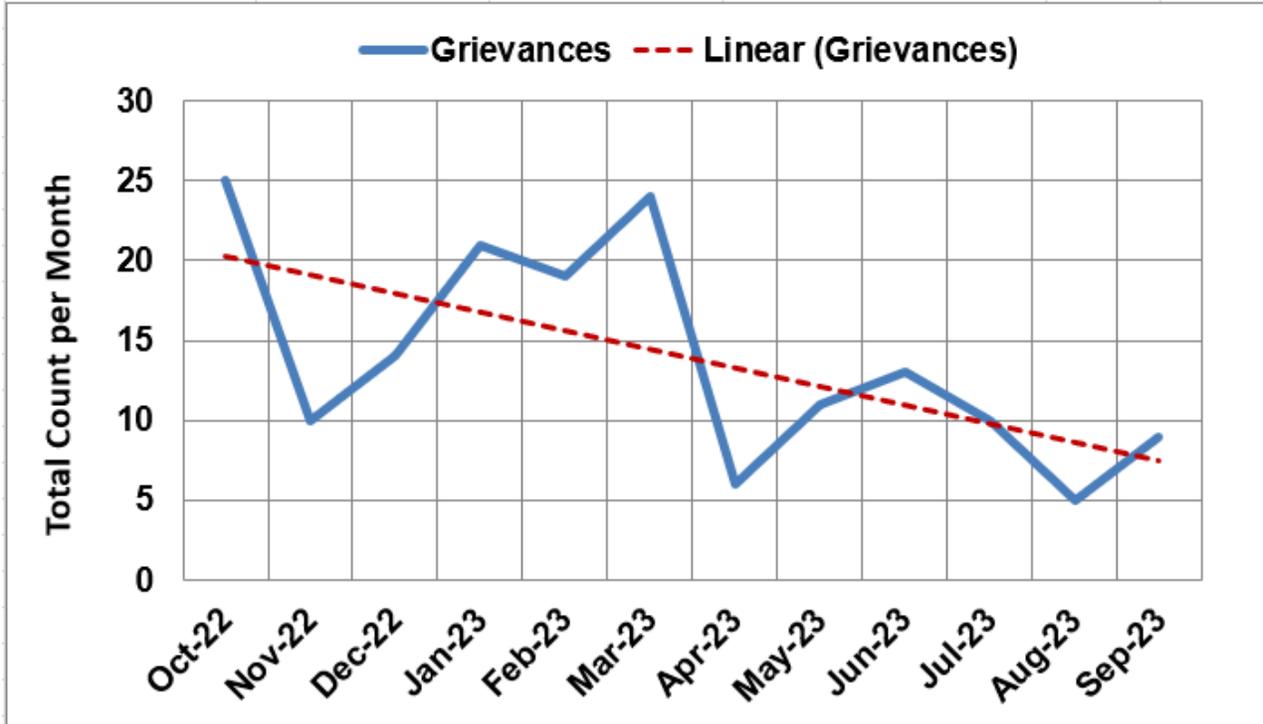
| Communication with Nurses | Response | Q4 FY21 | Q1 FY22 | Q2 FY22 | Q3 FY22 | Q4 FY22 | Q1 FY23 | Q2 FY23 | Q3 FY23 | Q4 FY23 | Q1 FY24 |
|---------------------------|-------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| H-COMP-1-A-P | UNMH Always | 73.0 | 73.5 | 73.5 | 76.5 | 74.1 | 67.8 | 73.3 | 72.9 | 69.0 | 67.9 |
| H-COMP-1-U-P | UNMH Usually | 19.2 | 18.4 | 18.8 | 17.0 | 18.4 | 22.3 | 17.3 | 20.3 | 22.6 | 22.5 |
| H-COMP-1-SN-P | UNMH Sometimes/Never | 7.7 | 8.1 | 7.7 | 6.5 | 5.8 | 9.9 | 9.4 | 6.8 | 8.5 | 9.7 |
| UHC Benchmark | Always (UHC Benchmark) | 79.9 | 79.3 | 78.7 | 77.6 | 78.9 | 78.1 | 78.1 | 77.9 | 78.9 | 78.6 |

HCAHPS Satisfaction – Communications with Doctors



| Communication with Doctors | Response | Q4 FY21 | Q1 FY22 | Q2 FY22 | Q3 FY22 | Q4 FY22 | Q1 FY23 | Q2 FY23 | Q3 FY23 | Q4 FY23 | Q1 FY24 |
|----------------------------|-------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| H-COMP-2-A-P | UNMH Always | 76.7 | 77.9 | 76.8 | 78.4 | 75.7 | 71.3 | 76.0 | 76.5 | 75.8 | 73.0 |
| H-COMP-2-U-P | UNMH Usually | 17.5 | 15.8 | 14.5 | 15.7 | 16.0 | 18.2 | 15.0 | 16.5 | 16.3 | 19.2 |
| H-COMP-2-SN-P | UNMH Sometimes/Never | 5.9 | 6.3 | 8.7 | 6.0 | 8.3 | 10.4 | 9.0 | 7.0 | 7.8 | 7.8 |
| UHC Benchmark | Always (UHC Benchmark) | 81.0 | 80.5 | 79.9 | 79.5 | 80.1 | 79.6 | 79.9 | 79.8 | 79.3 | 80.0 |

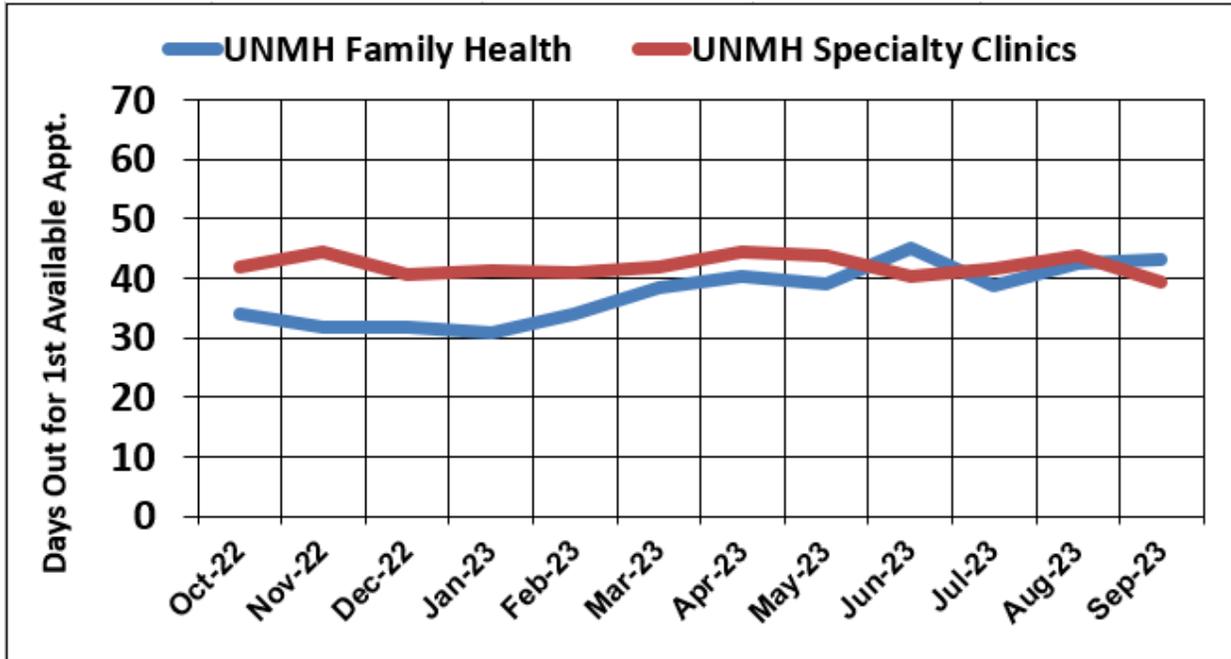
Grievances



| Month-Year | Grievances |
|------------|------------|
| Oct-22 | 25 |
| Nov-22 | 10 |
| Dec-22 | 14 |
| 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 |

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

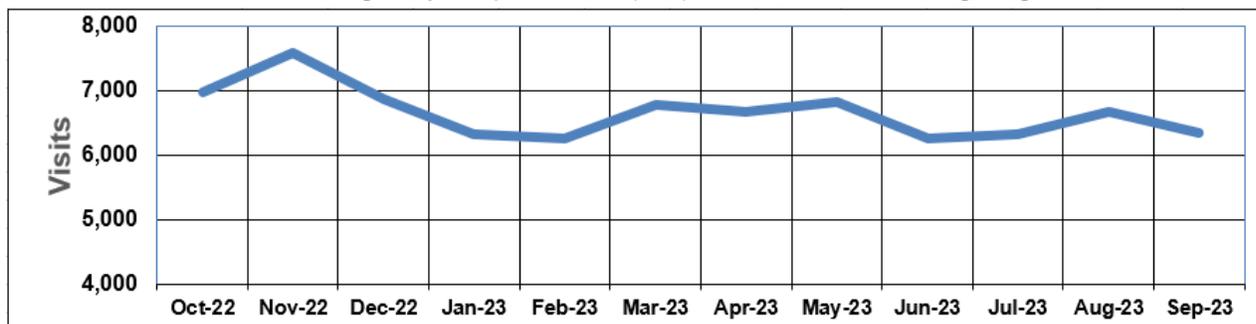
Average 1st Available* Day out for Appointments.



| Month | UNMH Family Health | UNMH Specialty Clinics |
|--------|--------------------|------------------------|
| Oct-22 | 33.8 | 42.0 |
| Nov-22 | 31.7 | 44.3 |
| Dec-22 | 31.9 | 40.8 |
| 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 |

Number of Emergency Department (ED) Visits

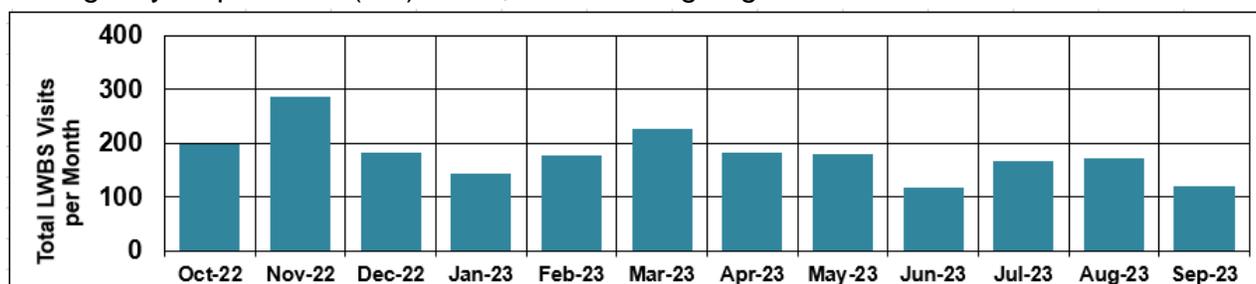
Adult and Pediatric Emergency Department (ED) Visits, not including Urgent Care visits.



| Month | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 | Apr-23 | May-23 | Jun-23 | Jul-23 | Aug-23 | Sep-23 |
|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Visits | 6,975 | 7,577 | 6,863 | 6,325 | 6,264 | 6,792 | 6,678 | 6,835 | 6,254 | 6,333 | 6,668 | 6,337 |

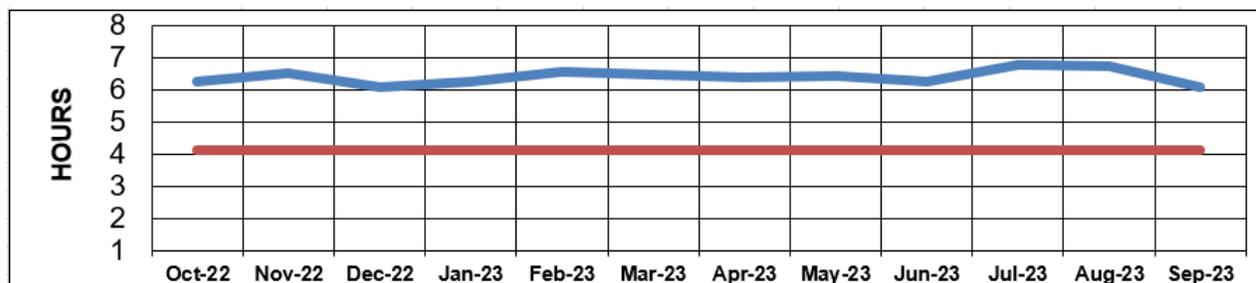
Total ED Patients Left without Being Seen

Patients who “Left Without Being Seen” (LWBS), including all Adult and Pediatric Emergency Department (ED) Visits, not including Urgent Care visits.



| Month | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 | Apr-23 | May-23 | Jun-23 | Jul-23 | Aug-23 | Sep-23 |
|---------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| UH LWBS | 198 | 287 | 182 | 144 | 178 | 227 | 183 | 179 | 117 | 166 | 171 | 120 |

