

DENVER HEALTH[™]
— est. 1860 —
FOR LIFE'S JOURNEY

**REPORT TO
THE CITY**

2023

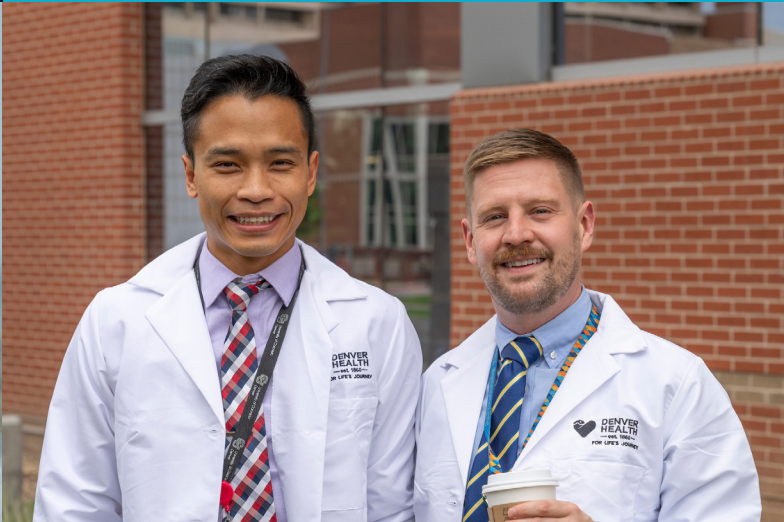


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01

Letter from the CEO



Honorable Mayor Michael C. Johnston
City and County of Denver
1437 N. Bannock Street, Room 350
Denver, CO 80202
May 1, 2024

Dear Mayor Johnston,

I am pleased to share the Denver Health and Hospital Authority's Compliance with Operating Agreement Performance Report for calendar year 2023. This report captures the extensive scope and services of our health care system, a significant touchstone of the Denver community and Colorado for more than 160 years. We value our partnership with you and the role we play in improving the health and well-being of all those whom we are privileged to serve.

Since you became Denver's 46th Mayor on July 17, 2023, we have seen strong alignment between your priority to address the unhoused crisis and a sizeable portion of the population we care for. Over the last three years we have seen a dramatic increase in the number of unhoused patients from Denver that we serve—growing from 7,625 in 2021 to 11,654 in 2023; those 11,654 individuals had 47,465 visits to Denver Health in our various clinical settings.

Our innovative partnership with the Denver Housing Authority and the Colorado Coalition for the Homeless addresses the importance of safe housing as a social determinant of health as patients need a safe and supportive place to heal. At our own expense, we provide transitional housing via 34 units in two Denver locations.

In 2023, we saw nearly 270,000 patients across our health care system which comprised over 1.3 million visits. Our health centers inside of 19 Denver Public Schools saw more than 15,000 students and our medical teams also provided more than 80,000 behavioral health visits across all venues of care. Denver Health also saw increased volume in our Emergency Department, our inpatient services, our mom and baby unit, and our outpatient medical and dental units.

The impact that Denver Health has reaches beyond the clinical care we provide. As a Learning Health System with an academic mission, in 2023 we have secured more than \$128 million in externally funded awards and contracts to educate and train the next generation of physicians and other health care workers, conduct high quality research to improve the quality of care we deliver, and evaluate our services to generate and use evidence to improve outcomes for our patients and community.

Finally, we spent more than six months developing a three-year strategic plan that was officially launched in January 2024. This plan provides a roadmap to attaining quantitative key metrics to improve our services across multiple venues. By the end of 2026, our vision is to become the most trusted health care provider in Colorado.

The financial challenges for Denver Health due to increasing uninsured patients, increases in underfunded public programs, and higher health care costs are important for us to address in partnership. I am, however, pleased that we saw an improvement in our financial results in 2023 compared to 2022, as noted on p. 80 in the Appendix.

This report demonstrates the tremendous impact our health care system has on caring for so many in our community. We value our partnership and agreement with the City and take immense pride in the work we do.

Sincerely,



Donna Lynne, DrPH
Chief Executive Officer
Denver Health

02

2023 Year in Review



Welcome to



DENVER HEALTH

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A Year In Review

Denver Health experienced tremendous growth in 2023. Medical teams took care of nearly 270,000 patients who needed health services at the hospital and in our community health centers. Our 19 school-based health centers, under the direction of Denver Health Pediatrics at Denver Public Schools, treated more than 15,000 students. The hospital system was recognized nationally, and milestones were celebrated locally. The 2023 Year in Review captures some of the year's highlights.

JANUARY



Denver Health's Outpatient Medical Center celebrated the **grand opening of two additional operating rooms**, allowing medical teams to see more specialty care patients.

Denver Health's ambulatory adult and pediatric specialty clinics were **recognized for the third time as a Patient-Centered Specialty Practice** by the National Center for Quality Assurance.

Practice Greenhealth recognized Denver Health with the **Partner for Change Award and the Circle of Excellence Award for Energy**.

FEBRUARY



Philip Mehler, MD, founder and executive medical director of ACUTE at Denver Health, received the **Lifetime Achievement Award** at the International Association of Eating Disorders Professionals' annual conference.



Denver Health Pediatrics at Denver Public Schools: School-Based Health implemented a youth-led program called **Providers and Teens Communicating for Health (PATCH)**. PATCH is an evidence-based program with a mission to create a supportive environment that improves the health and well-being of adolescents through youth-adult partnerships.

Denver Health's Child Life team brought smiles to inpatient pediatric patients, decorating rooms of three children and making it the **first hospital in the state to partner with the nonprofit Once Upon a Room**.

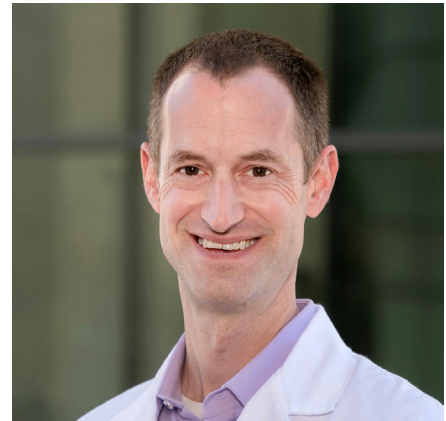
MARCH

Denver Health received more than \$6 million to **study improving care for children with ear infections**.



Denver Health Breast Imaging began offering advanced **3D mammograms to detect breast cancer** earlier, especially for those with dense breast tissue.

APRIL



Read Pierce, MD, became Denver Health's **chief quality and safety officer** as Denver Health marked the retirement of longtime chief Tom MacKenzie, MD.



The Denver Health Paramedic Division marked 28 years of serving as the EMS agency for the Colorado Rockies and their fans since Coors Field opened in 1995.

Denver Health pledged to reduce carbon emissions by 50% by 2030 and reach net zero by 2050, signing on to **the White House/HHS Health Sector Climate Pledge.**

MAY



Denver Health hosted a **health care forum** with the two final candidates vying to be Denver's next mayor, helping keep health care at the forefront of the campaign.



Westwood Family Health Center celebrates 20 years at its current location.

The U.S. Department of Health and Human Services through the Health Resources and Services Administration awarded Denver Health more than **\$1.3 million to implement innovative approaches to improve maternal health outcomes and reduce disparities for patients at highest risk.**



More than 200 people participated in **Denver Health's first Trauma Survivors Fun Run.** Survivors, family members and caregivers gathered to share stories, provide support and celebrate life.

JUNE



Kaiser Permanente Colorado donated **\$5 million** to **Denver Health**, the biggest single donation in the hospital system's history. The health plan challenged others in the community to bring in an additional \$5 million that Kaiser Permanente pledged to match.

Denver Health launched the **Firearm Safety Collaborative**, bringing together multiple programs working to address firearm safety and to address the impact of gun violence.

Denver Health opened **Colorado's first licensed adolescent withdrawal management program.** The program treats patients ages 17 and younger and works in conjunction with Denver Health's Substance Abuse Treatment, Education and Prevention (STEP) Program, which provides therapeutic support for young adults with substance use disorder.

JULY



Denver Health ranked among **the most socially responsible hospitals in America** for the third year in a row by Lown Institute. It received A grades in Health Equity, Value of Care and Outcomes on the 2023-24 Lown Institute Hospitals Index.

AUGUST



Denver Health received its three-year certificate confirming that its hospital, emergency department and hospital-based clinics and services are **fully accredited by the Joint Commission.**

Denver Health hosted an **International Overdose Awareness Day** program



featuring speakers from the Center for Addiction Medicine and people with lived addiction-related experience to bring awareness to preventable overdoses and honor the lives lost to overdose in 2022, which included 1,799 people in Colorado.

SEPTEMBER



Amy King was named **Denver Health's new chief human resources officer.**

Denver Health was recognized by Million Hearts®, a national initiative to prevent one million heart attacks and strokes in five years, for **excellence in preventing heart attacks and strokes.**

Denver Health Dentistry Community Health Services was honored by the University of Colorado School of Dental Medicine as part of the school's 50th anniversary celebration.

OCTOBER



A mural painted by muralist Austin Zucchini-Fowler was unveiled **celebrating health care workers and their work to care for patients.**

The ACUTE Center for Eating Disorders at Denver Health unveiled the **ACUTE Wellness Garden.**

Caring for Denver gave Denver Health a grant to create a **crisis response resource called TRUST** (Therapeutic Response and Urgent Stabilization Team) which supports students attending Denver Public Schools.

NOVEMBER



Denver Health unveiled its newest **Mobile Health Center** which brings methadone treatment for opioid use disorder to two of Denver Health's primary care clinics, the Bernard F. Gipson Eastside and Sam Sandos Westside Family Health Centers.

Denver Health announced a **partnership with Food Bank of the Rockies** to provide free, nutritious food boxes to Denver-area patients that have certain health-risk factors and have screened positive for food insecurity.

A team at Denver Health led by **Holly Frost, MD**, developed a **clinical care guideline to reduce unnecessary antibiotic prescriptions for conjunctivitis in children.**

DECEMBER



Jorge Avendaño-Curiel was appointed as **Denver Health's chief diversity, equity, inclusion and belonging (DEIB) officer.**

Denver Health **CEO Donna Lynne** was selected as an Axios Denver Power Player, recognizing her **outstanding contributions to the Denver community.**



Denver Health opened the **EMS Lounge**, providing a comfortable space for paramedics and EMTs to recharge, grab a snack and finish their patient hand-off work in a dedicated space.



03

**Denver Health
Performance**

Article V

5.1 Annual Report of the Denver Health and Hospital Authority to the City

The Authority shall deliver a written annual report to the City within six months of the end of its Fiscal Year, commencing with Fiscal Year 1998, which report shall include:

A. The latest financial statements of the Authority which have been audited by an independent auditing firm selected by the Authority.

Response: Criteria met

The Authority has provided the City with the appropriate financial statements which have been audited by an independent auditing firm. The 2023 financial statements are presented in Section 18 of this report.

B. An executive summary of the results of all regulatory and accreditation surveys with respect to the Authority which have been completed during such last Fiscal Year.

Response: Criteria met

A summary of the results of all regulatory and accreditation surveys with respect to the Authority is presented in Section 03 of this report.

C. A report of the disposition of all matters regarding the Authority that have been referred to the Liaison by the Mayor or any member of City Council during such Fiscal Year.

Response: Criteria met

All matters referred to the Liaison have been promptly addressed.

DENVER HEALTH REGULATORY SURVEYS 2023			
Organization	DH Program/Site or Issue Surveyed	Survey/ Inspection Date	Term
CDPHE/Mammography Quality Standards Act	Denver Health Mammography and Mobile Mammography "new" mobile clinic	9/19/2023	1-2 years
Signal Behavioral Health Network	OBHS 667 Bannock Street (Methadone program)	4/13/2023	1 year
Signal Behavioral Health Network	Denver CARES 1155 Cherokee St	5/31/2023	1 year
Colorado State Board of Pharmacy	Bruce Randolph Middle School, School Based Health Center	11/13/2023	1-2 years
Colorado State Board of Pharmacy	Denver CARES 1155 Cherokee St	8/1/2023	1-2 years
Colorado State Board of Pharmacy	Denver Health Central Fill Pharmacy, 500 Quivas	10/27/2023	1-2 years
Colorado State Board of Pharmacy	Denver Health Materials Management Warehouse	11/15/2023	1-2 years
Colorado State Board of Pharmacy	Denver Health Medical Center Hospital Pharmacy, 777 Bannock St	11/15/2023	1-2 years
Colorado State Board of Pharmacy	Denver Health Medical Center Hospital Pharmacy, 790 Delaware St	11/15/2023	1-2 years
Colorado State Board of Pharmacy	Denver Health Outpatient Medical Center Infusion and Clinics Pharmacy	11/15/2023	1-2 years
Colorado State Board of Pharmacy	Denver Health Primary Care Pharmacy, 301 W 6th Ave	11/1/2023	1-2 years
Colorado State Board of Pharmacy	Eastside Family Health Center Teen Clinic	11/27/2023	1-2 years
Colorado State Board of Pharmacy	Eastside Neighborhood Health Center	11/27/2023	1-2 years
Colorado State Board of Pharmacy	Federico F. Pena Family Health Center	10/30/2023	1-2 years
Colorado State Board of Pharmacy	Florence Crittenton High School	3/3/2023	1-2 years
Colorado State Board of Pharmacy	La Casa-Quigg Newton Health Center Pharmacy	7/31/2023	1-2 years
Colorado State Board of Pharmacy	Lowry Family Health Center Pharmacy	5/10/2023	1-2 years
Colorado State Board of Pharmacy	Montbello Family Health Center Pharmacy	10/19/2023	1-2 years
Colorado State Board of Pharmacy	Montbello High School	9/11/2023	1-2 years
Colorado State Board of Pharmacy	Thomas Jefferson High School	9/8/2023	1-2 years
Colorado State Board of Pharmacy	Urgent Care at Federico F Pena Family Health Center	8/3/2023	1-2 years
Colorado State Board of Pharmacy	Westside Neighborhood Health Center	11/1/2023	1-2 years
Denver Fire Department	Denver Health Pav A	8/24/2023	1 year
Denver Fire Department	Park Hill Family Health Center	11/9/2023	1 year
Denver Fire Department	Westside Neighborhood Health Center	10/24/2023	1 year
Denver Fire Department	Montbello Family Health Center	11/9/2023	1 year
Denver Fire Department	Denver Health 55 W 5th Ave	5/10/2023	1 year
Denver Fire Department	LaCasa Family Health Center	3/16/2023	1 year
Denver Fire Department	Westwood Family Health Center	11/14/2023	1 year
Denver Fire Department	Pena Southwest Family Health Center	5/25/2023	1 year
Denver Fire Department	Denver CARES 1155 Cherokee St	11/21/2023	1 year
Denver Fire Department	Lowry Family Health Center	11/16/2023	1 year
Denver Fire Department	Denver Health Pav C	8/23/2023	1 year
Denver Fire Department	Denver Health Pav B	8/23/2023	1 year
Denver Fire Department	Denver Health Pav M	8/23/2023	1 year
Denver Fire Department	Denver Health Davis Pavilion	8/23/2023	1 year
Denver Fire Department	Denver Health Pav K	8/23/2023	1 year
Denver Fire Department	Denver Health Pav L	12/27/2023	1 year
Denver Fire Department	Denver Health Pav I	8/23/2023	1 year
EcoSure	Good Day Café	6/8/2023	1 year

DENVER HEALTH REGULATORY SURVEYS 2023			
Organization	DH Program/Site or Issue Surveyed	Survey/ Inspection Date	Term
Vaccines For Children / CDPHE Site Visit	Evie Dennis Campus	2/6/2023	2 years
Vaccines For Children / CDPHE Site Visit	John F. Kennedy High School	2/7/2023	2 years
Vaccines For Children / CDPHE Site Visit	North High School	2/7/2023	2 years
Vaccines For Children / CDPHE Site Visit	Lake Middle School	2/8/2023	2 years
Vaccines For Children / CDPHE Site Visit	Kepner Middle School	2/13/2023	2 years
Vaccines For Children / CDPHE Site Visit	South High School	2/17/2023	2 years
Vaccines For Children / CDPHE Site Visit	Kunsmiller Creative Arts Academy	2/24/2023	2 years
Vaccines For Children / CDPHE Site Visit	West High School	2/27/2023	2 years
Vaccines For Children / CDPHE Site Visit	Denver School Based Health/DHIP	2/28/2023	2 years
Vaccines For Children / CDPHE Site Visit	Florence Crittenton	3/13/2023	2 years
Vaccines For Children / CDPHE Site Visit	Rachel B. Noel Middle School	3/14/2023	2 years
Vaccines For Children / CDPHE Site Visit	OMC Primary Care (Formerly LOP)	3/16/2023	2 years
Vaccines For Children / CDPHE Site Visit	Place Bridge Academy	3/16/2023	2 years
Vaccines For Children / CDPHE Site Visit	Westside Pediatric and Teen	3/22/2023	2 years
Vaccines For Children / CDPHE Site Visit	MLK Jr Early College	3/22/2023	2 years
Vaccines For Children / CDPHE Site Visit	Mobile Clinics	7/20/2023	2 years
Vaccines For Children / CDPHE Site Visit	Montbello High School	9/13/2023	2 years
Vaccines For Children / CDPHE Site Visit	LaCasa/Quigg Newton	10/4/2023	2 years
Vaccines For Children / CDPHE Site Visit	DHMC Inpatient Pediatrics	10/11/2023	2 years
Vaccines For Children / CDPHE Site Visit	Westwood FHC	12/6/2023	2 years
Vaccines For Children / CDPHE Site Visit	Pena Southwest FHC	12/7/2023	2 years
Vaccines For Children / CDPHE Site Visit	Lowry FHC	12/13/2023	2 years

DENVER HEALTH PLANNED REGULATORY VISITS 2023			
Organization	DH Program/Site or Issue Surveyed	Survey/Inspection Date	Outcome
Behavioral Health Administration	BHS Adolescent 3.7 Withdrawal Management	5/8/2023	First provisional
Behavioral Health Administration	BHS Adolescent 3.7 Withdrawal Management	8/8/2023	Second provisional given
Behavioral Health Administration	BHS Adolescent 3.7 Withdrawal Management	12/10/2023	Fully licensed
Behavioral Health Administration	STEP	12/12/2023	Zero deficiencies
Behavioral Health Administration	Denver CARES	12/12/2023	Zero deficiencies
Behavioral Health Administration/27-65	PSYCH 27-65 audit for 2022	1/1/2023	Zero deficiencies
Behavioral Health Administration/27-65	PSYCH 27-65 audit for 2023	12/13/2023	Zero deficiencies

DENVER HEALTH UNANNOUNCED REGULATORY VISITS 2023

DENVER HEALTH UNANNOUNCED REGULATORY VISITS 2023			
Organization	DH Program/Site or Issue Surveyed	Survey/Inspection Date	Outcome
CDPHE	Licensure/ certification complaint	8/22-8/28/2023	Zero deficiencies
CDPHE	Licensure/certification complaint	9/13-9/20/2023	Zero deficiencies
CDPHE	Licensure complaint / certification complaint	10/3-10/4/2023	Zero deficiencies
CDPHE	EMTALA	11/30-12/13/2023	Zero deficiencies
CDPHE	Licensure complaint / certification complaint	11/30-12/13/2023	One deficiency cited (1/17/2024 re-visit – completed)
CDPHE	CDPHE Hazardous Material and Waste Management Division	5/17/2023	Findings with action plans (completed)
DDPHE	Health inspection in Good Day Café	3/14/2023	1 finding identified, corrected during survey, no re-visit needed.
Drug Enforcement Agency	Medication Assisted Treatment	1/17/2023	Zero deficiencies
The Joint Commission	Hospital Survey (4 day)	4/1/2023	Findings with action plans (completed)
The Joint Commission	Behavioral Health Care & Human Services	1/26/23 - 1/27/23	Findings with action plans (completed)



04

A-1 Patient Care Services



Appendix A-1 Patient Care Services

1.5 Performance Criteria

A. The Authority shall submit an annual report to the City which includes the data indicated below in the Performance Criteria tables in 1.5(g) and 1.5(h) for the year just ended, as well as the two previous Fiscal Years, by May 1 following the reporting year.

