



**BOARD OF TRUSTEES – SPECIAL MEETING  
OPEN SESSION AGENDA**

**October 29, 2021 @ 10:00 AM**

<https://hsc-unm.zoom.us/j/91343180702> Meeting ID: 913 4318 0702 / Passcode: 725240  
1-346-248-7799 / 913 431 807 02# 725240# US (Houston)  
1-669-900-6833 / 913 431 807 02# 725240# US (San Jose)

- I. **CALL TO ORDER – Mr. Del Archuleta, Chair, UNM Hospital Board of Trustees**
- II. **ANNOUNCEMENTS – Mr. Del Archuleta, Chair, UNM Hospital Board of Trustees (Informational – 5 Minutes)**
- III. **ADOPTION OF AGENDA – Mr. Del Archuleta, Chair, UNM Hospital Board of Trustees (Approval/Action - 5 Minutes)**
- IV. **PUBLIC INPUT (Informational)**
- V. **APPROVAL OF THE MINUTES – Mr. Del Archuleta, Chair, UNM Hospital Board of Trustees (Approval/Action – 5 Minutes)**
  - September 24, 2021 UNM Hospital Board of Trustees Meeting Minutes
- VI. **UNM HOSPITAL BOARD OF TRUSTEES POLICIES – Mrs. Kate Becker, UNM Hospital CEO (Approval/Action - 60 Minutes)**

**Updated:**

- UNM Hospital Board of Trustees Finance Committee
- UNM Hospital Board of Trustees Patient Payment Policy
- UNM Hospital Discount Program Policy
- UNM Hospital Board of Trustees Audit and Compliance Committee
- UNM Hospital Board of Trustees Policy on Public Participation in Board Meetings
- UNM Hospital Board of Trustees Quality and Safety Committee
- UNM Hospital Board of Trustees Governing Body Approval of Quality Assessment Performance Improvement Policy
- UNM Hospital Board of Trustees Governing Body Approval of Radiological Services Policy
- UNM Hospital Board of Trustees Patient Grievance Policy

**Recommend discontinue and archive:**

- UNM Hospital Board of Trustees Orientation
- UNM Hospital Board of Trustees Statement of Strategic Planning Policy
- UNM Hospital Board of Trustees Advisory Board Member Nomination and Invitation Policy

- VII. **UNM HOSPITAL TOWER PROJECT (Approval/Action – 30 Minutes)**
  - Specific Project Professional Liability Insurance – HDR and FBT (\$950,000) – Mr. Scot Sauder, Deputy University Counsel
  - Low Voltage Equipment (\$16,977,398) – Dr. Michael Chicarelli, UNM Hospital COO

**VIII. CLOSED SESSION:**

- **Roll Call Vote to close the meeting and to proceed in Closed Session – Mr. Del Archuleta, Chair, (Approval/Action – Roll Call Vote)**
  - a. Discussion of limited personnel matters pursuant to Section 10-15-1.H (2), NMSA pertaining to the appointment and reappointment of medical providers to the medical staff of UNM Hospital and expansion of medical staff privileges for certain UNM Hospital medical staff providers, including the discussion of matters deemed confidential under the New Mexico Review Organization Immunity Act, Sections 41-9-1E(7) and 41-9-5, NMSA.
  - b. After discussion and determination where appropriate, of limited personnel matters per Section 10-15-1.H (2); and discussion and determination, where appropriate of matters subject to the attorney-client privilege regarding pending or threatened litigation in which UNMH is or may become a participant, pursuant to Section 10-15-1.H (7); and discussion of matters involving strategic and long-range business plans or trade secrets of UNMH pursuant to Section 10-15-1.H (9), NMSA, the Board certified that no other items were discussed, nor were actions taken.

**Certification that only those matters described in Agenda Item XII were discussed in Closed Session; consideration of, and final action on the specific limited personnel matters discussed in Closed Session – Mr. Del Archuleta, Chair, UNM Hospital Board of Trustee (Approval/Action)**

- IX. **Adjourn Meeting – Mr. Del Archuleta, Chair, UNM Hospital Board of Trustee (Approval/Action)**

# Board of Trustees Meeting Minutes 09 24 2021

Agenda Item	Subject/Discussion	Action/Responsible Person
Voting Members Present	Terry Horn, Erik Lujan, Kurt Riley, Tamra Mason, Michael Brasher, Trey Hammond, Monica Zamora, and Davin Quinn	
Ex-Officio Members Present	Michael Richards, Rob Schwartz, Garnett Stokes, and Nathan Boyd	
Staff Members Present	Mike Chicarelli, Bonnie White, Alex Rankin, Dawn Harrington, Jennifer James, John Marek, Kori Beech, Jennifer Vosburgh, Mike Richards, Rodney McNease, Ryan Randall, Sara Navarrette, Steve McLaughlin, Meic Schmidt, Kim Wagner, and Fontaine Whitney	
County Officials Present	Julie Morgas-Baca and Clay Campbell	
I. Call to Order	A quorum being established, Mr. Kurt Riley, Vice Chair, called the meeting to order at 9:34 AM	
II. Announcements	<p>Mr. Kurt Riley, Vice Chair, announced that Mr. Del Archuleta, Chair, was not present at today's meeting and requested Mr. Riley chair the meeting today.</p> <p>Mr. Kurt Riley, Vice Chair, welcomed Judge Monica Zamora and Dr. Davin Quinn as the newest members of the UNM Hospital Board of Trustees. Board Members and staff members welcomed both new members. Both members expressed appreciation for being selected as new members are looking forward to their tenure.</p> <p>Mrs. Jennifer James, HSC Legal, introduced Mrs. Sara Navarrette, who is an Associate University Legal Counsel.</p>	
III. Adoption of Agenda	Mr. Kurt Riley, Vice Chair, requested a modification to move the Announcement section after the Consent section of the agenda. Vice Chair Riley asked if there were any other changes required to the Agenda. Hearing none, he requested a motion to adopt the Agenda with change as noted.	Mr. Michael Brasher made a motion to adopt the agenda with the modification as noted by Vice Chair Riley. Dr. Tamra Mason seconded the motion. Motion passed with no objections.
IV. Consent Items	<p>Mrs. Bonnie White, UNM Hospital Chief Financial Officer, and Dr. Michael Chicarelli, Chief Operating Officer, presented the below identified Consent Items (documents in BoardBook) for review and approval. Mr. Terry Horn indicated the UNMH BOT Finance Committee discussed/reviewed the Consent Items in detail at their September 22<sup>nd</sup> meeting and recommend approval by the full UNM Hospital Board of Trustees. After discussion, Mr. Kurt Riley, Vice Chair, requested a motion to approve the Consent Items listed below.</p> <ul style="list-style-type: none"> <li>• Disposition of Assets</li> <li>• Cerner Corporation – 7 Year Initial Term Agreement e-Consent Software System (\$2,275,648)</li> <li>• Cerner Corporation – 5 Year Agreement Cloud-Based Dictation and Transcription Platform Software (\$5,000,000)</li> <li>• Capital Project – UNMH Crisis Triage Center Design (\$2,900,000)</li> </ul>	Mr. Terry Horn made a motion to approve the Consent Items as presented and discussed by Mrs. Bonnie White and Dr. Michael Chicarelli. Mr. Trey Hammond seconded the motion. Motion passed with no objections.

	<ul style="list-style-type: none"> <li>• Capital Project – Psychiatric Emergency Services Design (\$1,750,000)</li> <li>• Capital Project – UH Main 2<sup>nd</sup> Floor Sterile Processing Department – Decontamination Renovation (\$1,290,000)</li> <li>• Capital Project - 1600 University Eye Clinic Renovation and Addition (\$5,750,000)</li> <li>• Capital Project – Operational Project – UNMH Main Section 16 Roof and Skylight Replacement (1,225,000)</li> </ul>	
V. Public Input	N/A	
VI. Approval of Minutes	Mr. Kurt Riley, Vice Chair, asked for any revisions to the July 30, 2021 UNM Hospital Board of Trustees Meeting Minutes. Judge Monica Zamora stated under section IV. Consent Items, UNM Hospital 401(a) Plan and 415(m) Plan the plan year should be July 1, 2020 thru June 30, 2021 not July 1, 2021 thru June 30, 2022. Mr. Riley requested a motion to approve the July 30, 2021 UNM Hospital Board of Trustees Meeting Minutes with the correction as noted by Judge Zamora.	Dr. Tamra Mason made a motion to approve the July 30, 2021 UNM Hospital Board of Trustees Meeting Minutes. Mr. Trey Hammond seconded the motion. Motion passed unanimously.
VII. Mission Moment	<p>Dr. Michael Chicarelli, UNM Hospital Chief Operating Officer, and Dr. Jennifer Vosburgh, UNM Hospital Associate Chief Nursing Officer, presented the Medical Advisory Team (MAT), which came into existence shortly after the Governors public health order in March, 2020. MAT consists of state officials, healthcare providers, and community members throughout New Mexico who are tasked with developing responses to three questions:</p> <ul style="list-style-type: none"> <li>• How do we best use existing capacity and resources in the response to the pandemic</li> <li>• How do we create more capacity and resources</li> <li>• How do we allocate capacity and resources when they become scarce</li> </ul> <p>Dr. Chicarelli reviewed the MAT Activity Map. Dr. Vosburgh reviewed the State Call and Transfer Center (SCTC) whose primary goal is to load level and ensure even distribution of ICU patients between the HUB hospitals. Dr. Chicarelli expressed appreciation to Dr. Michael Richards, Vice President of Clinical Affairs, for his leadership in emergency management in New Mexico and said Dr. Richards has been in the front of the pandemic work since the beginning, is a key part in starting the MAT and making sure things stayed on task. Mr. Richards said he believes the model put in place for New Mexico is a demonstration of the New Mexico spirit, it is all the health care systems coming together in a collaborative way to partner with the State to make sure New Mexicans receive the best care. Dr. Richards stated that Dr. Chicarelli assisted in writing the MAT and has been an integral part of the day-to-day activity of the MAT development and follow through. Dr. Richards said he recently met with Dr. Scrase, Cabinet Secretary for the Health and Human Services Department, and he highly recognized Dr. Chicarelli's contributions to MAT and the pandemic. (Presentation in Open Session BoardBook). Vice Chair Riley expressed sincere gratitude to the members of the Call Center; he believes they are very important individuals in the system.</p>	
VIII. Board Initiatives	UNM Hospital Board of Trustees Committee Assignments: Mr. Kurt Riley, Vice Chair, stated that the UNMH BOT Executive Committee met and are recommending approval of the following UNMH BOT Committee Members. Vice Chair Riley stated that Chair Del Archuleta reached out to Board Members on the new committee assignments expressing that he felt we have a strong Board with a	Mr. Michael Brasher made a motion to approve the new UNMH BOT Committee Members as recommended by the UNMH BOT Executive Committee. Mr. Terry Horn

