

## Board of Managers

By Telephone

To Listen to Board Meeting

210-358-1880

Access Code: 177 213 5399#

Tuesday, 1/19/2021

6:00 - 8:00 PM CT

1. Call to Order and Record of Attendance *Presented By: Jim Adams, Chair* (:01)
2. Invocation – Pastor Tom Robison, Evangelical Lutheran Church in America *Presented By: Jim Adams, Chair* (:03)
3. Pledge of Allegiance *Presented By: Jim Adams, Chair* (:01)
4. Public Comment (:01)
5. Approval of Minutes of Previous Meeting(s): (:03)
  - November 10, 2020 (Special Meeting)
  - November 17, 2020 (Regular Meeting)
  - December 15, 2020 (Special Meeting)
  - 11.10.20 Minutes - Page 3*
  - 11.17.20 Minutes - Page 13*
  - 12.15.20 Minutes - Page 28*
6. New Business: *Presented By: Jim Adams, Chair* (:15)

### Consent Agenda

- A. Consideration and Appropriate Action Regarding a Contract Between Community First Health Plans and Clarity Software Solutions, Inc. for Member Fulfillment Services *Presented By: Theresa Scepanski*
    - 1.19.21 CFHP Fulfillment Services - Page 47*
  - B. Consideration and Appropriate Action Regarding a Contract Between Community First Health Plans and SPH Analytics for Member and Provider Survey Services *Presented By: Theresa Scepanski*
    - 1.19.21 CFHP member and Provider Survey Services - Page 51*
7. Action Items: (:30)
    - A. Consideration and Appropriate Action Regarding Selected Purchasing Items:
      - (1) Consideration and Appropriate Action Regarding a Contract with Henock Construction for Renovations and Repairs at the Edgewood Clinic *Presented By: Don Ryden*
        - 1-19-21 - Henock Construction - Edgewood Clinic - Page 56*
      - (2) Consideration and Appropriate Action Regarding a Support Agreement with Haven for Hope of Bexar County for the Jail Outreach Program and Continuity of Care Transition Program *Presented By: Sally Taylor, MD*
        - 1.19.21 Haven for Hope Support Agreement - Page 59*
      - (3) Consideration and Appropriate Action Regarding a Support Agreement with UT Health San Antonio for the Transitional Care Clinic *Presented By: Sally Taylor, MD*

*1.19.2021 UT Health Transitional Care - Page 65*

- (4) Consideration and Appropriate Action Regarding a Contract with Luby's Fuddrucker's Restaurants, LLC dba Luby's Culinary Services for Management of Sky Bistro, Robert B. Green Café, Texas Diabetes Institute Cafeteria, and Business Center Café *Presented By: Jim Willis*

*1.19.20 Lubys Renewal - Page 69*

8. Presentations and Education:

None at this time

9. Information Only Items:

None at this time

10. Adjournment *Presented By: Jim Adams, Chair*

The Board of Managers may recess during the open meeting in order to hold a closed meeting. Alternatively, a closed meeting may be held before the open meeting or after its adjournment.

Closed Meeting: A closed meeting will be held pursuant to TEX. GOV'T CODE, Section 551.085 to receive information regarding pricing, market data and/or financial and planning information relating to the arrangement or provision of proposed new services and/or product lines.

Closed Meeting: A closed meeting will be held pursuant to TEX. GOV'T CODE, Section 551.085 to receive information regarding pricing or financial planning information relating to a bid or negotiation for the arrangement or provision of services or product lines to another person if disclosure of the information would give advantage to competitors of the hospital district.



# University Health System

## BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Tuesday, November 10, 2020  
6:00 p.m.  
Cypress Room, University Hospital  
4502 Medical Drive  
San Antonio, Texas 78229

### MINUTES

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#### **BOARD MEMBERS PRESENT:**

James R. Adams, Chair  
Ira Smith, Vice Chair  
Roberto L. Jimenez, M.D., Immediate Past Chair  
Margaret Kelley, M.D.  
Thomas C. ("TJ") Mayes, J.D.  
Anita L. Fernandez  
L.P. Buddy Morris

#### **OTHERS PRESENT:**

George B. Hernández, Jr., President/Chief Executive Officer, University Health System  
Bryan J. Alsip, MD, Executive Vice President/Chief Medical Officer, University Health System  
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System  
Rob Hromas, MD, Dean, Long School of Medicine, UT Health San Antonio  
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System  
Leni Kirkman, Executive Vice President/Chief Marketing, Communications & Corporate Affairs Officer  
& Interim President/University Health System Foundation  
Serina Rivela, Vice President/General Counsel, Legal Services, University Health System  
Travis Smith, Deputy Chief Financial Officer, University Health System  
Rajeev Suri, MD, Professor/Department of Radiology, UT Health; and President/Medical-Dental Staff,  
University Health System  
Laura Garcia, Business Reporter, San Antonio Express-News  
And other attendees.

#### **CALL TO ORDER:**

Mr. Adams called the meeting to order at 6:10 pm.

**INVOCATION AND PLEDGE OF ALLEGIANCE**

In the absence of Ms. Jeanine Atkinson, Mr. Jim Adams provided the invocation and led the pledge of allegiance.

**PUBLIC COMMENT:** None.

**DISCUSSION AND APPROPRIATE ACTION REGARDING BEXAR COUNTY HOSPITAL DISTRICT D/B/A UNIVERSITY HEALTH'S PRELIMINARY OPERATING, DEBT SERVICE AND CAPITAL BUDGETS FOR FISCAL YEAR 2021 — GEORGE B. HERNÁNDEZ, JR./ REED HURLEY**

**SUMMARY:**

Mr. Hernandez welcomed the Board and made some introductory remarks regarding the budget process from the point of Board approval today through approval and acceptance by Bexar County Commissioners Court. He yielded the floor to Mr. Hurley for a detailed presentation on the preliminary 2021 Operating, Debt Service and Capital Budget. The preliminary 2021 budget was developed using the Triple Aim Plus as the guiding principles. Improving quality, safety and outcomes, improving the patient experience, improving efficiencies, and improving access to care, were all taken into consideration during the planning process. The preliminary 2021 budget incorporates many changes that are known or projected to occur during the coming year. The impact of the COVID-19 pandemic, changes in supplemental funding, optimization of the Epic system, ongoing large capital projects, and many planned operational improvements will impact revenues and expenses in the coming year.