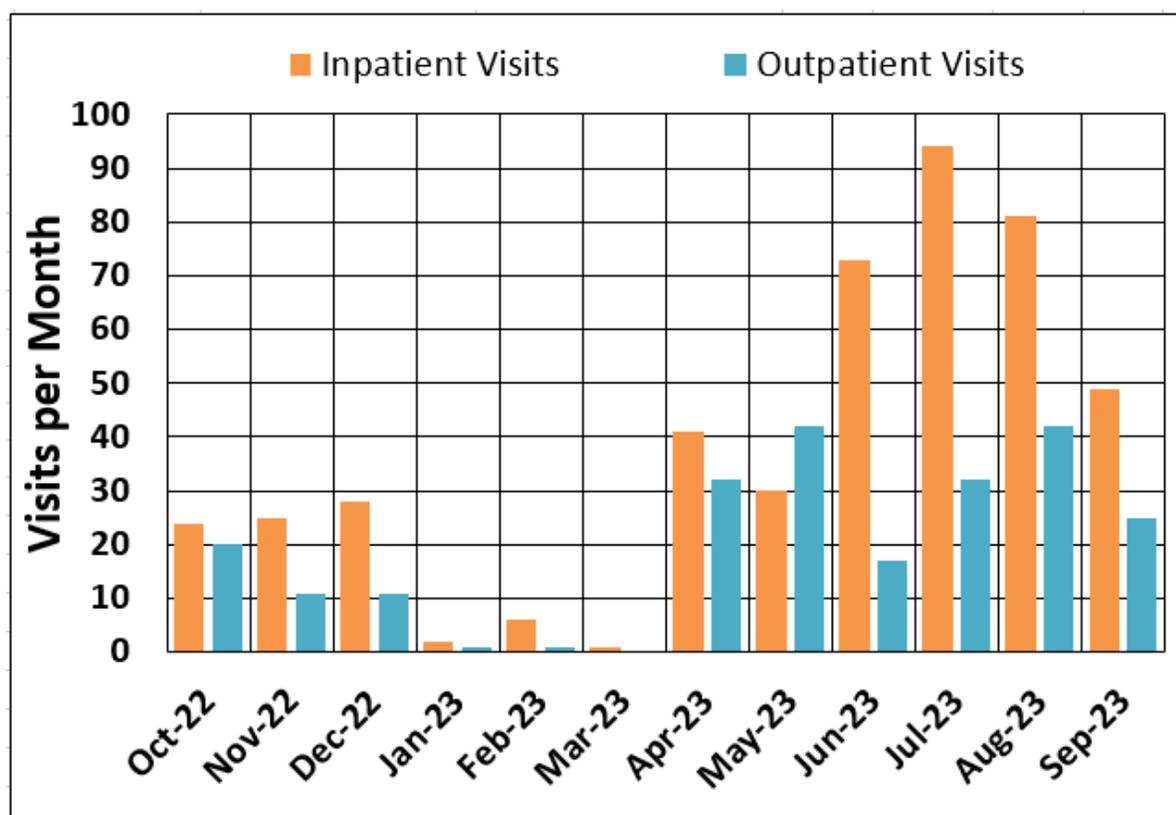
ED Average Hours from Arrival to Disposition



| Month | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Mar-23 | Apr-23 | May-23 | Jun-23 | Jul-23 | Aug-23 | Sep-23 |
|------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Arrival to Disposition | 6.28 | 6.52 | 6.08 | 6.28 | 6.58 | 6.47 | 6.40 | 6.45 | 6.27 | 6.80 | 6.73 | 6.08 |
| *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 |
|--------|------------------|-------------------|
| Oct-22 | 24 | 20 |
| Nov-22 | 25 | 11 |
| Dec-22 | 28 | 11 |
| 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 |

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 three (3) months ended September 30, 2023, broken down by funding source.

| Source | Bernalillo County Encounters |
|--------------------------------------|------------------------------|
| Charity Care - Bernalillo County | 5,578 |
| EMSA | 29 |
| IHS | 829 |
| Medicaid | 72,306 |
| Medicare | 72,789 |
| Uninsured | 10,512 |
| HMO's & Insurance | 65,566 |
| All Other * | 11,096 |
| Total Encounters | 238,705 |
| Native American Encounters ** | 27,618 |

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 three (3) months ended September 30, 2023, based on primary and secondary coverage.

| County | Charity Care Cost | Uninsured Cost | Total Uncompensated Care Cost |
|--------------------|----------------------|---------------------|-------------------------------|
| Bernalillo | \$ 9,905,993 | \$ 5,169,551 | \$ 15,075,544 |
| Catron | 363 | 3,878 | 4,241 |
| Chaves | 126,250 | 8,543 | 134,793 |
| Cibola | 676,105 | 96,316 | 772,422 |
| Colfax | 20,259 | 137 | 20,396 |
| Curry | 1,625 | 69,437 | 71,063 |
| De Baca | 57,557 | - | 57,557 |
| Dona Ana | 12,169 | 26,056 | 38,225 |
| Eddy | 18,467 | 14,575 | 33,043 |
| Grant | 27,848 | 204 | 28,052 |
| Guadalupe | 731 | 292 | 1,023 |
| Harding | 996 | - | 996 |
| Hidalgo | - | - | - |
| Lea | 114,641 | 9,212 | 123,853 |
| Lincoln | 19,819 | 6,803 | 26,621 |
| Los Alamos | 352 | 15,848 | 16,199 |
| Luna | 64,556 | 6,663 | 71,218 |
| Mc Kinley | 138,049 | 59,891 | 197,940 |
| Mora | 2,323 | 621 | 2,944 |
| Otero | 6,429 | 723 | 7,152 |
| Quay | 14,685 | 815 | 15,500 |
| Rio Arriba | 97,887 | 141,981 | 239,868 |
| Roosevelt | - | 2,097 | 2,097 |
| San Juan | 145,058 | 22,833 | 167,891 |
| San Miguel | 82,690 | 3,298 | 85,987 |
| Sandoval | 517,996 | 387,947 | 905,943 |
| Santa Fe | 862,048 | 186,288 | 1,048,335 |
| Sierra | 8,372 | 11,046 | 19,417 |
| Socorro | 190,560 | 69,449 | 260,009 |
| Taos | 61,764 | 2,152 | 63,917 |
| Torrance | 48,412 | 64,570 | 112,982 |
| Union | - | 6,960 | 6,960 |
| Valencia | 1,119,430 | 712,884 | 1,832,314 |
| Out Of State | - | 554,119 | 554,119 |
| Grand Total | \$ 14,343,433 | \$ 7,655,189 | \$ 21,998,622 |

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 three (3) months ended September 30, 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 | - | \$0 | 20 | \$ 12,205 | 20 | \$ 12,205 |
| 87022 | 3 | 1,706 | 27 | 3,331 | 30 | 5,037 |
| 87047 | 1 | 661 | 51 | 12,869 | 52 | 13,530 |
| 87059 | 5 | 22,863 | 125 | 34,243 | 130 | 57,106 |
| 87100 | - | - | - | - | - | - |
| 87101 | - | - | 1 | 5 | 1 | 5 |
| 87102 | 45 | 344,724 | 917 | 347,598 | 962 | 692,322 |
| 87103 | 5 | 34,518 | 12 | 3,193 | 17 | 37,712 |
| 87104 | 10 | 72,150 | 290 | 130,502 | 300 | 202,652 |
| 87105 | 87 | 1,228,681 | 2,552 | 1,252,768 | 2,639 | 2,481,449 |
| 87106 | 37 | 340,549 | 931 | 457,968 | 968 | 798,517 |
| 87107 | 26 | 148,662 | 983 | 396,913 | 1,009 | 545,575 |
| 87108 | 69 | 713,077 | 1,785 | 905,077 | 1,854 | 1,618,155 |
| 87109 | 22 | 140,808 | 601 | 183,059 | 623 | 323,867 |
| 87110 | 38 | 273,806 | 912 | 329,209 | 950 | 603,015 |
| 87111 | 20 | 276,368 | 471 | 142,916 | 491 | 419,283 |
| 87112 | 38 | 246,239 | 967 | 313,356 | 1,005 | 559,595 |
| 87113 | 8 | 22,358 | 215 | 92,163 | 223 | 114,521 |
| 87114 | 36 | 268,857 | 713 | 346,557 | 749 | 615,414 |
| 87115 | 1 | 12,640 | 3 | 560 | 4 | 13,200 |
| 87116 | 1 | - | 4 | 1,198 | 5 | 1,198 |
| 87117 | - | - | - | - | - | - |
| 87119 | - | - | 6 | 431 | 6 | 431 |
| 87120 | 49 | 517,665 | 876 | 332,139 | 925 | 849,804 |
| 87121 | 124 | 1,566,592 | 4,208 | 2,234,780 | 4,332 | 3,801,372 |
| 87122 | 2 | 2,429 | 105 | 36,773 | 107 | 39,203 |
| 87123 | 41 | 446,790 | 1,527 | 716,584 | 1,568 | 1,163,374 |
| 87125 | 1 | 98 | 40 | 11,149 | 41 | 11,247 |
| 87128 | - | - | - | - | - | - |
| 87130 | - | - | - | - | - | - |
| 87131 | - | - | 9 | 1,426 | 9 | 1,426 |
| 87140 | - | - | - | - | - | - |
| 87151 | 2 | 52,750 | 36 | 21,117 | 38 | 73,867 |
| 87153 | - | - | 6 | 399 | 6 | 399 |
| 87154 | 1 | 10 | 12 | 607 | 13 | 617 |
| 87158 | - | - | - | - | - | - |
| 87176 | - | - | 11 | 1,025 | 11 | 1,025 |
| 87181 | - | - | 5 | 766 | 5 | 766 |
| 87184 | - | - | 2 | 313 | 2 | 313 |
| 87185 | - | - | - | - | - | - |
| 87187 | - | - | 2 | 424 | 2 | 424 |
| 87190 | - | - | 5 | 478 | 5 | 478 |
| 87191 | - | - | 3 | 265 | 3 | 265 |
| 87192 | - | - | 8 | 1,041 | 8 | 1,041 |
| 87193 | - | - | 13 | 874 | 13 | 874 |
| 87194 | - | - | 17 | 469 | 17 | 469 |
| 87195 | 2 | 558 | 27 | 2,389 | 29 | 2,948 |
| 87196 | - | - | 6 | 5,877 | 6 | 5,877 |
| 87197 | - | - | 25 | 1,722 | 25 | 1,722 |
| 87198 | - | - | 45 | 1,897 | 45 | 1,897 |
| 87199 | - | - | 11 | 1,348 | 11 | 1,348 |
| Grand Total | 674 | \$ 6,735,559 | 18,585 | \$ 8,339,985 | \$ 19,259 | \$ 15,075,544 |

Financial Assistance to Bernalillo County Patients by Service Type

Totals for the three (3) months ended September 30, 2023.

| Bernalillo County Zip | Medicine Count | Surgery Count | Cancer Count | Orthopedics 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 | 6 | 1 | 2 | 8 | 1 | 1 | - | 1 | - | - | - | - | 20 |
| 87022 | 9 | 4 | 2 | 2 | 1 | 3 | 4 | - | - | - | 5 | - | 30 |
| 87047 | 13 | 10 | 5 | 13 | 1 | 2 | 2 | 4 | - | - | 2 | - | 52 |
| 87059 | 52 | 10 | 4 | 18 | 7 | 13 | 9 | 1 | - | - | 16 | - | 130 |
| 87100 | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 87101 | - | - | - | - | - | - | - | - | - | - | 1 | - | 1 |
| 87102 | 332 | 111 | 58 | 92 | 85 | 53 | 48 | 28 | 12 | 1 | 142 | - | 962 |
| 87103 | 5 | - | - | - | 10 | - | - | 1 | - | 1 | - | - | 17 |
| 87104 | 95 | 48 | 29 | 35 | 22 | 18 | 13 | 5 | 3 | - | 32 | - | 300 |
| 87105 | 894 | 373 | 175 | 309 | 306 | 133 | 119 | 82 | 28 | 6 | 214 | - | 2,639 |
| 87106 | 323 | 138 | 37 | 93 | 83 | 38 | 57 | 26 | 17 | 1 | 155 | - | 968 |
| 87107 | 354 | 139 | 57 | 116 | 121 | 49 | 51 | 19 | 4 | 2 | 97 | - | 1,009 |
| 87108 | 646 | 195 | 117 | 147 | 234 | 86 | 82 | 40 | 29 | 6 | 272 | - | 1,854 |
| 87109 | 207 | 73 | 39 | 82 | 25 | 40 | 29 | 29 | 12 | 1 | 86 | - | 623 |
| 87110 | 332 | 111 | 67 | 107 | 44 | 52 | 72 | 23 | 14 | - | 128 | - | 950 |
| 87111 | 161 | 56 | 50 | 47 | 17 | 33 | 38 | 10 | 2 | 1 | 76 | - | 491 |
| 87112 | 316 | 126 | 113 | 109 | 53 | 55 | 61 | 22 | 6 | 3 | 141 | - | 1,005 |
| 87113 | 91 | 40 | 22 | 14 | 13 | 7 | 5 | 7 | 4 | - | 20 | - | 223 |
| 87114 | 244 | 91 | 68 | 74 | 63 | 40 | 72 | 19 | 6 | 1 | 71 | - | 749 |
| 87115 | - | 1 | 1 | 2 | - | - | - | - | - | - | - | - | 4 |
| 87116 | 1 | - | - | - | 1 | 1 | - | - | - | - | 2 | - | 5 |
| 87117 | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 87119 | - | 2 | - | 1 | 1 | 2 | - | - | - | - | - | - | 6 |
| 87120 | 331 | 96 | 67 | 91 | 92 | 30 | 49 | 34 | 5 | 2 | 128 | - | 925 |
| 87121 | 1,450 | 582 | 440 | 382 | 728 | 205 | 194 | 95 | 33 | 12 | 201 | - | 4,332 |
| 87122 | 42 | 21 | 8 | 16 | 3 | 6 | 4 | 2 | - | - | 5 | - | 107 |
| 87123 | 612 | 179 | 127 | 128 | 151 | 89 | 103 | 36 | 21 | 2 | 120 | - | 1,568 |
| 87125 | 9 | 4 | - | 3 | 1 | 2 | 4 | 4 | - | - | 14 | - | 41 |
| 87128 | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 87130 | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 87131 | 5 | 1 | - | - | - | - | - | 1 | 2 | - | - | - | 9 |
| 87140 | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 87151 | 8 | 18 | - | 6 | - | - | - | - | - | - | 6 | - | 38 |
| 87153 | - | 1 | - | - | - | - | - | 2 | - | - | 3 | - | 6 |
| 87154 | 7 | 2 | - | 1 | - | 2 | - | - | - | - | 1 | - | 13 |
| 87158 | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 87176 | 7 | - | - | 1 | - | 2 | - | - | - | - | 1 | - | 11 |
| 87181 | 2 | 2 | - | 1 | - | - | - | - | - | - | - | - | 5 |
| 87184 | 2 | - | - | - | - | - | - | - | - | - | - | - | 2 |
| 87185 | - | - | - | - | - | - | - | - | - | - | - | - | - |
| 87187 | 1 | - | - | - | - | 1 | - | - | - | - | - | - | 2 |
| 87190 | 3 | 1 | - | - | 1 | - | - | - | - | - | - | - | 5 |
| 87191 | 2 | - | - | - | - | - | - | - | - | - | 1 | - | 3 |
| 87192 | 4 | - | - | - | 2 | - | - | - | - | - | 2 | - | 8 |
| 87193 | 5 | 3 | - | 2 | - | 1 | - | - | - | - | 2 | - | 13 |
| 87194 | 9 | 3 | - | 2 | 1 | - | 1 | - | - | - | 1 | - | 17 |
| 87195 | 9 | 5 | 1 | 6 | 1 | 1 | 3 | 1 | - | - | 2 | - | 29 |
| 87196 | - | 4 | - | - | - | - | 1 | - | - | - | 1 | - | 6 |
| 87197 | 10 | 3 | - | 8 | - | 1 | 2 | - | 1 | - | - | - | 25 |
| 87198 | 14 | 9 | 2 | - | 1 | 13 | - | 6 | - | - | - | - | 45 |
| 87199 | 3 | - | 1 | 2 | 1 | 1 | - | 1 | - | - | 2 | - | 11 |
| Grand Total | 6,616 | 2,473 | 1,492 | 1,918 | 2,070 | 980 | 1,023 | 499 | 199 | 39 | 1,950 | - | 19,259 |