Response: Criteria met

The Authority respectfully submits for consideration the *2023 Report to the City* dated April 30, 2024 in compliance with the 2023 Operating Agreement performance reporting requirements.

G. Performance Criteria Table - Clinical

(I-W numbering follows the Authority's annual report).

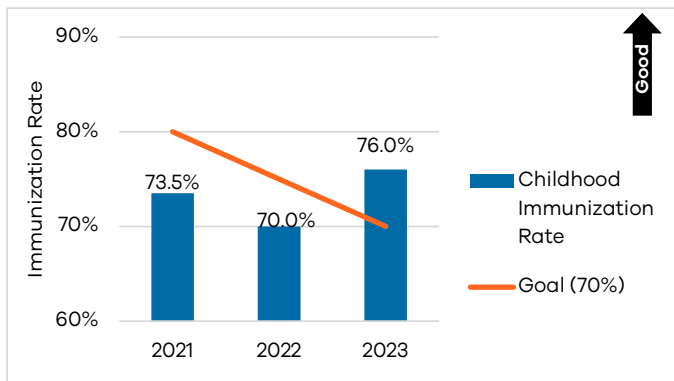
For all criteria, active patients are defined as empaneled patients who have had a Primary care visit in the past 18 months.

For performance criteria without goals or targets, a trend line is provided.

1.5I Childhood Immunization Rate

Goal: At least 70% of patients with at least one medical visit in the last year who became 24 mos of age in last year who have received 4 DTap, 3 Polio, 1 MMR, 3 HIB, 3 Hepatitis B, 1 Varicella, 4 Pneumococcal immunizations, 1 Hepatitis A, and 2 or 3 Rotavirus by 24 mos of age.

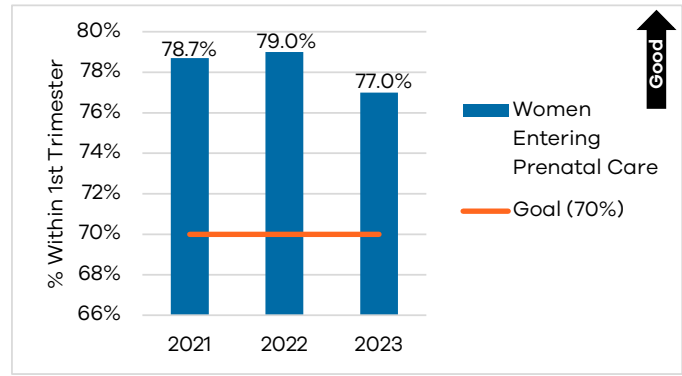
Response: Criteria met.



1.5J Percent Women Entering Prenatal Care

Goal: At least 70% of women will begin care within the 1st trimester.

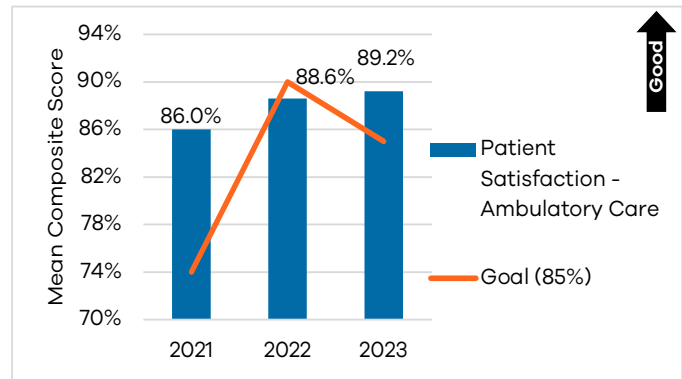
Response: Criteria met



1.5L Patient Satisfaction

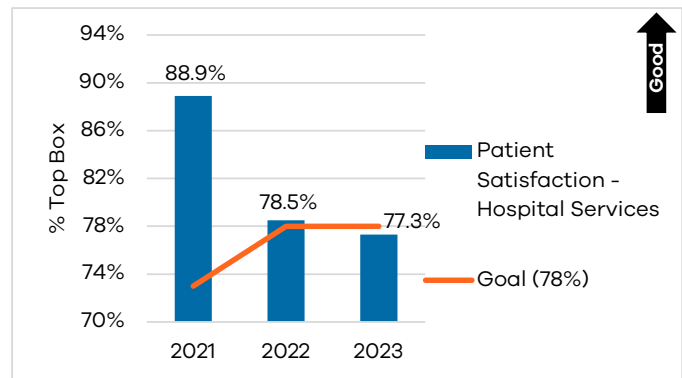
Goal - Ambulatory Care: The mean composite patient experience score in primary care will be 85% or greater.

Response: Criteria met



Goal - Hospital Care: 78% of hospitalized patients will respond with a 9 or a 10 ("top box") for overall patient satisfaction.

Response: Criteria not met



Variance Explanation:

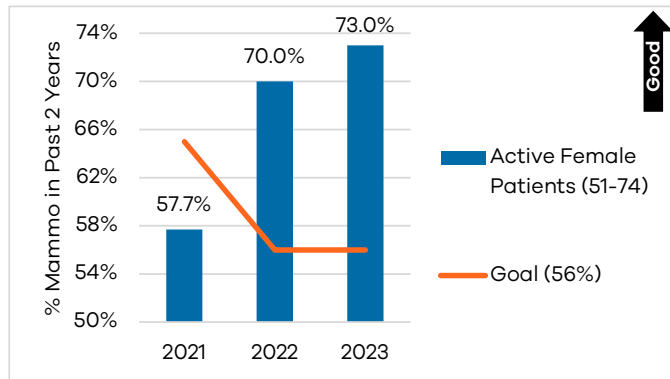
DH continues to be ranked in the top 25% of hospitals for this metric, however Patient Experience scores in hospitals across the country were down in 2023 - the average hospital saw a 1.5% decrease for this metric. DH has several

initiatives planned in 2024 that will help to meet the goal, including: providing additional training to develop service excellence skills, increasing senior and frontline leadership present through rounding on patients/staff, and enhancing communication and language support services to improve Patient Education materials.

1.5M Breast Cancer Screening

Goal: 56% of active female patients age 51 to 74 years will have a mammogram in the past 2 years.

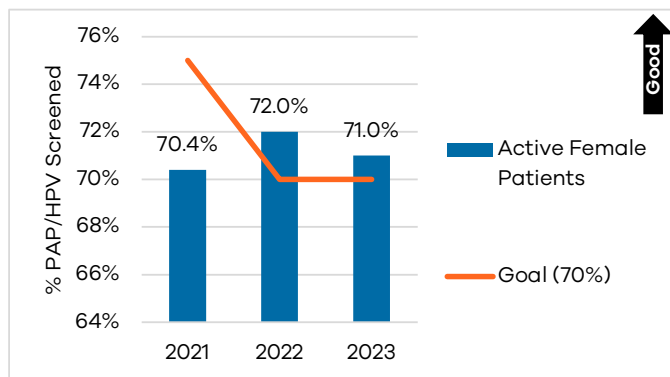
Response: Criteria met



1.5N Cervical Cancer Screening

Goal: 70% of active female patients age 24-64, will have had a PAP test in the past three years or a PAP+HPV in the past 5 years (age 30-64).

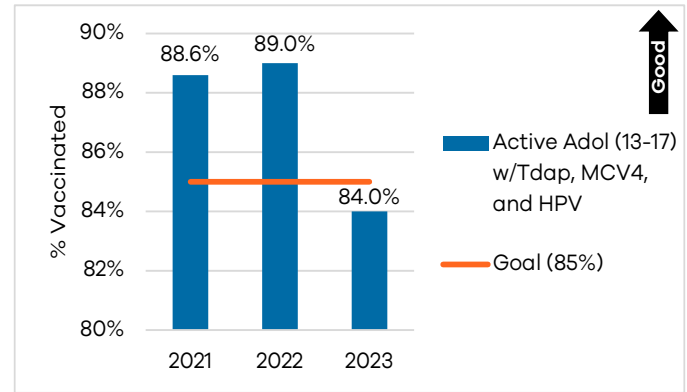
Response: Criteria met



1.5O Adolescent Vaccinations

Goal: 85% of active adolescent patients, age 13-17, will have at least one does each of Tdap, MCV4, and HPV vaccine.

Response: Criteria not met



Variance Explanation:

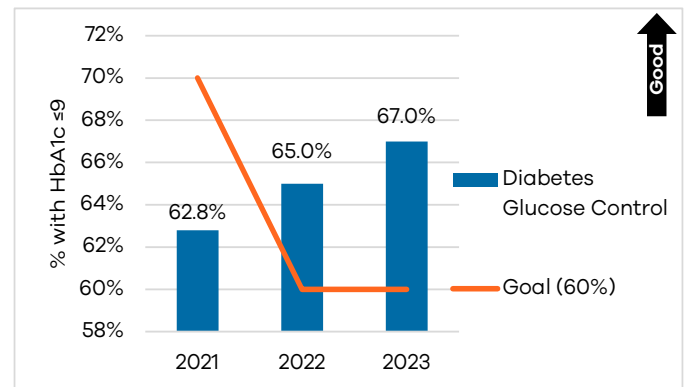
While the primary reason for not achieving the target is unclear, the likely cause is staff turnover, specifically Medical Assistants who administer the vaccines. DH Ambulatory Care Services (ACS) will perform an analysis of possible etiologies to determine an appropriate intervention.

1.5P Diabetes Monitoring

A "diabetic patient" is an adult in the diabetes registry with at least one diagnosis code for diabetes in the last 18 months.

Goal - Diabetes Glucose Control: 60% of Diabetic patients will have an HbA1c < 9.

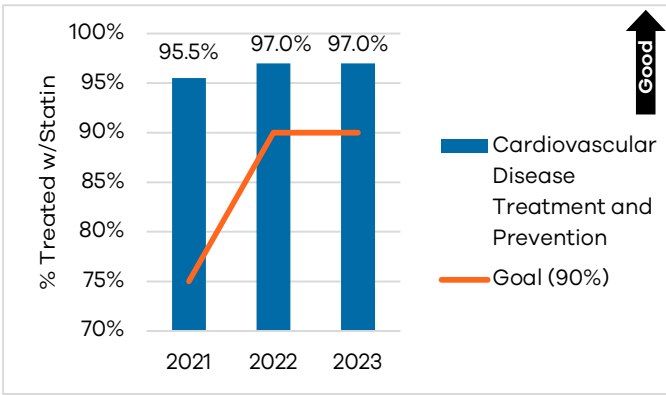
Response: Criteria met



Goal - Cardiovascular Disease Treatment and Prevention:

90% of Diabetic patients will receive guideline-adherent treatment with statin medication.

Response: Criteria met

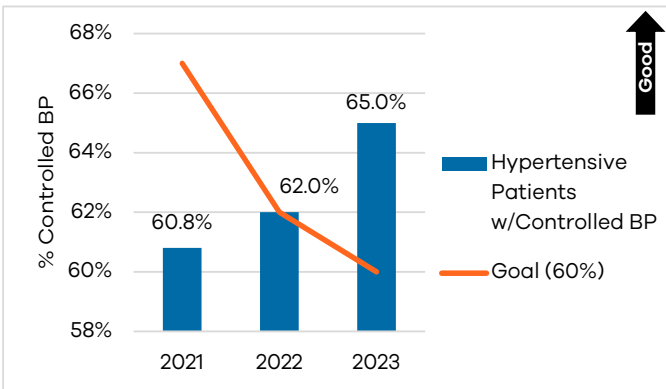

Variance Explanation:

ACS Primary Care continues to be challenged with turnover and competing priorities. The issue is training for new Medical Assistants and prioritizing this specific metrics. Mitigation strategies include: encouraging other team members to address and document cessation efforts, training new Medical Assistants, and re-prioritizing this specific metric. ACS made this a strategic indicator for 2024 to prioritize efforts toward smoking cessation for our population.

1.5Q Hypertension Control

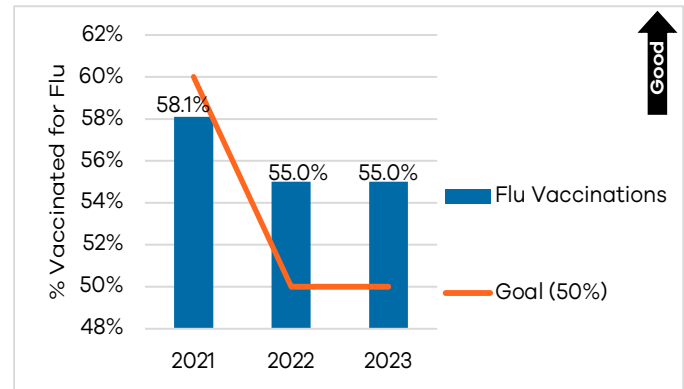
Goal: 60% of patients identified with hypertension will have their blood pressure under control as defined by current standards.

Response: Criteria met


1.5S Flu Vaccinations

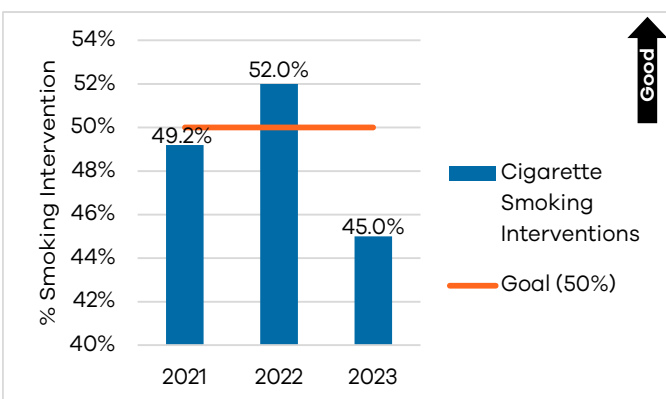
Goal: 50% of patients, 6 months of age or older who have had a visit to a primary care clinic during the influenza season and who do not have a contraindication to vaccination will receive the influenza vaccine.

Response: Criteria met


1.5R Cigarette Smoking Interventions

Goal: At least 50% of patients 11 years and older who smoke, had a visit in their medical home in the last month (and at least one other in the past year) and who received an approved cessation intervention anywhere at Denver Health in the past 6 months.

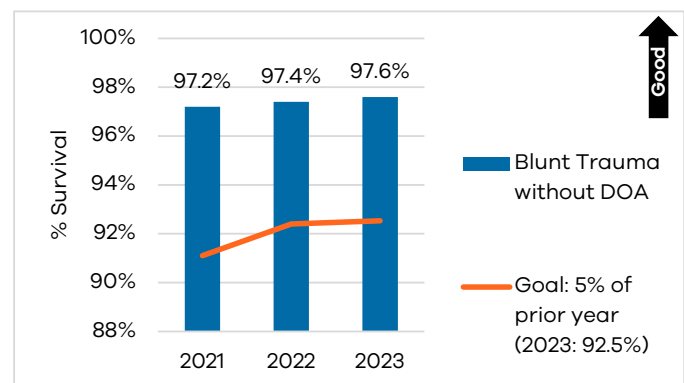
Response: Criteria not met


1.5T Survival with Trauma

Survival rate for blunt and penetrating trauma among patients who are not dead on arrival (DOA) will be maintained within 5% of prior year experience.

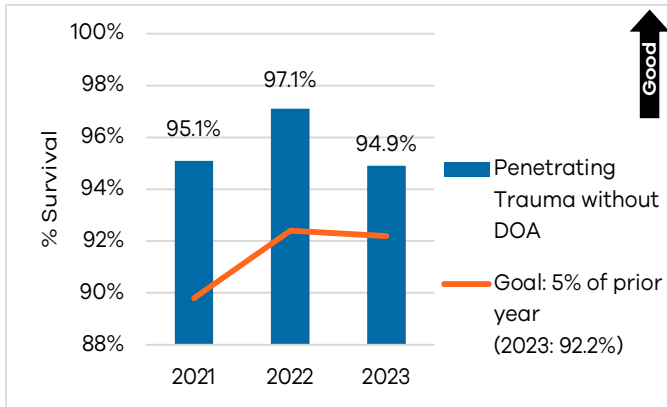
Goal - Blunt: Survival rate for blunt trauma will be maintained within 5% of 2022 experience, which was 97.4%.

Response: Criteria met



Goal - Penetrating: Survival rate for penetrating trauma will be maintained within 5% of 2022 experience, which was 97.1%

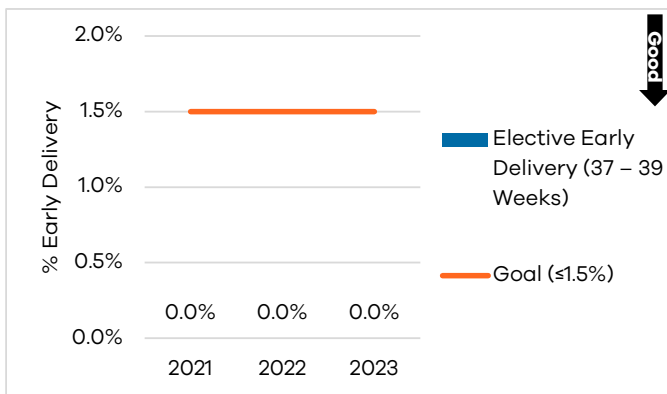
Response: Criteria met



1.5U Clinical Quality Measures. Early Elective Delivery between 37-39 Weeks Gestation

Goal: The rate of elective delivery between 37-39 weeks as defined by the Joint Commission measure PC-01 will be maintained at 1.5% or lower.

Response: Criteria met



1.5V Hospital-Acquired Infection Rates. Adult Critical Care Central Line Associated Blood Stream Infection (CLABSI)

Goal - Medical Intensive Care Unit: Risk-adjusted rate that is the same or better than the national Medical ICU rate per the National Healthcare Safety Network.

Goal - Trauma Intensive Care Unit: Risk-adjusted rate that is the same or better than the national Trauma ICU rate per the National Healthcare Safety Network.

Response: Criteria met

Contract Criterion	2021	2022	2023
Hospital-Acquired Infection Rates			
Adult Critical Care Central Line Associated Blood Stream Infection (CLABSI)			
Medical Intensive Care Unit	Same	Same	Same
Trauma intensive Care Unit	Same	Same	Same

1.5W HIV Prevention - Pre and Post Exposure

Response: Criteria met

Contract Criterion	2021	2022	2023
HIV Prevention - Pre and Post Exposure			
Number of persons started on Pre-Exposure Prophylaxis (PrEP) in STD Clinic/Ambulatory Care	724	1230	1104
Number of persons who receive non-occupational Post-Exposure Prophylaxis (PEP) in STD Clinic only	105	105	143

H. Performance Criteria Table - Ambulatory Encounters (1.5 numbering follows the Authority's annual report)

Response: Criteria met

See table below for details.