	<p>variety of backgrounds and experience and he wants to give members an opportunity to take leadership roles. After discussion, Vice Chair Riley requested a motion to approve new committee assignments.</p> <p>Mrs. Bonnie White, UNM Hospital CFO, presented an update to the UNM Hospital Financial Assistance Policy which is a Board of Trustees Policy. Mrs. White stated this is a modified version of the policy and in last Legislative Session House Bill 112 was passed that provided for a change in policy requiring the provision of health care services to indigent patients regardless of immigration status provided they meet the other qualifications necessary within our policies. Therefore any reference to Citizenship for people who may qualify for indigent care was removed from the Policy, effective July 1, 2021. We previously required certain co-pays for services; however, the cost sharing has been removed from the Policy. Mr. Terry Horn stated that the UNMH BOT Finance Committee discussed and approved recommendation of approval by the full Board of Trustees.</p>	<p>seconded the motion. Motion passed unanimously.</p> <p>Mr. Trey Hammond made a motion to approve the UNM Hospital Financial Assistance Policy. Mr. Michael Brasher seconded the motion. Motion passed with no objections.</p>
<p>IX. Administrative Reports</p>	<p>Dr. Michael Richards presented the Executive Vice President Update (report in BoardBook).</p> <p>Dr. Michael Richards presented the HSC Committee Update (report in BoardBook)</p> <p>Dr. Michael Chicarelli presented the UNM Hospital CEO Update (report in BoardBook).</p> <p>Dr. Alex Rankin presented the UNM Hospital CMO update (report in BoardBook)</p> <p>Dr. Nathan Boyd presented a Chief of Staff Update highlighting Medical Peer Reviews</p>	
<p>X. UNMH BOT Committee Reports</p>	<p>Mr. Terry Horn gave a brief summary of the UNMH BOT Finance Committee Meeting.</p> <p>Mr. Terry Horn stated the UNMH BOT Audit &amp; Compliance Committee did not meet in September.</p> <p>Mr. Erik Lujan gave a brief summary of the UNMH BOT Quality and Safety Committee Meeting.</p> <p>Mr. Erik Lujan gave a brief summary of the UNMH BOT Native American Services Committee Meeting.</p>	
<p>XI. Other Business</p>	<p>Mrs. Bonnie White, UNM Hospital CFO, presented the financial update through August 2021.</p>	
<p>XII. Closed Session</p>	<p>At 11:15 AM Mr. Kurt Riley, Vice Chair, requested a motion to close the Open Session of the meeting and move into Closed Session.</p>	<p>Mr. Trey Hammond a motion to close the Open Session and move to the Closed Session. Mr. Michael Brasher seconded the motion. Per Roll Call, the motion passed.</p> <p><b>Roll Call:</b> Mr. Kurt Riley – Yes Dr. Tamra Mason – Yes Mr. Terry Horn – Yes Mrs. Monica Zamora – Yes Mr. Erik Lujan – Yes Mr. Michael Brasher – Yes</p>

		<p>Mr. Trey Hammond – Yes Dr. Davin Quinn – Yes Mr. Del Archuleta – Not Present</p>
<p>Vote to Re-Open Meeting</p>	<p>At 11:21AM Mr. Kurt Riley, Vice Chair, requested a roll call motion be made to close the Closed Session and return the meeting to the Open Session.</p>	<p>Mr. Erik Lujan made a motion to close the Closed Session and return to the Open Session. Mr. Terry Horn seconded the motion. Per Roll Call, the motion passed.</p> <p><b>Roll Call:</b> Mr. Kurt Riley – Yes Dr. Tamra Mason – Yes Mr. Terry Horn – Yes Mrs. Monica Zamora – Yes Mr. Erik Lujan - Yes Mr. Michael Brasher – Yes Mr. Trey Hammond – Yes Dr. Davin Quinn – Yes Mr. Del Archuleta – Not Present</p>
<p><b>XIII. Certification</b></p>	<p><b>After discussion and determination where appropriate, of limited personnel matters per Section 10-15-1.H (2); and discussion and determination, where appropriate of matters subject to the attorney-client privilege regarding pending or threatened litigation in which UNMH is or may become a participant, pursuant to Section 10-15-1.H (7); and discussion of matters involving strategic and long-range business plans or trade secrets of UNMH pursuant to Section 10-15-1.H (9), NMSA, the Board certified that no other items were discussed, nor were actions taken.</b></p> <p>Mr. Kurt Riley, Chair, reported that the following items were acknowledged as approved by the UNMH BOT Quality and Safety Committee in their August 20, 2021 and September 17, 2021 Meetings.</p> <ul style="list-style-type: none"> <li>• Clinical Privileges and Credentialing <ul style="list-style-type: none"> <li>• Initial Appointments (Avila thru Zhu)</li> <li>• Reappointments (Acton thru Zummo)</li> <li>• Expansion of Clinical Privileges or Change in Department (Acton thru Wynne)</li> <li>• Change in Department or Staff Status (Bailey thru Segura)</li> <li>• Other Business: <ul style="list-style-type: none"> <li>○ CNP/PA Cardiothoracic Appendix</li> <li>○ CNP/PA General Surgery Appendix</li> <li>○ CNP/PA Neurosurgery Appendix</li> <li>○ CNP/PA Otolaryngology Appendix</li> <li>○ CNP/PA Urology Appendix</li> </ul> </li> </ul> </li> </ul>	<p>Mr. Michael Brasher made a motion to approve the Certification. Dr. Tamra Mason seconded the motion. The motion passed with no objections.</p>

	<ul style="list-style-type: none"> <li>○ Gastroenterology</li> <li>○ Internal Medicine</li> <li>○ Obstetrics and Gynecology</li> </ul> <p>Mr. Kurt Riley, Chair, reported that the UNMH Medical Staff Rules and Regulations were acknowledged as approved by the UNMH BOT Quality and Safety Committee in their September 17, 2021 Meetings</p> <p>Mr. Kurt Riley, Vice Chair, reported that the following items were acknowledged as received and approved by each committee as presented.</p> <ul style="list-style-type: none"> <li>▪ Medical Executive Committee July 21, 2021 Meeting Minutes</li> <li>▪ Medical Executive Committee August 18, 2021 Meeting Minutes</li> <li>▪ UNMH BOT Quality and Safety Committee July 23, 2021 Meeting Minutes</li> <li>▪ UNMH BOT Quality and Safety Committee August 20, 2021 Meeting Minutes</li> <li>▪ UNMH BOT Finance Committee July 28, 2021 Meeting Minutes</li> <li>▪ UNMH BOT Native American Services July 16, 2021 Meeting Minutes</li> </ul>	
<p>XIV. Adjournment</p>	<p>The next scheduled Board of Trustees Meeting will take place Friday, October 29, 2021 at 10:00 AM, via Zoom Conference Call. There being no further business, Mr. Del Archuleta, Chair, requested a motion to adjourn the meeting.</p>	<p>Mr. Trey Hammond made a motion to adjourn the meeting. Mr. Terry Horn seconded the motion. The motion passed unanimously. The meeting was adjourned at 11:26 AM.</p>

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Dr. Tamra Mason, Secretary  
 UNM Hospital Board of Trustees

**UNM Hospital Board of Trustees Policies**  
**UPDATED**

# UNMH BOT Finance Committee Policy wComments



Applies To: UNM Hospital  
Responsible Department: Board of Trustees

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Title: UNM Hospital Board of Trustees Finance Committee	Policy
Patient Age Group: (x) N/A ( ) All Ages ( ) Newborns ( ) Pediatric ( ) Adult	

**POLICY STATEMENT**

It is the policy of the UNM Hospital Board of Trustees Finance Committee to provide financial, and human resource oversight of the UNM Hospitals while advancing the mission and community responsibility as delegated by the UNM Hospital Board of Trustees (UNMH BOT).

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**APPLICABILITY**

UNM Hospital, Board of Trustees and Board of Trustees Finance Committee

**POLICY AUTHORITY**

Administration and UNM Hospital Board of Trustees

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**REFERENCES**

University of New Mexico Regents' Policy Manual Section 3.6: UNM Hospital Board of Trustees

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**IMPLEMENTATION PROCEDURES**

The UNM Hospital Finance Committee shall be authorized and expected to provide oversight as follows:

**Financial**

- Review financial performance of UNM Hospital.
- Review and recommend for approval to UNM Hospital Board of Trustees:
  - UNM Hospital operating budgets
  - UNM Hospital capital budget
  - UNM Hospital budget revisions
  - UNM Hospital disposal of property
  - UNM Hospital consent for procurement items
  - Other UNM Hospital financial issues and documents as needed
  - Review performance of investment management
  - Review proposals for union negotiations and contracts
  - Review financial priorities and strategies
  - Other duties or responsibilities as delegated by the UNMH BOT.

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**Human Resources**

- Review compensation philosophy
- Review labor and salary negotiations and program goals
- Provide oversight for significant employee and labor policy changes
- Review benefits program goals
- Review human resources issues and activities as necessary
- Other duties or responsibilities as delegated by the UNMH BOT

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Title: UNM Hospital Board of Trustees Finance Committee  
Owner: UNMH Board of Trustees  
Effective Date: 10/29/2021

**PROCEDURE**

**I. Finance Committee Structure and Membership**

The UNM Hospital Finance Committee Chair is a UNM Hospital Board of Trustees member and is nominated by the UNM Hospital Board of Trustees Chair. The UNM Hospital Finance Committee Chair shall be nominated for one year and may continue to serve as Chair at the request of the UNM Hospital Board of Trustees Chair or until a replacement is named.