**Operating Revenue – Consolidated Total Operating Revenue: \$2.21 Billion**

- Property Taxes \$426.0 million
- Community First \$611.8 million
- Net Patient Revenue (NPR) \$817.8 million
- Disproportionate Share (DSH) \$26.9 million
- Network Access Improvement Program (NAIP) \$33.1 million
- Uncompensated Care \$86.4 million
- Delivery System Reform Incentive Payment (DSRIP) \$68.1 million
- Skilled Nursing Facilities (SNF) \$33.9 million
- Other Revenue \$103.6 million

**Operating Expense – Consolidated Operating Expenses: \$2.11 Billion**

- Medical Claims \$529.4 million
- Salaries \$609.7 million
- Benefits \$135.3 million
- Medical Services \$222.8 million
- Supplies \$301.4 million
- Purchased Services \$306.6 million

**Clinical Volume by Location**

<u>2020 Projected</u>	<u>2021 Budget</u>	<u>Variance %</u>
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- Primary/Urgent Care  
 375,748 visits      460,219 visits      + 22.5

Clinical Volume by Location

	<u>2020 Projected</u>	<u>2021 Budget</u>	<u>Variance %</u>
○ Specialty Care			
415,590 visits		465,577 visits	+ 12.0
65,480 treatments			+ 9.7
7,556 procedures			+ 82.6
○ Preventive Care/ School-Based Clinics			
41,522 visits		60,708 visits	+ 46.2
○ Mammography			
27,376 procedures		30,488 procedures	+ 11.4
○ UH Emergency Care			
86,377 visits		103,495 visits	+ 17.4
○ University Hospital			
28,128 discharges		31,857 discharges	+13.3

Total discharges are projected to grow by 13.3 percent with 12.6 percent growth in adults and 20.6 percent in pediatrics. Outpatient ambulatory clinic volume is budgeted to achieve a 23.6 percent increase over 2020 projected activity. These volumes are in line with actual volumes achieved during 2019. The budget assumes that in early 2021, the pandemic will end and demand for healthcare services will return to normal levels.

2020 Projects

- Management of COVID Lockdown, Surge, and limited Reopening
- Epic Implementation – July 11 Go-live
- Women’s & Children’s Hospital – On schedule
- Advanced Diagnostics Center – Opening December 2020
- Pharmacy Growth – Retail Pharmacy & Meds to Beds
- Refunding of 2010 Bonds – Completed, Net Present Value savings of \$15 million
- Building Renovation & Repairs – Ambulatory Clinics & Roofs
- Premier Financial Software – January 1 Go-live

2021 Projects

- Grow Patient Volumes to 2019 level
- Optimize Epic
- Continue Women’s & Children’s Hospital Progress
- Expand Pharmacy Services – Retail Pharmacy & Specialty Pharmacy
- Focus on UT Health Partnership – Growth of Strategic Service Lines

- Continue Ambulatory facility repairs/upgrades – South Flores, Naco Perrin, Southeast, and others
- Implement Kronos Labor Management Software
- Address Supplemental Funding Changes

2021 Project: Grow Patient Volume - 2020 Impact vs. 2019 Average

Due to the public’s fear of catching COVID-19, closings of schools and businesses, and State imposed restrictions on performing elective procedures, patient volumes dropped dramatically at University Health, as well as other health care providers across the country. In April, surgical volumes dropped by 50 percent and most other areas were down at least 30 percent. Over the summer and into the fall months, patient volumes have grown but have not fully returned to 2019 levels. For patient care areas, volumes are the main driver of revenue and expense. The preliminary 2021 budget assumes volumes will return to levels similar to those in 2019 with some variations due to known service line changes. The long term medical resource demands and financial impacts related to the COVID-19 pandemic are unknown at this time but are predicted to last several years.

2021 Budgeted COVID-19 Impacts

COVID Initiative	2021 Financial Impact
Revenue	
FMAP Deflation	(21.2) M
Medicare Sequestration	(1.6) M
CARES Payment Decrease	(22.8) M
<u>Total Revenue Impact</u>	<u>\$ (45.6) M</u>
Expense	
COVID Entrance Screeners: 54 FTE	2.1 M
COVID Pre-Procedure Testing: 14 FTE	0.6 M
COVID PPE	2.3 M
<u>Pharmacy: COVID Vaccine</u>	<u>3.2 M</u>
<u>Total Expense Impact</u>	<u>\$ 8.2 M</u>
<b>Total Financial Impact 2021 Budget</b>	<b>\$ (53.8) M</b>

2021 Project: Epic Optimization

The Epic Electronic Health Record went live on July 11, 2020, and has changed work flows in many areas. Optimization of the Epic system will improve many processes during 2021 and beyond. All of the Triple Aim *Plus* goals should improve due to the implementation of the Epic system. Mr. Hurley provided an industry benchmark comparison for a three-month period from July to October 2020. This is an opportunity-focused effort with a performance goal for University Health to be in the top 25 percentile. Many operational and quality improvements will occur as staff, physicians, and patients optimize use of the tool. University Health is on its way to being a top performer in two areas:

	Ours	Median	Top 25%
Pre-Services Collection	32.8	10	20.3
Aged 90+ Accounts	6.9	21.9	17.8

2021 Project: Retail Pharmacy Growth

Since January 2018 thru June 2020, outpatient pharmacy dispense indicates an 85 percent overall growth:

- Improved Management of CareLink/Grant patients
- University Health Prescription Savings Club
- Employee prescription fill growth: \$0 co-pay
- Expand service to insured patients: 300 percent increase

2021 Project: Specialty Pharmacy Partnership with Shields Pharmacy

- High cost drugs primarily used for Transplant, HIV, and Cystic Fibrosis patients
- Conservative Estimates included in 2021 Budget
- Specialty Pharmacy Revenue \$19.7 million
- Total Expense Impact \$19.3 million
- Total Financial Impact 2021 Budget \$0.4 million

2021 Project: Women's & Children's Hospital

- Groundbreaking 2019
- Significant Progress
- 2021 Campus Traffic Flow Disruptor
- Planned opening early 2023

2020/2021 Project: Ambulatory Facility Upgrade

- Planning, Design and Construction are budgeted with a \$4.1 million increase for repair and renovation of multiple ambulatory locations including South Flores, Naco Perrin, and the Southeast Clinic.