Statistic	2021	2022	2023	Trend
DH Medicaid Choice Average Monthly Enrollment	107,637	110,350	101,462	
Inpatient Admissions	21,579	21,374	22,235	
Inpatient Days (Equivalent Census Days)	135,570	129,678	127,409	
Emergency Room Encounters	80,804	84,700	90,334	
Urgent Care Visits ¹	84,402	102,979	108,816	
ER Cost/Visit	\$908	\$1,035	\$1,215	
Top 25 DRGs for MI population	See Final DRG Table			
NICU days	5,707	5,782	5,304	
CT Scans	69,450	69,384	76,283	
MRIs	16,441	17,434	18,447	
Outpatient Surgeries	8,992	9,225	10,551	
Ambulatory Care Encounters (reported volumes are building-based)				
Ambulatory Care Center ²	157,435	210,060	221,595	
Webb Center for Primary Care ³	100,773	81,703	88,012	
Gipson Eastside Family Health Center ⁴	83,157	82,582	82,675	
Sandos Westside Family Health Center ⁵	81,137	80,134	81,433	
Lowry Family Health Center ⁶	55,118	54,032	60,279	
Montbello Health Center ⁶	39,735	39,585	39,854	
Park Hill Family Health Center ⁶	22,564	21,721	19,694	
La Casa/Quigg Newton Family Health Center ⁷	24,267	24,358	22,622	
Westwood Family Health Center ⁷	22,533	22,793	23,276	
Federico Pena Family Health Center ⁸	83,528	83,689	84,467	
Sloan's Lake Health Center ⁹	12,227	14,092	15,685	
Other ¹⁰	231,827	241,728	269,294	
OP Behavioral Health Visits ¹¹	252,715	249,333	245,375	
Total Ambulatory Care Encounters	1,167,016	1,205,810	1,254,261	
OP Pharmacy Cost/per patient	\$70	\$85	\$81	

¹Includes Adult Urgent Care Clinic (AUCC), Downtown Urgent Care (DUC), Pediatric Urgent Care (PEDUC), Pena Urgent Care, and Virtual Urgent Care

²Includes ACS services provided in Outpatient Medical Center (OMC): Adult, AUCC, Dental, ENT, Eye, IBH (Integrated Behavioral Health) NOTE: OMC opened in Q2 2021; reported 2020 volume is from Davis pavilion clinics that relocated to OMC.

³Includes ACS services: Adult, Geriatrics, IOC, Pediatrics, Pediatric Dental, Pediatric Specialty

⁴Includes ACS services: Adult, Dental, IBH, Pediatrics, Rehab, and Womens Care

⁵Includes ACS services: Adult, Dental, IBH, Pediatrics, Rehab, and Womens Care

⁶Includes ACS services: Dental, Family Medicine, and IBH

⁷Includes ACS services: Family Medicine and IBH

⁸Includes ACS services: Dental, Family Medicine, IBH, and Urgent Care

⁹New Denver Health Clinic not identified in current Operating Agreement language. Location opened Q3 2020. Includes ACS services: Family Medicine and IBH

¹⁰Includes services at clinics not included in building-based volumes: Chanda, Rose Andom, all Mobile Clinics, SBHC, SAFE (FCC), MHCD, Pav B/C Women's Care, AUCC, Ortho, OT, PT, and ST

¹¹Includes OBHS clinics: DH PAV G CHILD MEN, DH PAV G STEP, DH PAV K METHADONE, DH PAV K SUBOXONE, DH PAV L ADT BEHHEALTH as well as Methadone and Suboxone doses

I. The Authority's Medical Center's observed total inpatient mortality will be the same or better than the expected as measured by Vizient, the largest member-driven health care performance improvement company in the country.

Response: Criteria met

For the most recent full year of data available from Vizient (January 2023–December 2023), Denver Health's observed inpatient mortality was 16% better than the expected mortality, adjusted for patient complexity.

J. The Authority will maintain appropriate accreditation for the major national accrediting organizations as a measure of quality care.

Response: Criteria met

Denver Health maintains full accreditation from The Joint Commission on five distinct regulatory surveys covering 1) the hospital and specialty clinics, 2) the federally qualified health centers and school-based clinics, 3) the hospital laboratory, 4) the ambulatory care services laboratory, and 5) the opioid treatment program. In 2023, The Joint Commission conducted surveys of the hospital and specialty clinics as well as behavioral health care and human services, resulting in maintenance of full accreditation.

K. The Authority will maintain national Residency Review Committee accreditation for its training programs.

Response: Criteria met

Denver Health enjoys Continued Accreditation from ACGME for its three accredited medical residencies, Approval without Reporting Requirements from CODA for its three dental residencies, and Transferred Accreditation from CPME for its podiatry residency. In addition, Denver Community Health Services has received initial Accreditation for a new Family Medicine residency it is opening in June 2024.

L. The Authority will include in the May 1 annual report, a schedule of the number of patients treated during the reporting year by county, gender and ethnicity. The Authority will develop a report of the same data by census tract or zip code for Denver users. A separate report will be prepared detailing the same information for the homeless.

Response: Criteria met

See tables on the following pages for details.

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Top 25 DRG's for Medically Indigent Population					
2023 Rank	DRG#	DRG NAME	Total	2022 Rank	2021 Rank
1	871	SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITH MCC	106	2	2
2	807	VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITHOUT CC	67	5	3
3	885	PSYCHOSES	64	1	1
4	392	ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITHOUT MCC	60	N/A	N/A
5	917	POISONING AND TOXIC EFFECTS OF DRUGS WITH MCC	58	10	6
6	794	NEONATE WITH OTHER SIGNIFICANT PROBLEMS	48	3	9
7	872	SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITHOUT MCC	43	7	8
8	603	CELLULITIS WITHOUT MCC	39	12	10
9	419	LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITHOUT CC/MCC	36	14	N/A
10	189	PULMONARY EDEMA AND RESPIRATORY FAILURE	30	N/A	14
11	640	MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM , FLUIDS AND ELECTROLYTES WITH MCC	29	16	N/A
12	621	O.R. PROCEDURES FOR OBESITY WITHOUT CC/MCC	28	4	N/A
13	394	OTHER DIGESTIVE SYSTEM DIAGNOSES WITH CC	26	N/A	N/A
13	854	INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURE WITH CC	26	N/A	N/A
15	641	MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM , FLUIDS AND ELECTROLYTES WITHOUT MCC	25	9	N/A
15	661	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITHOUT CC/MCC	25	N/A	7
15	897	ALCOHOL, DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT MCC	25	15	5
15	795	NORMAL NEWBORN	25	22	N/A
15	494	LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITHOUT CC/MCC	25	26	21
20	690	KIDNEY AND URINARY TRACT INFECTIONS WITHOUT MCC	22	N/A	N/A
21	65	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH CC OR TPA IN 24 HOURS	21	N/A	N/A
21	896	ALCOHOL, DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITH MCC	21	20	N/A
23	639	DIABETES WITHOUT CC/MCC	20	N/A	N/A
23	391	ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITH MCC	20	N/A	N/A
25	193	SIMPLE PNEUMONIA AND PLEURISY WITH MCC	19	11	N/A

L.

Unduplicated Users and Patient Visits by Colorado County				
	2021	2022	2023	Trend
Total Unduplicated Users	316,953	262,119	269,258	
Total Visits	1,463,463	1,269,472	1,323,274	

Unduplicated Users and Patient Visits by Colorado County								
County	2021		2022		2023		Trend	
	Users	Visits	Users	Visits	Users	Visits	Users	Visits
Adams	28,873	134,795	26,469	126,503	27,253	130,941		
Alamosa	31	128	33	108	31	90		
Arapahoe	35,435	157,303	30,072	143,223	31,511	147,979		
Archuleta	13	30	7	84	10	21		
Baca	4	8	4	8	2	8		
Bent	12	82	8	29	12	60		
Boulder	2,311	6,509	1,650	5,782	1,618	5,545		
Broomfield	1,033	4,026	770	3,040	780	3,040		
Chaffee	42	95	47	97	39	102		
Cheyenne	4	13	5	19	4	6		
Clear Creek	171	630	140	520	148	542		
Conejos	14	34	14	42	16	28		
Costilla	9	23	11	36	14	38		
Crowley	3	5	5	28	3	17		
Custer	11	23	7	36	9	34		
Delta	21	74	25	68	19	38		
Denver	189,600	945,540	163,550	826,591	166,423	861,647		
Dolores	6	15	1	3	4	5		
Douglas	4,896	16,622	2,954	12,093	3,073	12,567		
Eagle	184	498	244	601	223	493		
El Paso	1,221	3,465	1,185	3,276	1,315	3,879		
Elbert	176	574	115	405	118	406		
Fremont	56	168	36	127	42	154		
Garfield	91	321	79	241	80	281		
Gilpin	76	227	61	164	48	151		
Grand	1,713	5,840	1,112	4,161	1,016	3,878		
Gunnison	34	73	21	40	26	53		
Hinsdale	0	0	1	3	0	0		
Huerfano	17	61	10	28	13	55		
Jackson	7	22	4	9	2	11		
Jefferson	30,270	135,782	23,568	110,964	23,482	113,078		
Kiowa	1	2	3	4	2	7		
Kit Carson	11	68	23	88	20	112		
La Plata	32	49	40	96	46	99		
Lake	42	131	43	98	33	68		
Larimer	714	1,991	528	1,206	570	1,458		
Las Animas	18	89	21	133	23	152		
Lincoln	57	237	52	194	41	137		
Logan	41	246	43	149	49	157		

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Unduplicated Users and Patient Visits by Colorado County								
County	2021		2022		2023		Trend	
	Users	Visits	Users	Visits	Users	Visits	Users	Visits
Mesa	109	283	77	165	90	207		
Mineral	1	8	1	1	0	0		
Moffat	14	48	14	33	16	47		
Montezuma	21	49	21	47	10	45		
Montrose	33	62	23	58	26	51		
Morgan	105	392	130	401	128	456		
Otero	20	82	25	118	36	142		
Ouray	7	15	1	9	2	3		
Park	180	489	141	421	136	453		
Phillips	7	26	6	11	8	12		
Pitkin	29	73	21	23	13	50		
Prowers	20	81	16	57	18	77		
Pueblo	261	910	236	806	229	753		
Rio Blanco	6	11	4	30	5	9		
Rio Grande	29	62	33	118	27	52		
Routt	55	122	53	160	60	148		
Saguache	11	27	10	43	10	36		
San Juan	0	0	0	0	3	3		
San Miguel	9	11	9	16	6	13		
Sedgwick	4	16	7	38	6	27		
Summit	173	525	199	527	194	494		
Teller	35	106	34	90	19	66		
Washington	25	115	25	75	17	48		
Weld	1,549	5,644	1,367	5,242	1,436	5,151		
Yuma	19	54	17	36	13	19		
Blank/Unknown	16,981	38,453	6,688	20,650	8,632	27,575		
Total	316,953	1,463,463	262,119	1,269,472	269,258	1,323,274		

L.

Unduplicated Users and Patient Visits by Denver County Zip Code				
	2021	2022	2023	Trend
Total Unduplicated Users	203,120	169,910	173,638	
Total Visits	986,481	848,481	889,261	

Unduplicated Users and Patient Visits by Denver County Zip Code								
Zip Code	2021		2022		2023		3-Year Trend	
	Users	Visits	Users	Visits	Users	Visits	Users	Visits
80201	208	1,161	154	949	144	936		
80202	4,307	16,027	3,730	13,924	3,667	14,150		
80203	6,720	30,293	5,680	25,000	5,804	26,431		
80204	24,141	116,316	19,423	98,676	20,615	102,726		
80205	12,278	60,913	10,346	52,668	10,690	54,363		
80206	4,087	17,379	2,724	12,226	2,680	13,173		
80207	5,420	27,434	4,298	23,090	4,072	22,068		
80208	29	97	16	41	29	81		
80209	3,748	14,010	2,563	10,540	2,421	10,538		
80210	4,175	15,599	2,633	11,306	2,665	12,316		
80211	8,588	40,540	6,587	31,828	6,699	32,897		
80212	3,187	14,395	2,208	11,104	2,262	11,322		
80216	6,062	31,099	5,711	29,909	5,881	29,981		
80217	66	232	40	112	38	130		
80218	4,651	20,821	3,673	16,336	3,541	16,615		
80219	34,092	185,290	30,357	164,431	29,809	168,488		
80220	6,869	31,968	5,249	26,575	5,475	28,064		
80222	3,944	20,130	3,157	16,528	3,271	17,593		
80223	9,136	50,474	7,896	43,499	7,861	44,788		
80224	3,625	17,201	3,055	14,980	3,264	16,804		
80227	4,689	22,548	3,881	19,358	3,838	20,039		
80230	1,651	7,461	1,262	6,325	1,297	6,208		
80231	6,547	30,282	5,607	26,664	6,132	30,516		
80235	938	4,500	726	3,726	696	3,833		
80236	4,458	22,383	3,868	19,527	3,739	20,140		
80237	2,756	12,275	2,162	10,550	2,172	10,610		
80238	2,629	10,092	1,666	7,372	1,873	8,757		
80239	17,441	86,528	16,155	77,971	16,469	84,228		
80243	3	4	4	7	7	29		
80244	5	22	3	25	4	6		
80246	2,340	10,719	2,101	10,616	2,474	12,411		
80247	5,574	26,565	4,762	23,580	5,038	26,002		
80248	7	41	4	16	6	24		
80249	8,639	41,115	8,133	38,620	8,940	42,675		
80250	73	456	36	310	30	218		
80251	1	16	1	1	0	0		
80252	1	2	1	1	1	1		
80256	1	2	0	0	2	2		
80257	0	0	1	1	0	0		
80259	2	4	1	2	1	7		
80261	8	12	11	23	6	12		
80262	1	2	2	7	1	2		
80263	4	7	2	7	4	15		
80264	0	0	1	2	0	0		



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Unduplicated Users and Patient Visits by Denver County Zip Code								
Zip Code	2021		2022		2023		3-Year Trend	
	Users	Visits	Users	Visits	Users	Visits	Users	Visits
80265	0	0	0	0	0	0		
80266	1	1	3	6	2	3		
80271	0	0	0	0	0	0		
80273	1	1	0	0	0	0		
80274	3	5	5	22	7	27		
80281	1	1	1	3	2	10		
80290	4	14	2	2	1	7		
80291	1	1	1	3	1	3		
80293	3	30	3	5	2	3		
80294	3	8	4	6	4	7		
80299	2	5	1	1	1	2		
Total	203,120	986,481	169,910	848,481	173,638	889,261		

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2023 Unduplicated Users and Visits by Sex Assigned At Birth and Race* (Colorado and Out-of-State Users**)					
		2023		3-Year Trend	
Sex At Birth	Race	Users	Total Visits	Users	Total Visits
F	African-American	18,016	103,620		
F	Amer/Alaskan Native	980	6,160		
F	Asian	5,396	28,342		
F	Hispanic	75,345	433,875		
F	Native-Hawaiian	64	283		
F	Other	5,483	22,169		
F	Oth-Pacific-Islander	378	2,306		
F	Unknown	21	52		
F	White-Caucasian	40,294	183,148		
F	NULL	1,387	1,793		
Female Total		147,364	781,748		
Sex At Birth	Race	Users	Total Visits	Users	Total Visits
M	African-American	16,529	74,439		
M	Amer/Alaskan Native	767	4,454		
M	Asian	4,052	18,677		
M	Hispanic	60,666	265,282		
M	Native-Hawaiian	83	258		
M	Other	5,525	19,215		
M	Oth-Pacific-Islander	299	1,080		
M	Unknown	28	89		
M	White-Caucasian	41,215	166,970		
M	NULL	1,454	1,745		
Male Total		130,618	552,209		
Sex At Birth	Race	Users	Total Visits	Users	Total Visits
Unknown	African-American	23	128		
Unknown	Amer/Alaskan Native	1	9		
Unknown	Asian	9	28		
Unknown	Hispanic	69	389		
Unknown	Other	44	87		
Unknown	Oth-Pacific-Islander	0	0		
Unknown	Unknown	1	1		
Unknown	White-Caucasian	201	1,002		
Unknown	NULL	51	63		
Unknown Total		399	1,707		

Grand Total		278,381	1,335,664		
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* Table uses Derived Race as identified by Epic
 **Out of State users and visits represent 9,123 and 12,390 respectively

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HOMELESS Unduplicated Users and Patient Visits by Colorado County				
	2021	2022	2023	Trend
Total Unduplicated Users	8,587	8,475	14,093	
Total Visits	27,760	29,948	59,303	
































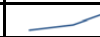





































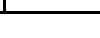








HOMELESS Unduplicated Users and Patient Visits by Colorado County								
County	2021		2022		2023		Trend	
	Users	Visits	Users	Visits	Users	Visits	Users	Visits
Adams	220	552	303	741	617	3,215		
Alamosa	2	2	0	0	2	5		
Arapahoe	274	668	356	1,153	773	4,326		
Archuleta	0	0	1	1	0	0		
Baca	0	0	0	0	0	0		
Bent	1	2	1	1	3	12		
Boulder	24	62	33	151	32	154		
Broomfield	6	22	6	16	11	27		
Chaffee	0	0	2	3	1	3		
Cheyenne	0	0	0	0	1	2		
Clear Creek	4	9	2	12	7	7		
Conejos	0	0	0	0	0	0		
Costilla	2	2	0	0	1	2		
Crowley	0	0	1	4	1	2		
Custer	0	0	0	0	0	0		
Delta	0	0	1	2	2	2		
Denver	7,625	25,396	7,274	26,361	11,654	47,465		
Dolores	0	0	0	0	2	3		
Douglas	20	40	19	70	39	172		
Eagle	1	1	0	0	1	1		
El Paso	15	32	19	53	64	152		
Elbert	3	4	2	2	3	3		
Fremont	0	0	1	6	1	1		
Garfield	0	0	0	0	1	10		
Gilpin	1	2	1	1	0	0		
Grand	1	1	6	8	12	27		
Gunnison	1	1	0	0	0	0		
Hinsdale	0	0	0	0	0	0		
Huerfano	1	1	0	0	0	0		
Jackson	0	0	0	0	0	0		
Jefferson	256	728	301	1,011	562	2,697		
Kiowa	0	0	0	0	1	6		
Kit Carson	0	0	0	0	0	0		
La Plata	0	0	1	1	0	0		
Lake	1	1	0	0	0	0		
Larimer	9	20	8	18	18	47		
Las Animas	2	3	2	4	1	1		
Lincoln	0	0	2	5	1	3		
Logan	0	0	1	1	3	4		

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HOMELESS Unduplicated Users and Patient Visits by Colorado County								
County	2021		2022		2023		Trend	
	Users	Visits	Users	Visits	Users	Visits	Users	Visits
Mesa	3	8	6	10	7	32		
Mineral	0	0	0	0	0	0		
Moffat	1	1	0	0	1	1		
Montezuma	0	0	2	2	1	1		
Montrose	0	0	3	12	2	12		
Morgan	1	6	1	1	2	5		
Otero	1	1	4	9	3	7		
Ouray	0	0	0	0	0	0		
Park	1	1	0	0	5	66		
Phillips	0	0	1	2	1	2		
Pitkin	0	0	0	0	1	7		
Prowers	0	0	1	1	1	1		
Pueblo	6	7	7	11	9	38		
Rio Blanco	0	0	0	0	0	0		
Rio Grande	0	0	0	0	2	4		
Routt	0	0	2	30	0	0		
Saguache	0	0	0	0	0	0		
San Juan	0	0	0	0	0	0		
San Miguel	0	0	0	0	0	0		
Sedgwick	0	0	0	0	1	1		
Summit	4	10	3	7	3	10		
Teller	0	0	0	0	1	3		
Washington	1	3	0	0	0	0		
Weld	12	18	14	36	28	91		
Yuma	0	0	0	0	0	0		
Blank/Unknown	88	156	88	202	211	673		
Total	8,587	27,760	8,475	29,948	14,093	59,303		

L.