1.1 The UNM Hospital Finance Committee Chair shall:

- Conduct the Finance Committee meetings
- Establish the Finance Committee calendar
- Direct the Finance Committee agenda
- Make recommendations to the UNM Hospital Board of Trustees regarding financial performance, plans, and any other appropriate informational or approval items
- Advise the UNM Hospital Chief Executive Officer (CEO) and Chief Financial Officer on hospital financial, or human resources issues
- Ensure adequate financial knowledge and expertise of Finance Committee Board members
- Report risk or financial concerns to the UNM Hospital Board of Trustees
- Ensure financial integrity and performance while advancing the mission of UNM Hospital

1.2. Membership:

- The UNM Hospital Finance Committee is comprised of the Finance Committee Chair plus three UNM Hospital Board of Trustees members.
- The UNM Hospital Finance Committee is supported by the UNM Hospital CEO and CFO
- The UNM Hospital CFO serves as primary staff and advisor to the UNM Hospital Finance Committee Chair
- Ad hoc staff include:
  - o Chief Executives

**2. Finance Committee Duties**

The UNM Hospital is part of UNM Health Sciences Center, a division of the University of New Mexico. The UNM Hospital Finance Committee, as delegated by the UNM Hospital Board of Trustees, has the fiduciary responsibility to ensure that the use of public funds of the UNM Hospital is reported appropriately. The public's confidence in the UNM Hospital financial integrity is dependent upon the foundation of trust placed in the UNM Hospital Board of Trustees and its Committees. The Chair of the UNM Hospital Finance Committee must accept this role as the ultimate responsibility of his/her position.

**DEFINITIONS**

**The UNM Hospital Finance Committee:** formed to provide financial and human resources oversight of the UNM Hospitals while advancing the mission and community responsibility as delegated by the UNM Hospital BOT.

**SUMMARY OF CHANGES**

Replaces document of the same name, last revision 1/2014. Removes references to audit as oversight is delegated to the UNM Hospital Audit and Compliance Committee.

Title: UNM Hospital Board of Trustees Finance Committee  
Owner: UNMH Board of Trustees  
Effective Date: 10/29/2021

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**RESOURCES/TRAINING**

Resource/Dept	Contact Information
Finance	UNM Hospital CFO

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**DOCUMENT APPROVAL & TRACKING**

Item	Contact	Date	Approval
Owner	[UNMH Board of Trustees]		
Consultant(s)	[Name, Title]		
Committee(s)	UNMH Board of Trustees Finance Committee		[Y or N/A]
Nursing Officer	[Name], Chief Nursing Officer		[Y or N/A]
Medical Director/Officer	[Name, Department (or Chief Medical Officer)]		[Y or N/A]
Human Resources	Sara, Frasch Chief HR Officer, UNMH		[Y or N/A]
Finance Officer	Bonnie White, Chief Financial Officer, UNMH		[Y or N/A]
Legal (Required)	[Name, Title], [UNMH or HSC]		Y
Official Approver	Dr. Tamra Mason, Secretary		Y
Official Signature		Date:	
2 <sup>nd</sup> Approver (Optional)			
Signature		Date:	
Effective Date		[Day/Mo/Year]	

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**ATTACHMENTS**

None

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Title: UNM Hospital Board of Trustees Finance Committee  
 Owner: UNMH Board of Trustees  
 Effective Date: 10/29/2021

# Patient Payment Policy Revised October 2021



Applies To: **UNM Hospital**  
 Responsible Department: Board of Trustees  
 Effective Date: 10/29/2021

Title: <b>Patient Payment</b>		<b>Policy</b>			
<b>Patient Age Group:</b>	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> All Ages	<input type="checkbox"/> Newborns	<input type="checkbox"/> Pediatric	<input type="checkbox"/> Adult

**POLICY STATEMENT**

All patients who receive medical services at the UNM Health Sciences Center will be required to pay for those medical services. This payment liability can be met through the patient’s private insurance or government reimbursement programs. However, any remaining unpaid balance owing to the UNM Hospital will be the patient’s obligation to satisfy.

A patient whose financial liability is not satisfied by the patient’s private insurance or enrollment in government reimbursement programs, may be eligible for either UNM HSC’s financial assistance program or a discount.

UNM HSC will abide by the federal Emergency Medical Treatment and Labor Act (EMTALA) in providing care to patients at UNMHospitals.

UNM Hospital will abide by Medicare Provider Reimbursement Manual Chapter III, Section 310, entitled “Reasonable Collection Effort” as well as Chapter III, Section 312, entitled “Indigent or Medically Indigent Patients.”

**APPLICABILITY**

This policy pertains to all UNM HSC Hospitals and Clinics including UNM Medical Group and the UNM Comprehensive Cancer Center.

**POLICY AUTHORITY**

Chief Executive Officer

**REFERENCES**

UNM Hospital Financial Assistance Policy

**IMPLEMENTATION PROCEDURES**

A patient scheduled to receive non-emergent, medically necessary medical care may be required to make a down or co-payment in advance for the medical care or procedure. This down or co-payment requirement is subject to the UNM Hospital Financial Assistance Policy and the UNM Hospital Discount Program Policy. Patients with coverage under commercial insurance, coverage by a HMO, and/or coverage by an MCO ( ) are required to pay co-payments and/or co-insurance payments as required under their plan of coverage. Patients who are unable to make a down or co-payment at the time for service will be triaged by the medical provider to determine if the visit or procedure is medically necessary care. Patients can, and are strongly encouraged to, negotiate, establish, and make payment plan arrangements for monthly payments for their Patient Payment

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Title: Patient Payment  
 Owner: Board of Trustees, UNM Hospital  
 Effective Date: 10/29/2021

Responsibility, which shall be interest-free. Patients qualifying under UNM Hospitals Financial Assistance programs will not be required to make co-payments.

Patients must apply for, provide the information required under the Financial Assistance Policy and the Discount Program Policy (as applicable) and be determined to be eligible to participate, or otherwise be deemed to be eligible for indigent status before these down or co-payment amounts can be waived. Patients not on UNMH Financial Assistance Programs are responsible for the balance of accounts after financial assistance eligibility has been determined and/or all discounts have been taken. Patients with multiple accounts may request that all accounts be combined into a single account.

### **EXTENDED BUSINESS OFFICE**

The UNM HSC will use an Extended Business Office (EBO) program to follow up on self-pay accounts and self-pay balances. The EBO has the authority to combine accounts and set up payment arrangements. If a patient is approved for financial assistance after an account has been referred to EBO, the account will be adjusted to financial assistance. Notwithstanding the foregoing, the EBO will not engage in any Extraordinary Collection Action for pursuit of any outstanding and unpaid amounts in respect of any accounts approved for financial assistance under the Financial Assistance Policy and/or any accounts approved for indigent status under other financial assistance programs.

### **COLLECTION AGENCIES**

The UNM HSC will engage and use one or more collection agencies to follow up on unpaid patient accounts after a six-month period in which a patient has an unpaid balance or has not met agreed upon payment arrangements for three consecutive months. The collection agency shall not be allowed to commence litigation or otherwise pursue judgments on accounts, place liens on patient's property, charge patients for attorneys' fees or charge interest on any outstanding balance. Accounts approved for financial assistance will not be assigned to a collection agency for pursuit of any outstanding and unpaid co-pay amounts. Similarly, accounts approved for indigent status will not be assigned to a collection agency for pursuit of any outstanding and unpaid amounts. Patients who do not apply for or provide the necessary information to enable UNM Hospital to determine their eligibility either for financial assistance under the Financial Assistance Policy or indigent status under other financial assistance programs will not be eligible to be exempted from referral to the collection agencies.

The collection agency will strictly follow all applicable state and federal laws including, without limitation, the federal Fair Debt Collections Practices Act and the regulations promulgated thereunder.

### **DEFINITIONS**

**Extraordinary Collection Action:** An "Extraordinary Collection Action" is any of the following:

- (i) Any action to obtain payment from a Patient that requires a legal or judicial process, including without limitation the filing of a lawsuit;
- (ii) selling a Patient's debt to the Hospital to another party, including without limitation to a Collection Agency;
- (iii) reporting adverse information about a Patient to a consumer credit reporting agency or credit bureau;

- (iv) seizing a bank account;
- (v) causing an arrest in connection with collection of a debt;
- (vi) wage garnishment;
- (vii) lien on a residence or other personal or real property;
- (viii) foreclosure on real or personal property;
- (ix) delay or denial of medically necessary care based on the existence of an outstanding balance for prior service(s); or
- (x) obtaining an order for examination.

Extraordinary Collection Actions do not include the assertion of, or collection under, a lien asserted under the New Mexico Hospital Lien Act. Further, filing a claim in a bankruptcy proceeding is not an Extraordinary Collection Action.

**Uninsured Patient:** An “Uninsured Patient” is a patient who has no third-party source of payment for any portion of their medical expenses, including without limitation, commercial or other insurance, government sponsored healthcare benefit programs, or third party liability, and includes a patient whose benefits under all potential sources of payment have been exhausted prior to an admission.

**Billed Charges:** “Billed Charges” are the undiscounted amounts that a Hospital customary bills for items and services.

**Patient Payment Responsibility:** “Patient Payment Responsibility” is the amount that a Patient is responsible to pay out-of-pocket after the patient’s third-party coverage has determined the amount of the patient’s benefits

**Federal Poverty Guidelines or FPG:** Guidelines developed by the U.S. Department of Health & Human Services on an annual basis. Levels are determined by the number of members in an individual’s household and their annual income.

**Medically Necessary Care:** “Medically necessary care” shall have the meaning ascribed to those terms under the regulations adopted by the New Mexico Human Services Department in respect of the Medical Assistance program, specifically, NMAC § 8.302.1.7.

**SUMMARY OF CHANGES**

This policy replaces the October 2017 Patient Payment Policy. The primary change is eliminate copayment requirements for patients on UNMH Financial Assistance programs.

**RESOURCES/TRAINING**

Resource/Dept	Contact Information
Patient Financial Services	<a href="http://hospitals.unm.edu/pfs/">http://hospitals.unm.edu/pfs/</a>

**DOCUMENT APPROVAL & TRACKING**

Item	Contact	Date	Approval
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Title: Patient Payment  
 Owner: Board of Trustees, UNM Hospital  
 Effective Date: 10/29/2021

<b>Owner</b>	Board of Trustees, UNM Hospital	
<b>Consultant(s)</b>	[Name, Title]	
<b>Committee(s)</b>	Board of Trustees, UNM Hospital	[Y or N/A]
<b>Nursing Officer</b>	[Name], Chief Nursing Officer	[Y or N/A]
<b>Medical Director/Officer</b>	[Name, Department (or Chief Medical Officer)]	[Y or N/A]
<b>Human Resources</b>	[Name], HR Administrator, [UNMH or UNM]	[Y or N/A]
<b>Finance Officer</b>	[Name, Title], [UNMH or HSC]	[Y or N/A]
<b>Legal (Required)</b>	[Name, Title], [UNMH or HSC]	Y
<b>Official Approver</b>	[Name, Title, Area]	Y
<b>Official Signature</b>		Date:
<b>2<sup>nd</sup> Approver (Optional)</b>		
<b>Signature</b>		Date:
<b>Effective Date</b>	[Day/Mo/Year]	

**ATTACHMENTS**

None

# Discount Program Policy Revised October 2021



Applies To: **UNM Hospital**  
 Responsible Department: Board of Trustees  
 Effective Date: 10/29//2021

<b>Title: Discount Program</b>	<b>Policy</b>
<b>Patient Age Group:</b> <input checked="" type="checkbox"/> N/A <input type="checkbox"/> All Ages <input type="checkbox"/> Newborns <input type="checkbox"/> Pediatric <input type="checkbox"/> Adult	

**POLICY STATEMENT**

If a patient otherwise qualifies for indigent status but is not eligible for financial assistance under the UNM Hospital Financial Assistance Program Policy, they may be eligible to participate in the UNM Hospital Discount Program established under this Policy. The discount program described in this Policy is not, and shall not be construed to be, financial assistance in respect of patients who qualify for indigent status but who are not eligible for financial assistance under the UNM Financial Assistance program.