Primary Reason for Bernalillo County Indigent Resident Visits

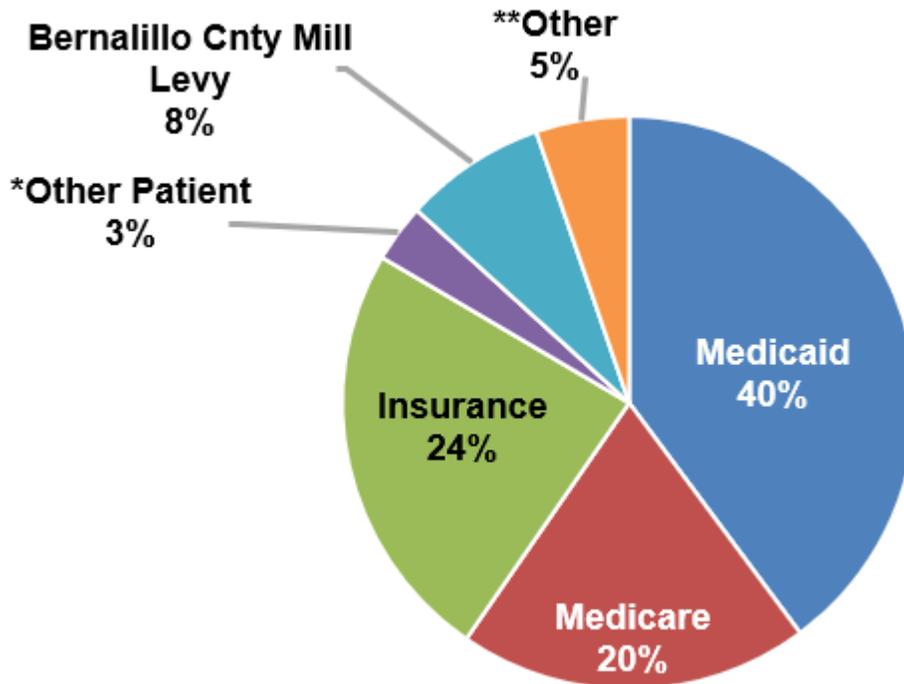
Totals are for each of the eight (8) quarters ended September 30, 2023.

| Description | 2024Q1 | 2023Q4 | 2023Q3 | 2023Q2 | 2023Q1 | 2022Q4 | 2022Q3 | 2022Q2 |
|---|--------|--------|--------|--------|--------|--------|--------|--------|
| Factors influencing health status and contact with health services | 3,842 | 4,260 | 6,037 | 5,912 | 4,195 | 3,897 | 4,374 | 5,024 |
| undefined | 2,902 | 2,327 | 3,259 | 3,152 | 2,104 | 1,922 | 1,952 | 2,187 |
| Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified | 1,754 | 1,849 | 2,589 | 2,292 | 1,640 | 1,537 | 1,662 | 1,954 |
| Diseases of the musculoskeletal system and connective tissue | 1,636 | 1,781 | 2,391 | 2,221 | 1,596 | 1,487 | 1,573 | 1,806 |
| Endocrine, nutritional and metabolic diseases | 1,062 | 1,115 | 1,538 | 1,305 | 949 | 866 | 940 | 1,116 |
| Injury, poisoning and certain other consequences of external causes | 1,011 | 1,067 | 1,319 | 1,325 | 996 | 907 | 870 | 1,112 |
| Diseases of the circulatory system | 874 | 999 | 1,450 | 1,224 | 885 | 830 | 908 | 1,028 |
| Diseases of the nervous system | 861 | 925 | 1,239 | 1,090 | 791 | 692 | 737 | 898 |
| Mental and behavioural disorders | 854 | 969 | 1,354 | 1,273 | 922 | 878 | 979 | 1,133 |
| Diseases of the genitourinary system | 678 | 697 | 957 | 873 | 601 | 572 | 609 | 730 |
| Neoplasms | 675 | 738 | 1,042 | 1,001 | 667 | 602 | 668 | 827 |
| Diseases of the digestive system | 586 | 639 | 902 | 810 | 574 | 561 | 550 | 638 |
| Diseases of the skin and subcutaneous tissue | 508 | 559 | 768 | 682 | 523 | 454 | 471 | 537 |
| Diseases of the respiratory system | 495 | 652 | 1,115 | 1,322 | 557 | 623 | 616 | 788 |
| Pregnancy, childbirth and the puerperium | 456 | 502 | 645 | 584 | 436 | 407 | 470 | 564 |
| Diseases of the eye and adnexa | 335 | 397 | 558 | 480 | 341 | 317 | 337 | 353 |
| Certain infectious and parasitic diseases | 201 | 265 | 370 | 336 | 217 | 218 | 213 | 278 |
| Diseases of the ear and mastoid process | 198 | 242 | 397 | 392 | 223 | 210 | 204 | 238 |
| Congenital malformations, deformations and chromosomal abnormalities | 124 | 154 | 205 | 191 | 128 | 123 | 123 | 143 |
| Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism | 122 | 131 | 177 | 166 | 116 | 107 | 121 | 135 |
| Codes for special purposes | 47 | 59 | 102 | 240 | 161 | 123 | 314 | 203 |
| Certain conditions originating in the perinatal period | 15 | 17 | 25 | 24 | 30 | 27 | 29 | 35 |
| External causes of morbidity and mortality | 0 | -1 | -1 | -1 | 0 | -1 | -1 | -1 |
| | 19,236 | 20,343 | 28,438 | 26,894 | 18,652 | 17,359 | 18,719 | 21,726 |

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

FY 2023 Revenue (Unaudited)



| 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 three (3) months ended September 30, 2023.

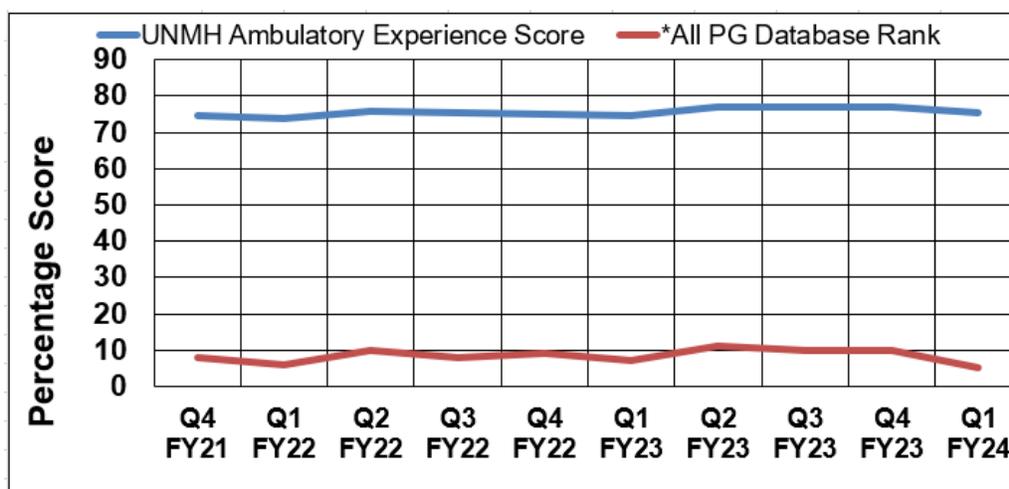
| | |
|---------|--------------------------------|
| 562,253 | FY22 Actual (12 Months) |
| 549,832 | FY23 Actual (12 Months) |
| 131,081 | FY24 Actual (3 Months) |

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

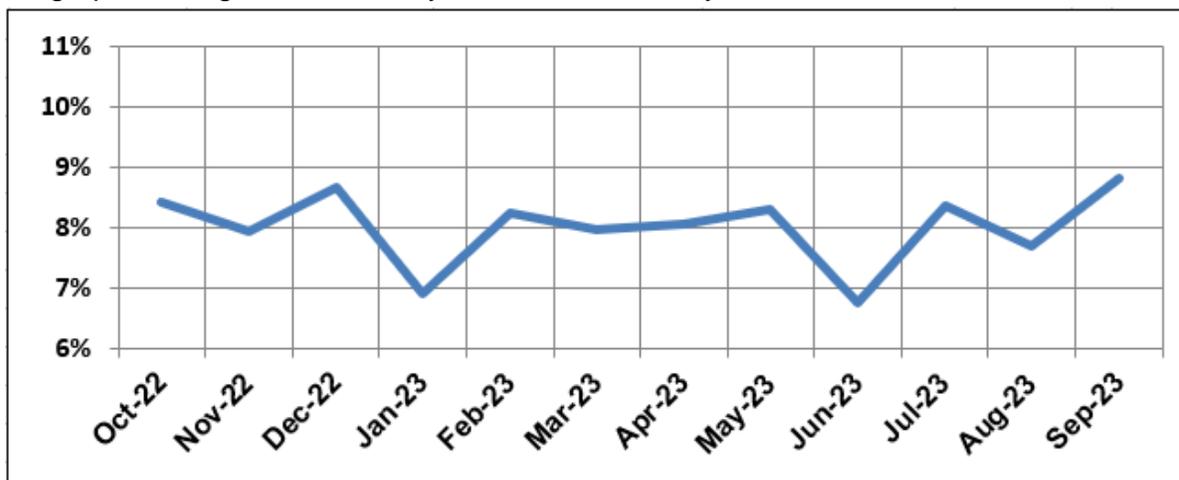


| Quarter | Q4 FY21 | Q1 FY22 | Q2 FY22 | Q3 FY22 | Q4 FY22 | Q1 FY23 | Q2 FY23 | Q3 FY23 | Q4 FY23 | Q1 FY24 |
|----------------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| UNMH Ambulatory Experience Score | 74.5 | 73.7 | 75.8 | 75.4 | 75.1 | 74.5 | 76.8 | 77.0 | 77.0 | 75.4 |
| *All PG Database Rank | 8.0 | 6.0 | 10.0 | 8.0 | 9.0 | 7.0 | 11.0 | 10.0 | 10.0 | 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.

Percentage of Primary Care Patients with Same Day Clinic Appointments

Average percentage of Same Day Access for Primary Care Clinics.



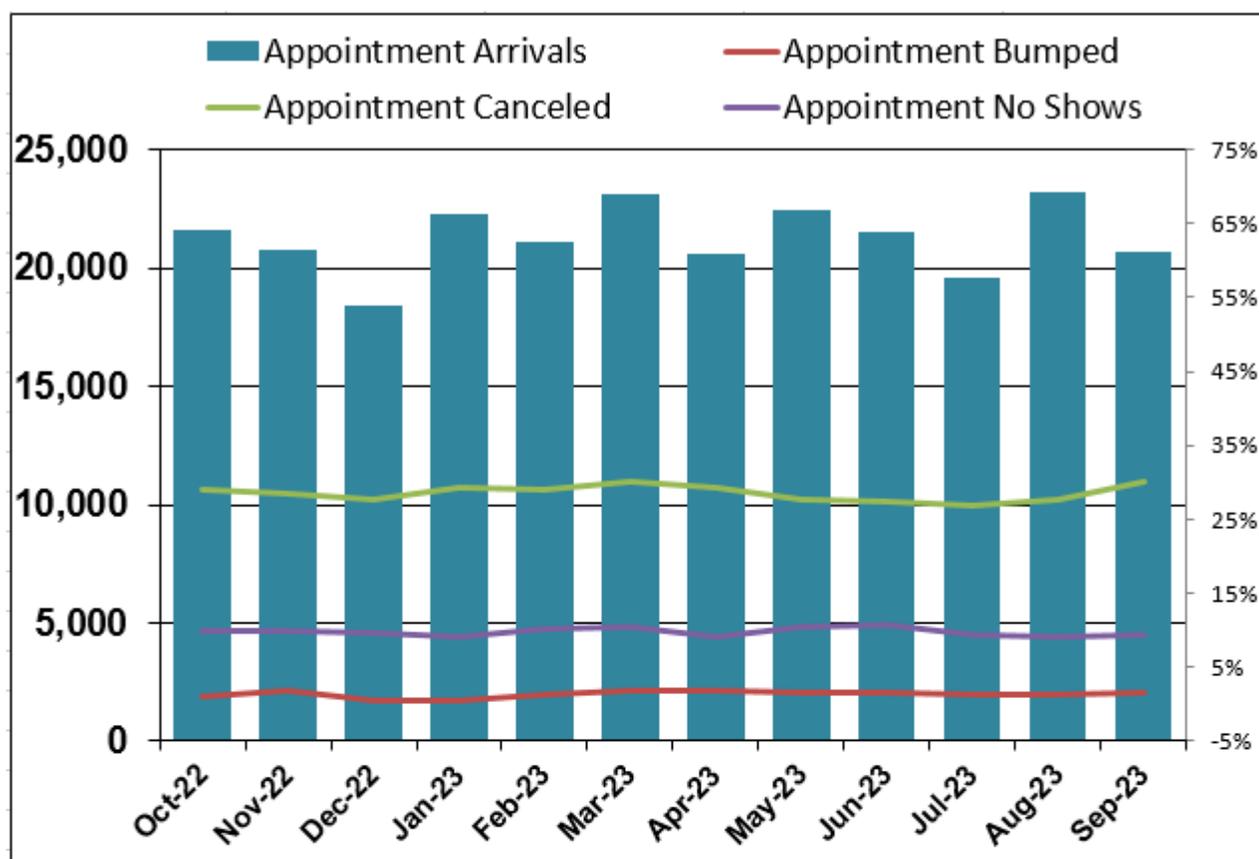
| Month | Same Day | Total Arrived | Same Day Rate |
|--------|----------|---------------|---------------|
| Oct-22 | 1,284 | 15,272 | 8.4% |
| Nov-22 | 1,185 | 14,918 | 7.9% |
| Dec-22 | 1,174 | 13,569 | 8.7% |
| Jan-23 | 1,102 | 15,976 | 6.9% |
| Feb-23 | 1,256 | 15,264 | 8.2% |
| Mar-23 | 1,313 | 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% |