Clinical Services Division – 2021 Revenue Budget

- Total Operating Revenue \$1.6 Billion
- Property Taxes \$426 million
- Net Patient Revenue (NPR) \$817.8 million
- Disproportionate Share (DSH) \$26.9 million
- DSRIP \$68.1 million
- Uncompensated Care (UC) \$86.4 million
- NAIP \$33.1 million
- Skilled Nursing Facilities (SNF) \$33.9 million
- Other Revenue \$100.6 million

2021 University Health less CFHP Revenue Budget

- Mr. Hurley compared revenue sources projected for 2020 and preliminary for 2021 and respective amounts: Net Patient Service Revenue, Property Taxes, DSH, DSRIP, NAIP, SNF, UC, Tobacco Settlement Fund, and Other. Net Patient Services Revenue for 2020 is projected to be \$731,194, while the 2021 preliminary budget amount is \$817,773. Total Operating Revenues for 2020 projected to be \$1,568,943, while 2021 preliminary budget amount is \$1,592,729.

#### Volume and Revenue

The Preliminary 2021 budget projects inpatient activity will increase by 13.3 percent and outpatient activity will increase by 23.6 percent compared to the volumes projected for 2020. The major assumptions for clinical volumes revolves around the COVID-19 pandemic. For budgeting purposes, the assumption is that the pandemic will ease in early 2021, as vaccines become available and demand for services will return to historical levels. There should be additional volume related to a backlog of elective procedures that were delayed due to the pandemic. Mr. Hurley provided additional details regarding activity in Exhibit 2, attached to the 2020 preliminary budget. The major factors contributing to this growth include:

- Assumption that patient volumes will return to 2019 levels.
- Growth in the Orthopedics, Transplant, and Heart/Vascular cases, due to delays in treatment during 2020.
- Women's service line enhancement will drive continued volume increases in both inpatient and outpatient settings.
- Total discharges are projected to grow by 13.3 percent with 12.6 percent growth in adults and 20.6 percent in pediatrics. These volumes are in line with actual volumes achieved during 2019.

#### Payer Mix Summary – Patient Revenue

\$.8 Billion Gross Charges, \$818 million Net Patient Revenue (NPR):

- CareLink – 3 percent NPR
- Medicaid – 23 percent of NPR\*
- Commercial – 25 percent of NPR
- Medicare – 43 percent of NPR

*\*Approximately 80 to 85 percent are going to be Obstetrics and Gynecology patients.*

Commercial Insurance Rate Negotiations - Mr. Hurley reviewed negotiated reimbursement adjustments with the various managed care companies for the period 2014 through 2021. The largest increase adjustment across the board of approximately \$10.2 million is for FY 2021.

#### Changes in Net Patient Revenue - \$86.6 million and Variance from Projected 2020

- 2020 Projected Net Patient Revenue is \$731.2 million
- Clinical volume increase: \$30.4 million
- Pharmacy volume increase: \$23.5 million
- Medicare rate improvement: \$19.1 million
- Managed Care Rate Improvement: \$10.2 million
- Cost Report: \$3.4 million\*
- 2021 Net Patient Revenue Budget: \$817.8 million

*\*The Medicare cost report is a financial report that is filed annually with CMS which identifies the cost and charges related to healthcare activities, and impacts reimbursement, much like a tax return.*

#### 2021 Project: Supplemental Funding Programs Budget: \$206 Million

- \$54 million lower than the 2020 projection
- Major Program Changes
- Medicaid UC Decrease - \$15.5 million – Lower FMAP
- DSRIP Decrease - \$17.1 million

(Program ends September 2021)

- DSH Decrease - \$17.3 million – Scheduled DSH cuts
- NAIP Decrease - \$1.6 million Lower FMAP

Clinical Services Division – 2021 Expense Budget

Total Operating Expense: \$1.58 Billion

- Skilled Nursing Facilities - \$33.1 million
- Salaries - \$580.9 million
- Benefits - \$128.7 million
- Medical Services - \$222.8 million
- Supplies - \$301.4 million
- Purchased Services - \$233.4 million

Operating Expense

2020 Projected Total Operating Expense: \$1,418.7 million/% Variance

- Salaries: \$32.1 million/5.0
- Benefits: \$2.7 million/2.1
- Medical Services: \$13.6 million/6.5
- Purchased Services -\$6.6 million/-2.4
- Supplies: \$39.8/15.2
- Changes to Total Operating Expense: \$81.7 million/5.8
- 2021 Preliminary Budget Total Operating Expense: \$1,500.4 million

Employee Compensation

2020 Projected Employee Compensation: \$674.8 million\*

- Merit Increase and Market Adjustment \$15.6 million
- Volume Impact \$6.3 million
- New Programs \$4.5 million
- Epic Impact \$3.7 million
- Specialty Pharmacy \$2.0 million
- Benefits \$2.7 million
- Changes to Employee Compensation Expense \$34.8 million
- Variance from Projected 2020 5.2%
- Total Employee Compensation Expense \$709.6 million

*\*Drivers for each item provided in written report.*

Medical Services

2020 Projected Medical Services - \$209.2 million\*

- UT Master Services Increase: \$4.9 million
- Increased CareLink Utilization: \$4.9 million
- Physician Recruitment Support: \$2.1 million
- UMA Contracts with UT Health: \$1.8 million
- Changes to Medical Service Expense: \$13.6 million, or 6.5% variance

*\*Drivers for each item provided in written report.*

Purchased Services - 2020 Projected Purchased Service Expense: \$273.1 million

- Comprised management fees, planning, design and construction, transplant programs, community support, Epic project, maintenance contracts, net other purchased services, SNF

expense. Changes to purchased service expense is -\$6.6 million, or -2% variance. Total purchase service expense is \$266.5 million. Drivers for each item provided in written report.