UNM Hospital offers the Discount Program for the patient’s medical bill(s) for qualified patients who meet each of the following:

1. Is not covered by government or private insurance; and
2. Established financial requirements for establishing indigent status, defined as 300% of the Federal Poverty Guidelines or below (“Indigent Status”).

UNM Hospital will abide by the federal Emergency Medical Treatment and Labor Act (“EMTALA”) in providing care to patients at UNM Hospital. Individuals will be assessed for Indigent Status eligibility when documentation is submitted to UNM Hospital Financial Services Department. As the Discount Program is not a fund for payment of medical services, medical services rendered to patients outside the UNM Hospital are not payable by UNM Hospital. The remaining balance, after the Discount described in this Policy is applied, shall remain due and owing to UNM Hospital.

**APPLICABILITY**

This policy pertains to all UNM Hospitals and Clinics including the UNM Hospitals-based clinics at the UNM Comprehensive Cancer Center.

**POLICY AUTHORITY**

Chief Executive Officer

**REFERENCES**

- Personal Responsibility and Work Opportunity Reconciliation Act, 8 U.S.C. § 1621.
- CMS Provider Reimbursement Manual, Chapter III, Section 310.
- CMS Provider Reimbursement Manual, Chapter III, Section 312.
- UNM Hospital Financial Assistance Program Policy.
- UNM Hospital Patient Payment Policy.
- UNM Hospital Bad Debt Policy.

## **IMPLEMENTATION PROCEDURES**

### **Discount and Repayment Plan**

If a patient otherwise qualifies for Indigent Status but is not eligible for financial assistance under the UNM Hospital Financial Assistance Program Policy, that patient will be eligible to receive a 45% discount from UNM Hospital's billed charges.

In addition, a patient who otherwise qualifies for Indigent Status (but not eligible for financial assistance) may set up a repayment plan (the "Repayment Plan") for all amounts remaining outstanding after application of the Discount. In this connection, UNM Hospital will work with each patient to come to an agreement as to a Repayment Plan. In this connection, once a Repayment Plan is established, UNM Hospital will not charge interest on outstanding amounts owing and will allow for monthly payments.

If the patient accumulates multiple accounts, he or she may request that the accounts be combined into one account and included in a single Repayment Plan.

Unless and until a patient presents at the UNM Hospital Financial Services Department and provides the sufficient information to enable UNM Hospital to grant Indigent Status to the patient as described in the "Financial Requirements" section, below, the patient is not eligible for the Discount and/or the Repayment Plan.

The amounts outstanding after application of the Discount shall remain due and owing to UNM Hospital until the Repayment Plan results in payment in full of the amounts outstanding.

### **Residency Requirements**

To be eligible for the Discount Program, the patient must be living in New Mexico. Residency in New Mexico is established by living in the state and county and carrying out the types of activities associated with normal living: such as occupying a home, enrolling children in school, attaining a New Mexico driver's license or New Mexico State issued identification card, renting a post office box, obtaining employment within the State of New Mexico.

The patient can demonstrate this residency by bank statements, home ownership, rental leases, and letters addressed to the patient at a home address, utility bills, and proof of enrollment of self or child in an educational institution, pay stubs, income tax returns, or other similar documents.

### **Financial Requirements**

To be eligible for Indigent Status and, therefore, the Discount, the patient must verify income by providing: employment pay stubs; income tax returns; letter from employers; direct bank deposits if gross amount of payment can be determined; letters or copies of checks from Social Security, Worker's Compensation, Veteran's Affairs, Bureau of Indian Affairs, or other similar documents.

In addition, to be eligible for Indigent Status and, therefore, the Discount, the patient must verify his or her assets. Assets may be verified by providing bank statements, investment statements or other similar documents. Retirement funds, primary residence, and vehicles are not considered in the asset level.

### **Other Coverage**

With limited exceptions as described below, third party government or private insurance will be a primary financial payment source before the Discount will be applied. Patients that appear to be Medicaid-eligible, or have access to other coverage that is deemed affordable must apply for Medicaid or other affordable coverage and receive a denial of eligibility prior to being considered for Indigent Status, the Discount, and/or the Repayment Plan.

### Denial and Appeal Process

A patient will receive a letter from UNM Hospital if the patient is denied eligibility for participation in the Discount Program described in this Policy for any reason. If a patient is not granted Indigent Status because of lack of documentation, for income or asset reasons, they can appeal that decision to the Medical Director of the Utilization Review Department and the UNM Hospital Chief Medical Officer or designee.

### Down-payment Requirements

Any patient who is not covered in whole or in part by third party government or private insurance and who is otherwise qualified for Indigent Status as provided in this Policy will not be required to a copayment or down-payment.

### DEFINITIONS

None

### SUMMARY OF CHANGES

This policy replaces the policy approved 10/27/2017. The primary change is related to the elimination of copayment requirements.

### RESOURCES/TRAINING

Resource/Dept.	Contact Information
Patient Financial Services	<a href="http://hospitals.unm.edu/pfs/">http://hospitals.unm.edu/pfs/</a>

### DOCUMENT APPROVAL & TRACKING

Item	Contact	Date	Approval
Owner	Board of Trustees, UNM Hospital		
Consultant(s)	[Name, Title]		
Committee(s)	Board of Trustees, Quality and Safety Committee, UNM Hospital		Y
Nursing Officer	[Name], Chief Nursing Officer		[Y or N/A]
Medical Director/Officer	[Name, Department (or Chief Medical Officer)]		[Y or N/A]
Human Resources	[Name], HR Administrator, [UNMH or UNM]		[Y or N/A]
Finance Officer	[Name, Title], [UNMH or HSC]		[Y or N/A]
Legal (Required)	[Name, Title], [UNMH or HSC]		Y
Official Approver	[Name, Title, Area]		Y
Official Signature		Date:	
2 <sup>nd</sup> Approver (Optional)			
Signature		Date:	
Effective Date		[Day/Mo/Year]	

### ATTACHMENTS

None

# UNMH BOT Audit and Compliance Committee Policy wComments



Applies To: UNM Hospital  
 Responsible: UNM Hospital Board of Trustees  
 Revised: 10/29/2021

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Title: UNM Hospital Board of Trustees Audit and Compliance Committee	Policy
Patient Age Group: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> All Ages <input type="checkbox"/> Newborns <input type="checkbox"/> Pediatric <input type="checkbox"/> Adult	

**1. POLICY STATEMENT**

The UNM Hospital Board of Trustees (BOT) has delegated to the UNM Board of Trustees Audit and Compliance Committee (Audit and Compliance Committee) the responsibility for monitoring and improving the UNM Hospital audit and compliance programs' effectiveness while advancing the hospital's mission and community responsibility. The Audit and Compliance Committee will assist and advise the BOT in fulfilling its oversight responsibilities over financial reporting, risk management, internal controls, performance of internal and external auditors, and compliance with laws and regulations. The Executive Director of Compliance, internal auditors and external auditors shall have direct access to the Audit and Compliance Committee and the BOT.

Deleted: Executive Director of Internal Audit,

To ensure the independence of the internal audit and compliance functions, for matters related to UNM Hospital, the Internal Auditors and Executive Director of Compliance report functionally to the Audit and Compliance Committee, and administratively to the CEO of UNM Hospital. The UNM Hospital Internal Auditors and the Compliance Departments shall be free from interference in determining the scope of internal auditing and compliance reviews, and shall be empowered to obtain the information they need to perform their work and communicate the results.

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**2. CROSS REFERENCES**

- University of New Mexico Regents' Policy Manual Section 3.6: UNM Hospital Board of Trustees.
- University of New Mexico Regents' Policy Manual Section 3.7: Health Sciences Center Institutional Compliance Program.
- University of New Mexico Regents' Policy Manual Section 7.2: Internal Auditing and Compliance.
- University of New Mexico Regents' Policy Manual Section 7.3: Audit and Compliance Committee

**3. GENERAL INFORMATION AND DESIRED OUTCOME:**

The UNM Hospital is part of UNM Health Sciences Center, a division of the University of New Mexico, and is an instrumentality of a political subdivision of the State of New Mexico. The BOT serves at the direction of the UNM Regents in accordance with delegated authorities and powers as set forth in Regents Policy 3.6. The Audit and Compliance Committee, as delegated by the BOT, has the fiduciary responsibility to ensure that the use of public funds of UNM Hospital is reported appropriately and operates in compliance with federal, state, and local laws and regulations. The public's confidence in UNM Hospital's financial integrity is dependent upon the foundation of trust placed in the BOT and its committees.

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Title: UNM Hospital Board of Trustees Audit and Compliance Committee  
 Owner: UNMH Board of Trustees  
 Effective Date: 10/29/2021  
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#### 4. AUDIT AND COMPLIANCE COMMITTEE STRUCTURE AND MEMBERSHIP:

The Audit and Compliance Committee members shall be nominated for one-year terms and may continue to serve at the request of the BOT Chair or until a replacement is named.

##### 4a. Membership

- The Audit and Compliance Committee is comprised of the Chair plus three BOT members.
- Chair of Audit and Compliance Committee may appoint up to two physician members of the UNM Hospital Medical Staff as non-voting members of the Audit and Compliance Committee.
- The Audit and Compliance Committee is supported by the UNM Hospital's CEO, Executive Director of Internal Audit, and Executive Director of Compliance.
- At the discretion of the CEO and Chair of the Audit and Compliance Committee other employees of the University and UNM Hospital may attend for liaison and informational purposes, but not as voting members of the Audit and Compliance Committee.