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

| Average | Primary Care Clinics |
|---------|-------------------------------|
| 8.3% | 1209 Clinic |
| 6.9% | Alamo Primary Care Clinic |
| 3.8% | Family Practice Clinic |
| 2.0% | General Pediatric Clinic |
| 7.3% | Northeast Heights Clinic |
| 8.7% | Senior Health Center |
| 4.9% | Southeast Heights Clinic |
| 7.0% | Southwest Mesa Clinic |
| 3.6% | SRMC FP Clinic |
| 6.7% | UH 4th Street NV Clinic |
| 13.1% | UH Atrisco Heritage |
| 47.0% | UNM Lobocare Clinic |
| 6.7% | UNMMG Family Health Grande |
| 5.6% | Westside Clinic |
| 8.0% | Young Childrens Health Center |

Primary Care Outpatient Appointment Dispositions

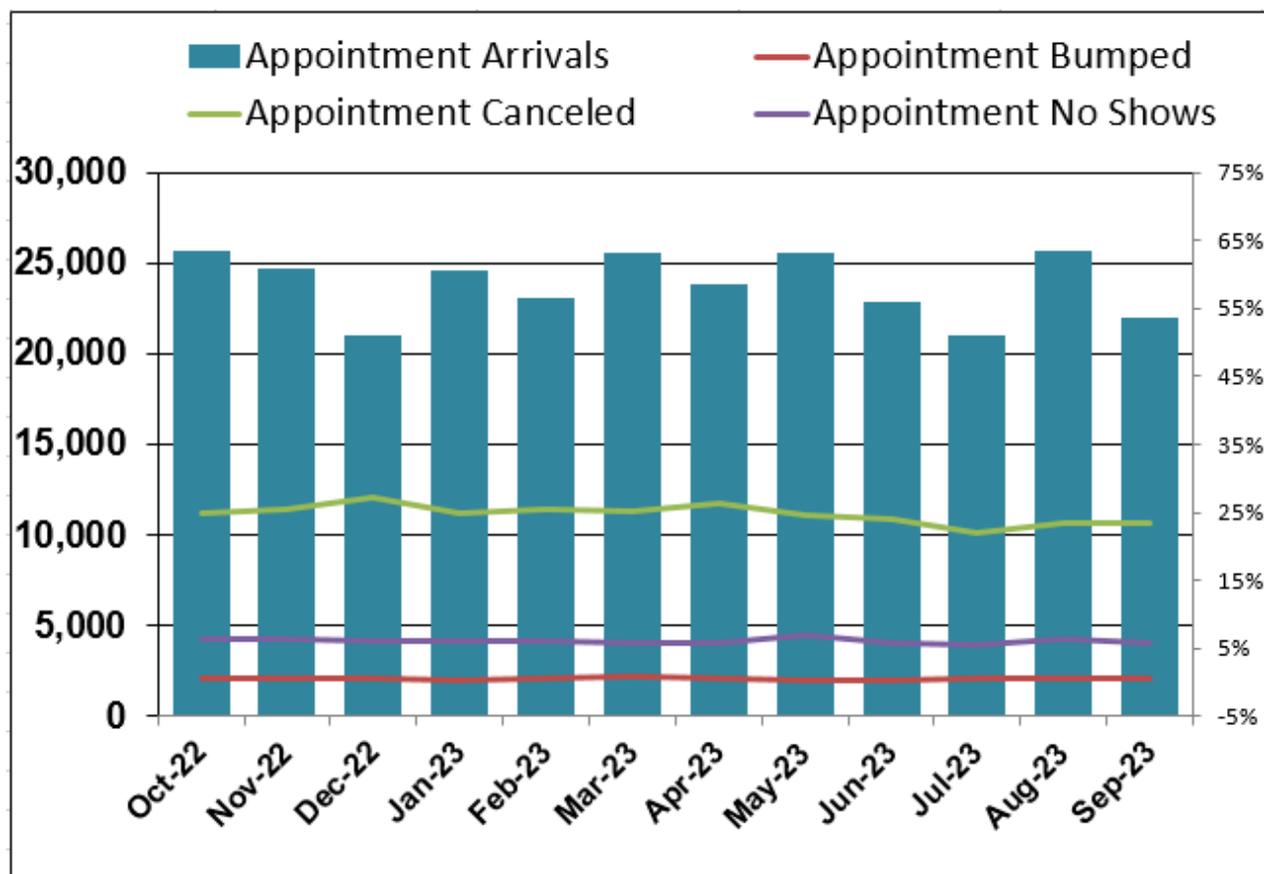
This data includes only Primary Care appointments.



| Month | Appointment Arrivals | Appointment Bumped | Appointment Canceled | Appointment No Shows |
|--------|----------------------|--------------------|----------------------|----------------------|
| Oct-22 | 21,615 | 1% | 29% | 10% |
| Nov-22 | 20,733 | 2% | 28% | 10% |
| Dec-22 | 18,378 | 1% | 28% | 10% |
| 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% |

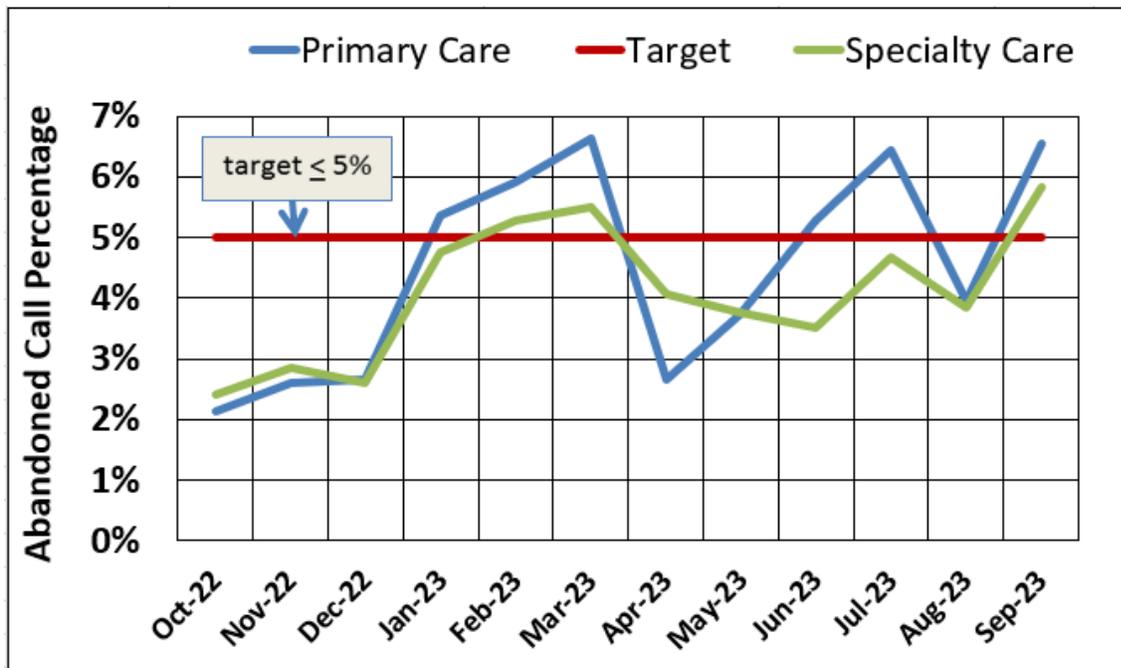
Specialty Care Outpatient Appointment Dispositions

This data includes only Specialty Care appointments.



| Month | Appointment Arrivals | Appointment Bumped | Appointment Canceled | Appointment No Shows |
|--------|----------------------|--------------------|----------------------|----------------------|
| Oct-22 | 25,717 | 1% | 25% | 6% |
| Nov-22 | 24,676 | 1% | 26% | 6% |
| Dec-22 | 21,039 | 1% | 27% | 6% |
| 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% |

Percentage Abandoned Phone Calls for Primary and Specialty Care

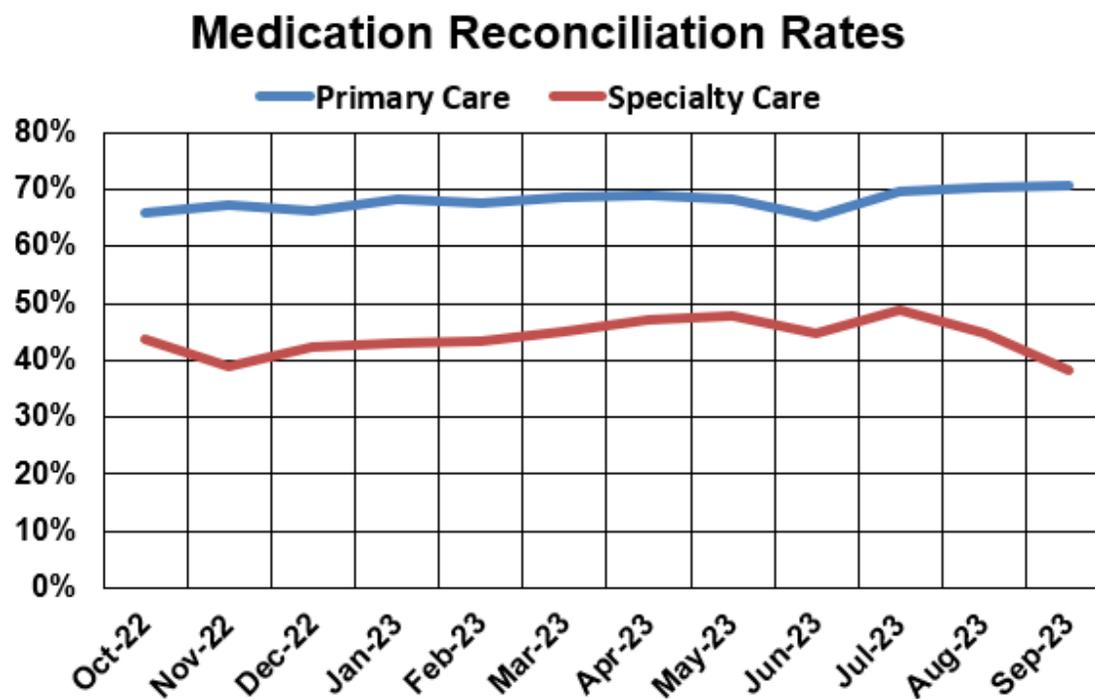


| Area: Month | UNMH Primary Care Scheduling ACD | UNMH Specialty Care Scheduling ACD | Goal Standard for Call Center |
|----------------|-------------------------------------|---------------------------------------|----------------------------------|
| Oct-22 | 2.14% | 2.42% | 5% |
| Nov-22 | 2.60% | 2.85% | 5% |
| Dec-22 | 2.66% | 2.59% | 5% |
| 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% |

Medication Reconciliation Goals Primary and Specialty Care

National Patient Safety Goal :

UNH Medication Reconciliation Rates for Primary Care and Specialty Care.



| Month | Primary Care | Specialty Care |
|--------|--------------|----------------|
| Oct-22 | 65.8% | 43.8% |
| Nov-22 | 67.4% | 38.8% |
| Dec-22 | 66.3% | 42.3% |
| 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% |

Percentage of Patients with Access to Electronic Medical Record

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

As of October 2, 2023.

| | |
|---------|--|
| 411,173 | Invitations sent out to patients who provided an email address. |
| 188,840 | Patients who have claimed invitation to sign up. |
| 3,102 | Patients who have self enrolled directly without an invitation. |
| 164,799 | *Active Users who have accessed their medical records. |
| 40% | 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).

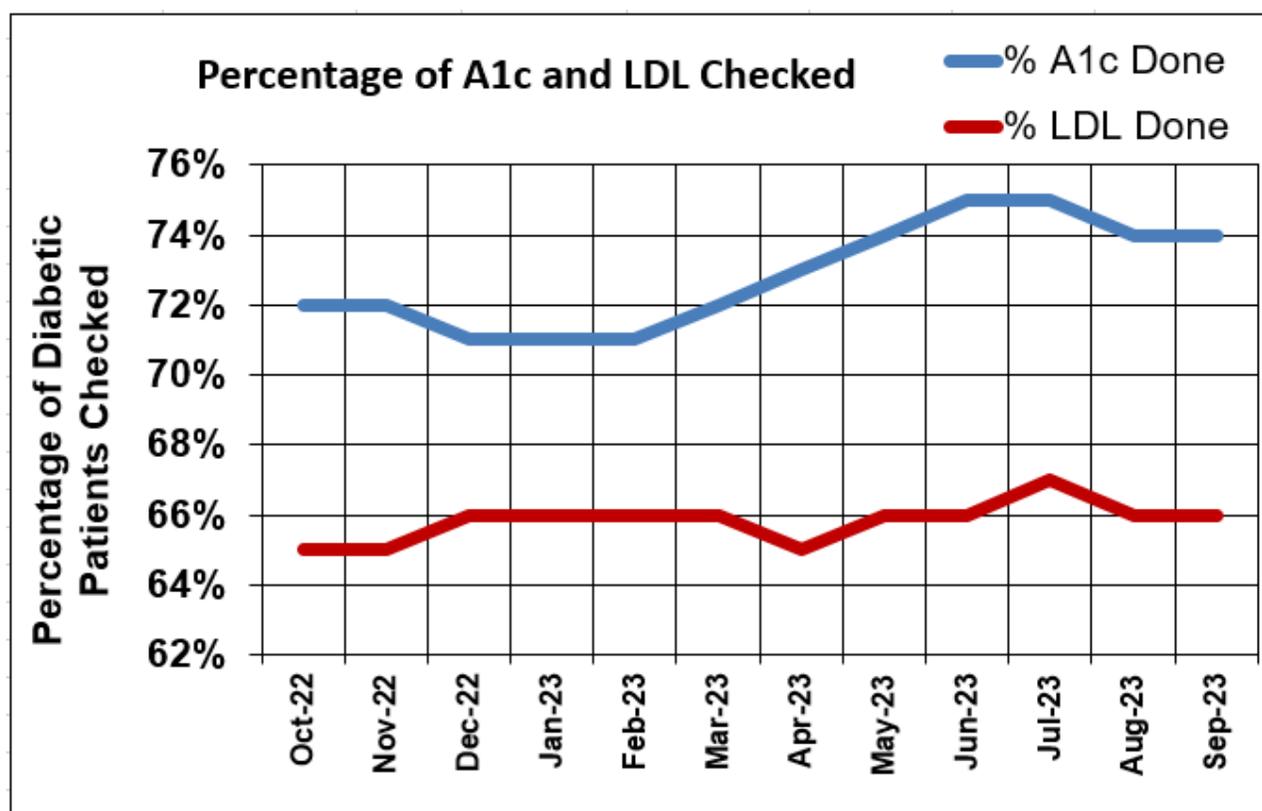
One hundred percent (100%) of all patients may access their medical records in person at UNMH Health Information Management (HIM).