Supply Expense – 2020 Projected Supply Expense: \$261.6 million

- Comprised of pharmaceuticals, specialty pharmaceutical drugs, implants, medical supplies, and non-medical supplies. Changes to Supply Expense: \$39.8 million, or 15.2% variance. Total Supply Expense: \$301.4 million.

University Health less CFHP:

	<u>2020 Projected</u>	<u>2021 Preliminary</u>	<u>Variance</u>
○ Bottom Line	\$98.5 million	\$8.4 million	-91.5%

Property Tax Revenue - (\$0.276235 of \$100 valuation) x \$181 billion in property values

- For 2021 this produces \$499 million in total assessments
- The \$0.27 rate covers M&O (operations) and I&S (debt service)
- 2021 total rate is projected to produce \$14.7 million more than 2020
- 2021 M&O Tax Revenue = \$426 million up \$11.6 million
- 2021 I&S Tax Revenue = \$73 million up \$3.1 million

Bond Debt

Debt on Sky Tower/RBG	\$518,625,000
Certificates of Obligation, Series 2018 & Series 2020	
<u>And Women’s and Children’s Hospital</u>	<u>\$413,405,000</u>
Total Balance of Debt at Par	\$932,030,000

<u>Debt Service</u>	<u>2020 Projected</u>	<u>2021 Preliminary</u>	<u>Variance</u>	<u>%</u>
Debt Service I&S	\$70.2 million	\$73.3 million	3.1	4.4
<u>Debt Service Payment</u>	<u>\$70.2 million</u>	<u>\$73.3 million</u>	<u>3.1</u>	<u>4.4</u>
Net Debt Service Revenue	-	-	-	0.0

Capital Asset Value - Assets in Service: \$1,962 million

- Land & Improvements: \$21million, Less Depreciation -\$10 million  
Asset Book Value: \$11 million
- Buildings: \$1,277 million, Less Depreciation -\$381million  
Asset Book Value: \$897 million
- Equipment: \$663 million, Less Depreciation -\$465 million  
Asset Book Value: \$198 million

Aged Capital Equipment – Replacement Plan by Year

- Detailed review of aged medical equipment & expected useful life
- Implemented replacement plan to smooth spikes
- Aged Medical Equipment = \$3 million

<u>2021 Routine Capital Requirements</u>	<u>Grand Total</u>
Essential: Cannot Function Without:	\$13,647,281 million
Important: Necessary for Improvement	\$28,520,675 million
Proactive: Necessary to avoid Problems	\$2,056,480 million
Total Clinical Services – Mandated:	\$2,991,010 million
Total Clinical Services – Replacement:	\$32,002,797 million
<u>Total Clinical Services – New</u>	<u>\$9,230,628 million</u>
Grand Total:	\$44,224,436 million

Grand total includes:

- Radiology Equipment Replacement = \$5.7M
- Rio and Horizon Fire Alarm Replacement = \$5.0M
- Facilities = \$3.6M
- Aged Medical Equipment = \$3M
- DaVinci Robot = \$2.3M

Consolidation of 2021 Budget

- CFHP Budget Approved by CFHP Board 10/23
- Presentation to University Health Board 10/27
- University Health less CFHP

	<u>2020</u>	<u>2021</u>
	<u>Projected</u>	<u>Preliminary/Variance</u>
Total Operating Revenue	\$2,187.6 million	\$2,207.6 million/0.9%
Total Operating Expense	\$1,985.9 million	\$2,105.3 million/6.0%
Bottom Line		
Excluding Debt Service	\$149.8 million	\$19.9 million/86.8%
Debt Service	\$70.2 million	\$73.3 million/4.4%
Capital Requirements	\$44.1 million	\$44.4 million/0.7%

RECOMMENDATION:

Staff recommends Board of Managers’ approval of the proposed Operating, Debt Service and Capital Budgets for Fiscal Year 2021, and endorsement to forward to Bexar County Commissioners Court for their final approval on December 1, 2020.

ACTION:

A **MOTION** to approve staff’s recommendation was made by Dr. Kelley, **SECONDED** by Mr. Morris, and **PASSED UNANIMOUSLY**.

EVALUATION:

Throughout the presentation, Board members engaged the staff in dialogue regarding staffing, absences related to COVID-19, and University Health’s paid time off policy. University Health is well prepared to onboard additional nurses and/or providers should there be another surge of COVID-19 in the city. Frontline workers and providers who get sick are encouraged to stay home. A temporary change to the PTO policy allows for a negative balance up to 80 hours to avoid burnout of clinicians. The number of 2020 Projected FTE positions is 8,403. The preliminary 2021 budget indicates a total paid FTE count of 8,976.4, an FTE variance of 573.4; FTE growth of 6.8 percent, and Mr. Hurley referenced Exhibit 6 (2021 Budget FTE Change). Also discussed were the 2020 savings due to the delay of the Epic implementation, the improved impact on patient outcomes due to Epic, and availability of data from Epic. It was noted that the Epic system has eliminated approximately 90 subsystems, and University Health now has a seamless integration with UT Health. Savings in 2020 were due to cancelled travel and remote training during COVID-19. Dr. Jimenez asked about the interpretation of medical data and the diagnosing of patients when so many symptoms are alike, and intuition and experience play a major role.