##### 4b. The Audit and Compliance Committee Chair shall:

- Conduct Audit and Compliance Committee meetings four or more times a year.
- Establish Audit and Compliance Committee calendar.
- Direct the Audit and Compliance Committee agenda.
- Make recommendations to the BOT regarding audit and compliance report findings, plans, and any other appropriate informational or approval items.
- Report compliance risk or audit concerns to the BOT.
- Provide support to the UNM Board of Regents Audit and Compliance Committee.
- Meet separately with external auditors, internal auditors, and compliance staff to discuss any matters that the Audit and Compliance Committee believes should be discussed.

#### 5. AUDIT AND COMPLIANCE COMMITTEE DUTIES

The Audit and Compliance Committee's primary role and duty is to make risk informed inquiries into the operations and financial performance of UNM Hospital's Audit and Compliance Programs, including the performance of external auditors. The Audit and Compliance Committee should encourage continuous improvement, and should foster adherence to UNM Hospital's policies, procedures, and practices at all levels. The Audit and Compliance Committee should also provide for open communication among external auditors, senior management, internal auditors, compliance professionals, and the BOT.

##### 5.1 The Audit and Compliance Committee shall be authorized and expected to provide coordination and oversight as follows for Internal Audit:

- Advise on Internal Audit Plan structure.
- Review and advise in identifying and prioritizing risks for UNM Hospital.
- Review and approve the internal audit plan for UNM Hospital based on the risk assessment.
- Receive and review quarterly reports on status and results of the internal audit plan and significant audit findings.
- Review and recommend approval for internal audit reports.
- Consider, advise and review with management any audit findings or other matters identified in internal audit reports.
- Consider, advise and review with management any corrective action plans implemented.
- Direct CEO or Internal Auditors to study areas of particular interest or

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Title: UNM Hospital Board of Trustees Audit and Compliance Committee  
Owner: UNMH Board of Trustees  
Effective Date: 10/29/2021  
Doc. #

concern that fall within the delegated authorities and powers of the BOT.

5.2 The Audit and Compliance Committee shall be authorized and expected to provide coordination and oversight as follows for External Audit:

- Advise on areas of particular interest.
- Review and approve the external audit plan.
- Review and recommend approval of any external audit reports to BOT.
- Follow up with management in regards to any audit findings or other matters identified in external audit reports.

5.3 The Audit and Compliance Committee shall be authorized and expected to provide coordination and oversight as follows for Compliance:

- Advise on the Compliance department structure.
- Receive and review quarterly reports from the Executive Director of Compliance regarding the Compliance Program.
- Review and remain informed about governmental compliance enforcement activity such as notices of non-compliance, warning letters and/or more formal sanctions.
- Follow up with management on any corrective actions implemented.
- Promote and support a culture that builds compliance consciousness into the daily activities of the UNM Hospital employees.
- Advise on the allocation of resources when necessary to respond to situations or circumstances determined to present a high compliance risk.
- Review and recommend approval of the Standards of Conduct and Code of Ethics.
- Direct the CEO or Executive Director of Compliance to study areas of particular interest or concern that fall within the delegated authorities and powers of the BOT.

**6. ACCESS**

Any member of management or any UNM Hospital employee may bring issues of concern directly to the Audit and Compliance Committee or any committee member.

**SUMMARY OF CHANGES**

Replaces document of UNM Hospital Board of Trustees Audit Committee, last revision, 1/2014.

**DOCUMENT APPROVAL & TRACKING**

Item	Contact	Date	Approval
Owner	UNM Hospital Board of Trustees		
Legal (Required)	Jennifer James		Y
Official Approver	Dr. Tamra Mason, Secretary		Y
Official Signature		[Day/Mo/Year]	
Effective Date		08/30/19	
Origination Date		02/2009	
Issue Date	UNM Hospital Policy Coordinator		

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Deleted: Dr. Jerry McDowell

Deleted: Del Archuleta, Board of Trustees Chairperson

Title: UNM Hospital Board of Trustees Audit and Compliance Committee  
 Owner: UNMH Board of Trustees  
 Effective Date: 10/29/2021  
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# **UNMH BOT Public Participation in Board Meetings Policy wComments**

	Applies To: UNM Hospitals Responsible Department: Administration Effective Date: 6/29/2018
	<b>Policy</b>
Title: UNM Hospital Board of Trustees Policy on Public Participation in Board Meetings	
Patient Age Group: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> All Ages <input type="checkbox"/> Newborns <input type="checkbox"/> Pediatric <input type="checkbox"/> Adult	

**POLICY:**

It is the policy of the UNM Hospital Board of Trustees (Board) to provide opportunities for public participation in meetings of the Board, in accordance with the New Mexico Open Meetings Act and applicable Regents' and University policies.

**AUTHORITY:** The Regents of the University of New Mexico have delegated responsibility to the Board for review of certain matters related to oversight of the non-research, non-educational clinical activities of UNM Hospital clinical facilities. As such, the Board is an integral part of the governance structure of UNM Hospital and its role and responsibilities must be safeguarded from disruption.

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**PURPOSE:** The purpose of this policy is to generally outline how the public will be permitted to participate in open meetings of the Board and is supplemental to the Board's Open Meetings Resolution adopted annually.

**PROCEDURE:**

1. Participation as part of the "public comment" portion of the agenda:
  - 1.1 Persons who wish to provide public comment should sign in on the log provided upon entry to the meeting.
  - 1.2 The Chairperson of the Board, as the presiding officer, will determine when public comment will be presented.
  - 1.3 In order to facilitate the presentation of comment by the public, the Chairperson will recognize the person formally prior to the beginning of the public comment. Once recognized, the person will state their name, organizational affiliation, and profession for the record.
  - 1.4 In order to provide adequate opportunity for the presentation of all public comment to the Board, each person who wishes to provide public comment will be provided an appropriate amount of time as determined by the Chairperson of the Board.
  - 1.5 Persons addressing the Board may submit their presentation in writing rather than presenting it orally.
  - 1.6 Public comments will be delivered in a manner that is respectful of the Board.
  - 1.7 If any disruption of a Board meeting occurs, the Chairperson may recess or adjourn the Board meeting or may call for a motion to begin the closed portion of the meeting, after which the meeting room will be cleared or the meeting will be closed. A closed meeting may be reopened after the disruption has subsided so that the Board may continue with its scheduled business in open session. No business that is on the agenda for an open session will be discussed in closed session.

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*Policy and Procedure*

Title: UNM Hospital Board of Trustees Policy on Public Participation in Board Meetings  
 Owner: Administration  
 Effective Date: 6/29/2018

2. Participation as part of the Board's published agenda:

2.1 If a member of the public or any other individual wishes to place any item of business on the agenda for a Board meeting, they will be required to present their request in writing to the Board Chairperson, in care of the CEO of UNM Hospital, at least ten (10) days prior to the date of the next scheduled regular meeting of the Board.

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2.2 The procedures for presentation of agenda items by members of the public will be the same as described under section one (1), for public comment.

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**SUMMARY OF CHANGES**

Replaces document of same name, last revision 6/29/2018

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**DOCUMENT APPROVAL AND TRACKING**

Item	Contact	Date	Approval
Owner	UNMH Administration		
Consultant(s)			
Human Resources			Y
Official Approver			Y
Official Signature			
Effective Date		6/29/2018	

Deleted: Dr. Raymond Loretto, UNMH BOT Secretary

Policy and Procedure

Title: UNM Hospital Board of Trustees Policy on Public Participation in Board Meetings  
 Owner: Administration  
 Effective Date: 6/29/2018

# UNMH BOT Quality and Safety Committee Policy wComments



Applies To: UNMH  
 Responsible Department: Administration  
 Revised: 10/22/2021

Title: UNM Hospital Board of Trustees Quality and Safety Committee	Policy
Patient Age Group: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> All Ages <input type="checkbox"/> Newborns <input type="checkbox"/> Pediatric <input type="checkbox"/> Adult	

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**1. POLICY STATEMENT**

It is the policy of the UNM Hospital Board of Trustees (BOT) to have a Quality and Safety Committee which will be responsible to provide oversight for the quality, clinical performance, credentialing and privileging, accreditation, licensing and risk management of clinical services for UNM Hospitals as delegated by the UNM Hospital Board of Trustees.

**2. APPLICABILITY**

UNM Hospitals Board of Trustees

**3. POLICY AUTHORITY**

UNM Hospital Board of Trustees  
 UNM Hospital Lease and Delegation of Authority

**4. REFERENCES**

**5. DEFINITIONS**

**6. GENERAL INFORMATION AND DESIRED OUTCOME**

The UNM Hospitals Quality and Safety Committee, as formed by and delegated by the UNM Hospital Board of Trustees, has the oversight responsibility to ensure that the UNM Hospitals have competent and qualified medical staff, remains appropriately accredited and licensed, and has systems to monitor and continuously improve the quality of care provided and minimize and monitor risk to patients, staff and the organization. The public's confidence in the UNM Hospitals' operational integrity is dependent upon the foundation of trust placed in the UNM Hospital Board of Trustees and its Committees.

Deleted: The UNM Hospitals are part of UNM Health Sciences Center, a division of the University of New Mexico and are instrumentalities of a political subdivision of the State of New Mexico.

**7. QUALITY AND SAFETY COMMITTEE STRUCTURE AND MEMBERSHIP**

The UNM Hospitals Quality and Safety Committee is comprised of the Quality and Safety Committee Chair as appointed by the Board of Trustees plus UNM Hospital Board of Trustees members and the Chief

of the Medical Staff. Establishment of quorum requires the participation of 3 voting members of the full Board of Trustees.

The UNM Hospitals Quality and Safety Committee will be supported by the UNM Hospital CEO, the Chief Medical Officer, the Chief Quality Officer, and the Chief Operations Officer.