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



| Month | Total Patients | A1c Done | % A1c Done | LDL Done | % LDL Done |
|--------|----------------|----------|------------|----------|------------|
| Oct-22 | 8,035 | 5,800 | 72% | 5,254 | 65% |
| Nov-22 | 8,136 | 5,815 | 72% | 5,310 | 65% |
| Dec-22 | 8,095 | 5,714 | 71% | 5,325 | 66% |
| 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% |

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 |
|--------|---------------------------------|--|---|
| Oct-22 | 2,276 | 6 | 231 |
| Nov-22 | 3,513 | 8 | 204 |
| Dec-22 | 3,499 | 3 | 92 |
| 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 |

Total Uncompensated Care – Charity Care and Uninsured

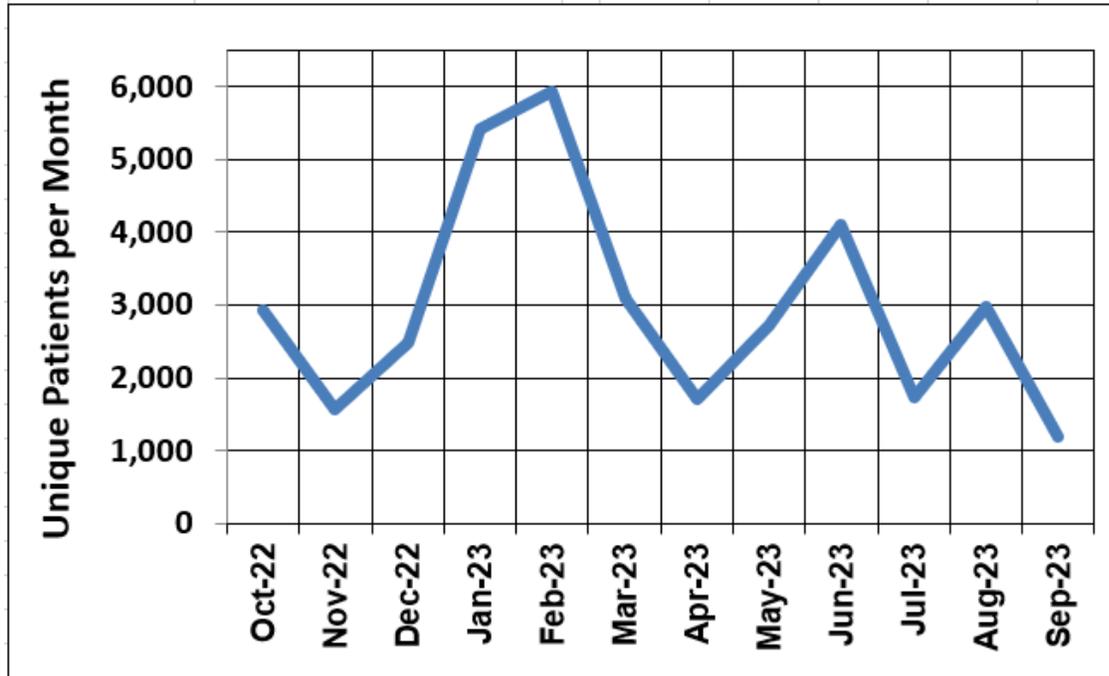
For the three (3) months ended September 30, 2023, based on primary and secondary coverage.

| Bernalillo County | Charity Care | Uninsured | Total Uncompensated Care |
|---------------------|---------------------|---------------------|--------------------------|
| Unduplicated Census | 6,259 | 3,433 | 9,692 |
| Encounters | 13,878 | 5,269 | 19,147 |
| Cost | \$ 9,904,612 | \$ 5,169,551 | \$ 15,074,163 |

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.

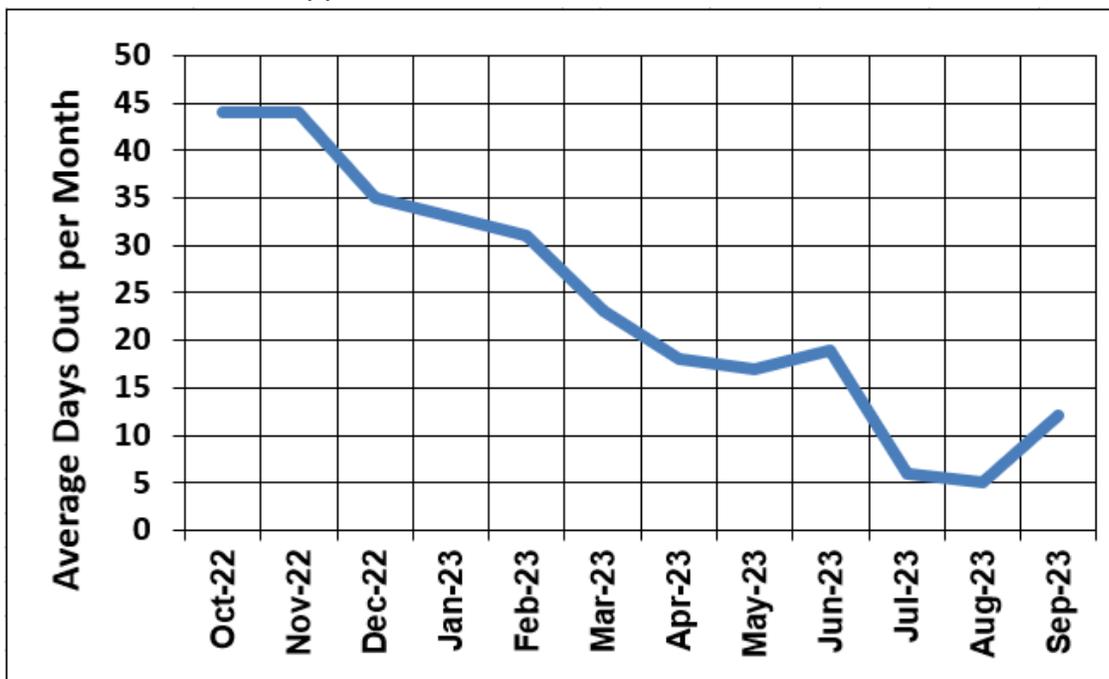
Number of Unique Patients Sent to Collections

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



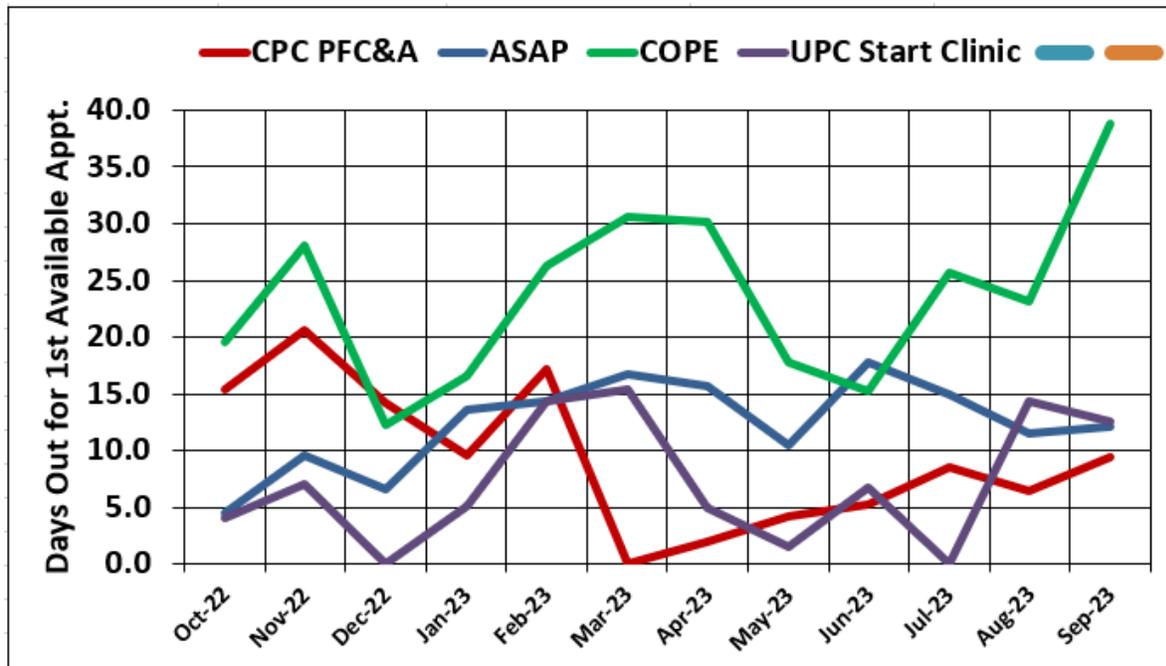
Days Out For Scheduling Financial Assistance Appointment

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



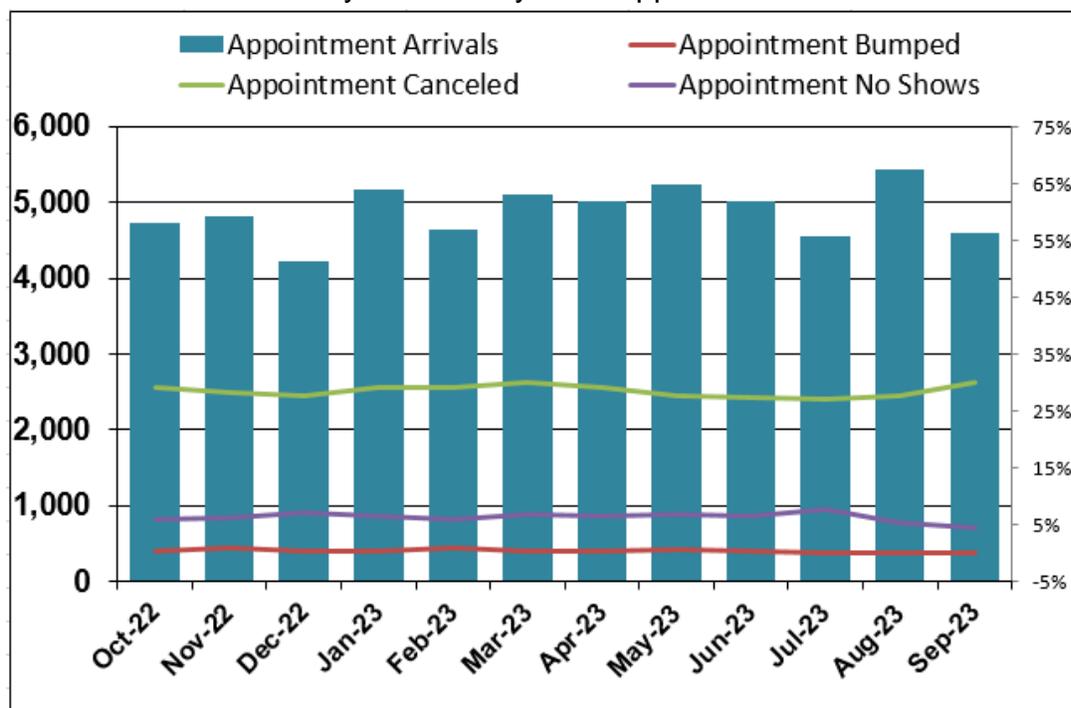
| Month | CPC PFC&A | ASAP | COPE | UPC Start Clinic |
|--------|-----------|------|------|------------------|
| Oct-22 | 15.4 | 4.6 | 19.5 | 4.0 |
| Nov-22 | 20.6 | 9.5 | 28.0 | 7.0 |
| Dec-22 | 14.2 | 6.6 | 12.3 | 0.0 |
| Jan-23 | 9.6 | 13.6 | 16.5 | 5.1 |
| Feb-23 | 17.2 | 14.3 | 26.3 | 14.3 |
| Mar-23 | 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 |

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 consolidated 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.



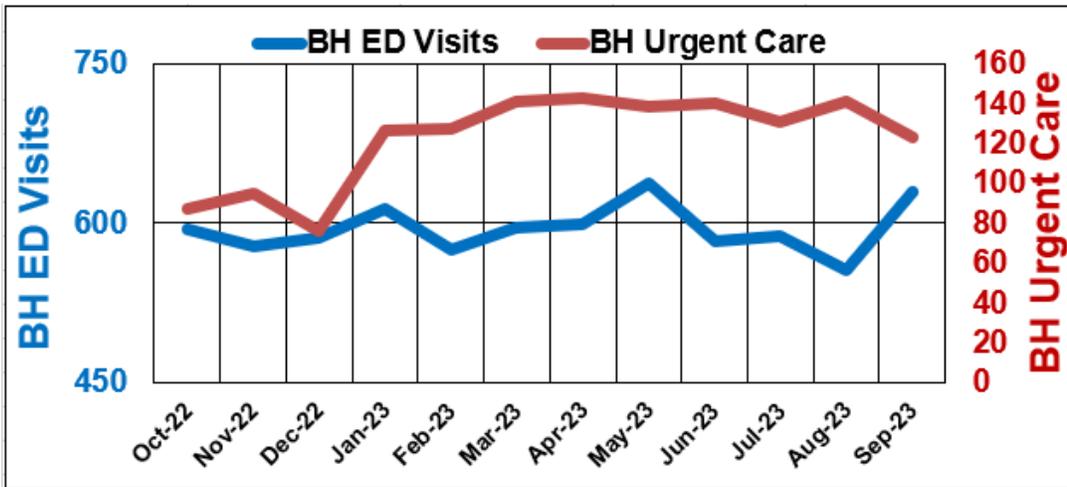
| Month | Appointment Arrivals | Appointment Bumped | Appointment Canceled | Appointment No Shows |
|--------|----------------------|--------------------|----------------------|----------------------|
| Oct-22 | 4,732 | 0% | 29% | 6% |
| Nov-22 | 4,823 | 1% | 28% | 6% |
| Dec-22 | 4,227 | 0% | 28% | 7% |
| Jan-23 | 5,176 | 0% | 29% | 7% |
| Feb-23 | 4,651 | 1% | 29% | 6% |
| Mar-23 | 5,101 | 0% | 30% | 7% |
| Apr-23 | 5,027 | 0% | 29% | 7% |
| May-23 | 5,231 | 1% | 28% | 7% |
| Jun-23 | 5,022 | 0% | 27% | 7% |
| Jul-23 | 4,564 | 0% | 27% | 8% |
| Aug-23 | 5,428 | 0% | 28% | 5% |
| Sep-23 | 4,594 | 0% | 30% | 4% |