HOMELESS Unduplicated Users and Patient Visits by Denver County Zip Code				
	2021	2022	2023	Trend
Total Unduplicated Users	7,673	7,336	11,798	
Total Visits	25,415	26,507	48,027	

HOMELESS Unduplicated Users and Patient Visits by Denver County Zip Code								
Zip Code	2021		2022		2023		3-Year Trend	
	Users	Visits	Users	Visits	Users	Visits	Users	Visits
80201	18	47	28	120	20	204		
80202	60	117	111	519	112	649		
80203	142	330	185	562	304	1,763		
80204	5,323	18,941	4,555	16,431	6,095	20,121		
80205	829	2,817	864	3,362	1,584	6,794		
80206	37	117	49	206	91	576		
80207	53	105	54	173	108	576		
80208	6	8	1	1	7	16		
80209	34	92	25	100	38	305		
80210	38	85	36	114	83	268		
80211	109	279	128	444	278	1,058		
80212	22	41	41	180	60	240		
80216	146	353	154	537	315	1,480		
80217	3	6	3	10	5	14		
80218	92	269	106	317	257	1,273		
80219	221	565	287	982	683	3,615		
80220	100	278	118	588	185	1,326		
80222	26	67	30	72	89	481		
80223	82	192	105	416	208	1,149		
80224	28	70	41	158	105	421		
80227	19	36	30	80	62	384		
80230	11	32	13	55	32	195		
80231	33	83	46	138	152	754		
80235	6	13	10	15	10	75		
80236	30	79	44	212	98	492		
80237	10	13	14	56	34	158		
80238	7	8	8	22	26	103		
80239	112	208	164	358	434	1,983		
80243	0	0	0	0	0	0		
80244	0	0	0	0	0	0		
80246	20	47	29	90	91	503		
80247	22	55	25	105	105	507		
80248	0	0	0	0	0	0		
80249	31	44	28	72	124	536		
80250	2	16	2	9	1	6		
80251	0	0	0	0	0	0		
80252	1	2	1	1	0	0		
80256	0	0	0	0	0	0		
80257	0	0	0	0	0	0		
80259	0	0	0	0	0	0		
80261	0	0	0	0	0	0		
80262	0	0	0	0	0	0		
80263	0	0	0	0	0	0		

L.

HOMELESS Unduplicated Users and Patient Visits by Denver County Zip Code								
Zip Code	2021		2022		2023		3-Year Trend	
	Users	Visits	Users	Visits	Users	Visits	Users	Visits
80264	0	0	0	0	0	0	—	—
80265	0	0	0	0	0	0	—	—
80266	0	0	1	2	0	0	∧	∧
80271	0	0	0	0	0	0	—	—
80273	0	0	0	0	0	0	—	—
80274	0	0	0	0	0	0	—	—
80281	0	0	0	0	0	0	—	—
80290	0	0	0	0	0	0	—	—
80291	0	0	0	0	0	0	—	—
80293	0	0	0	0	0	0	—	—
80294	0	0	0	0	2	2	↗	↗
80299	0	0	0	0	0	0	—	—
Total	7,673	25,415	7,336	26,507	11,798	48,027	↗	↗

L.

2023 HOMELESS Unduplicated Users and Visits by Sex Assigned At Birth and Race*							
Sex At Birth	Race	2023			3-Year Trend		
		Users	Total Visits**	Charges	Users	Visits**	Charges
F	African-American	699	3,180	\$ 11,590,339	↗	↗	↗
F	Amer/Alaskan Native	79	340	\$ 944,882	↘	↘	↘
F	Asian	43	238	\$ 1,138,179	↘	↘	↘
F	Hispanic	2,633	11,390	\$ 31,180,846	↗	↗	↗
F	Native-Hawaiian	3	13	\$ 67,563	↗	↘	↘
F	Other	162	632	\$ 1,407,623	↗	↗	↗
F	Oth-Pacific-Islander	11	53	\$ 126,572	↗	↗	↗
F	Unknown	0	0	\$ -	↘	↘	↘
F	White-Caucasian	1,394	5,869	\$ 30,020,838	↗	↗	↗
F	NULL	38	46	\$ 289,425	↘	↘	↘
Female Total		5,062	21,761	\$ 76,766,266	↗	↗	↗
M	African-American	1,558	6,337	\$ 48,622,075	↗	↗	↗
M	Amer/Alaskan Native	133	907	\$ 3,578,358	↗	↘	↘
M	Asian	72	426	\$ 2,499,181	↘	↘	↘
M	Hispanic	3,527	12,411	\$ 70,323,997	↗	↗	↗
M	Native-Hawaiian	6	25	\$ 103,098	↗	↗	↗
M	Other	310	1,073	\$ 4,639,617	↗	↗	↗
M	Oth-Pacific-Islander	24	76	\$ 265,349	↗	↗	↗
M	Unknown	3	12	\$ 408,389	↘	↘	↘
M	White-Caucasian	3,469	16,563	\$ 116,970,947	↘	↗	↗
M	NULL	55	58	\$ 2,075,937	↘	↘	↘
Male Total		9,157	37,888	\$ 249,486,947	↗	↗	↗
Unknown	African-American	6	7	\$ 27,090	↘	↘	↘
Unknown	Amer/Alaskan Native	-	-	\$ -	↘	↘	↘
Unknown	Hispanic	2	3	\$ 12,121	↘	↘	↘
Unknown	Other	2	2	\$ 7,306	↘	↘	↘
Unknown	Oth-Pacific-Islander	-	-	\$ -	↘	↘	↘
Unknown	White-Caucasian	5	8	\$ 14,510	↗	↗	↗
Unknown	NULL	1	1	\$ 7,122	↗	↗	↗
Unknown Total		16	21	\$ 68,147	↘	↗	↗
Grand Total		14,235	59,670	\$ 326,321,360	↗	↗	↗

* Table uses Derived Race as identified by Epic



05

A-2 Emergency Medical Services

Appendix A-2 Emergency Medical Services

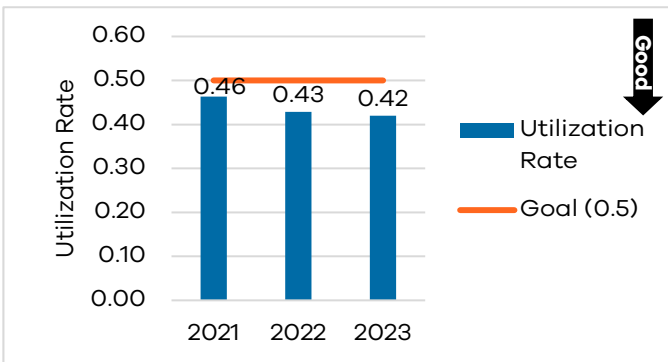
1.5 Performance Criteria

Each component of the Emergency Medical Response Services (EMRS), including the Authority and Department of Safety, and certain stakeholders, including the Mayor’s Office, City Council, and the Auditor’s Office, will designate representation on the EMRS Advisory Committee, which will meet regularly to monitor system performance, identify and recommend strategies for innovation and improvement, and provide the necessary collaboration and accountability to ensure continued high delivery of EMS responses and services. The parties are committed to continuing improvements to overall system performance. The parties further agree to monitor all aspects of EMRS performance, including response times and clinical outcomes, and to work with each other in good faith to identify potential options to achieve the desired EMRS performance, which options may include but are not limited to, revisiting the current EMRS performance metrics, staffing or scheduling changes, alternative response mechanisms, equipment and infrastructure investments.

Response: Criteria met

A. The Utilization/Hour rate will be at or below 0.5 transports/hour (system wide).

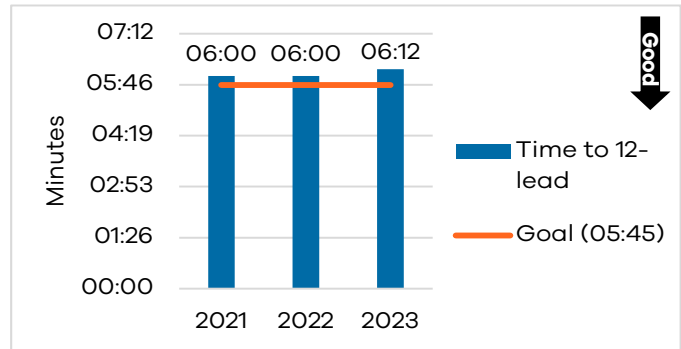
Response: Criteria met



(v) Authority’s Clinical Criteria. The following clinical performance measures for each call will be reported by the Authority in its quarterly performance report:

1. Median elapsed target of 5 minutes 45 seconds or fewer from paramedics’ arrival time to initial recording of 12 lead ECG for suspected cardiac chest pain.

Response: Criteria not met

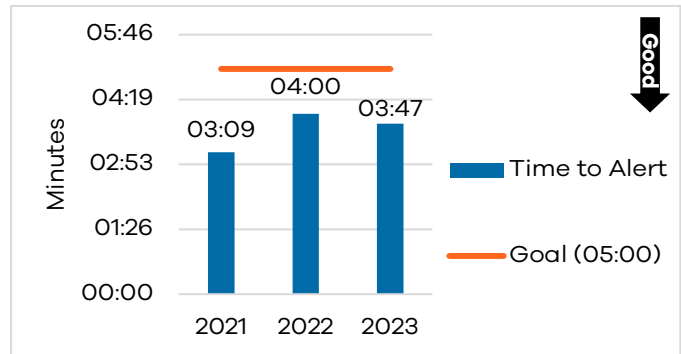


Variance Explanation:

Accurate data collection for 12-lead EKG times remained a challenge in 2023, as this data is often manually entered by personnel. Denver Health Paramedic Division (DHPD) delivered employee education on the importance of cardiac monitor uploads and accurate data entry and have another educational session planned in February of 2024.

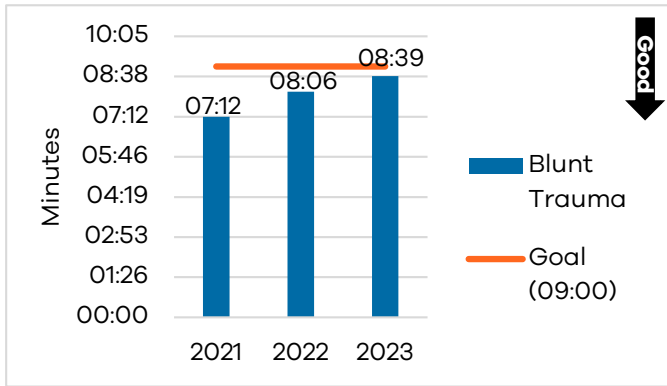
2. Median elapsed target of 5 minutes or fewer from qualifying 12 lead ECG to hospital notification for patients meeting STEMI (cardiac alert) criteria (targets to be added).

Response: Criteria met



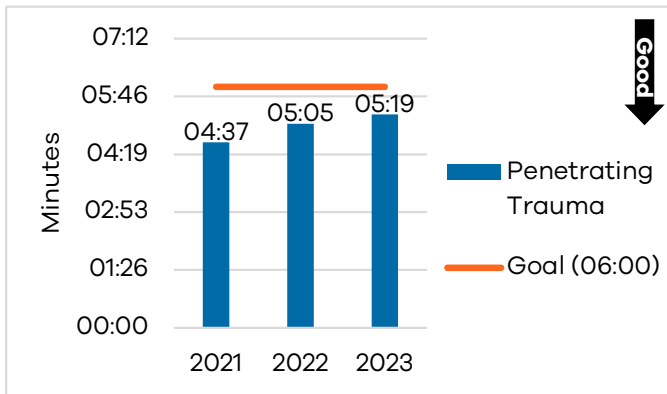
3. Median elapsed transport ambulance scene time of 9 minutes or fewer from time of arrival to departure for blunt trauma patient meeting emergency transport criteria. Exclusions to this are extrication delays, patient access/staging, multiple patient incidents.

Response: Criteria met



4. Median elapsed transport ambulance scene time of 6 minutes or fewer from time of arrival to departure for penetrating trauma patient meeting emergency transport criteria. Exclusions to this are extrication delays, patient access/staging, multiple patient incidents.


Response: Criteria met



Out-of-hospital cardiac arrest survival rate reported under the Utstein Criteria definition for long-term performance purposes and with appropriate identification of comparison date ranges and lags in comparison reporting.

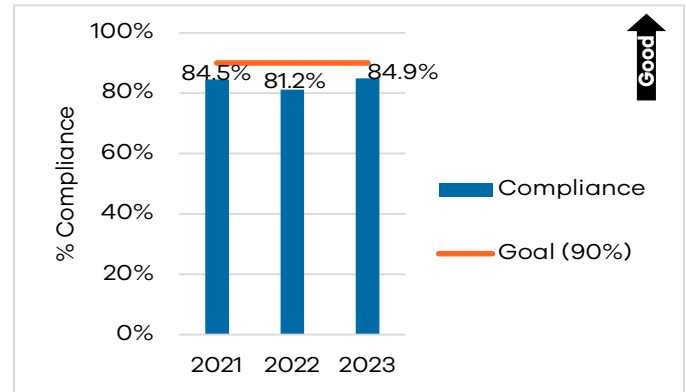
Response:

Criteria disposition pending data availability.

Utstein	2021	2022	2023	Trend
Actual	36.8	41.9*		
*Data unavailable until after 4/30/2024				

5. The Authority shall be responsible for meeting its time and clinical performance criteria. The Authority can meet its response time performance criteria by meeting the 9-minutes ALS Response time of 90% from unit assigned to unit arrived.

Response: Criteria not met



Variance Explanation:

During 2023, DHPD hired extra personnel, purchased 10 new ambulances, and worked to reduce call volume through the Alpha/Omega Project. This resulted in the overall RTC improvement from the previous year, though increasing call volume demand still exceeded available resources. DHPD intends to continue hiring, complete the work to get new ambulances on the street, and explore opportunities to reduce call volume where possible.

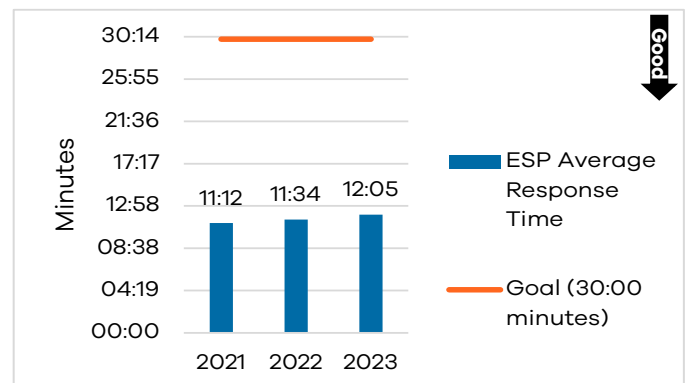
(vi) In support of the Denver Community Addictions Rehabilitation and Evaluation Services (CARES), the Emergency Services Patrol (ESP) will transport individuals experiencing substance misuse to the Denver CARES facility. If serious medical problems are evident, the client is taken by ambulance to Denver Health Medical Center. ESP van service will operate sixteen-hours/day seven days/week.

Response: Criteria met

(vii) An ESP average response time of 30 minutes or fewer will be provided, with that time being calculated as the number of minutes from the dispatcher notifying the van to the time of arrival on the scene. A goal of 30 minutes will be set for contract year 2023 based on available resources. Emergency Services Patrol:




- Average response time

Response: Criteria met



- Total calls for service
- Number of clients picked up per shift
- Number of shifts worked per month

Response: Criteria met

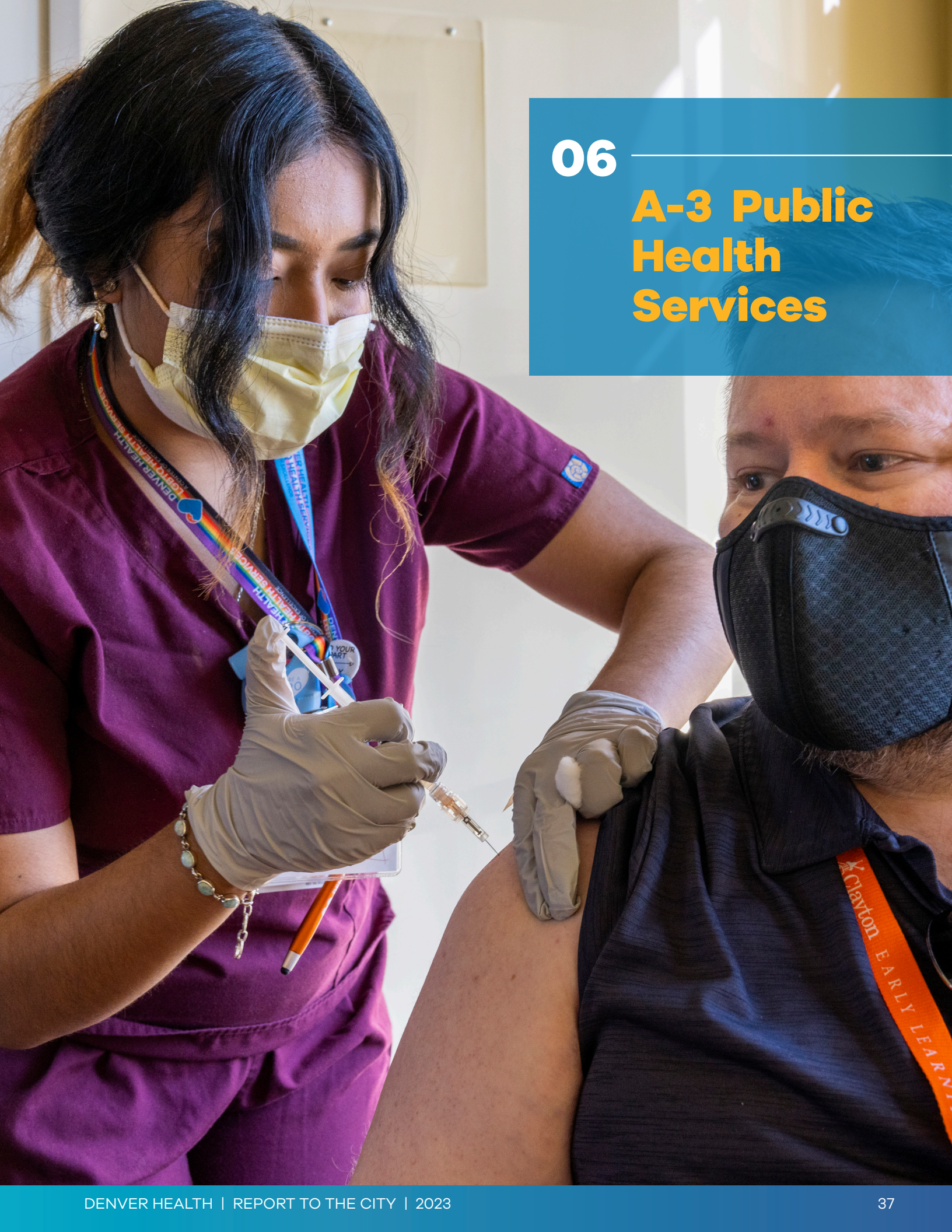
ESP Van Scheduled Shift Statistics	2021	2022	2023	Trend
Total Calls for Service	7,622	6,067	5,003	
Avg # Clients Transported per Shift	7	6	5	
Avg # Shifts Worked per Month	71	76	70	

(viii) Reporting – Performance reports will be analyzed continuously by the EMRS Analyst who will report to the members of the EMRS Advisory Committee at least bi-monthly regarding system performance. A system performance report will be made at least annually by the EMRS Advisory Committee to the leadership of the City and the Authority. The parties recognize that the tiered emergency response system at times may not meet one or more goals of the NFPA Standards. The parties understand and agree that coordination and cooperation will be needed to share data and provide system performance reporting.