**8. QUALITY AND SAFETY COMMITTEE CHAIR AND COMMITTEE DUTIES**

8.1 The UNM Hospitals Quality and Safety Committee Chair shall:

- Conduct the Quality and Safety Committee meetings
- Establish the Quality and Safety Committee calendar
- Direct the Quality and Safety Committee agenda
- Advance in closed session of the UNM Hospital BOT any Quality and Safety Committee recommendations regarding quality, clinical performance, credentialing and privileging, accreditation, licensing and risk management items related to these areas, and any other appropriate informational or approval items as may arise
- Advise the UNM Hospital Board of Trustees, as requested, on hospital quality, clinical performance, credentialing and privileging, accreditation, licensing and risk management items related to these areas
- Ensure adequate operational knowledge and expertise of Quality and Safety Committee board members

8.2

8.3 The UNM Hospitals Quality and Safety Committee shall be authorized and expected

- Review and approve, by delegation of the full BOT, medical staff credentialing and privileging decisions for Medical Staff of the UNM Hospitals.
- Advance recommendations for all adverse actions, subject to appeal rights by a medical staff member under the UNMH Medical Staff Bylaws, for a vote by the full BOT
- Review and approve clinical quality priorities
- Review performance of UNM Hospitals Medical Staff and other staff
- Review risk management and liability issues related to the provision of clinical care, quality, credentialing and privileging, accreditation and licensing
- Review internal quality and safety scorecards and assure a quality improvement plan is in place for each parameter in the scorecard
- Review and recommend annually the Quality and Performance Improvement plan (QAPI)
- Monitor and report on patient access, outcomes and satisfaction issues
- Review and be briefed with recommendations on maintaining accreditation status

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Deleted: Administrator, Professional and Support Services, and the Administrator for Ambulatory Services. The UNM Hospitals Administrator, Professional and Support Services, and Administrator for Ambulatory Services serve as primary staff and advisors to the UNM Hospitals Quality and Safety Committee Chair. Ad hoc staff includes:¶  
 ¶ Executive Director, Quality Outcomes Management¶  
 Office of the University Counsel¶  
 Director, UNM Hospital Medical Staff Affairs¶  
 Other executives and staff as needed

Deleted: <#>Attend, or designate another Quality and Safety Committee member to attend, the UNM Hospital Quality Oversight Committee monthly meetings¶

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- Review and be briefed with recommendations on licensure status
- Advance to the UNMH BOT, any additional quality, clinical performance, credentialing and privileging, accreditation, licensing and risk management items as deemed appropriate by the voting members of the Quality and Safety Committee
- Other duties or responsibilities as delegated by the UNMH BOT

**9. SUMMARY OF CHANGES**

Replaces UNM Hospital Board of Trustees Performance Oversight and Community Engagement Committee dated November 4, 2011.

**DOCUMENT APPROVAL & TRACKING**

Item	Contact	Date	Approval
Owner	Administration		
Consultant(s)			
Committee(s)	UNM Hospital Quality and Safety Committee		Y
Nursing Officer	Sheena Ferguson, Chief Nursing Officer		Y
Medical Director/Officer	Irene Agostini, Chief Medical Officer		Y
Human Resources	Sara Frasch, HR Administrator UNMH		N
Finance Officer	Ella Watt, Chief Financial Officer, UNMH		N
Legal (Required)	Scott Sauder, Sr. Associate University Counsel, UNM		Y
Official Approver	Chair, UNM Hospital Board of Trustees		Y
Official Signature		Date: 06/02/2017	
Effective Date			
Origination Date		08/28/2003	
Issue Date	Clinical Operations Policy Coordinator		

**ATTACHMENTS**

N/A

# **UNMH BOT Governing Body Approval of Quality Assessment Performance Improvement Policy wComments**

	Applies To: UNM Hospitals Responsible Department: Administration Effective Date: 6/29/2018
	<b>Policy</b>
Title: <b>Governing Body Approval of Quality Assessment-Performance Improvement</b>	
Patient Age Group:	<input checked="" type="checkbox"/> N/A <input type="checkbox"/> All Ages <input type="checkbox"/> Newborns <input type="checkbox"/> Pediatric <input type="checkbox"/> Adult

**POLICY STATEMENT**

The UNM Board of Regents has delegated to the UNM Hospital Board of Trustees the responsibility of delegation and/or approval of policies, procedures, and appointments. UNM Hospital Board of Trustees retains overall responsibility and accountability for the quality of patient care, including the safety of patients, staff and visitors and the appropriate utilization of resources.

**POLICY AUTHORITY**

CEO of UNM Hospital,

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**REFERENCES**

Centers for Medicare & Medicaid Services (CMS) Conditions of Participation §482.21  
The Joint Commission (TJC) LD.01.03.01

**IMPLEMENTATION PROCEDURES**

1. The UNM Hospital Board of Trustees (Board) ensures that the performance improvement program reflects the complexity of the hospital's organization and services; involves all hospital departments and services (including those services furnished under contract or arrangement); and focuses on indicators related to improved health outcomes and the prevention and reduction of medical errors.
2. The Board has established the Quality and Safety Committee to implement and maintain an effective hospital-wide, data-driven quality assessment and performance improvement (QAPI) program. Part of the Quality and Safety Committee responsibility is the identification of the frequency and detail of data collection and recommending QAPI priorities to the Board at least annually.
3. The Board reviews, revises, and approves the QAPI priorities on an annual basis.

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**SUMMARY OF CHANGES**

Replaces previous Policy Effective Date 6/29/2018.

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**DOCUMENT APPROVAL & TRACKING**

Item	Contact	Date	Approval
Owner	Administration		Y
Consultant(s)			
Official Approver			Y
Official Signature		Date: 6/29/2018	
Effective Date		6/29/2018	

Deleted: Dr. Raymond Loretto, Board Secretary

Title: Governing Body Approval of Quality Assessment-Performance Improvement  
Owner: Administration  
Effective Date: 6/29/2018

# **UNMH BOT Governing Body Approval of Radiological Policy wComments**



Applies To: UNM Hospitals  
 Responsible Department:  
 Administration  
 Effective Date: 6/29/2018

**Title: Governing Body Approval of Radiological Services**

**Policy**

Patient Age Group:  N/A  All Ages  Newborns  Pediatric  Adult

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**POLICY STATEMENT**

The UNM Board of Regents has delegated responsibility to the UNM Hospital Board of Trustees (Board) for approval of policies, procedures, and appointments.

**DETAILED POLICY STATEMENT**

The Board retains overall responsibility and accountability for the scope and complexity of radiological services offered at UNM Hospital.

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**APPLICABILITY**

UNM Hospital

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**POLICY AUTHORITY**

CEO of UNM Hospitals.

Deleted: UNM Hospital Board of Trustees and

**REFERENCES**

Centers for Medicare & Medicaid Services (CMS) Conditions of Participation §482.26  
 The Joint Commission (TJC) LD.01.03.01

**IMPLEMENTATION PROCEDURES**

The Board in conjunction with the medical staff approves the scope of radiological services offered at UNM Hospital and Clinics (outlined in the Radiology Operation Plan).

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**SUMMARY OF CHANGES**

Replaces document of same name, last revision 6/2018.

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**RESOURCES/TRAINING**

Resource/Dept	Internet/Link
UNM Intranet, Administrative policies	

**DOCUMENT APPROVAL & TRACKING**

Item	Contact	Date	Approval
Owner	Administration		Y
Consultant(s)			
Official Approver			Y
Official Signature		Date: 6/29/2018	
Effective Date		6/29/2018	

Deleted: Administrator, Professional Support Services  
 Deleted: Dr. Raymond Loretto, Board of Trustees Secretary

Title: Board Approval of Radiological Services  
 Owner: Executive Director, Quality Outcomes  
 Effective Date:

# UNMH BOT Patient Grievance Policy wComments



Applies To: UNMH  
 Responsible Department: Patient Relations  
 Effective Date:

Deleted: Care Management

Deleted: 6/29/2018

Title: UNM Hospital Board of Trustees Patient Grievance	Policy
Patient Age Group: (X) N/A ( ) All Ages ( ) Newborns ( ) Pediatric ( ) Adult	

**POLICY STATEMENT**

It is the policy of the UNM Hospital Board of Trustees that patients and their authorized representatives' grievances and complaints will be resolved in a timely, reasonable and consistent manner.

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**DETAILED POLICY STATEMENT**

1. A grievance is defined as, "a formal or informal written or verbal complaint that is made to the hospital by a patient, or the patient's representative, regarding the patient's care (when the complaint is not resolved at the time of the complaint by staff present), abuse or neglect, issues related to the hospital's compliance with the CMS Hospital Conditions of Participation, or a Medicare beneficiary billing complaint related to rights and limitations provided by 42 CFR 489.
2. Information obtained from Patient Experience Surveys administered by the approved survey vendor are considered a grievance when the patient writes or attaches a written complaint on the survey and requests resolution, then the complaint meets the definition of a grievance.
3. A written complaint is always considered a grievance.
4. A complaint is defined a concern that can be resolved by, "staff present," at the time of the complaint or who can quickly be at the patient's location to resolve the patient's complaint. Post-hospital verbal communications regarding patient care that would have routinely been handled by staff present if the communication would have occurred during the stay/visit are also considered complaints. This means complaints must be dealt with by staff in real-time or within 24-hours.
5. If a complaint is not addressed in real time or within 24-hours, it will become a grievance.
6. UNM Hospital staff that become aware of a patient concern or complaint, regarding patient care, patient rights, or who become aware of a concern or complaint about barriers to disabled visitors or patients, are authorized to attempt to resolve the concern or complaint as promptly as the circumstances allow, in a courteous and reasonable manner.
  - 6.1 Immediate attention must be given to grievances about situations that endanger the patient, such as alleged neglect, abuse, the potential for harm to the patient(s).
7. All formal grievances must go through the patient advocate office within the patient relations department. If a patient or their representative requests from staff that a formal grievance be filed, documentation of oral or written, information shared including the date of incident or service, the patient/ visitor name, address and phone number, the employee's name who took or received the information, must be forwarded to the Patient Advocate Office.
8. If a complaint or concern is handled in real-time or within 24-hours by staff present and a patient or their representative has not requested the involvement of the patient advocate, it is not required that this information be sent to the patient advocate office.
9. If the complaint cannot be resolved at the point of contact or service within the time frame identified in this policy, the patient, patient's representative will be referred to the Patient

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Title: UNM Hospital BoT-Patient Grievance  
 Owner: Director, Patient Relations  
 Effective Date:

- Advocate, or the Administrative Supervisor for assistance in making an oral or written grievance:  
 Patient Advocate: 505-272-2121 0800 - 1630 M-F Administrative  
 Supervisor: 505-272-2111 Outside of the above hours
10. The patient/patient representative shall be informed that they have the right to file a grievance directly with:
    - 10.1 the New Mexico Department of Health (“DOH”) Division of Health Improvement
    - 10.2 The Joint Commission
  11. Complaints or grievances related to quality of care or premature discharge will be forwarded to the appropriate medical department for review.
  12. Medicare beneficiaries follow the process outlined in “An Important message From Medicare about Your Rights” which is provided within 2 days of admission.
  13. Concerns regarding quality of care or premature discharge may be reported to the Quality Improvement Organization (QIO): Comagine Health at toll-free 1-800-663-6351 or voice at 1-505-998-9898 as outlined in the Important Message.
  14. Approaches for resolving complaints and grievances include the following as well as any other approaches that support communication in a language and manner that the patient or patient’s representative understands.
    - 14.1 Face-to-face meetings with the patient and/or their legally authorized representative;
    - 14.2 Request for an ethics consultation by any staff member, patient, or patient family member or decision-maker (505-272-6663);
    - 14.3 Request for Care Management services;
    - 14.4 Referral for UNMH Patient Financial Services consultation or UNM Medical Group Billing Consultation; (Unless you are a Medicare beneficiary, billing issues are not considered grievances for the purpose of the Conditions of Participation);
    - 14.5 Request for environmental services, food and nutrition services, parking services and interpreter services;
    - 14.6 Referral to Children, Youth & Families Department for child and adult protective services for abuse, neglect or exploitation of a child;
    - 14.7 Referral to UNM Health Science Center legal counsel via Risk Management for protective services regarding healthcare decision-making, such as guardianship and treatment orders;
    - 14.8 Referral to the appropriate department for review of dates of services and care provided, when a grievance or complaint includes a request for money. After review by the appropriate department, risk management involvement may be requested, if needed.
    - 14.9 Referral to Security.
  15. On average, all grievances are addressed within 7 days but may take up to 30 days. For extraordinary circumstances when the complexity of the grievance requires more than 30 days the person filing the grievance must be notified and the Chief Nursing Officer must be made aware of the circumstances. The patient or their authorized representative will be notified in writing of the investigative outcome of all grievances (oral or written). On average, this will be done within 7 days unless additional time is needed for resolution. If additional time is needed, the patient or representative will be notified in writing. This notification will include:

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Title: UNM Hospital BoT-Patient Grievance  
 Owner: Director, Patient Relations  
 Effective Date:



- 15.1 Name of the UNMHSC contact person who can provide additional information;
- 15.2 Steps taken to investigate the grievance;
- 15.3 Outcome of the grievances investigated; and
- 15.4 Date of completion.
- 15.5 Additional contact information as needed.

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- 10.
- 11. A monthly trend report for compliments, complaints and grievances will produced by the Patient Relations Department.

**APPLICABILITY**

UNM Hospital and Clinics

**POLICY AUTHORITY**

UNM Hospital Board of Trustees, UNMH CEO

**REFERENCES**

- 45 CFR Part 84 as implementing the Rehabilitation Act of 1973, as amended, (29 USC, 94) and the Americans with Disabilities Act of 1990 (42 USC, 12101-12213).
- Uniform Health Care Decisions Act, NMSA 1978, and Sections 24-7A-1, et seq. (1995, as amended through 2000).
- Uniform Anatomical Gift Act, NMSA 1978, and Sections 24-6A-1, et seq. (1995, as amended through 2000).
- New Mexico Department of Health Regulations, 7.7.2.19 NMAC (2000)
- UNM Board of Regents’ Policy Manual, HSC Quality of Care (2.13.1)
- CMS Conditions of Participation: Patient’s Rights (482.13(a)(2) (Rev. 37, 10-17-08)
- The Joint Commission (RI01.07.01)

**IMPLEMENTATION PROCEDURES**

- 2. The UNM Board of Regents delegates to the Board of Trustees who then delegates the responsibility to assure the effective operation of the patient grievance process to the Patient Advocate office and the Patient Relations Department. On average, all grievances will be resolved within 7 days, unless the grievant is notified that the appropriate investigation will require additional time.
- 3. This policy and procedure applies to all patients or patient’s representatives.4.1. Requests for money (e.g., lost items) or billing issues are required by state law to follow a procedure, which includes written notice to the facility. The notice may be mailed to UNMH Risk Management, 2211 Lomas NE, Albuquerque, NM 87106 or to the New Mexico Risk Management Division, PO Drawer 26110, Santa Fe, NM 87502-6110. For information regarding the notice procedure and deadlines, contact the PAC or UNMH Risk Management.
- 4. Billing issues are not considered grievances for the purposes of this policy. However, a Medicare beneficiary billing complaint related to rights and limitations provided by 42 CFR 489 is considered a grievance. Notices to patients or their authorized representative of their

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Title: UNM Hospital BoT-Patient Grievance  
Owner: Director, Patient Relations  
Effective Date:



right to make an oral or written grievance is included in the "Patient Rights and Responsibilities," which is included in the patient's admission packet, handed out in the outpatient clinics for each episode of care and is available online at: <https://unmhealth.org/patients-visitors/rights-responsibilities.html>. Copies of the "Patient Rights and Responsibilities" are available from the Patient Advocate office.

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5. When applicable, referrals will be made to the state designated Quality Improvement Organization (QIO) for quality of care issues, disagreements with coverage decisions, and premature discharges.
6. Grievances will not be documented in the patient's paper or electronic medical record.
7. A grievance will be considered resolved when the patient or patient's representative is satisfied with the actions taken on their behalf. In situations where the UNMHSC has taken appropriate and reasonable actions on the patient's behalf in order to resolve the patient's grievance and patient or patient's representative remain unsatisfied, UNMHSC may consider the grievance closed with appropriate documentation of its efforts.

**DEFINITIONS**

1. **Authorized representative** means a person appointed by the patient such as in an advance directive, by a court order such as guardianship, or according to the New Mexico Healthcare Decisions Act, NMSA 1978, Section 24-7-1, et seq. (1995, as amended through 2000), the New Mexico Anatomical Gifts Act, NMSA 1978, Section 24-6A-1, et seq. (1995, as amended through 2000), and other applicable laws. For purposes of this Policy and Procedure, family members are also considered to be authorized representatives unless the patient has indicated otherwise.
2. **Grievant** means the patient on whose behalf an oral or written grievance has been filed, or the disabled visitor's or patient's legally authorized representative who has filed the grievance on behalf of the patient.
3. **Grievance Procedure** means the procedure used when the patient's concern or complaint cannot be resolved at the point of contact or service by staff present.
4. **Point of service or contact:** means the place and time the services are or were to be provided or where a barrier was encountered, or where a majority of patients will receive services, including Admitting, Business Office, clinic registration counters, etc.

Deleted: <#> **Complaint** means an issue, concern, or complaint about patient care or access to care issues, including complaints regarding barriers to care or other services, which are encountered, by patients or patient representatives resolved by staff present. For example, a relatively minor request such as a request to change bedding, housekeeping of a room and serving preferred food and beverages may be made relatively quickly and would not usually be considered a "grievance" and therefore would not require a written response.¶  
 <#> **Grievance** is a formal or informal written (letter, e-mail or fax) or verbal complaint that is made to the hospital by a patient, or the patient's representative, regarding the patient's care (when the complaint is not resolved at the time of the complaint by the staff present), abuse or neglect, issues related to the hospital's compliance with the CMS Hospital Conditions of Participation or a Medicare beneficiary billing complaint related to rights and limitations provided by 42 CFR.489.¶

**SUMMARY OF CHANGES**

**DOCUMENT APPROVAL & TRACKING**

Item	Contact	Date	Approval
Owner	Director, Patient Relations		
Consultant(s)	Executive Director, Care Management		
	Chief Nursing Officer, Patti Kelley		
Official Approver	Board of Trustees Secretary		
Official Signature		Effective Date:	

- Deleted: Admitting and Patient Assistance.
- Deleted: Committee(s)
- Deleted: Grievance Committee
- Deleted: Y
- Deleted: Human Resources
- Deleted: Y
- Deleted: Dr. Raymond Loretto,
- Deleted: Y
- Deleted: Executive
- Deleted: Care Management
- Deleted: 6/29/2018¶

Title: UNM Hospital BoT-Patient Grievance  
 Owner: Director, Patient Relations  
 Effective Date:

**UNM Hospital Board of Trustees Policies  
Recommend Discontinue and Archive**

# **UNM Hospital Board of Trustees Orientation (Rec Retire)**

<b>Title: UNM Hospital Board of Trustees Orientation</b>	<b>Policy</b>
<b>Patient Age Group:</b> (X) N/A      ( ) All Ages      ( ) Newborns      ( ) Pediatric      ( ) Adult	

### POLICY STATEMENT

This policy defines the orientation process of new board members. Each new UNM Hospital Board of Trustees (BOT) member shall receive an orientation within 60 calendar days of his/her appointment.

### APPLICABILITY

UNM Hospital Board of Trustees Members

### IMPLEMENTATION PROCEDURES

1. The orientation of the Board and each Committee of the Board, shall be coordinated by the CEO's office and shall consist of the following:

- 1.1. State of the Hospital Industry
- 1.2. Role of UNMH in the State
- 1.3. Roles and responsibilities of a Board member
- 1.4. Board structure, committee orientation and background, By-laws
- 1.5. Hospital structure, statutes, By-laws, leases, and contracts
- 1.6. Hospital tour
- 1.7. Medical Staff roles and By-laws (credentialing)
- 1.8. University Organization Chart
- 1.9. Hospital Organization Chart
- 1.10. Key Hospital programs, personnel and administration
- 1.11. Hospital finances
- 1.12. Hospital Human Resources
- 1.13. Fundraising
- 1.14. Quality/Safety programs
- 1.15. Regulatory process
- 1.16. In most instances, contingent upon available funds, new board members will be reimbursed for at least one national conference.

### SUMMARY OF CHANGES

Replaces document of same name last revision, 2/2009.

### DOCUMENT APPROVAL & TRACKING

Item	Contact	Date	Approval
<b>Owner</b>	Administration & Board of Trustees		
<b>Consultant(s)</b>			
<b>Human Resources</b>	Jim Pendergast, Administrator, Human Resources		Y
<b>Official Approver</b>	Michelle Coons, Board of Trustees Secretary		Y
<b>Official Signature</b>		Date: 4/25/2014	
<b>Effective Date</b>	4/25/2014		
<b>Origination Date</b>	1/2009		
<b>Approved Date</b>	Clinical Operations Policy Coordinator	5/2/2014	ar

# **UNM Hospital Board of Trustees Statement of Strategic Planning Policy (1) (1) Rec Retire**



Title: **UNM Hospital Board of Trustees Statement of Strategic Planning**

Applies To: **UNM Hospitals**  
Responsible Department: Administration  
Effective Date: 6/29/2018

**Policy**

**Patient Age Group:**       N/A       All Ages       Newborns       Pediatric       Adult

**POLICY STATEMENT**

This policy will define the UNM Hospital Board of Trustees role in strategic planning.

**DETAILED POLICY STATEMENT**

This policy will also define management’s role in strategic planning and implementation.