Number of Unique Outpatients and Number of Encounters CY2022

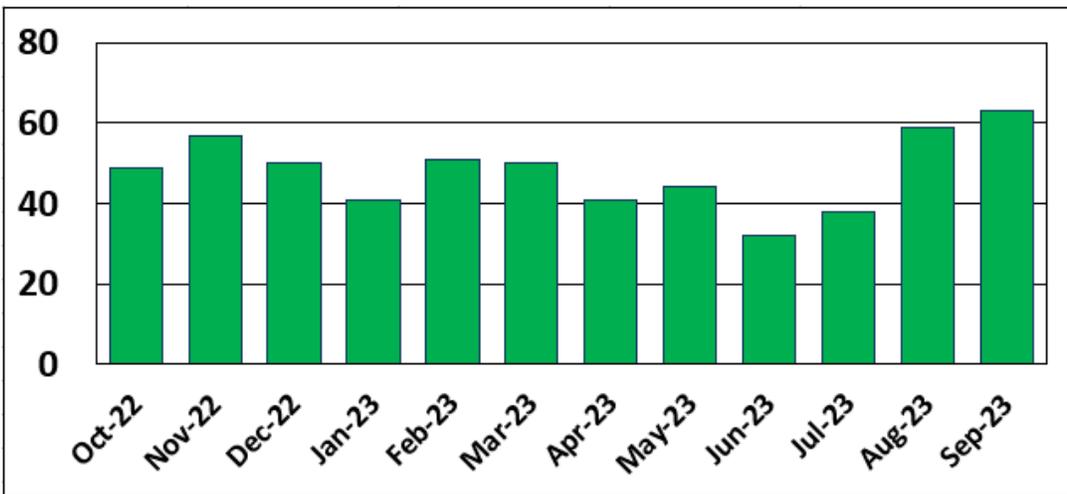
| Patient Group | Patients Served | Total Encounters |
|--------------------|-----------------|------------------|
| BH UPC Outpatient* | 11,064 | 70,222 |
| BH CPC Outpatient | 3,612 | 24,327 |

* Excluding all Suboxone and Methadone Visits

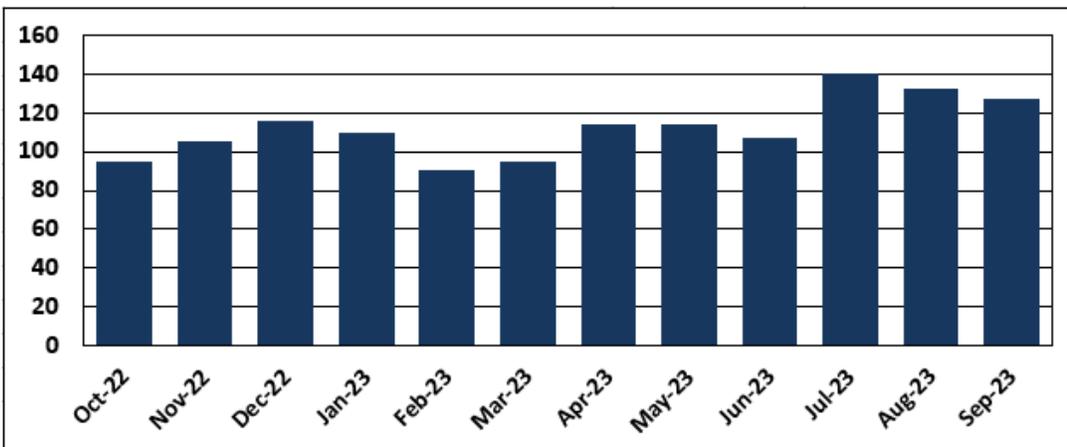
Psychiatric Emergency Department and Urgent Care Encounters



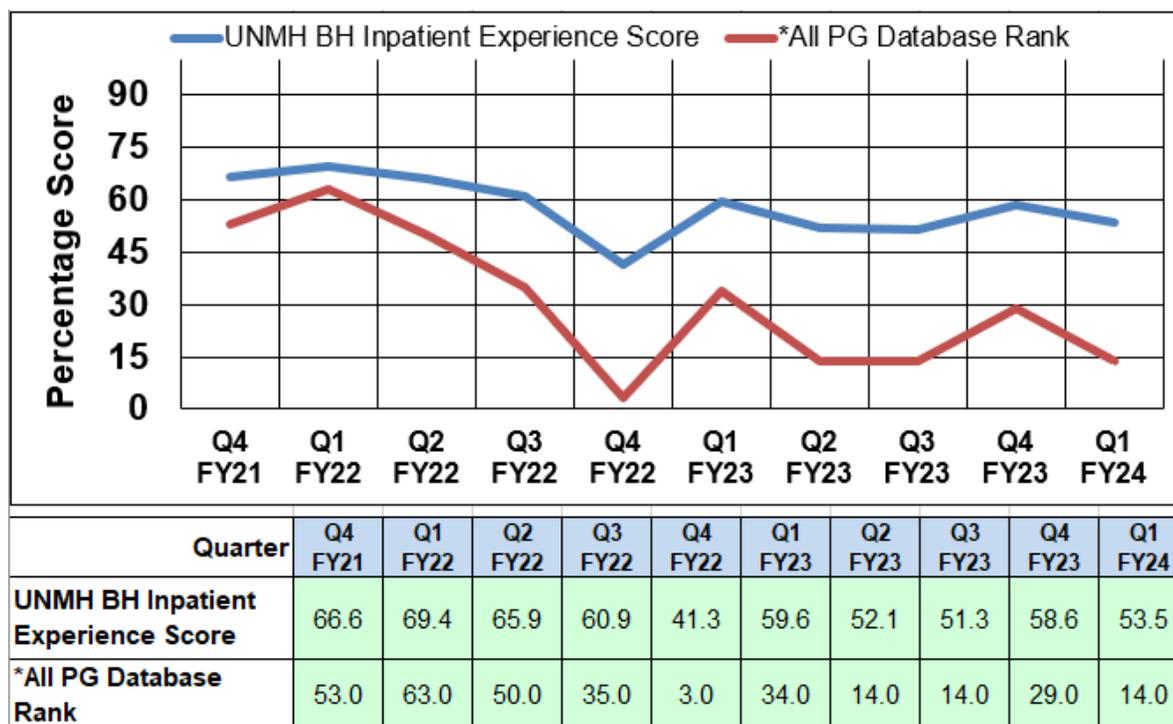
Number of Fast Track Patients Seen



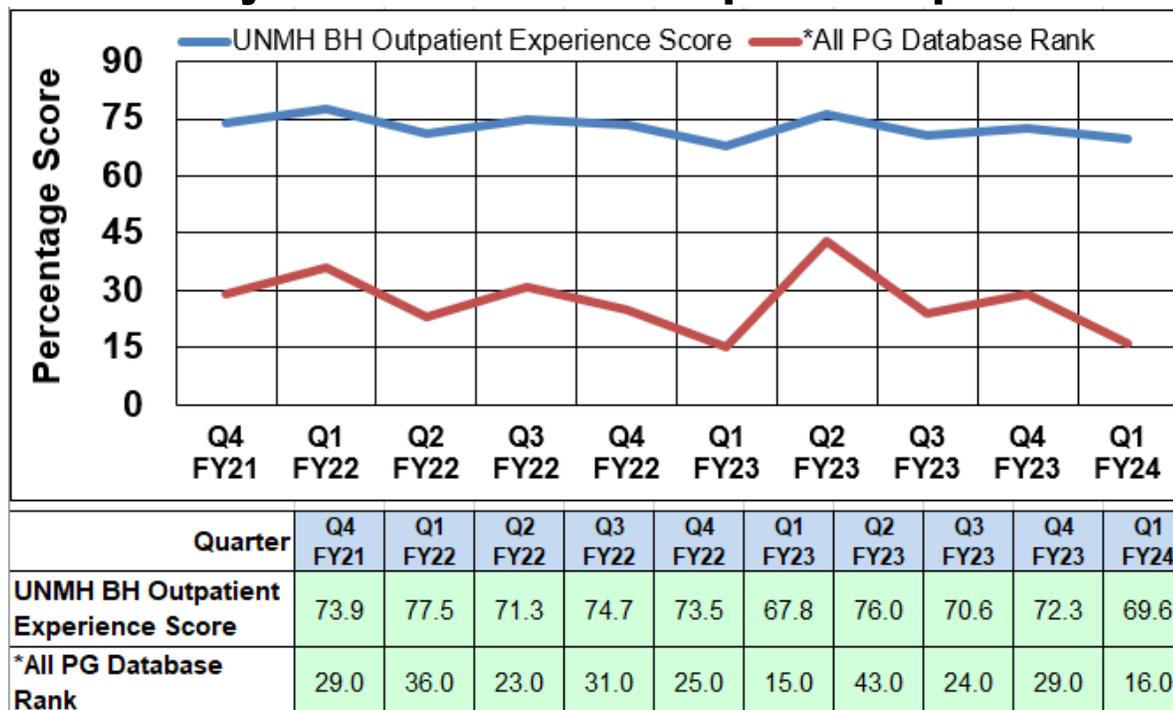
Law Enforcement Drop offs at Psychiatric Emergency Services



Press Ganey Behavioral Health Inpatient Experience Score

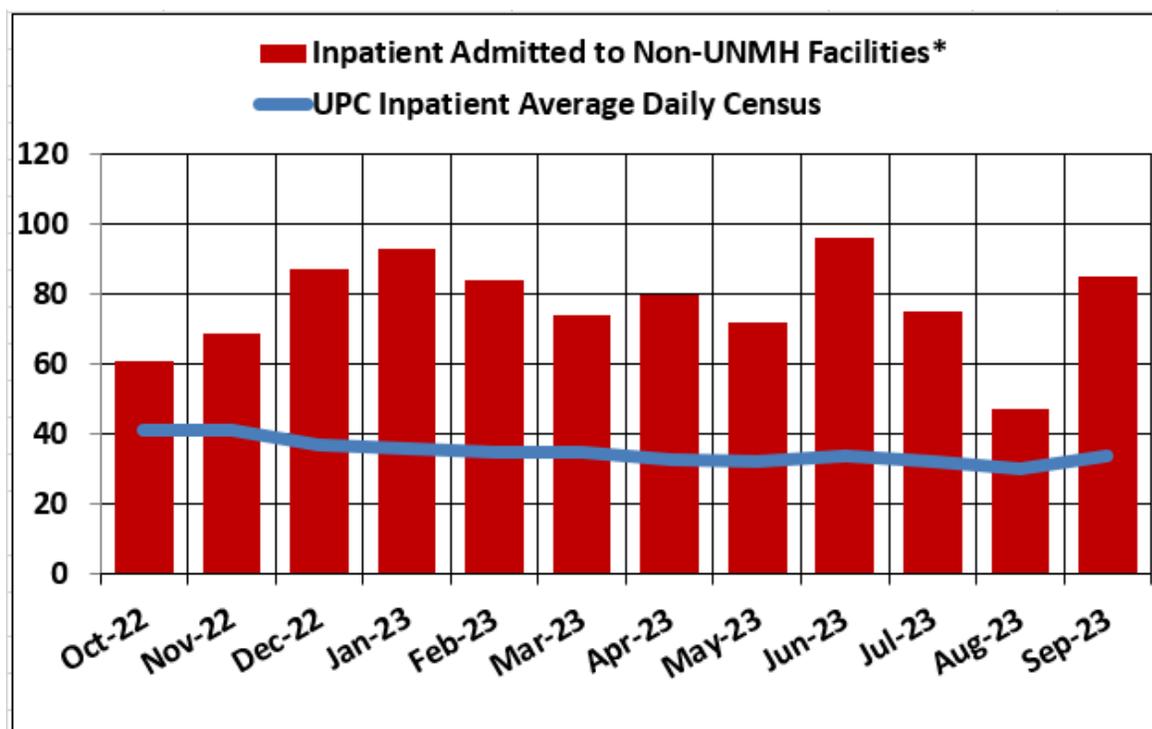


Press Ganey Behavioral Health Outpatient Experience Score



*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.