1. Compliance – The percentage of responses with response times less than or equal to the time criteria identified above for each category and service level; i.e. how many times out of 100 was the time criteria met.
2. Time Performance – Using the same data set as for compliance, the time (in minutes and seconds) at which 90% of responses fall at or below; e.g. 90% compliance for total response time was achieved at 11:00 minutes as an overall EMRS metric.
3. Exclusions – The count of excluded calls, by type, will be reported, in each report.

Response: Criteria met

The required reports have been submitted by the EMRS Analyst and the Authority has attended bi-monthly meetings.



06

A-3 Public Health Services

Appendix A-3 Public Health Services

1.4 Performance Criteria

A. The Authority will provide an annual report by May of the following year being reported on, which includes performance statistics for the year and the two previous fiscal years, for the Objectives and Metrics listed below. Nothing herein is intended to require submission of information, documentation or support which is otherwise provided or referenced.

Response: Criteria met

Annual report provided for the metrics listed below.

B. The Authority will provide the following performance statistics which includes the goals and metrics for public health functions of Public Health Institute at Denver Health (PHIDH). The frequency of reporting is provided in the table. Metrics reported monthly will accompany the invoice.

Response: Criteria met

The following performance statistics were provided Monthly (N/A = statistics without goals):

Operating Agreement Monthly Measurements by Program 2023				
Program	Objective	Metric	YE Total	Result
ID-Clinic HIV	Ready access for patients	Number of in-clinic medical, psychiatric, and social work encounters provided (face-to-face or telehealth)	12,211	N/A
		Number of adults seen in clinic	6,537	N/A
Immunization and Travel Clinic Vaccine-preventable infections	Ready access for residents of and visitors to Denver to vaccines in clinical and community settings	Number of adult vaccines given in clinic	9,279	N/A
		Number of children seen in clinic	1,725	N/A
		Number of children vaccines given in clinic	3,339	N/A
		Number of adults seen in community settings	1,548	N/A
		Number of adult vaccines given in community settings	2,311	N/A
		Number of children seen in community settings	790	N/A
		Number of children vaccines given in community settings	2,128	N/A
		Provide travel-related evaluation and immunizations	Number of travel consults	2,074
	Number of travel vaccines administered in the clinic		2,324	N/A
	Denver Sexual Health Clinic (DSHC) Sexually-transmitted diseases (other than HIV and viral hepatitis)	Provide access to Denver residents and visitors to clinical sexual health services in clinical and community settings	Care for possible sexually-transmitted diseases in the DSHC (annual goal = 10,500 visits)	13,431
Reproductive health services the DSHC (annual goal = 4,000 visits)			4,247	✓
STD screening in community settings (annual goal = 2,000 visits)			4,203	✓
Percent of patients with gonorrhea or chlamydia treated within 7 days of diagnosis (annual goal = 80%)			92.0%	✓

Operating Agreement Monthly Measurements by Program 2023				
Program	Objective	Metric	YE Total	Result
Denver Sexual Health Clinic (DSHC) Sexually-transmitted diseases (other than HIV and viral hepatitis)	Provide HIV testing in clinical and community settings	Testing in the DSHC (annual goal= 5,500)	7,422	✓
		Community testing in high-risk venues (annual goal = 500)	1,281	✓
TB Clinic	Provide tuberculosis (TB) testing, prevention, and treatment in Denver	Number of visits provided in community settings or outreach	16,116	N/A
		Number of total TB encounters (includes in-clinic or outreach)	25,377	N/A

Response: Criteria met

The following performance statistics were provided Quarterly (N/A = statistics without goals):

Operating Agreement Quarterly Measurements by Program 2023							
Program	Objective	Metric	Q1	Q2	Q3	Q4	Result
ID Clinic-HIV	Provide treatment for persons with HIV disease in Denver	Number of unique patients seen with HIV (annual goal = 900)	1,131	1,136	1,092	1,182	✓
		Percent of ID Clinic patients with a viral load < 200 copies (annual goal = 88%)	89%	91%	91%	92%	✓
	Provide evaluation and treatment of Hepatitis C for persons in Denver	Number of persons who complete treatment for Hepatitis C in the ID Clinic (annual goal = 50)	67	78	44	45	✓
Denver Sexual Health Clinic (DSHC) Sexually-transmitted diseases (other than HIV and viral hepatitis)	Access to pre-exposure prophylaxis for HIV	Number of persons started on PrEP in DSHC (annual goal = 300)	184	186	191	147	✓
Hepatitis C	Provide testing for Hepatitis C among persons at increased risk in the STD Clinic	Number of persons tested for Hepatitis C (annual goal = 1,200 tests)	1,258	1,181	1,098	1,030	✓

Response: Criteria partially met

The following performance statistics were provided Semi-Annually (N/A = statistics without goals):

Operating Agreement Semi-Annual Measurements by Program 2023					
Program	Objective	Metric	6/30/2023	12/31/2023	Result
TB Clinic	Prevent TB in Denver	Number of new TB cases	36	33	N/A
		Completion of treatment within 12 months (goal ≥95%)	85%	94%	X
	<p>Variance Explanation: This metric is based on patients diagnosed in 2022. Fewer patients were diagnosed with TB that year and a small number were lost to follow-up which resulted in falling below the goal. The people lost to follow-up was caused by immigration and customs enforcement issues.</p> <p>Mitigation Strategy: We are working with Adams County Public Health to improve the coordination of care for people detained at the ICE facility there and prevent loss to follow-up.</p>				
	Provide evaluation and treatment of persons with latent TB in Denver	Contacts to active TB cases with newly diagnosed latent TB who start treatment (goal >90%)	71%	100%	X
		<p>Variance Explanation: Very small numbers impacted the data in the first 6 months of the year. We have also encountered increased skepticism about public health recommendations and willingness to take latent TB treatment post-pandemic.</p> <p>Mitigation Strategy: We are working to identify and address patient concerns about taking latent TB treatment. We will evaluate the use of patient education tools created for the TBESC research project.</p>			
Completion of treatment of latent TB among close contacts to active cases of smear-positive pulmonary TB (goal >80%)		40%	78%	X	
<p>Variance Explanation: Small numbers of patients eligible in the first half of the year impacted this metric. We saw improvement later in the year. The target of 80% is a reach metric as this is higher than the national average for latent TB treatment completion among TB programs nationally.</p> <p>Mitigation Strategy: We are evaluating the barriers to latent TB treatment completion and whether the target is achievable.</p>					

07

**A-4 Denver
Community
Addiction
Rehabilitation
and Evaluation
Services (CARES)**




Appendix A-4 Denver Community Addictions Rehabilitation and Evaluation Services (CARES)

1.4 Performance Criteria

A. One-hundred percent of the women of child-bearing age utilizing the services of Denver CARES will be offered a pregnancy test and, if the test is positive, will be provided referral and follow-up.

Response: Criteria met

Denver CARES offers pregnancy testing at no cost to all female patients of child-bearing age.

Pregnancy Testing	2021	2022	2023	Trend
% of the women of child-bearing age utilizing the services of Denver CARES were offered a pregnancy test	100%	100%	100%	










B. The Authority will provide an annual report by May 1st of the year following the year being reported on, which includes performance statistics for the year just ended and the two previous fiscal years, for the following items:

Detoxification: Average Daily Census

- Number of clients admitted more than one time for the program year
- Number of admissions of clients experiencing homelessness
- Number of clients who did not pay any charges due for services rendered.
- Number of referrals not admitted.
- Number of clients admitted for the first time
- Number of clients referred with a DUI
- Number of client to staff and client to client assaults

Response: Criteria met

See table below for details:

Detoxification Program	2021	2022	2023	Trend
Detoxification: Average Daily Census	64	65	65	
Number of clients admitted more than one time for the program year	5,949	6,408	6,251	
Number of admissions of clients experiencing homelessness*	7,360	8,709	14,514	
Number of clients who did not pay any charges due for services rendered	7,158	6,071	4,061	
Number of referrals not admitted	535	641	851	
Number of clients admitted for the first time	2,982	909	724	
Number of clients referred with a DUI	204	195	354	
Number of client to staff assaults	10	8	11	
Number of client to client assaults	2	7	1	

* For 2023 reporting, Denver CARES implemented a report through the electronic health record to capture this statistic

The Authority will provide a quarterly report to the City in an agreed upon format, which indicates the amount of year-to-date expenses and revenues for Denver CARES by the 15th day of the month following the end of the quarter after the end of the reporting period.

The report will also include the following metrics:

- Number of clients admitted more than once for the program year
- Number of total clients seen in the program year
- Number of unanticipated or negative events (seizures, assaults, and serious injuries)
- Standard demographics on clients seen in program year (age, gender, race/ethnicity, housing status, and Medicaid status)

Response: Criteria met

See table on the following page. The Denver Health Finance Department provided regular quarterly reports to the City with year-to-date expenses and revenues.

Denver CARES Services	Q1 2023	Q2 2023	Q3 2023	Q4 2023	EOY 2023
Number of clients admitted more than once for the program year.	1520	1541	1612	1564	6237
Number of total unique clients seen in the	1709	1702	1799	1712	6922
Number of unanticipated or negative events (seizures, assaults, and serious injuries)	12	17	11	7	47
Demographics of clients seen in program year	Q1 2023	Q2 2023	Q3 2023	Q4 2023	EOY 2023
Age					
18-29	372	411	468	440	1691
30-39	530	516	523	543	2112
40-49	361	362	373	338	1434
50-59	285	259	284	253	1081
60+	159	154	151	137	601
NULL	2			1	3
Gender					
Male	1364	1331	1362	1355	5412
Female	343	370	435	352	1500
Unknown	2	1	0	5	8
NULL			2		2
Race					
White or Caucasian	1019	1030	1063	952	4064
Black or African American	237	242	257	239	975
American Indian or Alaska Native	68	58	54	66	246
Other Pacific Islander	6	4	6	1	17
Native Hawaiian	1	3	8	3	15
Asian	8	11	17	0	36
Other	264	269	308	330	1171
Unknown	75	59	68	45	247
Decline to Answer	31	26	18	0	75
NULL				76	76
Ethnicity					
Not Hispanic, Latino/a, or Spanish Origin	1097	1097	1142	1081	4417
Hispanic, Latino/a, or Spanish Origin	517	520	569	561	2167
Mexican, Mexican American, or Chicano/a	0	0	0	0	0
Unknown	74	60	70	0	204
Decline to Answer	21	25	18	24	88
NULL				46	46
Housing Status					
Homeless	461	471	449	449	1830
Not Homeless	1248	1231	1350	1263	5092
Medicaid Status					
Have Medicaid	963	1010	944	932	3849
Don't have Medicaid	746	692	855	780	3073



08

A-6 Medical Services for Arrestees, Pretrial Detainees and Inmates












Appendix A-6 Medical Services for Arrestees, Pretrial Detainees and Inmates at Denver Health and Hospital Authority

1.6 Performance Criteria and Reports

A. The Correctional Care Medical Facility (CCMF) is a Denver Health patient care facility and as such will comply with Joint Commission on Accreditation of Healthcare Organizations regulations and review.

Response: Criteria met

The CCMF follows all Denver Health policies and procedures aligning with the regulations of Denver Health's accreditation by the Joint Commission on Accreditation of Healthcare Organizations. CCMF continues to be open for Denver prisoner admissions 24 hours a day, 7 days a week. The CCMF is a state-of-the-art facility, combining both security and medical care features. Patients are accepted from all adult-based correctional facilities and jurisdictions. 20 beds (including one dedicated psychiatric observation room), six holding cells, electronic surveillance and door control, vehicular sally port, and a dedicated ten room outpatient area are some of the key features of this facility.

CCMF Services	2021	2022	2023	Trend
Discharges				
Denver	304	356	371	
All Jurisdictions	522	610	600	
Total Hospital Days				
Denver	1,262	1,789	1,811	
All Jurisdictions	2,220	2,742	2,776	
Average Length of Stay				
Denver	5.0	5.2	4.9	
All Jurisdictions	4.0	4.3	4.6	
CCMF Outpatient Clinic Visits				
Denver	831	885	1,058	
All Jurisdictions	2,891	2,927	3,580	
Denver Jail Patients Seen in ED				
Denver	1,903	1,917	1,635	

B. The Authority will continue to provide the City with mutually agreed upon standardized Utilization Management (UM) reports each month. In addition, the following information shall be provided to the Sheriff or his/her designee:

- (i) a daily census report for all inpatients at CCMF or at Denver Health Medical Center (DHMC);
- (ii) within sixty (60) days, monthly patient data including the patient name, medical record number, total length of stay, admit and discharge dates, the Authority charges, City

- Cost, patient DOB, split billing information;
- (iii) within sixty (60) days, monthly reports including ambulance, facility and physician billing;
- (iv) within sixty (60) days, monthly third-party billing reports including patients name, admit and discharge dates, split billing information, sum of charges, sum of City cost, amount collected from third party, name of third party payor, credits/debits to City; and,
- (v) within sixty (60) days, a monthly A-6 report and B-3 report as agreed upon by the City and the Authority.

Response: Criteria met

All above listed reports were submitted to the City within required timelines. Reports on special projects are also included in the UM reports such as Specialty Clinical Utilization Report. A daily census is also provided.

C. The Authority shall continue to develop and submit financial reports at least monthly to enable the City and the Authority to evaluate payment mechanisms and to improve understanding of costs. If the ongoing billing methodology work group (consisting of representatives from the Authority and the City) agrees, the City and the Authority may amend this agreement as to payment methodology.

Response: Criteria met

During 2023, the Authority continued its monthly financial reporting to include summary and detailed information. These reports have enabled analyses of the many different services on various levels. The current reporting format and content has been approved by both the City and the Authority.

D. If any third-party payment is denied or reduced to less than full payment, the Authority shall provide detailed documentation of such (including the stated reason and any available appeal procedures) to the City within fifteen (15) days. The Authority shall timely take such action as is necessary and reasonable to challenge or appeal the denial or reduced payment, where warranted under the law and the rules of ethics as long as the City pays all necessary, reasonable and preauthorized (in writing) associated fees and expenses and the City's written preauthorization is received within three (3) days of the Sheriff's or his/her designee's receipt of written notice from the Authority of the denial or reduction. However, the City shall not pay for the processing and re-submission of third party claims that can be accomplished by Authority staff.


Response: Criteria met

The City is notified monthly of all denials related to third-party payments. Where there are concerns, these concerns are resolved in accordance with the language outlined above.

E. Upon completion of providing patient care services to the City and County of Denver arrestees, pretrial detainees and inmate population, it is agreed that the Authority will notify the Sheriff’s Department of the final medical disposition at which time the Sheriff’s Department shall arrange for transport of the detainee or inmate within the agreed upon median target of 50 minutes.

Response: Criteria met

See table below for details.

Sheriff Department Median Time to Transport (Minutes)				
From Emergency Department	2021	2022	2023	Trend
Actual	42	49	47	
Target	50	50	50	



09

A-8 Rocky Mountain Poison and Drug Safety Services



Appendix A-8 Rocky Mountain Poison and Drug Safety Services

1.4 Performance Criteria

A. The Poison Center will answer phones 24 hours a day, 365 days a year. The Poison Center will target telephone line answer within ten rings however, variable volume may impact speed to answer.

Response: Criteria met

Telephone lines were answered within ten rings. The Rocky Mountain Poison and Drug Safety (RMPDS) provides information to health care professionals and the public 24 hours a day, 365 days a year.

B. Physicians will respond to complicated, difficult or unusual cases within 10 minutes of page.

Response: Criteria met

C. The Center will maintain certification by the American Association of Poison Control Centers.


Response: Criteria met

RMPDS was re-certified in 2017 by the American Association of Poison Control Centers. The current certification is effective through November 1, 2024.

D. The Center will provide public education in the Denver Metro Area.

Response: Criteria met

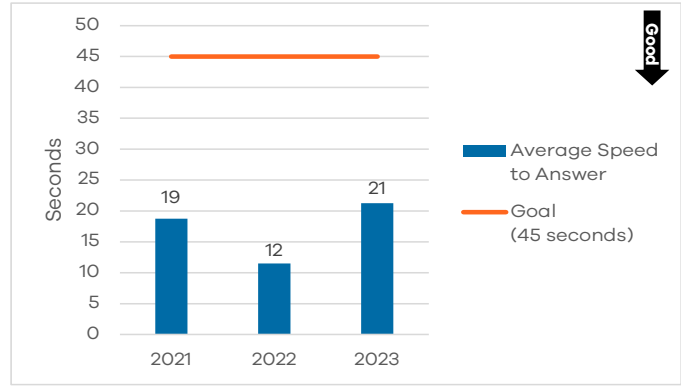
In 2023, RMPDS distributed 1,785 pieces of public education materials on poison prevention for human and animals, in both Spanish and English, in the Denver Metro area. RMPDS maintains the Colorado Poison Center website (www.copoisoncenter.org), that offers one-click contacting for individuals who may prefer non-telephonic routes of correspondence (i.e. chatting, email, texting).

Public Information Materials	2021	2022	2023	Trend
Pieces Distributed	1,000	2,480	1,785	

E. The Rocky Mountain Drug Safety Services Center will answer telephone calls within six rings during working hours 8:00 a.m. to 4:30 p.m., Mountain Time.

Response: Criteria met

RMPDS answers telephone calls within six rings and is staffed 24 hours per day, 365 days per year.







F. The Authority will provide an annual report by May 1 of the year following the year being reported on, which includes the following information for the year just ended and the previous Fiscal Year:

Number of calls from Denver County and total State calls for:

- Poison Center
- Drug Consultation Center

Response: Criteria met

See table below for details.

Call Volume	2021	2022	2023	Trend
Poison Center ¹				
Denver	4,379	4,509	4,551	
State	33,032	37,204	34,596	
Drug Safety Services Center ^{2,3}				
Denver	169	78	113	
State	47,244	34,737	31,804	

¹ Includes poison center calls and public health emergency service calls
² State totals combine Denver County, Colorado and out-of-state calls and electronic inquiries
³ Client base changes annually

Call Volume Trends Analysis:

In 2023, the total Denver & Colorado calls to the Poison Center involving human exposures still got closer to approaching pre-COVID volumes and rose slightly from 2022 to 2023, both in Denver City and County (increase of 2.7%) and state-wide (increase of 2.2%).