He asked if University Health has analytics experts available to interpret the data and what will University Health do with all the data that is collected. University Health has many reporting requirements with national and state registries, for specific data, and Epic will be very helpful in this regard. Currently, there is a group working on dashboards, which can be customized and put into a work flow so that providers are reminded daily. Prior to Epic, data was manually pulled by report writers, whereas now Epic can provide almost 100 percent of that data. The staff is currently working on data validation which will take a period of time to ensure all of the fields are correct to produce solid data. All agreed that the implication of data is for teaching, research, and particularly important, are the social determinants of disease. In addition, Epic has a national interface that allows any other healthcare organizations in the country that uses Epic to access a patient's medical record and vice versa. Epic will also help to quantify the savings produced by having a large ambulatory network, to include improving the health of the community and the avoidance of emergency room visits. The Baptist Health System is the other healthcare organization in town that has implemented Epic. Mr. Ted Day is working with the Federally Qualified Health Centers in town to enroll them in Epic. In addition, Mr. Hernandez provided background information on the bond debt service and recalled that the Board made a \$120 million cash contribution towards the Sky Tower from its Reserves Account. The 340B Drug Pricing Program, the establishment of a Geriatrics service line, hospital capacity, Medicare, Medicaid, and the CareLink financial assistance program were also discussed in great detail.

FOLLOW UP:

Mr. Morris requested historical income statement information going back five years. Mr. Adams suggested this information be shared with all the Board members.

**ADJOURNMENT:**

There being no further business, Mr. Adams adjourned the meeting at 8:11 pm.

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James R. Adams  
Chair, Board of Managers

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George B. Hernández, Jr.  
Acting Secretary, Board of Managers

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Sandra D. Garcia, Recording Secretary



**BEXAR COUNTY HOSPITAL DISTRICT  
BOARD OF MANAGERS**

Tuesday, November 17, 2020  
6:00 p.m.  
Cypress Room, University Hospital  
4502 Medical Drive  
San Antonio, Texas 78229

**MINUTES**

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**BOARD MEMBERS PRESENT:**

James R. Adams, Chair  
Ira Smith, Vice Chair  
Roberto L. Jimenez, M.D., Immediate Past Chair  
Margaret Kelley, M.D.  
Anita L. Fernandez  
L.P. Buddy Morris

**OTHERS PRESENT:**

George B. Hernández, Jr., President/Chief Executive Officer, University Health System  
Bryan J. Alsip, MD, Executive Vice President/Chief Medical Officer, University Health System  
Tommye Austin, PhD, Senior Vice President/Chief Nurse Executive, University Health System  
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System  
Don Ryden, Vice President/Project, Design, & Construction, University Health System  
Rob Hromas, MD, Dean, Long School of Medicine, UT Health San Antonio  
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System  
Leni Kirkman, Executive Vice President/Chief Marketing, Communications & Corporate Affairs Officer  
& Interim President/University Health System Foundation  
Serina Rivela, Vice President/General Counsel, Legal Services, University Health System  
Rajeev Suri, MD, Professor/Department of Radiology, UT Health; and President/Medical-Dental Staff,  
University Health System  
Laura Garcia, Business Reporter, San Antonio Express-News  
And other attendees.

**CALL TO ORDER:**

Mr. Adams called the meeting to order at 6:08 pm.

**INVOCATION AND PLEDGE OF ALLEGIANCE**

Mr. Adams introduced Father Casmir Dike, Chaplain, University Health Spiritual Care Services, and he led the pledge of allegiance. At this time, Mr. Adams invited the Board members to tour University Health's new \$56 million Advance Diagnostic Center (Heart/Vascular & Endoscopy Suite) after today's meeting.

**PUBLIC COMMENT** – None.

**REPORT FROM THE NOMINATING COMMITTEE AND ELECTION OF THE BOARD OF MANAGERS OFFICERS — IRA SMITH, CHAIR, NOMINATING COMMITTEE**

**SUMMARY:** The Board Bylaws call for the Chair to name an Officer Nominating Committee each fall. The Committee's role is to recommend to the Board a slate of officers (Chair, Vice Chair, and Secretary). The Board will consider that slate and any nominations from the floor and elect its officers to be effective immediately. Mr. Ira Smith, Dr. Margaret Kelley and Ms. Anita Fernandez agreed to serve on the committee; and Mr. Smith agreed to serve as its chair. Every Board member was asked provide input directly to any member of the Nominating Committee, who will then bring their recommendation to the full Board. Mr. Adams asked for nominations from the floor at this time.

**RECOMMENDATION:** Hearing no recommendation from the floor, the Nominating Committee on the Election of Officers submitted the following slate of officers for 2020-2021:

- Chair, Mr. James R. Adams
- Vice Chair, Mr. Ira Smith
- Secretary, Dr. Margaret Kelley

**ACTION:** A **MOTION** to approve the Nominating Committee's recommendation was made by Mr. Ira Smith. There being **NO OBJECTION**, the **MOTION CARRIED**.

**EVALUATION:** Mr. Smith thanked Mr. Adams for the opportunity to work with Dr. Kelley and Ms. Fernandez.

**FOLLOW-UP:** None.

**APPROVAL OF MINUTES OF PREVIOUS MEETING(S): OCTOBER 27, 2020 (REGULAR MEETING)**

**SUMMARY:** The minutes of the regular meeting of Tuesday, October 27, 2020 were submitted for approval by the Board of Managers.

**RECOMMENDATION:** There being **NO OBJECTION**, the minutes were **APPROVED** as submitted.

**ACTION:** None.

**EVALUATION:** None.

**FOLLOW-UP:**

**REPORT FROM UT HEALTH SAN ANTONIO — WILLIAM HENRICH, M.D., PRESIDENT**

**SUMMARY:** Dr. Hromas provided an update on the COVID-19 vaccine. Moderna and Pfizer preliminary data indicates their respective vaccines are 95 and 90 percent effective against COVID-19. If the Food and Drug Administration grants an Emergency Use Authorization, the vaccines