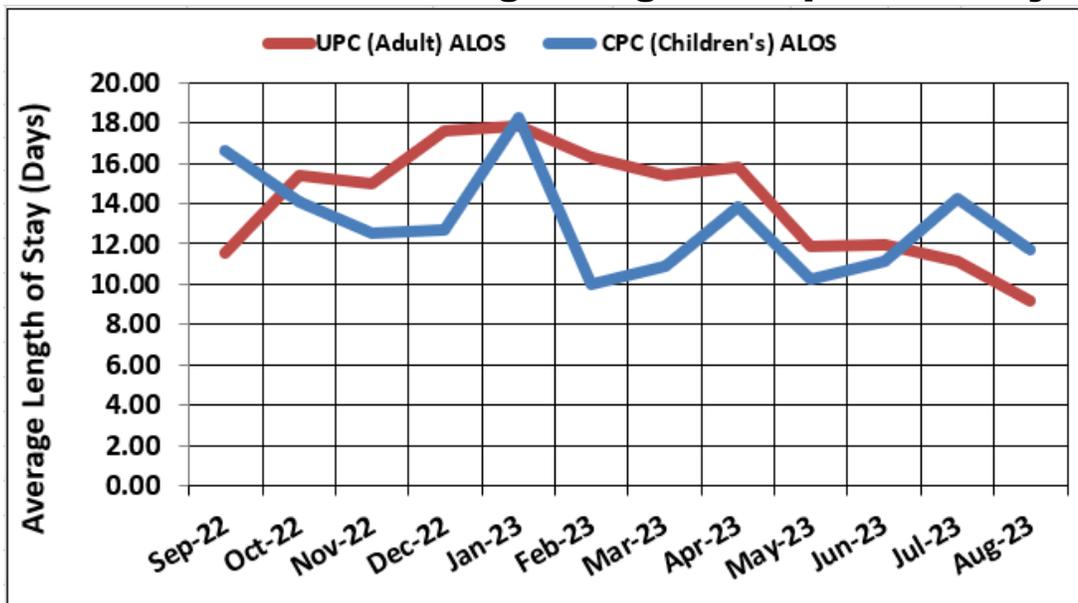
Behavioral Health Inpatient Admitted to Non-UNMH Facilities



| Month | Inpatient Admitted to Non-UNMH Facilities* | UPC Inpatient Average Daily Census |
|--------|--|------------------------------------|
| Oct-22 | 61 | 41 |
| Nov-22 | 69 | 41 |
| Dec-22 | 87 | 37 |
| 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 |

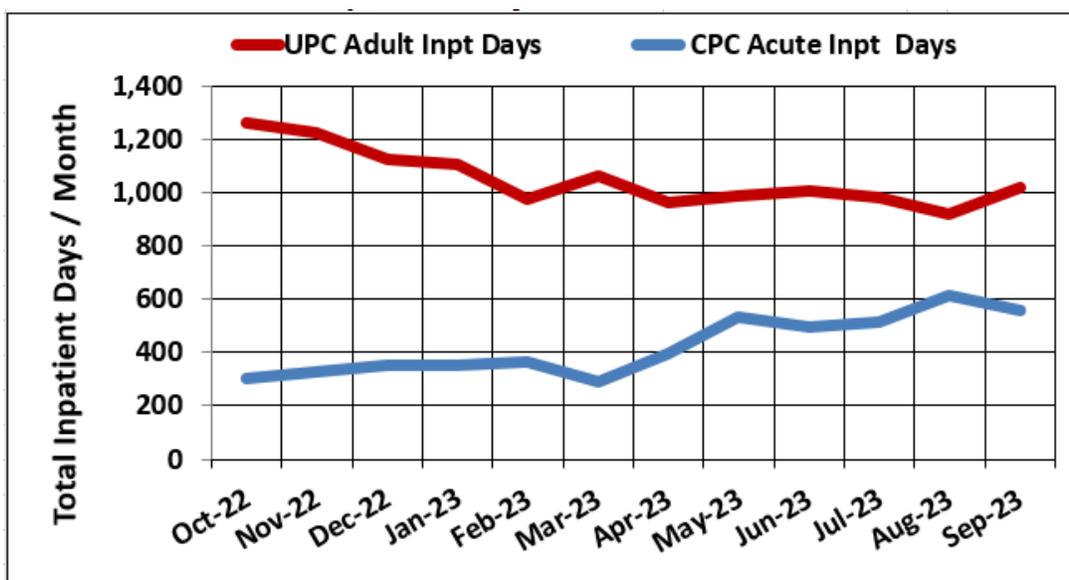
*Includes transfers based on patient's network provider, healthcare coverage and clinically appropriate level of care for a patient who may need a different type of bed for which we currently do not have capacity. Behavioral Health has a maximum of 47 licensed inpatient beds.

Behavioral Health Average Length of Inpatient Stay



Children's Psychiatric Center (CPC) Average Child National Benchmark: **11.01**
 University Psychiatric Center (UPC) Average Adult National Benchmark: **6.57**

Number of BH Adult and Child/Adolescent Inpatient Days



Number of Unique Inpatients and Number of Encounters CY2022

| Patient Group | Patients Served | Total Encounters |
|------------------|-----------------|------------------|
| BH UPC Inpatient | 851 | 1,368 |
| BH CPC Inpatient | 344 | 408 |

Number of COPE Medical Home Encounters for High Needs Patients

| Fiscal Year | Count |
|-------------|--------|
| FY2021 | 12,615 |
| FY2022 | 11,755 |
| FY2023 | 10,916 |
| FY2024* | 10,475 |

Total Opioid Patients

| Month | Census |
|--------|--------|
| Oct-22 | 463 |
| Nov-22 | 461 |
| Dec-22 | 453 |
| 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 |

Total Methadone Encounters

| Month | Count |
|--------|-------|
| Oct-22 | 2,290 |
| Nov-22 | 2,405 |
| Dec-22 | 2,319 |
| 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 |

Number of Methadone and Suboxone Doses *

| Month | Pharmacy Suboxone Rx Filled | Prescription Suboxone Doses | ASAP Methadone Doses |
|--------|-----------------------------|-----------------------------|----------------------|
| Oct-22 | 521 | 27,249 | 11,425 |
| Nov-22 | 530 | 29,010 | 11,456 |
| Dec-22 | 503 | 27,119 | 11,842 |
| 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 |

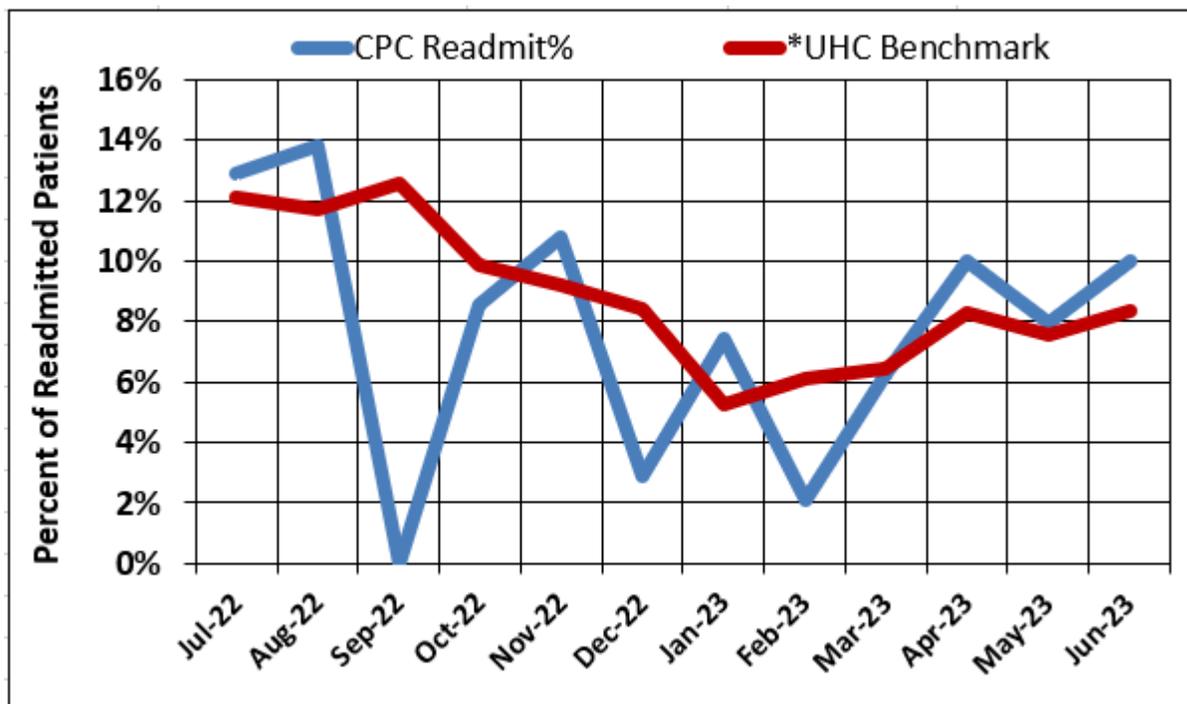
Total Suboxone Encounters

| Month | Count |
|--------|-------|
| Oct-22 | 36 |
| Nov-22 | 27 |
| Dec-22 | 25 |
| 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 |

*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.

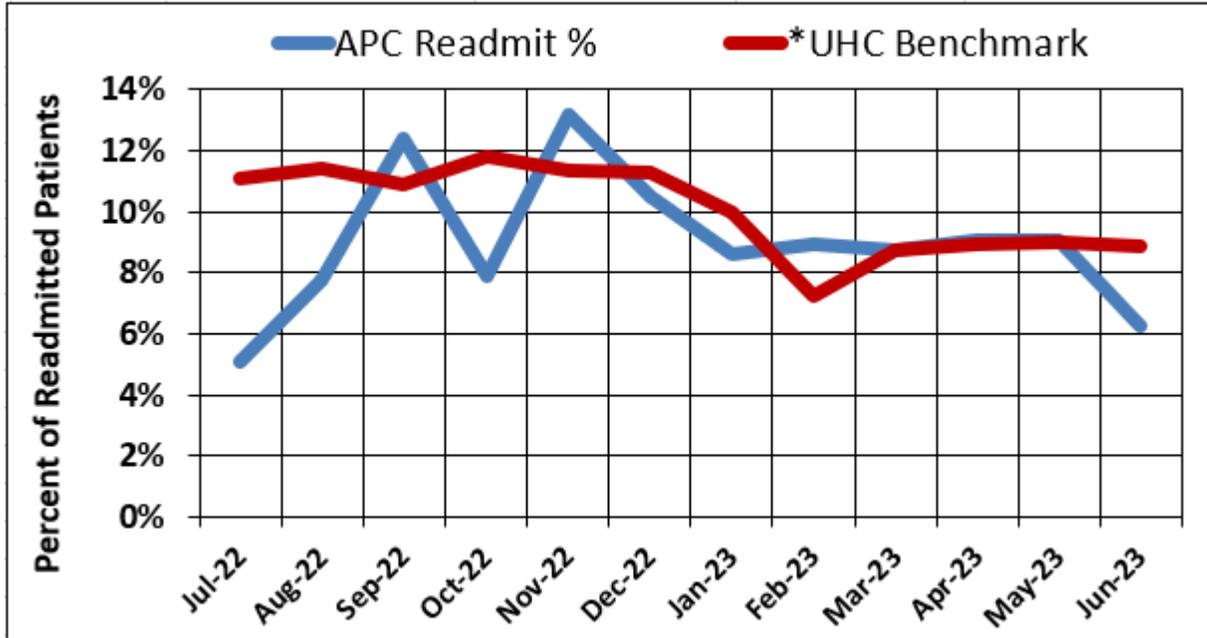


| Discharge Month | Total Cases (Denominator Cases) | 30 Day (Readmit Cases) | Percent 30 Day Readmit Rate | *UHC Benchmark |
|-----------------|---------------------------------|------------------------|-----------------------------|----------------|
| Jul-22 | 31 | 4 | 12.9% | 12.1% |
| Aug-22 | 29 | 4 | 13.8% | 11.7% |
| Sep-22 | 29 | 0 | 0.0% | 12.5% |
| 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% |

*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.

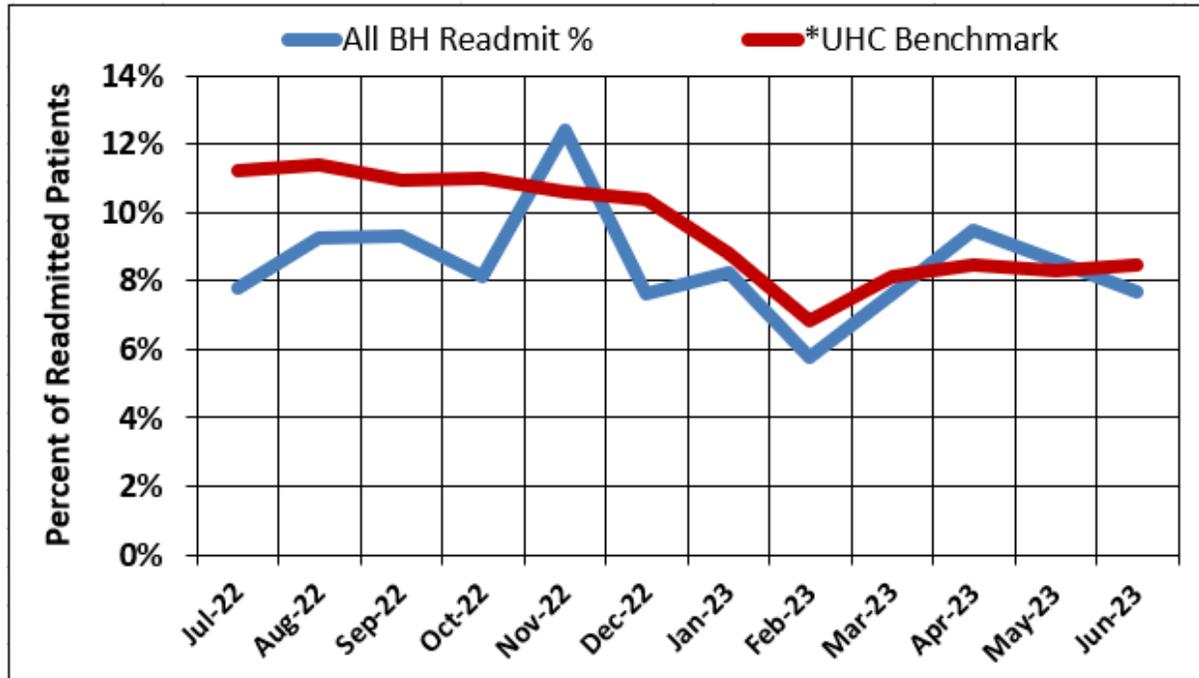


| Discharge Month | Total Cases (Denominator Cases) | 30 Day (Readmit Cases) | Percent 30 Day Readmit Rate | *UHC Benchmark |
|-----------------|---------------------------------|------------------------|-----------------------------|----------------|
| Jul-22 | 59 | 3 | 5.1% | 11.1% |
| Aug-22 | 90 | 7 | 7.8% | 11.4% |
| Sep-22 | 89 | 11 | 12.4% | 10.9% |
| 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% |

*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.