Mental health challenges continue to remain a public health area of focus locally and worldwide. Suicide gestures/attempts by drug overdose in Denver City and County reported to the Poison Center have increased by 10.2% from 2022 to 2023. There were 8 deaths reported to the Poison

Center in 2023 which is a 300% increase from 2022 (2 reported) and 12.5% decrease from 2021 (9 reported). Case severity in 2023 was more favorable in terms of less cases codified with major [life-threatening] effects than in 2022 (57 cases with major [life-threatening] outcome; 82, respectively). Cases marked with a “moderate” medical outcome remained similar (431 reported in 2023, 426 reported in 2022). Straightforward cases marked with a “minor medical outcome” or “no effect” increased slightly (0.7%) to the prior year (3182 total in 2023, and 3160 reported in 2022). This supports the hypothesis that when the poison center is involved in the medical management of a poisoned patient, patient outcomes are optimized (resulting in more cases of minor or no effect, less cases of major outcomes). By supporting poison center efforts, we can hopefully improve patient outcomes when it comes to the poisoned patient, especially in the setting of complicated or serious exposures. In summary, overall Poison Center case volume in Denver City and County increased from 2022 to 2023. Exposures involving suicide gesture rose by 10.2%, and exposures resulting in deaths were significantly increased from the prior year. We hope this troubling trend does not continue and that global efforts to improve mental health services and access will reduce attempted suicide counts overall. Our poison center will continue to promote poison prevention in our community. Our efforts in reducing serious outcomes in the poisoned patient will remain a top priority.

In 2023 we continued to meet the preferences of the community by supporting an omni-channel platform (webchat, text-to-chat, and email). Implemented in 2021 and continued through 2023, we followed up calls to the Poison Center hotline with an outbound text message containing case reference number and contact information should caller need help again. These outbound messages improved the caller experience by making it easy and convenient for the caller to follow-up while minimizing time Poison Center staff needed to manually search for cases. Callers’ feedback cites appreciating this added service and that having the case number handy on their mobile device is reassuring if they need to call us back again.

G. The Authority will provide a quarterly report to the City in the format attached to this Appendix, which indicates the amount of year-to-date expenses and revenues for RMPDS by the forty-fifth (45th) day after the end of the reporting period.

Response: Criteria met

See table below for details.

H. Requests for consultation services to City and County of Denver regulatory agencies will be responded to within 48 business hours.

Response: Criteria met

2023 Quarterly Denver Health Rocky Mountain Poison and Drug Safety Services (A-8) Providing Drug Consultation Services for the City and County of Denver							
Drug Consultation Center Program (A-8 Program)	1Q2023	2Q2023	3Q2023	4Q2023	2023 Total	2022 Total	2021 Total
Denver Drug Consultation Line Case Volume	8,409	8,298	7,442	7,638	31,787	64	169
All Other Drug Center Client Case Volume	7	10	10	8	35	34,417	47,244
Total Drug Center Cases	8,416	8,308	7,452	7,646	31,822	34,481	47,413
Other RMPDS Services Benefitting Denver Residents							
Poison Center ¹ Cases from Denver county (answering calls 24/7/365 within 6 rings ²)	1,155	1,129	1,128	1,139	4,551	4,509	4,379
All other Medical Triage Cases (DH Patients who live in the City)	0	0	0	0	0	0	0
Poison Center ¹ Cases from All Others (only Colorado calls)	2,862	8,562	9,467	8,150	29,041	32,749	33,032
Poison Center ¹ Public Education Pieces (English or Spanish) Distributed to Denver County	1,380	405	0	0	1,785	2,480	1,000
¹ Poison Center is certified by American Association of Poison Control Centers through 2023							
² Poison Center physician escalations occur within 10 minutes							
A-8 Program Contact Center Full-Time Equivalents							
Hours of Operation - Answering Calls 24/7/365	2,160	2,184	2,208	2,208	8,760	7,344	8,784
FTE Equivalents (assumes 1,828 work hours per FTE per year; 25% FTE coverage)	0.30	0.30	0.30	0.30	1	1.20	1.20
A-8 Program Expenses							
Actual Average Drug Center FTE Staff Salary Cost Plus Benefits	\$ 160,494	\$ 160,495	\$ 160,495	\$ 160,495	\$ 641,979	\$ 641,971	\$ 641,972
Staff Cost Based on Hours of Operation & Staffing Coverage	\$ 120,371	\$ 120,371	\$ 120,371	\$ 120,371	\$ 481,484	\$ 481,476	\$ 160,493
Telephone Line Cost (for 303-389-1112)	\$ 588	\$ 591	\$ 591	\$ 591	\$ 2,361	\$ 2,340	\$ 780
DrugDex Software License	\$ 10,691	\$ 10,694	\$ 10,694	\$ 10,694	\$ 42,771	\$ 9,600	\$ 3,200
Total Drug Consultation Program Cost	\$ 131,649	\$ 131,656	\$ 131,656	\$ 131,656	\$ 526,616	\$ 493,416	\$ 164,473
Collected Revenue Per the City Operating Agreement	\$ 72,678	\$ 72,681	\$ 72,681	\$ 72,681	\$ 290,721	\$ 290,700	\$ 96,900
Variance (Discounted Amount)	\$ (58,971)	\$ (58,975)	\$ (58,975)	\$ (58,975)	\$ (235,895)	\$ (202,716)	\$ (67,573)
% Variance (Discount)	45%	45%	45%	45%	45%	41%	41%





10

A-9 Clinical and Laboratory Services for the City's Department of Public Health & Environment

Appendix A-9 Clinical and Laboratory Services for the City's Department Environmental Health.

1.4 Specific Time Frame for Performance; Performance Criteria and Laboratory Report Delivery.

Clinical and Laboratory Services for the City are a Core Service as defined in the Operating Agreement.

A. The Authority's Department of Pathology and Laboratory Services (DPLS) shall provide service 24-hours per day, seven days per week. DPLS agrees to render Laboratory Services for the patients of the City in accordance with orders given by the physicians treating the patient.

Response: Criteria met

DPLS provided all laboratory services 24 hours per day, seven days per week, and in accordance with orders given by the physicians treating the patient.

B. DPLS shall use reasonable efforts to complete tests within stated expected turnaround times (TAT) following receipt of the specimen and the requisition. In general, TAT should be no more than four (4) days following receipt of the specimen and the requisition, unless the test is esoteric, anatomic pathology, molecular diagnostic testing, or a microbiology test which requires longer turnaround. DPLS pricing and TAT for 2023 has been distributed and accepted by the City.

Response: Criteria met

99% of all test results were resulted (reported) within their established turnaround times as stated by the laboratory. All turnaround times were met within 24-72 hours except for specialized tests performed at DPLS or tests that were sent to reference laboratories (as noted above).

C. Routine Histology slides shall be available within five (5) business days following specimen receipt by DPLS.

Response: Criteria met

Turnaround times were met for 99% of routine histology slides being available within 5 days.

D. DPLS agrees to deliver a copy of the laboratory report in a timely manner and per the hospital laboratory TATs. The laboratory test report will include at a minimum: patient's name, date of test, test name, test result, normal values, laboratory name and address. DPLS agrees to make all records on the City patients to whom DPLS has rendered services available for the City upon request.

Response: Criteria met

Copies of laboratory reports were provided upon request according to the specifications noted and in a timely manner.

E. The City shall notify DPLS of any time-sensitive testing requirements. On request for time-sensitive laboratory testing, the Authority shall meet the time requirements of the City whenever possible.

Response: Criteria met

There were no incidents in which DPLS was notified of time-sensitive testing requirements by the Office of the Medical Examiner or another affected City agency.

F. If the laboratory is unable to run a requested test within the TAT specified, it shall immediately notify the Office of Medical Examiner or other affected City agency.

Response: Criteria met

There were no incidents in which DPLS needed to notify the Office of the Medical Examiner or another affected City agency of any situations where TATs could not be met.

G. All concerns or complaints regarding laboratory services shall be directed to the Director of DPLS.

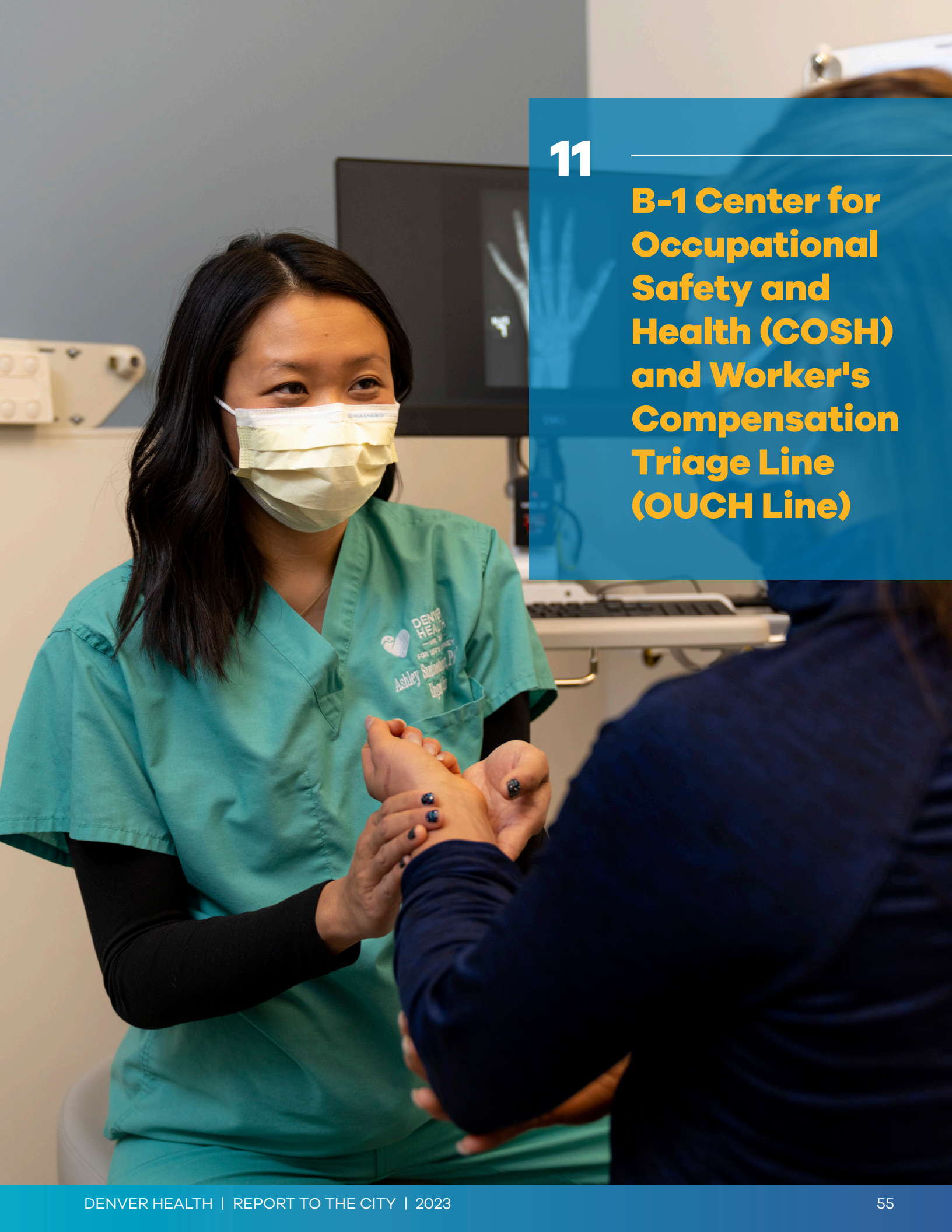
Response: Criteria met

The Director of DPLS was not notified by the office of the Medical Examiner or another affected City agency of any concerns or complaints during 2023.

H. The laboratory code of ethical behavior ensures that all testing performed by the laboratory are billed only for services provided. All marketing and billing is performed in accordance with community standards; all billing is for usual and customary services. All business, financial, professional, and teaching aspects of the laboratory are governed by standards and professional ethics.

Response: Criteria met

There were no changes to pricing in 2023. Pricing is available in the laboratory services fee schedule which is available upon request. Fees are created using Centers for Medicare and Medicaid Services (CMS) reimbursement rates and are reviewed annual for changes.



11

B-1 Center for Occupational Safety and Health (COSH) and Worker's Compensation Triage Line (OUCH Line)

Appendix B-1 Center for Occupational Safety and Health (COSH) and Worker’s Compensation Triage Line (OUCH Line)

1.6 Reporting






A. Annual Report. The Authority will provide an annual report by May 1 of the year following the year being reported on, which includes performance statistics for the year just ended and the two previous fiscal years relating to the services provided to the City under this Appendix B-1. The report shall include, but not be limited, the following items for City employees:

Workers’ Compensation Encounters:

- Initial visits
- Follow-up visits
- Emergency room visits
- Number of referrals

Response: Criteria met

See table below for details.














































Center for Occupational Safety & Health (City Only)	2021	2022	2023	Trend
Workers’ Compensation Encounters	3,913	3,683	3,261	
Initial Visits (new workers’ comp cases)	621	613	497	
Follow-up Visits (workers’ comp)	2,387	2,303	2,764	
Emergency Room Visits (CSA only)	122	168	198	
Referrals	1,293	1,210	1,345	

Worker’s Compensation Encounters:

- Average time from initial treatment to maximum medical improvement (MMI)

Response: Criteria partially met

See table for details. Due to the change from Agility to EPIC, 2023 MMI data is incomplete.

Body Part		2021	2022	2023	Trend
		(Reported in Days)			
Abdomen	Average	61	147	N/A	
	Median	61	147	N/A	
Ankle	Average	35	89	31	
	Median	25	60	31	
Arm	Average	36	61	19	
	Median	5	29	19	
Back	Average	54	59	20	
	Median	36	26	18	
Chest	Average	17	35	N/A	
	Median	12	22	N/A	
Chin	Average	N/A	7	N/A	
	Median	N/A	7	N/A	
Ear	Average	4	113	0	
	Median	4	94	0	
Elbow	Average	54	84	17	
	Median	30	91	17	
Eye	Average	10	15	5	
	Median	3	8	5	
Face	Average	9	17	0	
	Median	5	18	0	
Finger	Average	42	18	17	
	Median	15	8	20	
Foot	Average	51	34	11	
	Median	37	16	11	
Forearm	Average	8	N/A	N/A	
	Median	8	N/A	N/A	
Forehead	Average	N/A	N/A	4	
	Median	N/A	N/A	4	
Genitals	Average	N/A	N/A	N/A	
	Median	N/A	N/A	N/A	
Groin	Average	90	131	N/A	
	Median	74	129	N/A	
Hand	Average	32	31	14	
	Median	15	13	7	
Head	Average	31	27	52	
	Median	13	11	52	
Heart	Average	2	N/A	N/A	
	Median	2	N/A	N/A	
Hip	Average	78	51	9	
	Median	78	29	9	
Jaw	Average	N/A	4	N/A	
	Median	N/A	4	N/A	
Knee	Average	75	74	15	
	Median	37	65	12	
Leg	Average	22	25	5	
	Median	9	19	5	

Body Part		2021	2022	2023	Trend
		(Reported in Days)			
Lip	Average	13	29	N/A	
	Median	13	29	N/A	
Lumbar	Average	N/A	3	N/A	
	Median	N/A	3	N/A	
Lung	Average	45	0	N/A	
	Median	45	0	N/A	
Mouth	Average	N/A	N/A	N/A	
	Median	N/A	N/A	N/A	
Multiple	Average	28	59	38	
	Median	8	27	38	
Neck	Average	85	99	21	
	Median	86	52	21	
Nose	Average	4	75	20	
	Median	4	75	20	
Rib	Average	15	7	N/A	
	Median	15	124	N/A	
Shoulder	Average	92	124	22	
	Median	86	129	23	
Teeth	Average	N/A	38	N/A	
	Median	N/A	3	N/A	
Throat	Average	15	3	N/A	
	Median	15	3	N/A	
Thigh	Average	N/A	117	N/A	
	Median	N/A	117	N/A	
Thumb	Average	29	11	39	
	Median	9	6	39	
Toe	Average	47	251	13	
	Median	47	251	13	
Wrist	Average	87	28	0	
	Median	63	30	0	
Total MMI averaged days		39	57	18	
Total MMI median days		15	27	17	

Non-Workers' Compensation Encounters:

- By Agency or Department as identified below.

Response: Criteria met

See table below for details.

Agency	2021	2022	2023	Trend
Animal Control	1	32	4	
Art Museum	0	0	0	
Arts and Venues	0	1	0	
Civil Service Commission	289	572	217	
Clerks and Recorder	2	13	9	
Community Planning	2	0	0	
Department of Finance	0	0	2	
Department of Safety	1	75	108	
Denver International Airport	2	1	1	
Environmental Health	1	4	4	
Excise & License	0	0	0	
Fire Department	46	62	52	
General Services	1	1	3	
Human Services	1	43	3	
Marshal Division	0	0	0	
Parks and Recreation	214	138	81	
Police Department	120	104	121	
Public Library	30	34	37	
Public Works	561	417	156	
Sheriff's Department	221	238	132	
Social Services	0	1	1	
Tech Services	0	0	0	
TOTAL	1,492	1,736	931	

Other services:

- As requested in the prior contract year.

Response: Criteria met

Other services were not requested in 2023.

B. Quality Reviews: As part of the medical management process identified in section 1.4 of this Appendix, the COSH, on an ongoing basis, shall conduct quality reviews of the services provided for each City employee for whom the physician has an open file based on an COSH referral. The Authority

and City will jointly identify and expand the performance statistics measured and provided by the clinic for work related injuries to identify areas of improvement.

Response: Criteria met

The COSH Medical Director and City Case Manager discuss performance regularly as part of their monthly meeting.

C. Other Requested Reports: COSH shall provide mutually agreed upon reports as requested by Risk Management office to quantify services and workloads, performance metrics, and identify achievement of best practices.

Response: Criteria met

Other reports were not requested in 2023.

12

B-2 NurseLine Services



Appendix B-2 NurseLine Services

1.3 Performance Criteria

A. The NurseLine will respond to callers 24 hours a day, 365 days a year.

Response: Criteria met

B. Call Center Agents will intake calls, gather chief complaint or medical question, and will collect demographics on calls where medical information is provided.

Response: Criteria met

C. Registered Nurses will provide medical triage utilizing National Guidelines to arrive at a final disposition of 911, ED, Urgent Care, Appointment, or Home Care.

Response: Criteria met

D. Calls resulting in a recommendation for medical care within 24 hours may be provided second level triage by an experienced medical provider. All medical providers will be overseen and trained on DHNL procedures by a Board Certified Emergency Medicine Physician. Trained professionals will respond to the caller with medical information, provide instructions for home care, or recommend that the caller seek care at a medical facility.

Response: Criteria met

E. Language Translation will be provided for callers through Denver Health medical interpretation services or appropriate external medical language interpretation services.

Response: Criteria met

F. The NurseLine will strive to adhere to call center standards set by the Utilization Review Accreditation Commission (URAC) Healthcare call Center Guidelines, National Committee for Quality Assurance Guidelines (NCQA), and the Health Insurance Portability and Accountability Act (HIPAA).

Response: Criteria met

G. The Authority will provide a monthly report to the City through the Executive Director of the Department of Public Health and Environment. The report shall provide numbers for the total and for the target populations served that month and the amount of year-to-date expenses and revenues for



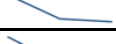


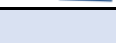

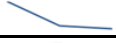




the Denver Health NurseLine. The monthly report shall be submitted to the City by the 20th day after the end of each month.