will be made available to the public, and could start to be distributed in San Antonio as early as two weeks after Thanksgiving. The Centers for Disease Control and Prevention will be in charge of overseeing the vaccine's distribution to the public but states will develop their own plans as well. Early prioritization puts healthcare workers and first responders at the front of the line. Moderna, which is part of the federal government's Operation Warp Speed, has publicly committed to making 100 million doses; and Pfizer is publicly reporting 75 to 80 million doses by the end of the year. There is no significant difference in efficacy between the vaccines; each patient will need two vaccines one month apart. However, widespread distribution is still months away. Elderly and high risk patients are not included in the first rounds of distribution. The challenge with the Pfizer vaccine is that it must be stored at minus 94 degrees Fahrenheit and requires extreme cold chain distribution and immediate use. Texas will receive a total of 150 million doses of vaccine enough for 750,000 individuals, while the Bexar county region will receive enough for about 75,000 people. Texas will receive about 60 percent Moderna brand and 40 percent Pfizer brand. University Health and UT Health will jointly distribute the vaccines but due to its many ambulatory clinics, University Health has applied to be an independent distribution site. UT Health is the receiving point for the Pfizer vaccine. UT Health and University Health leadership will work closely together to create an infrastructure that assures first responders and healthcare providers in Bexar County receive their vaccination as soon as possible, in the most efficient manner possible. In addition, both have agreed to publicize the importance of receiving the vaccine. Dr. Alsip helped to design the distribution algorithms through STRAC. Dr. Alsip noted that there are 40 more vaccines in the pipeline. There is no cost involved for the vaccines at this time; they will be free.

RECOMMENDATION:

This report was provided for informational purposes only.

ACTION:

No action was required by the Board of Managers.

EVALUATION:

Mr. Adams cautioned that a lot of things are promised and not delivered; he asked the teams to be grateful for the number of vaccines that will be received, and also to be hopeful that the state and federal government follow through. Dr. Jimenez has been made aware that a vast number of nurses across the country have been infected with COVID-19 while working, and Governors are concerned of the shortage this has created, they are shipping nurses from other parts of the country that have not been hit as hard. Dr. Austin agreed that a disproportionate number of health care workers have been infected while they work. University Health has been very fortunate, however; the leadership has been proactive in working with the nurses and Dr. Austin has been proactive regarding personal protective equipment for the nursing staff. Nurses have played a primary role during this pandemic. However, Dr. Austin informed the Board that she and Ms. Andrea Casas have a proposal that will ensure sufficient nursing coverage for next year, which they will present later in the evening

FOLLOW-UP:

None.

- At this time, Mr. Adams asked Dr. Tommye Austin to share an important announcement. Dr. Austin

reported that University Health received word earlier in the day that it has once again been designated as a Magnet facility by the American Nurses Credentialing Center (ANCC), a subsidiary of the American Nurses Association and the world's largest and most prestigious nurse credentialing organization. This is University Health's third re-designation and its 11<sup>th</sup> year as a Magnet organization. The evaluators toured University Health facilities by iPad and performed interviews by WebEx due to the COVID-19 pandemic. The ANCC evaluation committee's decision was unanimous. University Health continues to be among a prestigious group of 554 Magnet institutions worldwide and one of just 51 in Texas. Only 24 percent of hospitals who apply for re-designation are awarded Magnet re-designation because it is a very rigorous process.

- Mr. Adams asked Ms. Kirkman to say a few words about how University Health observed Veterans' Day. This year, veterans were honored with a daylong World War II display in the main lobby at University Hospital. It is University Health's tradition to highlight the story and impact of a specific veteran during this annual event. This year, the event specifically honored Dr. Albert Hartman and Captain William Herald Taylor, Dr. Sally Taylor's father, who was a World War II pilot and prisoner of war. Dr. Albert Hartman's son, Mr. Al Hartman, had an opportunity to visit the display, which included memorabilia loaned by eight University Health staff members. Mr. Adams highlighted Dr. Jimenez's service in Vietnam, and thanked him again on behalf of the Board.
- Dr. Jimenez asked Dr. Austin to say a few words about Dr. Nelson Toazan, Assistant Chief Nursing Officer for Adult Services, who was officially inducted as a Fellow of the American Academy of Nursing during a virtual ceremony on October 31, 2020. Dr. Austin noted that an invitation to join the Fellowship is a tremendous honor in itself; it is the highest commendation for a nurse. Dr. Toazan is also a Magnet appraiser and an expert in infection control practices. He reflects all of the characteristics of a Fellow – he is a nursing leader in education, management, practice and research. The executive leadership is very proud of Dr. Toazan's accomplishments.

#### **NEW BUSINESS - CONSENT AGENDA – JIM ADAMS, CHAIR**

#### **CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF MEMBERSHIP AND PRIVILEGES — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF**

SUMMARY:

Pursuant to Article III, Section 3.3-1 of the Medical-Dental Staff Bylaws, initial appointments and reappointments to the Medical-Dental Staff of University Health shall be made by the Board of Managers. The Board of Managers shall act on initial appointments, reappointments, or revocation of appointments only after there has been a recommendation from the Executive Committee of the Medical-Dental Staff. If approval is granted by the Board of Managers, the clinical provider is placed on a two-year reappointment cycle. After 12 months' provisional review, the provider's status changes from Provisional to Active or Courtesy Staff depending on board certification and the frequency of patient encounters during the previous 12 months. The Credentials Committee met on October 26, 2020, and reviewed the credential files of the individuals listed in the written Credentials Committee Report provided to the Board of Managers. At its meeting of November 3, 2020, in accordance with University Health's credentialing and privileging process, the Executive Committee of the Medical-Dental Staff approved the Credentials Committee's recommendations for clinical privileges for staff membership. The Executive Committee recommends approval by the Board of Managers.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR PROFESSIONAL PRACTICE EVALUATIONS AND DELINEATION OF PRIVILEGES — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF**

SUMMARY: The Credentials Committee met on October 26, 2020, and reviewed proposed revisions to Delineation of Privileges Reports and the Professional Performance Evaluation Reports and forms, which were provided to the Board of Managers. In its meeting of November 3, 2020, the Executive Committee of the Medical-Dental Staff approved the items below and recommends approval by the Board of Managers:

- 1) Delineation of Privileges
  - a. University Health System
    - i. Advance Practice Nurse – (Revised)
    - ii. Advance Practice Professional – Emergency Medicine (Revised)
    - iii. Physician Assistant – (Revised)
- 2) Focused/Ongoing Professional Performance Evaluation Reports

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT BETWEEN COMMUNITY FIRST HEALTH PLANS AND CHANGE HEALTHCARE, INC. FOR EVIDENCE-BASED CLINICAL DECISION SUPPORT THROUGH THE INTERQUAL SYSTEM — THERESA SCEPANSKI**

SUMMARY: The selection of an evidence-based clinical decision support vendor was competitively bid on August 18, 2020. One (1) response was received from Change Healthcare. Change Healthcare is one of only two (2) vendors who offer this decision support, the other being MCG. In the past, MCG also submitted a response; however, their cost was 2-3 times that of Change Healthcare. While only Change Healthcare responded to this competitive bid, they are an industry leader, most cost effective and the best value based on the overall services offered. Community First has utilized Change Healthcare for over 15 years and currently licenses their InterQual Criteria, Review Manager and Interrater Reliability tools. As compared to the previous 5-year contract awarded in 2015, the total estimated cost has increased by \$383,407 (includes new services and staff certification training and re-certification), or \$1,640,628, for a 5-year period beginning January 1, 2021 through December 31, 2025. The increase in annual fees is primarily due to the procurement of additional clinical content modules and staff training, which Ms. Scepaniski described in detail in her written report. The workforce composition data for Change Health was provided for the Board's review. Community First Board of Directors approved the selection of Change Healthcare at its regular Board meeting of October 23, 2020. Community First Board of Directors requests approval of the proposed agreement by the Board of Managers.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT BETWEEN COMMUNITY FIRST HEALTH PLANS AND INOVALON FOR HEALTH INFORMATION TECHNOLOGY SERVICES — THERESA SCEPANSKI**

SUMMARY:

To prepare for the Interoperability Rule Requirements as set forth in the 21<sup>st</sup> Century Cures Act, a contract for a health information technology services solution was competitively bid on August 18, 2020. A total of five (5) responses were received including bids from Change Healthcare, Cognizant, Edifecs, Inovalon and ZeOmega. The bids were compared utilizing a decision matrix and reviewed for responsiveness to the request for proposal (RFP) specifications. The bids were then equally weighed based on administrative and financial criteria. Inovalon provided the best value for the following reasons: (1) well-designed solution that meets the requirements of the Cures Act; (2) authentication and authorization meet and exceed required security standards; (3) extensive implementation support; (4) implementation timeline meets requirements, and; (5) highly competitive fees. Community First Health Plans Board of Directors approved the selection of Inovalon, for Health Information Technology Services, at its regular meeting of October 23, 2020, for a total amount of \$1,217,125 over a three-year period. Community First Board of Directors requests approval of the proposed agreement by the Board of Managers.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN INTERLOCAL AGREEMENT WITH EDGEWOOD INDEPENDENT SCHOOL DISTRICT FOR AN EMPLOYEE CLINIC — THERESA DE LA HAYA/TED DAY**

SUMMARY:

University Health began formally collaborating with local school districts in 2013 initially as a Delivery System Reform Incentive Payment (DSRIP) initiative to improve access to care for pediatric patients. Today, University Health operates school-based clinics at Harlandale ISD, Southwest ISD, and San Antonio ISD. Because of these established clinics and University Health's reputation within the community, Edgewood ISD desires to collaborate with University Health on an employee clinic for their staff and dependents through an interlocal agreement for healthcare services. Through an interlocal agreement, with University Health, Edgewood ISD can provide its employees and their dependents convenient access to care in proximity to their workplace at the University Health Edgewood Clinic. The services to be provided were outlined in the proposed agreement provided for the Board's review by Mr. Day. This is a revenue-generating agreement for University Health, in which Edgewood will pay a fixed rate of \$20,000 per month for their employees to access primary/walk-in services and select laboratory tests at the University Health Edgewood Clinic. The utilization and spend will be closely monitored in its first year and revisited as necessary to right-size for both current and future year agreements. Staff recommends Board of Managers' approval of an interlocal agreement with Edgewood Independent School District for a period beginning January 1, 2021 through December 31, 2022, to enable this new employee clinic relationship to be established.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING PURCHASING ACTIVITIES (SEE ATTACHMENT A) — ANTONIO CARRILLO/TRAVIS SMITH**

**SUMMARY:** University Health’s Purchasing Consent agenda for the month of November 2020 includes five (5) proposed contracts with a total value of \$5,155,733. The ten (10) presented contracts have a total value of \$24,433,472. Out of the presented contracts, six (6) contracts are classified as a Small, Minority, Woman, or Veteran Owned Business Enterprises (SMWVBE), which are included in the November 2020 SMWVBE Status Report. A total of 15 contracts with a combined value of \$29,589,205 are submitted to the Board of Managers for approval during the November 2020 meeting.

**CONSENT AGENDA RECOMMENDATION:** Staff recommends approval of the items listed on the consent agenda.

**CONSENT AGENDA ACTION:** A **MOTION** to approve staff recommendation was made by Dr. Jimenez, **SECONDED** by Mr. Smith, and **PASSED UNANIMOUSLY**.

**CONSENT AGENDA EVALUATION:** None.

**ACTION ITEMS - CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED ITEMS:**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING COMMISSIONING OF TWO PEACE OFFICERS FOR BEXAR COUNTY HOSPITAL DISTRICT — CHIEF A.J. SANDOVAL, III/EDWARD BANOS**

**SUMMARY:** Chief AJ Sandoval introduced two Peace Officer candidates to the Board of Managers – Mr. Felipe J. Moreno, III, and Mr. Rene P. Ramirez. Chief Sandoval has examined and certified the respective credentials of each individual and both meet all of the requirements of a University Health Peace Officer, to include necessary training requirements.

**RECOMMENDATION:** Staff recommends Board approval to commission Felipe J. Moreno, III, and Rene P. Ramirez, as Bexar County Hospital District Peace Officers.