**APPLICABILITY**

UNM Hospitals Board of Trustees

**POLICY AUTHORITY**

UNM Hospital Board of Trustees and CEO of UNM Hospitals.

**IMPLEMENTATION PROCEDURES**

1. In carrying out its role, the board will ensure that management has effective strategic planning and implementation process in place, that the process examines community need and incorporates input from key stakeholders, and that the long-range and annual strategic and financial plans are integrated and aligned.
2. The UNM Hospital Board of Trustees (UNMH BoT) will have an active role in the strategic planning process, while ensuring it does not conflict with management responsibilities. The board will:
  - 2.1 Formally initiate updates to the Hospital strategic plan.
  - 2.2 Participate in educational sessions about healthcare trends and community/stakeholders needs, including, but not limited to the UNM Regents, Bernalillo County, Business Community, All Indian Pueblo Council, Indian Health Services and Health Care Advocacy groups.
  - 2.3 Share ideas and feedback about critical strategic issues and community/stakeholder needs, and provide feedback on draft plans and updates.
  - 2.4 Approve the final strategic plan.
  - 2.5 Review and approve major transactions and programmatic changes to ensure consistency with the strategic plan, financial viability and responsiveness to community needs.
  - 2.6 Help communicate strategic plans and programs to key stakeholders and the general public.
  - 2.7 Monitor strategic plan progress on a regular basis.
3. Time will be allotted on board meeting agendas to discuss strategy issues and monitor implementation of the plan.
4. Management is responsible for preparing for board review and approval a rolling 3 to 5 year strategic plan that provides direction for decision-making by the UNMH BoT and Hospital management. The plan will include major strategic goals key initiatives to achieve each goal, and measures of success by which the board and management monitor implementation.
6. Management will provide to the board a quarterly dashboard report on the key goals and measures in the strategic plan. The dashboard report will be included in the board packets.

## SUMMARY OF CHANGES

Replaces document of same name last revision, 2/2014.

## DOCUMENT APPROVAL & TRACKING

Item	Contact	Date	Approval
Owner	UNMH Administration & Board of Trustees		
Consultant(s)			
Human Resources			
Official Approver	Dr. Raymond Loretto, BOT Secretary		Y
Official Signature		Date: 6/29/2018	
Effective Date			

# **Advisory Board Member Nomination and Invitation Policy Rec Retire**

 <b>Title: Advisory Board Member Nomination and Invitation</b>	<b>Applies To: UNM Hospitals</b> Responsible Department: Administration Effective Date: 6/29/2018
	<b>Policy</b>
<b>Patient Age Group:</b> <input checked="" type="checkbox"/> N/A <input type="checkbox"/> All Ages <input type="checkbox"/> Newborns <input type="checkbox"/> Pediatric <input type="checkbox"/> Adult	

**POLICY STATEMENT:**

It is the policy of the UNM Hospital (UNMH) Board of Trustees to consider nominations of Advisory Board members.. Members of component Advisory Boards may be invited to the UNMH Board of Trustees general meetings or meetings of its committees.

**Advisory Board Nominations**

Vacancies of advisory board positions will be filled by appointment of the UNM Board of Regents, upon recommendation of the UNMH Board of Trustees (UNMH BoT), in accordance with the UNMH Board of Trustees bylaws.

1. The applicable advisory board may submit nominations to fill advisory board vacancies for consideration by the UNMH BoT.
2. Such nominations will be submitted in writing to the Chair of the UNMH BoT .The UNMH BoT will consider suggested nominations and make a decision on whether to accept or deny the recommendation.
  - 2.1 Upon acceptance, the nomination will be forwarded by the UNMH BoT Chair to the UNM Board of Regents for their consideration. The chair of the applicable advisory board will be notified of the nominations progress in writing.
  - 2.2 If the UNMH Board of Trustees acts in a manner not to accept the nomination, the UNMH BoT Chair will notify the applicable advisory board chair of the decision in writing. The UNMH Board of Trustees will defer action on a substitute nomination for a period of one (1) month to allow consultation with the Advisory Board.
  - 2.3 The UNMH Board of Trustees may make a nomination for potential advisory board members following one (1) month from the receipt of advisory board nominations. UNMH Board of Trustees nominations may be forwarded to the Regents in addition to or instead of nominations recommended by an advisory board.

**Clinical Component Advisory Board Invitation**

**Clinical Component Advisory Board Members**

1. May attend any general UNMH Board of Trustees meeting pursuant to the New Mexico Open Meetings Act. The Chair of the UNMH Board of Trustees may request a presentation or briefing from the Advisory Board.
2. May attend a UNMH Board of Trustees Committee meeting or portion of a Committee meeting at the invitation of the Chair of the Committee and will be for the purpose of providing advice to the Committee. The Advisory Board Member may participate in discussions at the meeting or present based on the discretion of the Committee Chair. Votes of the Committee will be restricted to members of the UNMH Board of Trustees.

## SUMMARY OF CHANGES

Combines and replaces documents **Advisory Board Member Nomination and Invitation to Meetings**, last revisions 2/2014.

## DOCUMENT APPROVAL & TRACKING

<b>Item</b>	<b>Contact</b>	<b>Date</b>	<b>Approval</b>
<b>Owner</b>	Administration and Board of Trustees		
<b>Consultant(s)</b>			
<b>Human Resources</b>			Y
<b>Official Approver</b>	Dr. Raymond Loretto, Board Secretary		Y
<b>Official Signature</b>			Date: 6/29/2018
<b>Effective Date</b>			<b>6/29/2018</b>

**UNM Hospital Tower Project  
Approvals**

# NHT Project Specific Insurance 10-2021v2 Final



## **CAPITAL PROJECT APPROVAL**

### **New Hospital Tower – Modern Medical Facility Architectural and Engineering Services - Specific Project Professional Liability Insurance**

**October 2021**

#### **RECOMMENDED ACTION:**

Management requests approval from the UNM Hospital Board of Trustees of an increase in the Architecture and Engineering services for the purchase of a Specific Project Professional Liability Insurance policy for the New Hospital Tower (NHT) project.

#### **PROJECT DESCRIPTION:**

The UNMH New Hospital Tower Project includes development of a new 7 level hospital tower comprising approximately 570,000 GSF. The hospital structure includes 5 podium levels with 2 patient floors of 96 total beds on top of the podium.

#### **RATIONALE:**

In 2019, UNMH contracted with HDR Architecture, Inc. and FBT Architects for professional architectural and engineering design services on the New Hospital Tower. Because of prior experience of UNM in another very large construction project, the Office of University Counsel advised UNM Hospital after the HDR/GBT bid was awarded and during the negotiation of the contract with HDR Architecture, Inc. and FBT Architects that the Regents were requiring a project-specific policy of professional liability insurance with a coverage amount commensurate with the risk being undertaken by UNM and UNM Hospital with the NHT Project. . The Specific Project Professional Liability Insurance policy provides \$10,000,000 for each claim and policy aggregate, retroactive to May 26, 2019 and for an extended reporting period of 5 years from policy expiration or until May 31, 2029, in addition to the standard policy of professional liability insurance maintained by HDR Architecture, Inc. and FBT Architects, and solely for the protection of UNM and UNM Hospital. The producer is Willis Towers Watson of Chicago, IL. The requirements of UNM Hospital and the architects in respect of this project-specific professional liability policy are included in the many mutual covenants and obligations in the contract that was approved by the UNM Hospital Board of Trustees and the UNM Board of Regents. The total cost of the contract, however, exceeded the amount originally approved by the Board of Trustees by the amount of the specific project professional liability policy premium, so UNM Hospital now seeks approval from the UNM Hospital Board of Trustees of the amount of the specific project professional liability insurance policy premium.

#### **PURCHASING PROCESS:**

HDR Architecture, Inc. and FBT Architects were selected using a competitive sealed RFP process completed in 2018. At the time of the RFP, the dollar amount of any specific project professional liability insurance that would be required by UNM Hospital had not yet been finalized. After HDR Architecture, Inc. and FBT Architects had been selected as the architects for the New Hospital Tower, UNM Hospital finalized its requirement of a \$10,000,000 specific project professional liability policy. Negotiation of the contract with HDR Architecture, Inc. and FBT Architects

included negotiation of the requirement of a \$10,000,000 specific project professional liability policy for the protection of UNM and UNM Hospital. Competitive quotes were obtained by Willis Towers Watson. The policy is issued to HDR Architecture, Inc. and issued by North American Capacity Insurance Company of Kansas City, MO. The project covered by this policy is “University of New Mexico Hospitals – New Hospital Tower.”

**FUNDING:**

The increase in the contract with HDR/FBT due to the additional term premium for the Specific Project Professional Liability Insurance of \$950,000 is funded by UNM Hospital Capital Initiative Funds as part of the New Hospital Tower project.

# **BOR Approval Letter NHT Low Voltage (3126 New Hospital Tower)**



## **CAPITAL PROJECT APPROVAL**

### **CIP 3126 UNM HOSPITALS – NEW HOSPITAL TOWER PROJECT – LOW VOLTAGE COMMUNICATIONS SYSTEMS**

**OCTOBER 26, 2021**

#### **RECOMMENDED ACTION:**

As required by Section 7.12 of Board of Regents Policy Manual, the New Mexico Higher Education Department and the New Mexico State Board of Finance, capital project approval is requested for the UNM Hospitals – New Hospital Tower Project – Low Voltage Communications Systems. For the project described below, UNM Hospitals requests the following actions, with action requested only upon requisite sequential approval and recommendation by any and all committees and bodies:

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

#### **PROJECT DESCRIPTION:**

The project includes installation of low voltage communication systems for the New Hospital Tower (NHT) by Bradbury Stamm Hunt. The NHT Project includes a new 7-level hospital tower comprising approximately 570,000 GSF.

#### **RATIONALE:**

The New Hospital Tower project is under construction on the North Campus of the University of New Mexico. The low voltage communications systems are the digital technology and communication infrastructure for the hospital. These systems include nurse call, security, door access, data, telephone, Wi-Fi, high definition audio/video systems, controls and computer networking infrastructure.

#### **PURCHASING PROCESS:**

Three (3)-stage Construction Manager at Risk selection process was used to select Bradbury Stamm Hunt:

- Request for Qualifications from all interested firms
- Request for Proposals from qualified firms
- Interviews with selected firms

#### **FUNDING:**

Budget for the low voltage communication systems will not to exceed \$16,977,398.00 with funding from the UNMH FY22 Capital Initiatives Budget.

**UNM Hospital Board of Trustees**  
**Closed Session**