Response: Criteria met

H. In addition to monthly reports described below, the Authority will provide an annual report by May 1 of the year following the year being reported on to the City through the Executive Director of the Department of Public Health and Environment. The report shall include the following information for the year just ended and the previous fiscal year: NurseLine medical triage cases in total; medical triage cases for uninsured, medically indigent patients from the City and County of Denver; physician medical triage cases; behavior health cases; all other cases; and medical interpretation cases.

Response: Criteria met

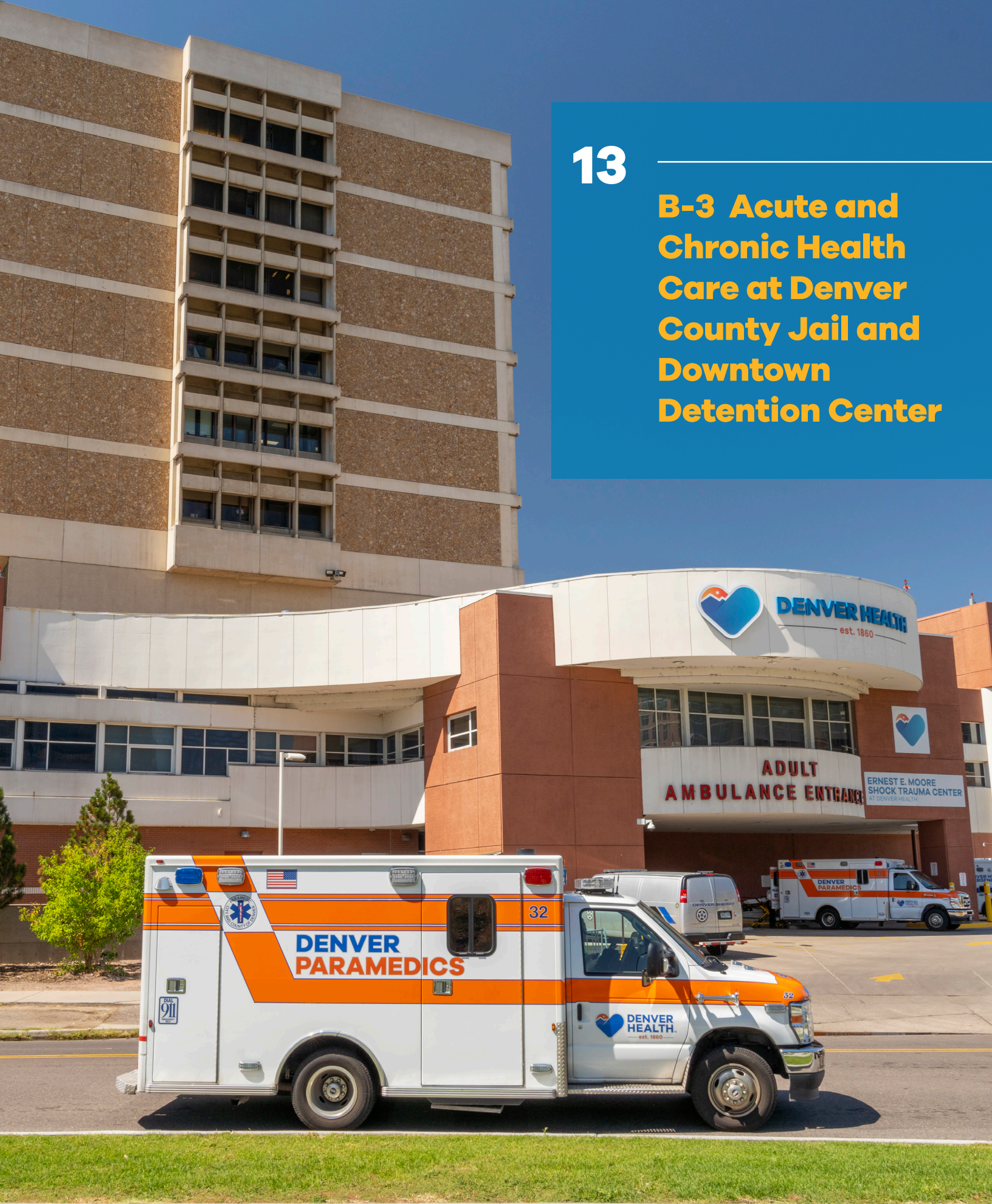
See table on the next page for details.

City Program Case Volumes	2021	2022	2023	Trend
Uninsured Citizen Medical Triage Cases (non-DH patients)	2,327	1,752	2,270	
Uninsured Citizen Behavioral Health Cases (non-DH patients)	23	20	13	
Citizen Medical Triage Cases (non-DH patients, insured)	17,640	7,419	6,160	
Behavioral Health Cases (non-DH patients, insured)	159	99	117	
Referral Cases (offer resources in the City, non-DH patients)	703	326	389	
Totals	20,852	9,616	8,949	
Percent of all calls from Uninsured Denver Citizens	11%	18%	26%	
City Physician Medical Triage Cases (non-DH patients)	2,414	815	628	
All other Medical Triage Cases (DH patients who live in the City)	37,537	40,280	32,510	
Medical Interpretation (minutes; non-DH patients)	12,624	9,217	20,349	
Estimated Total Cost of Program	\$ 628,885	\$ 308,147	\$ 297,793	
Total Cost to the City for Uninsured*	\$ 60,000	\$ 102,797	\$ 102,797	
*This is a flat fee service contract as per the agreement				



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B-3 Acute and Chronic Health Care at Denver County Jail and Downtown Detention Center



Appendix B-3 Acute and Chronic Health Care at Denver County Jail and Downtown Detention Center

1.7 Reporting Requirements:

The Authority shall continue to provide the following reports unless modified by written agreement of the parties in the Utilization Management (UM) process:

A. Reports and meetings as required by the National Commission on Correctional Health Care (NCCHC), the American Correctional Association (ACA), and to meet Prison Rape Elimination Act (PREA) standards;

Response: Criteria met

In accordance with the Jail's NCCHC and ACA accreditation, Denver Health works collaboratively with the Denver Sheriff's office to coordinate reports and meetings. UM is managed by CCMF and Erin Ellquist is the point of contact. Denver Sheriff Health Services is NCCHA and ACA Accredited. All other reports have been submitted as requested.

B. Sheriff's Department Monthly Statistical Report on Health Services Activities;

Response: Criteria met

C. Any meetings as deemed necessary by the Sheriff or designee the Health and Hospital Authority.

Response: Criteria met

D. Schedule of health care personnel and specific jail assignments of specific days upon request by the Sheriff or designee.

Response: Criteria met

In 2023, schedule data was not requested but was available upon request.

E. The Authority will notify DDPHE (DDPH_Epi@denvergov.org) and the Sheriff of any confirmed reportable disease case in any person or persons in custody.

Response: Criteria met

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B-7 Miscellaneous Services for DDPHE



Appendix B-7 Miscellaneous Services for DDPHE

1.1 Agreement to provide additional miscellaneous services

A. Occasionally during the year, the City requires and the Authority agrees to provide additional services, including materials, not specified in this Agreement. The Authority will provide reasonable medical services to the City upon request.

Response: Criteria met

In 2023, the Authority provided additional services when requested by the City.

1.2 Park Hill

The Authority has operated a family health center in the Park Hill neighborhood for many years. In order to assist the Authority in carrying out its mission, the City has committed to partially fund land acquisition, construction and equipping of the Park Hill clinic.

a. Pursuant to an Agreement (the Funding Agreement), the City has agreed to partially fund land acquisition and construction of the Park Hill Clinic. The City's maximum payment obligation for the land acquisition and construction of the Park Hill Clinic over the term of the Funding Agreement will not exceed \$4.788 million. The City's annual contribution is subject to appropriation by City Council and is calculated in accordance with the formula contained in the Funding Agreement. For Fiscal Year 2023, the City's annual payment for its land acquisition and construction contribution to the Park Hill Clinic shall be \$200,900.

Response: Criteria met

Denver Health validates this number annually with the City and the invoicing process is updated accordingly.

1.3 South Westside Clinic ("Federico Pena Family Center")

The Authority constructed the Southwest Family Health Center (formerly referred to as South Westside Clinic and South West Clinic) to serve the west Denver population. In order to assist the Authority in carrying out its mission, the City has committed to partially fund the construction improvements through proceeds of the Better Denver Bonds program (the "South Westside Clinic Proceeds") and the Capital Improvement Fund (CIF), pursuant to the terms of the Southwest Family Health Center Funding Agreement.

a. From 2017 and continuing through 2028, the City will pay an amount not to exceed \$1,200,000.00 each year. The City's total funding for the clinic from all sources for all time shall not exceed \$22,150,00.00.

b. The City's obligation to make this payment is pursuant to the terms of the South Westside Clinic Funding Agreement and shall be contingent upon: such funds being appropriated and paid into the City Treasury and encumbered for the purposes of this Agreement on an annual basis by the City; compliance with this Agreement; the completion of the funding agreement referred to above; and compliance with the same funding agreement.

Response: Criteria met




Denver Health provided the annual final reconciliation due on 3/31/2024.

1.4 Office of the Medical Examiner (OME) Services

Denver Health will provide instrument sharpening for no charge utilizing the full-time onsite vendor. OME will need to either deliver the instruments to the main campus or arrange for transport via the Denver Health Courier. Biomedical waste, pathological waste, and sharps will be disposed of utilizing the vendor contracted to provide services to Denver Health. The DH Safety Department will arrange for the vendor to pick this waste up directly from the OME in coordination with the OME. The cost will be \$.19 per pound for bio-hazardous waste and sharps and \$.85 per pound for pathological waste or any other items requiring incineration. DH will receive and process the invoices for these services and bill the charges to the OME.

Response: Criteria met

See table below for details.

Office of Medical Examiner - Waste Removal	2021	2022	2023	Trend
Biomedical and Sharps	14,390	13,346	17,108	
Pathological and Chemo (incineration required)	565	681	910	
Total	14,955	14,027	18,018	

1.5 Treatment on Demand

To promote the goals of rapid access to substance use treatment, linkage to community based substance use treatment, and recovery, Outpatient Behavioral Health Services (OBHS) will report the following performance and outcome metrics on a monthly or annual basis according to the agreed-upon templates:

A. Treatment on Demand Access Measures

- i. Number of persons with a substance use disorder seen by Treatment on Demand
- ii. Number of persons receiving an assessment
- iii. Number of persons receiving medication-assisted treatment (MAT) induction for opioid-use disorder (OUD)
- iv. Number of persons linked to community-based care across stimulant use disorder (SUD)
- v. Number of persons linked to community-based care within 48 hours
- vi. Percentage retained in treatment >90-days and beyond
- vii. Assess for increase in referral and linkage across SUD

Response: Criteria met

See table below for details.

Treatment on Demand Access Measures	2021	2022	2023
Number of Persons with a Substance Use Disorder (SUD) Seen by Treatment on Demand	471	795	1034
Number of Persons Receiving an Assessment	413	496	493
Number of Persons Receiving MAT Induction for Opioid Use Disorder (OUD)	378	448	463
Number of Persons Linked to Community-Based Care Across SUD	179	178	353
Number of Persons Linked to Community-Based Care Across Within 48 Hours*			217
Percentage Retained in Treatment >90 Days and Beyond	38% (86 retained 90 days / 227 Biopsychosocial Evaluations Completed Jan-Oct 2021)	56% (277 retained 90 days ¹ / 496 Biopsychosocial Evaluations Completed)	59% (127 retained 90 days ¹ / 216 Biopsychosocial Evaluations Completed)
Assess for Increase in Referral and Linkage Across SUD**	8 patients were referred to partner OTPs	7 patients were referred to partner OTPs	719

*New metric in 2023
 **Revised metric in 2023 to report referral and linkage across SUD vs the capacity of OTPs
¹Dec 90-day retention not yet available

B. Develop and report metrics to:

- i. Evaluate and report linkage and retention in treatment for persons referred external to the DHHA system and for patients within the DHHA system
- ii. Assess Treatment on Demand services outlined in a.i-vii, (above) by number of persons with an OUD, SUD, or alcohol use disorder (AUD)

Response: Criteria met

See table below for details.

Treatment on Demand Access Measures	2021	2022	2023
Evaluate and Report Linkage and Retention in Treatment for Persons Referred External to the DHHA System and for Patients within the DHHA System ¹	Internal DHHA linkage and retention data has been reported on a monthly basis and is included above. For external partners, 8 patients were referred out 4 successfully linked.	Internal DHHA linkage and retention data has been reported on a monthly basis and is included above. 39 patients were referred to external partners (across all substances). External partners are not currently able to share linkage and retention data.	Internal DHHA linkage and retention data has been reported on a monthly basis and is included above. 162 patients were referred to external partners (across all substances). External partners are not currently able to share linkage and retention data.
Assess Treatment on Demand Services Outlined in a.i-vii (above) by Number of Persons with an OUD or Alcohol and Other Drug Use Disorder (AOD) ²	The Treatment on Demand 2021 Metrics Spreadsheet is available upon request and provides the metrics by substance for the full year.	The Treatment on Demand 2022 Metrics Spreadsheet is available upon request and provides the metrics by substance for the full year (with the exception of the Q4 retention data which is not ready by the time reporting occurs).	The Treatment on Demand 2023 Metrics Spreadsheet is available upon request and provides the metrics by substance for the full year (with the exception of the Q4 retention data which is not ready by the time reporting occurs).

¹External partners do not have a comparable EHR making it difficult to share retention data with DH TOD
²Nov/Dec 90-day retention not available yet





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B-8 Miscellaneous Services for the Department of Public Safety

Appendix B-8 Miscellaneous Services for the Department of Public Safety

1.1 Agreement to provide additional miscellaneous services

A. Occasionally during the year, the City requires and the Authority agrees to provide additional services, including materials, not specified in this Agreement. The Authority will provide reasonable medical services to the City upon request.

Response: Criteria met

In 2023, the Authority provided additional services when requested by the City.

1.2 Sexual Assault Nurse Examiner (SANE)

A. In accordance with State statute C.R.S. 18-3-407.5 which requires that the law enforcement agency referring a victim of sexual assault or requesting an examination of a victim of sexual assault pay for any direct cost associated with the collection of forensic evidence from such victims, the City hereby agrees to reimburse the Authority for the costs associated with the collection of forensic evidence of sexual assault victims, including photography services for cases of domestic violence, non-accidental trauma or other physical assaults, as requested or referred by a City law enforcement agency at the following per exam rates: \$680.00 for victims and \$235.00 for suspects, which is the Authority’s actual cost. Forensic photography for cases of domestic violence, non-accidental trauma, or other physical assaults may also be provided by the SANE per law enforcement request and pending the availability of the examiner for a fee of \$175.00. This payment is characterized as a fee for service.

B. The City will purchase, prepare, and provide the evidence kits to the Authority. The completed forensic evidence kit will be transported, using proper chain of custody procedures, to the Police Headquarters building.

C. The City will reimburse the Authority a maximum of \$6,000 annually for the cost of registration and travel expenses for the training of new SANE program nurses. Requests for training must be submitted for approval at least four weeks in advance for any out-of-state travel and a minimum of two weeks in advance for in-state travel. An identified benefit to the Denver Police Department SANE Program must be included in the training request. Reimbursement for travel-related expenses will be subject to Denver Police Department and/or General Services Administration rates for reimbursement.

D. Medical forensic examinations that do not require evidence collection will have a rate of \$400.00 for victims. This would include sexual assault examinations when a patient declines the evidence collection portion, domestic violence, and strangulation evaluations.

E. The Authority’s SANE program nurses will collect and preserve forensic evidence and document the findings of victims of sexual assault. The SANE Program nurses will also conduct evidentiary exams of suspects in sexual assault cases in accordance with established protocol.





F. The Authority will bill the Denver Police Department on a monthly basis for exams. The invoice must contain all of the following information: date of exam, delineation of victim/suspect, last name and first name initial, medical record number, encounter number, city/county designation, CAD #, General Offense (GO) # and cost. The Authority agrees to provide this service without charge to the victim.

G. The Authority will be responsible for all training and travel costs above the \$6,000 annual cost for new SANE program nurses reimbursed by the City.

H. The Authority will present an annual accounting of costs of the program by the end of January of the following year. Requests for rate increases must be submitted to the City at least sixty (60) days prior to anticipated date of the rate increase and must be accompanied by supporting documentation.

Response: Criteria met

Four quarterly reports were submitted within 45 days of the end of each reporting period. Each quarterly report provided a comprehensive summary of activities occurring that quarter and expected activities in the subsequent quarter.

Total Forensic Exams	2021	2022	2023	Trend
Victim Exams	359	411	461	
Suspect Exams	3	6	15	
Strangulation*	N/A	74	138	
Total	362	491	614	

*New metric in 2022 OA


1.3 Blood Alcohol Draws

The Authority will perform forensic legal blood alcohol draws for individuals brought to the Authority Emergency Department by Denver law

enforcement. The Authority will follow chain of custody procedures as set forth in Denver Health Policies and Procedures P-2.040. The law enforcement officer will take immediate possession of the specimen in accordance with the policy. The City will pay the Authority \$29.00 per specimen based on the monthly invoice. This payment is characterized as a fee for service.

Response: Criteria met

See table below for details.




Blood Alcohol Draws	2021	2022	2023	Trend
Draws	524	246	400	

1.4 At-risk Intervention and Mentoring (AIM Program)

C. The Authority’s AIM program will provide services to over four hundred (400) unique individuals in 2023; an estimated 250 bedside interventions with youth, one hundred and fifty (150) other community individuals, and approximately twenty (20) critical crisis interventions within the Authority and the community.

Response: Criteria met


See table below for details.

AIM Program Services	2021	2022	2023	Result	Trend
Number of bedside interventions 2023 Goal: 250	424	353	331	✓	
Individuals served (unduplicated) 2023 Goal: 400	541	1083	1087	✓	
Critical crisis interventions 2023 Goal: 20	40	45	35	✓	

D. AIM will provide up to ten (10) trauma-informed care trainings around at-risk youth to various departments and staff members, including frontline emergency department staff, community and school-based clinic providers, and inpatient staff that care for injured patients. Trainings will be 1-3 hour blocks of interactive sessions with outreach workers, molded to fit the needs of specific departments and clinics; these activities will be eligible for continuing education credits.

Response: Criteria met

See table below for details.

AIM Program Services	2021	2022	2023	Result	Trend
Trauma-informed care trainings 2023 Goal: 10	19	26	38	✓	

F. The Authority will present an annual accounting of costs of the program by the end of January of the following year. Requests for rate increases

must be submitted to the City at least sixty (60) days prior to anticipated date of the rate increase and must be accompanied by supporting documentation.


Response: Criteria met

1.5 Heartsaver First Aid CPR AED Training

The Authority agrees to provide Heartsaver® First Aid CPR AED – Adult, Child and Infant training by a certified American Heart Association instructor(s) for up to 100 of the students attending the Denver Fire Department’s Young Adult Career Exploration Camp. The course will prepare students to provide first aid, CPR, and use an automated external defibrillator (AED) in a safe, timely, and effective manner. Each student who completes the course successfully will be awarded a certificate or card which displays their newly acquired First Aid certification. The City will pay the Authority \$45.00 per student enrolled in the course. This payment is characterized as a fee for service. Invoices shall include the date of training and name of trainees.

Response: Criteria met

In 2023, Denver Fire took over Heartsaver First Aid CPR AED training and Denver Health was not involved.