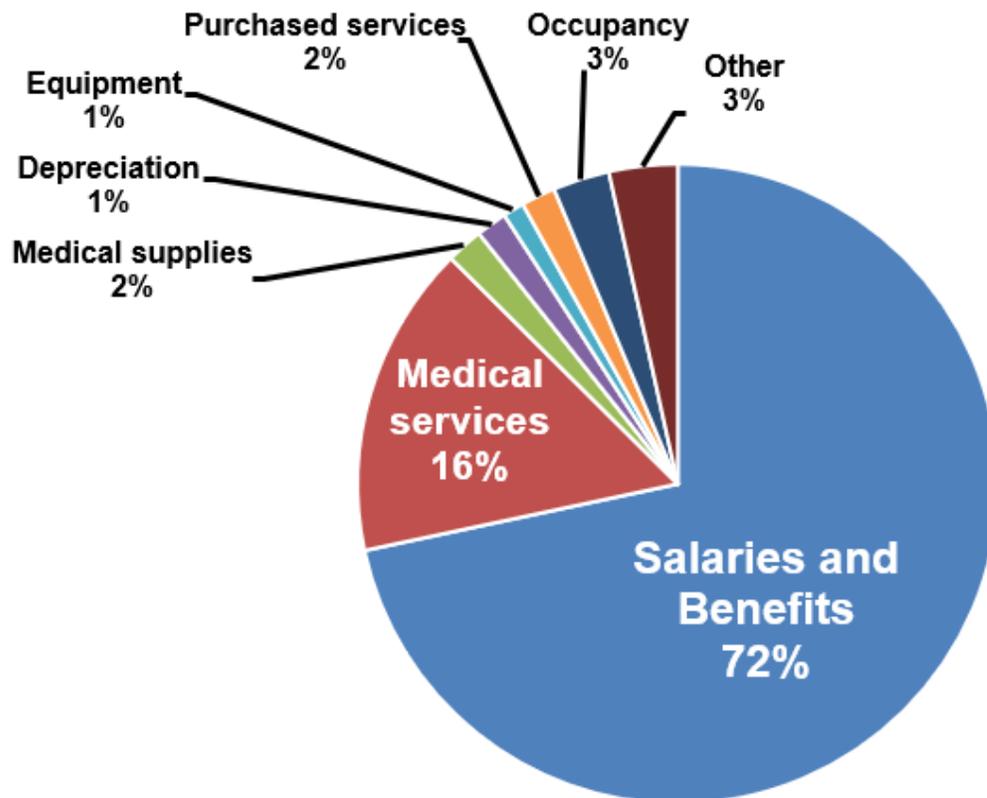


| Discharge Month | Total Discharges (Denominator Cases) | 30 Day (Readmit Cases) | Percent 30 Day Readmit Rate | *UHC Benchmark |
|-----------------|--------------------------------------|------------------------|-----------------------------|----------------|
| Jul-22 | 90 | 7 | 7.8% | 11.2% |
| Aug-22 | 119 | 11 | 9.2% | 11.4% |
| Sep-22 | 118 | 11 | 9.3% | 10.9% |
| 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% |

*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 BHO Mill Levy Operating Expense by Category (Unaudited)

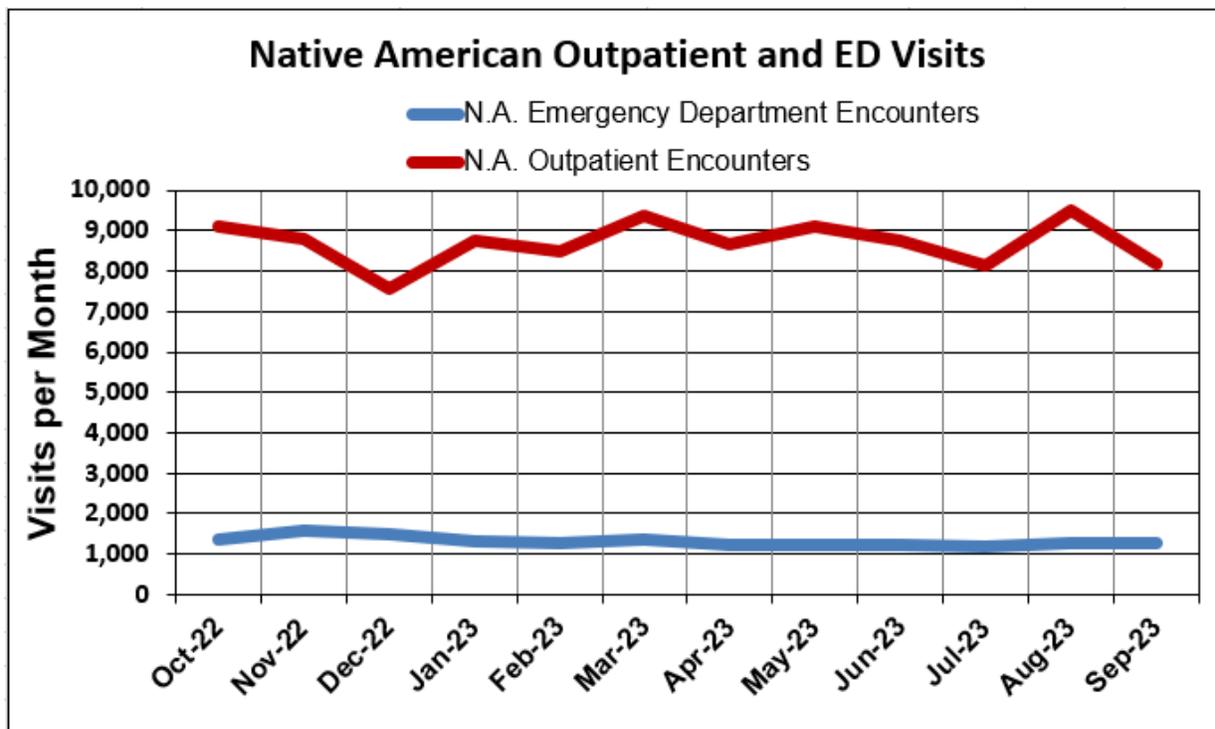


| FY2023 | |
|-----------------------|----------------------|
| Salaries and Benefits | \$ 12,969,329 |
| Medical services | 2,859,234 |
| Medical supplies | 338,054 |
| Depreciation | 282,121 |
| Equipment | 193,402 |
| Purchased services | 311,803 |
| Occupancy | 517,443 |
| Other | 626,060 |
| Total Expense | \$ 18,097,446 |

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

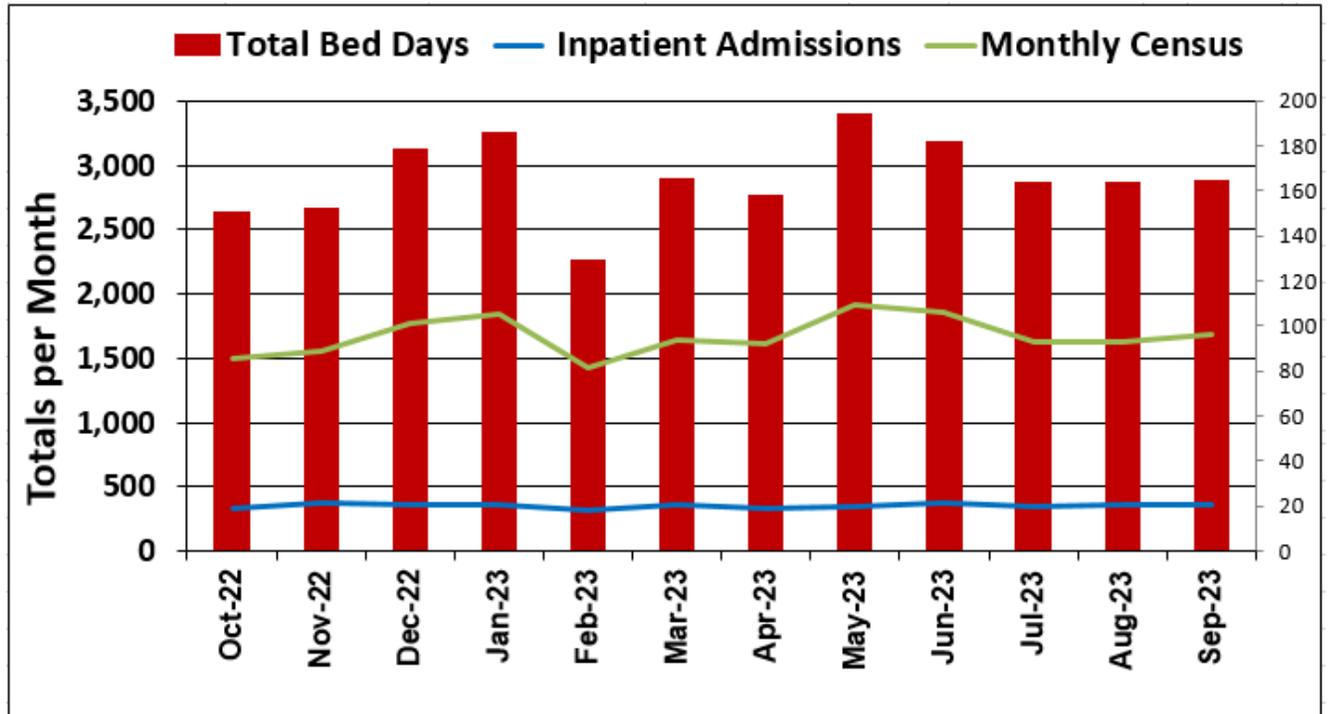
E. NATIVE AMERICAN SERVICES

Native American UNM Care Enrollment, Outpatient and ED Visits



| Month | Native American UNM Care Enrollment | N.A. Emergency Department Encounters | N.A. Outpatient Encounters |
|--------|-------------------------------------|--------------------------------------|----------------------------|
| Oct-22 | 4 | 1,341 | 9,117 |
| Nov-22 | 17 | 1,596 | 8,798 |
| Dec-22 | 30 | 1,483 | 7,552 |
| 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 |

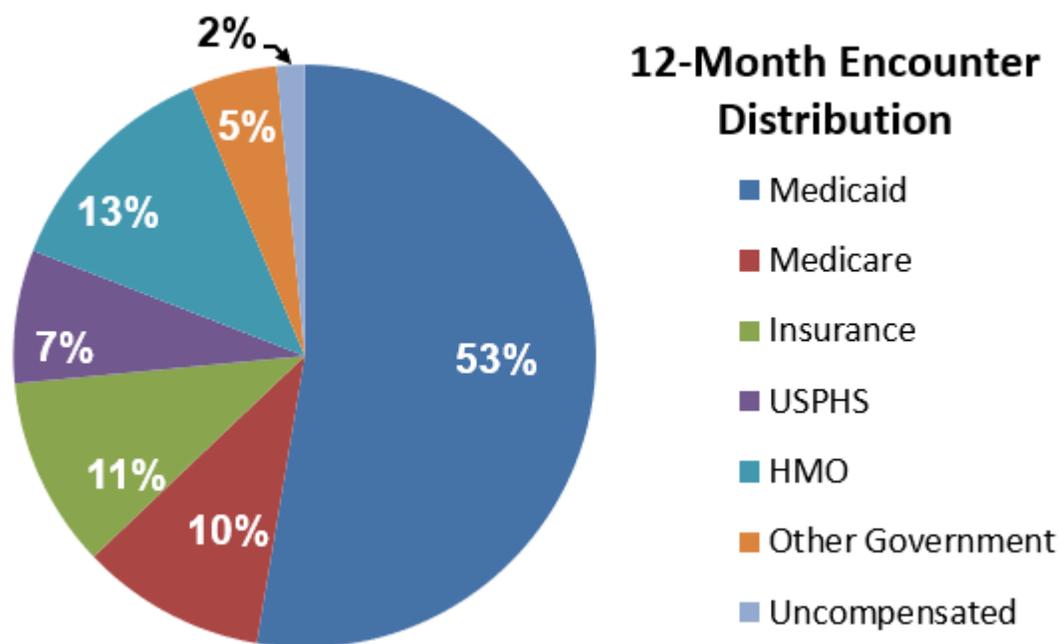
Native American Bed Days and Monthly Inpatient Census



| Month | Total Bed Days | Inpatient Admissions | Monthly Census |
|--------|----------------|----------------------|----------------|
| Oct-22 | 2,646 | 339 | 85 |
| Nov-22 | 2,667 | 377 | 89 |
| Dec-22 | 3,131 | 368 | 101 |
| 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 |

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.



| <i>Month</i> | Medicaid | Medicare | Insurance | USPHS | HMO | Other Government | Uncompensated |
|--------------|---------------|---------------|---------------|--------------|---------------|------------------|---------------|
| Oct-22 | 5,687 | 1,119 | 1,066 | 711 | 1,582 | 476 | 129 |
| Nov-22 | 5,857 | 1,086 | 1,074 | 803 | 1,318 | 503 | 118 |
| Dec-22 | 5,100 | 1,001 | 912 | 662 | 1,151 | 453 | 125 |
| 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 |
| TOTAL | 65,179 | 12,702 | 13,111 | 9,159 | 15,842 | 5,905 | 1,921 |
| | 53% | 10% | 11% | 7% | 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. | |
| 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. | |
| 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. | |
| 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. | |
| 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. | |
| 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. | |
| 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. | |
| 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. | |

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 be 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. | Green |
| 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. | Red |
| 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. | Green |
| 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. | Green |

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. | Green |
| 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. | Green |
| 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. | Yellow |
| 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. | Green |
| 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. | Green |
| 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. | Green |

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 |
|---|--|
| <p>A.2 UNMH Will establish mechanisms for the public to provide input on medical and behavioral health operations, planning and development.</p> | <p>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.</p> <p>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.</p> |
| <p>A.3 UNMH will establish a mechanism for collaboration with Bernalillo County and IHS on programmatic public and community health initiatives.</p> | <p>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.</p> |
| <p>A.6 UNMH will establish procedures related to <u>it</u> budget development, which will allow meaningful input into the budget by the County and IHS.</p> | <p>UNMH established budget planning meetings with both the County and IHS for updates and input related to the Budget and Capital process.</p> |

Exhibit A Reporting Area - Accountability and Transparency

| Semi- Annual Focus Areas | Status Update |
|---|--|
| <p>B.2 UNMH will report on national patient safety goals for the hospital with comparative benchmark information.</p> | <p>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.</p> |
| <p>B.4 UNMH will provide financial information to the County Commission and IHS as to the expenditure of mill levy funding by UNMH Departments.</p> | <p>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.</p> |
| <p>B.7 Subject to applicable laws UNMH will publish data required under Subsection B of the MOU on its public website.</p> | <p>Bernalillo County Quarterly Reports are available online at: https://hsc.unm.edu/health/about/financial-reports/bernalillo-county-reports.html</p> |

Exhibit A Reporting Area - Primary Care

| Semi- Annual Focus Areas | Status Update |
|---|---|
| <p>C.3 UNMH will encourage and assist Bernalillo County residents and Native Americans to access health care coverage.</p> <p>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.</p> | <p>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 primary care site in Bernalillo County that will be located in the southwest mesa area.</p> <p>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.</p> <p>UNMH offers financial assistance through the UNM Care and other programs to patients.</p> <p>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.</p> |

Exhibit A Reporting Area - Native American Care

| Semi- Annual Focus Areas | Status Update |
|---|--|
| <p>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.</p> | <p>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.</p> |
| <p>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.</p> | <p>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.</p> |
| <p>E.5 UNMH will evaluate the opportunity to sustain and improve healthcare services available to Native Americans.</p> | <p>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.</p> |

Exhibit A Reporting Area - Behavioral Health Services

| Semi- Annual Focus Areas | Status Update |
|--|---|
| <p>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.</p> <p>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.</p> | <p>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.</p> <p>UNMH is currently working on expanded Behavioral Health programming 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.</p> |