CRP AED Training	2021	2022	2023	Trend
Participants	52	32	0	

1.6 Tactical Casualty Care (TCC) for Law Enforcement Training

The Authority agrees to provide Tactical Casualty Care (TCC) for Law Enforcement training for all Denver Police Department Recruits by instructors who are minimally state certified EMTs, or preferably, paramedics. The Authority will adhere to all POST mandates for the training, including the instructor ratio guidelines. The City will pay the Authority \$95.00 per student enrolled in the course. This payment is characterized as a fee for service. Invoices shall include the date of training and name of trainees.

Response: Criteria met

Denver Health provides TCC for Law Enforcement for all Denver Police Recruits annually as needed through DPD's rotating academy schedule.

TCC for Law Enforcement	2021	2022	2023	Trend
Classes	6	5	7	
Participants	86	50	112	

1.7 Department of Safety Fit for Duty Psychiatric Evaluations

A. The Authority agrees to provide psychiatric evaluations at the request of the City's Department of Safety for the purpose of determining if a Department of Safety employee is fit to return to duty.

K. The Authority will provide the City with medical services in accordance with the terms and the standard of care stated in the Operating Agreement.

Response: Criteria met

The Authority provided psychiatric evaluations in accordance with the terms stated in the Operating Agreement. See table below for details.

Performance Criteria	2021	2022	2023
# Psychological Fitness for Duty Exam	4	0	2
# Duty Exam appointments within 5 business days	4	6	2
# Full report transmissions with physician signature	4	6	2
# Psychological Testing Related to Fitness for Duty Exam	0	2	2
Total Invoiced Amount	\$2,400	\$3,600	\$1,200

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B-9 Miscellaneous Services, Other



Appendix B-9 Miscellaneous Services, Other

1.1 Agreement to provide additional miscellaneous services

A. Occasionally during the year, the City requires, and the Authority agrees to provide additional services, including materials, not specified in this Agreement. The Authority will provide reasonable medical services to the City upon request.

Response: Criteria met

In 2023, the Authority provided additional services when requested by the City.

1.2 Expert Witness

The Authority agrees to provide expert witnesses to the City upon request for purposes of testifying in court and or other formal hearings involving the City. The City will reimburse the Authority up to the hourly maximum of \$150.00/hour for this service. The Denver District Attorney’s Office will reimburse the Authority up to an hourly maximum of \$150.00/hour (\$80/hour for experts without advanced educational degrees consistent with the Supreme Court Directive) for prep time and expert witness testimony when the expert is a prosecution witness testifying in state court matters prosecuted by the Denver District Attorney’s Office. The witness must be qualified as an expert by the Judge in open Court prior to providing testimony. Each invoice shall include the following supporting documentation: the dates of services, information identifying the case, information identifying the activity billed for, any off-setting revenue from the City or other sources. This payment is characterized as a fee for service.

Response: Criteria met




Denver Health provides Expert Witness support to the city when requested.

1.4 Competency Examination

The Authority agrees to provide competency evaluations or other investigative reports to determine competency as requested by the County Court. The Authority and the City’s County Court have agreed to a new process, which includes scheduling a two (2) hour time block of time for a total of four (4) available examinations every week. These examinations shall be performed for a per report fee of \$600.00. The City will pay the Authority a \$225.00 preparation fee for each individual who fails to appear to the set examination. This payment is characterized as a fee for service.

Response: Criteria met

In 2023, Denver Health provided competency evaluations as requested by the County Court and invoiced the City for a total of \$159,600 for court competency evaluations.

Total Competency Exams	2021	2022	2023	Trend
# Completed	172	268	236	
# Failures to Appear	86	73	80	
Total Charges	\$ 122,550	\$ 177,225	\$ 159,600	

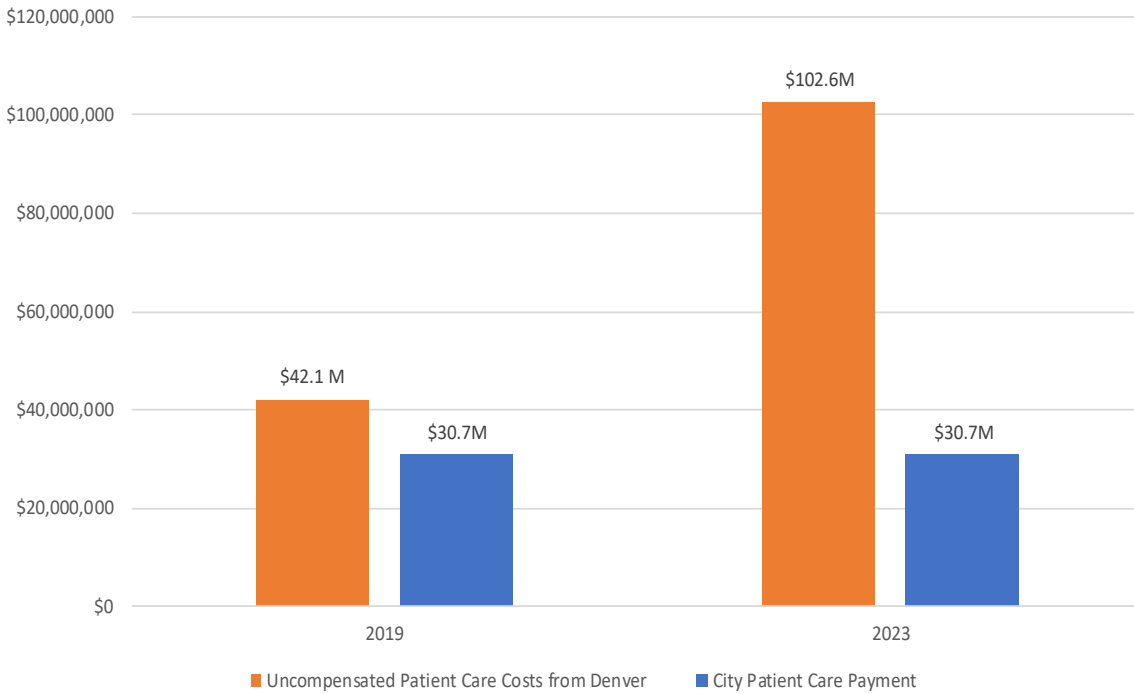


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**Uncompensated
Care**

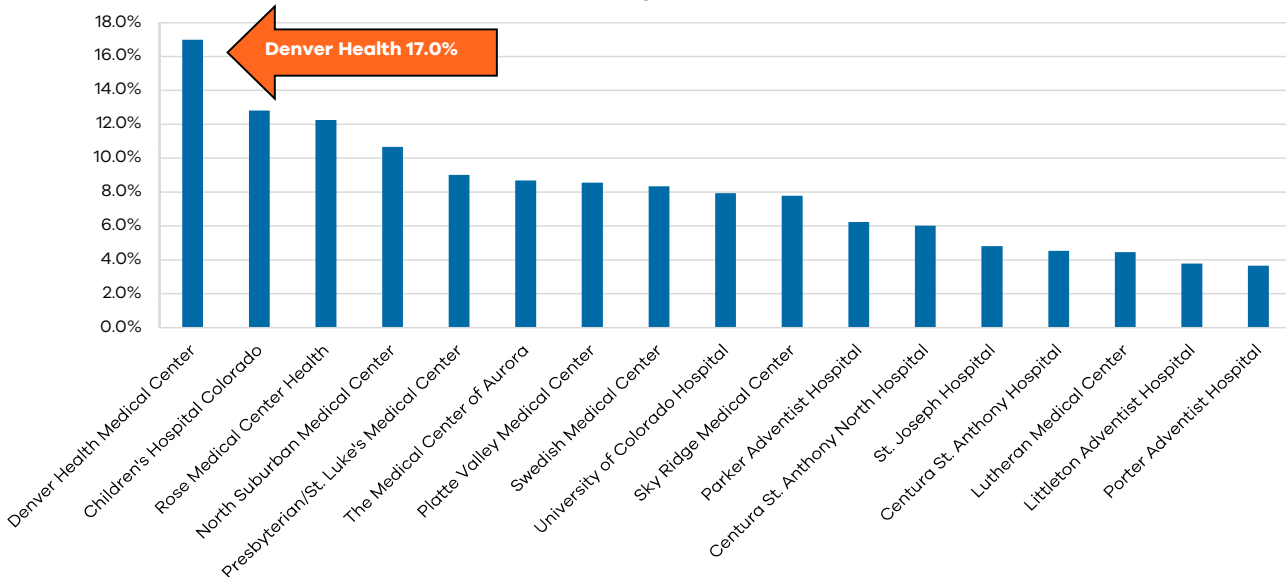
There has been a substantial growth in uncompensated care for City and County of Denver residents since 2019, increasing from \$42M to \$102M in 2023. The city's flat payment for medically indigent care is increasingly putting strain on the health system as this uncompensated care grows.

2019 vs 2023 Uncompensated Care Cost & City Patient Care Payment



The most current data available from Colorado Department of Health Care Policy and Financing (HCPF) 2024 Hospital Financial Transparency Report shows that Denver Health's % of Total Care for Uninsured continues to be greater than other Front Range hospitals.

Front Range Hospitals Uninsured as a % of Total Care Based on Total Charges by Payer Type (2022)



Source: HCPF 2024 Hospital Financial Transparency Report Detailed Data by Hospital: Total Gross Charges by Peer Group <https://hcpf.colorado.gov/sites/hcpf/files/2024%20Hospital%20Financial%20Transparency%20Report%20Appendix%20C%20V2.pdf>
 Uninsured is defined as the total charges as reported by hospitals in Self Pay and CICIP/Other payer categories.

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Financial Statements





Denver Health and Hospital Authority

Statements of Net Position

December 31, 2023 and 2022

Assets and Deferred Outflows of Resources

	2023	2022 *
Current Assets		
Cash and cash equivalents	\$ 36,021,054	\$ 45,859,134
Patient accounts receivable, net of estimated uncollectibles of approximately \$88,200,000 and \$65,700,000 in 2023 and 2022, respectively	126,495,200	101,222,178
Due from other governmental entities	42,015,253	42,728,580
Due from City and County of Denver	10,033,686	5,699,020
Other receivables	20,720,970	7,534,963
Interest receivable	1,875,925	1,503,291
Due from other funds and investment in discretely presented component units	7,600,738	10,821,071
Inventories	22,390,235	18,903,095
Prepaid expenses and other assets	21,311,381	17,500,891
Total current assets	288,464,442	251,772,223
Noncurrent Assets		
Notes receivable	14,957,348	14,957,348
Estimated third-party payor settlements receivable	1,893,030	3,865,767
Equity interest in joint venture	651,014	586,958
Restricted investments	19,971,136	19,344,067
Capital, leased, and subscription assets, net of accumulated depreciation and amortization	628,909,686	662,931,031
Long-term investments	277,899,018	254,290,496
Board-designated investments	-	1,800,001
Other long-term assets	9,642,899	10,735,024
Total noncurrent assets	953,924,131	968,510,692
Total assets	1,242,388,573	1,220,282,915
Deferred Outflows of Resources		
Deferred outflows of resources related to pension benefits	62,420,086	8,564,580
Deferred outflows of resources related to other postemployment benefits	3,708,982	304,595
Loss on refunding of debt	11,851,792	13,211,559
Total deferred outflows of resources	77,980,860	22,080,734
Total assets and deferred outflows of resources	\$ 1,320,369,433	\$ 1,242,363,649

SOURCE: Denver Health and Hospital Authority Audit Report, April 24, 2024. In order to accurately interpret these statements, they should be read in conjunction with the notes that accompany the audited financial statements, available upon request

Denver Health and Hospital Authority

Statements of Net Position (continued)

December 31, 2023 and 2022

Liabilities, Deferred Inflows of Resources and Net Position

	2023	2022 *
Current Liabilities		
Current maturities of bonds payable	\$ 13,435,000	\$ 11,909,999
Current maturities of leases and subscriptions	11,174,901	14,750,804
Current maturities of notes payable	1,130,000	2,051,757
Medical malpractice liability	8,654,659	8,204,603
Accounts payable and accrued expenses	40,712,071	48,487,068
Accrued salaries, wages and employee benefits	47,556,645	34,649,173
Accrued compensated absences	38,365,012	40,923,538
Unearned revenue	29,765,535	35,385,137
Total current liabilities	190,793,823	196,362,079
Long-term Liabilities		
Long-term portion of liability for estimated third-party settlements	5,714,390	6,496,967
Long-term portion of compensated absences	116,076	116,077
Bonds payable, less current maturities	268,148,000	274,688,796
Lease and subscription liability, less current maturities	31,570,510	33,071,611
Notes payable, less current maturities	38,463,032	39,692,346
Net pension liability	149,528,010	61,162,594
Postemployment benefits	7,741,905	3,337,059
Total long-term liabilities	501,281,923	418,565,450
Total liabilities	692,075,746	614,927,529
Deferred Inflows of Resources		
Deferred inflows of resources related to pension benefits	5,775,229	15,349,458
Deferred inflows of resources related to other postemployment benefits	819,082	895,145
Deferred inflows of resources related to leases	6,362,670	6,660,121
Total deferred inflows of resources	12,956,981	22,904,724
Total liabilities and deferred inflows of resources	705,032,727	637,832,253
Net Position		
Net investment in capital assets	278,784,845	300,641,126
Unrestricted	336,551,861	303,890,270
Total net position	615,336,706	604,531,396
Total liabilities, deferred inflows of resources and net position	\$ 1,320,369,433	\$ 1,242,363,649

SOURCE: Denver Health and Hospital Authority Audit Report, April 24, 2024. In order to accurately interpret these statements, they should be read in conjunction with the notes that accompany the audited financial statements, available upon request



Denver Health and Hospital Authority

Statements of Revenues, Expenses and Changes in Net Position

Years Ended December 31, 2023 and 2022

	2023	2022 *
Operating Revenues		
Net patient service revenue	\$ 969,866,999	\$ 901,027,279
Capitation earned net of reinsurance expense	1,366,220	2,502,535
Medicaid disproportionate share and other safety net reimbursement	163,097,427	148,120,716
City and County of Denver payment for patient care services	32,577,300	29,700,000
Federal, state and other grants	122,658,114	99,509,389
City and County of Denver purchased services	30,887,402	30,007,576
Poison and drug center contracts	20,369,961	20,478,071
Other operating revenue	57,017,528	52,414,502
	<u>1,397,840,951</u>	<u>1,283,760,068</u>
Operating Expenses		
Salaries and benefits	848,333,192	773,970,366
Contracted services and nonmedical supplies	263,584,496	265,572,549
Medical supplies and pharmaceuticals	217,406,805	194,269,667
Depreciation and amortization	71,588,006	73,675,820
	<u>1,400,912,499</u>	<u>1,307,488,402</u>
Operating loss	<u>(3,071,548)</u>	<u>(23,728,334)</u>
Nonoperating Revenues (Expenses)		
Increase (decrease) in equity in joint venture	64,056	(62,454)
Nonoperating grant revenue (FEMA)	3,283,928	6,089,020
Interest income	11,961,401	10,197,601
Interest expense	(14,526,899)	(14,599,301)
Net increase (decrease) in fair value of investments	9,363,579	(36,563,351)
Gain on disposition of capital assets	831,197	3,734
	<u>10,977,262</u>	<u>(34,934,751)</u>
Income (loss) before capital contributions	7,905,714	(58,663,085)
Contributions Restricted for Capital Assets	2,899,596	1,485,231
Increase (decrease) in net position	<u>10,805,310</u>	<u>(57,177,854)</u>
Total Net Position, Beginning of Year	<u>604,531,396</u>	<u>661,709,250</u>
Total Net Position, End of Year	<u>\$ 615,336,706</u>	<u>\$ 604,531,396</u>

* Restated for Implementation of GASB 96

SOURCE: Denver Health and Hospital Authority Audit Report, April 24, 2024. In order to accurately interpret these statements, they should be read in conjunction with the notes that accompany the audited financial statements, available upon request

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Contract Reconciliation





April 11, 2024

To: Ansar Hassan, Interim Chief Financial Officer, DHHA
From: Meggan Parezo, Director of Shared Services & Business Operations, Denver Department of Public Health & Environment
Subject: 2023 Denver Health Operating Agreement Contract Fiscal Close Out

Regarding the services outlined in the 2023 Operating Agreement provided by Denver Health and Hospital Authority (DHHA) to the City and County of Denver, we agree that expenses for 2023 came in under the initial forecasts outlined in the Operating Agreement. Any budget shortfall realized by a specific section of the Operating Agreement was absorbed within the larger City appropriation it was budgeted within. Therefore, 2023 is closed without the need for a contract budget amendment. Please see Exhibit A for a breakdown of the variance by appendix.

Per audit recommendations, DHHA and the City agree that this memo and the Exhibit A will be included in DHHA’s 2023 annual report to the City.

This memo concludes the Operating Agreement fiscal year 2023 close out. The City deeply appreciates DHHA’s partnership in serving Denver’s most vulnerable populations, and your partnership in financial management and reporting.

Meggan Parezo
Director Shared Services & Business Operations
Denver Department of Public Health and Environment

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Exhibit A: 2023 Operating Agreement Contract Budget Variance by Appendix

Appendix	Description	2023 Final Approved Budget	2023 Type of Payment	2023 Final	Difference
A-1	Medically Indigent Patient Care	32,577,300	Flat	32,577,300	0
A-2	Training: Continuing Education	0	Flat	91,172	-91,172
A-2	Training: Certification	0	Fee for Service	0	0
A-2	Englewood	1,272,728	Flat	1,272,728	0
A-2	DEN Paramedic	3,300,467	Actual	3,358,693	-58,226
A-2	Medical Direction and QA/QI for 911 Call Takers	69,793	Flat	69,793	0
A-2	Medical Direction Services	0	Flat	169,800	-169,800
A-2	EMRS Oversight	94,090	Flat	94,090	0
A-2	Emergency Service Patrol	733,728	Flat	733,728	0
A-3	Public Health	926,777	Actual	627,746	254,031
A-4	Denver C.A.R.E.S.	2,459,485	Actual	2,439,919	19,566
A-6	Legally Detained Care at Hospital	4,564,500	Actual	6,182,619	-1,618,119
A-8	Rocky Mountain Poison Center	96,900	Flat	96,900	0
A-9	Clinical and Laboratory Services	25,000	Fee for Service	16,462	8,538
B-1	COSH and OUCH Line	625,000	Actual	238,064	386,936
B-2	NurseLine	102,797	Flat	102,797	0
B-3	Legally Detained Care at Jail and Detention Center	19,374,515	Actual	17,312,692	2,061,823
B-7	Parkhill Financing	200,900	Flat	204,761	-3,861
B-7	South Westside Clinic CIP Payment	1,200,000	Flat	1,200,000	0
B-7	Office of Medical Examiner Waste Pick-Up	n/a	Fee for Service	8,739	-8,739
B-7	OME Postage	n/a	Fee for Service	998	-998
B-7	Treatment on Demand	573,384	Actual	521,174	52,210
B-8	Sexual Assault Nurse Examiner (SANE)	188,000	Fee for Service	215,560	-27,560
B-8	Blood Alcohol Draws	8,000	Fee for Service	8,439	-439
B-8	At-Risk Intervention and Mentoring (AIM)	179,085	Flat	179,085	0
B-8	First Aid CPR AED Training	n/a	Fee for Service	0	n/a
B-8	Tactical Casualty Care for Law Enforcement Training	n/a	Fee for Service	10,545	-10,545
B-8	Fitness for Duty Psychiatric Evaluations	n/a	Fee for Service	600	-600
B-9	Expert Witnesses	40,000	Fee for Service	1,950	38,050
B-9	Court Competency Evaluations	185,000	Fee for Service	165,600	19,400



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