**ACTION:** A **MOTION** to approve staff recommendation was made by Mr. Smith, **SECONDED** by Mr. Morris, and **PASSED UNANIMOUSLY**.

**EVALUATION:** Board members expressed appreciation for the work performed by University Health peace officers, especially during these turbulent times; Mr. Smith commended Chief Sandoval for ensuring they receive appropriate mental health and de-escalation training. Dr. Jimenez noted that the initial mental health training for Peace Officers, San Antonio Police Department, and Bexar County Sherriff’s Office was established by The Center for Health Care Services for the Bexar County region. The region is most fortunate that it has not suffered a major police incident in the last 15 years. Dr. Kelley was especially grateful to have University Health police de-escalate a patient incident in her presence.

**FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A MEMORANDUM OF UNDERSTANDING WITH FAMILY VIOLENCE PREVENTION SERVICES, INC. FOR THE BATTERED WOMEN AND CHILDREN'S SHELTER AND RELATED SUPPORT SERVICES — SALLY TAYLOR, M.D.**

**SUMMARY:** Established in 1977, Family Violence Prevention Services, Inc. (FVPS), has the mission to break the cycle of violence and to strengthen families by providing the necessary tools for self-sufficiency. It includes services provided at the Battered Women and Children's Shelter (BWCS), the only shelter in Bexar County designated by the Health and Human Services Commission to serve both adult and child victims of violence. The BWCS typically has the highest average daily census of any shelter in Texas per data collected by the Texas Council on Family Violence. The purpose of this Memorandum of Understanding is for University Health to provide funding support for FVPS to address multiple needs including staff, other support services (such as food, transportation, kennels), psychiatric treatment (with a target goal of 200 unduplicated adults and 200 unduplicated children, and includes telemedicine treatment), and a forensic nurse (for on-site initial assessments for an estimated 250 women who have suffered injuries, including strangulation). FVPS has set target metrics for each of these areas of support. The MOU provides funding for a 13-month agreement with Family Violence Prevention Services, Inc., beginning December 1, 2020 in the amount of \$650,000. This contract amount is included in the Health System's 2020 and proposed 2021 budget. The workforce data composition for FVPS was provided for the Board's review.

**RECOMMENDATION:** Staff recommends the Board of Managers authorize the President/CEO to execute a 13-month agreement beginning December 1, 2020 in the amount of \$650,000 with Family Violence Prevention Services, Inc., to support the Battered Women and Children's Shelter.

**ACTION:** A **MOTION** to approve staff's recommendation was made by Dr. Kelley, **SECONDED** by Ms. Fernandez, and **PASSED UNANIMOUSLY**.

**EVALUATION:** Discussion ensued regarding statistics cited by Dr. Taylor from a Status of Women report released in May 2019, which indicates that Bexar County has the highest rate of murder of women by male intimate partners of any major city in Texas. From 2017 to 2018, there was a 4 percent increase in family violence incidents (Texas Department of Public Safety). These issues are exacerbated by the COVID-19 pandemic, with widespread concern regarding the mental health repercussions, including the inability for victims to seek help and limited access to normal coping mechanisms. Studies of previous natural disasters indicate that increased domestic violence can last for months after a catastrophic event. In addition, victims who survive a strangulation attempt are unlikely to survive another violent encounter. Dr. Kelley acknowledged that domestic abuse has long been an ugly secret in Bexar County and Mr. Smith described domestic violence as a complex issue that many do not understand. The Board was also informed that many domestic violence victims will not leave the perpetrator if they must leave pets behind. Dr. Kelley asked about the shelter's policy regarding the housing of adolescent boys. For planning purposes and to gauge the program's longevity and sustainability, Ms.

Fernandez asked for the amount of FVPS' total budget for fiscal year 2021 to ascertain what percentage comes from University Health. Dr. Jimenez asked if legal services are made available to the residents of the shelter, and was interested in knowing how the shelter and the women interact with Child Protective Services (CPS). In years past, CPS took a hard stand against victims of domestic violence for allowing the perpetrator to remain in the home, and CPS would remove children from the mother's care. The shelter provides legal services on site and Dr. Taylor acknowledged a lack of general understanding of these situations when CPS gets involved. When Dr. Taylor toured the shelter, Ms. Marta Pelae, CEO, cited several successful cases where the women and shelter staff work directly with a judge and others so that their children are not immediately taken away. This MOU will fund 0.5 FTE position for a Director of Community Integrated Services to provide oversight of programs and enhance liaison activities with CPS (target to serve 175 unduplicated persons/year). In addition, when she toured the shelter she witnessed young boys of all ages and was not made aware that children of any age are excluded. Dr. Taylor did not have FVPS 2021 budget amount available.

FOLLOW-UP:

Dr. Taylor will confirm the housing policy for adolescent boys and will obtain the budget amount requested by Ms. Fernandez. Mr. Adams thanked Dr. Taylor for her leadership in this serious issue and for setting specific metrics; he is delighted to have University Health involved in an issue that requires everyone's attention.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A STAFFING AGREEMENT WITH ACCOUNTABLE HEALTHCARE STAFFING, INC. — ANDREA CASAS/TOMMYE AUSTIN, PH.D.**

SUMMARY:

University Health has used temporary agency staff for a number of years. In 2020, University Health had a higher utilization due to COVID-19 and the EPIC roll-out. Due to the uncertainty of the COVID-19 pandemic in 2021, University Health estimates the use of agency nurses at 2020 levels. This is a request is to secure professional services of qualified, temporary agency healthcare staff from Accountable Healthcare Staffing to assure appropriate coverage for ICU nurses and other areas when workers get sick and need time off to quarantine. Training will include appropriate orientation, including awareness and compliance with University Health policies and procedures. This contract will also ensure that University Health continues to provide exceptional patient care for San Antonio, Bexar County and beyond, which supports immediate and emerging goals. The total estimated expense requested is \$5,025,280 (Average Temp RN Rate: \$60.40 x 40 temps x 2,080 hours = \$5,025,280). The term of this agreement will be from December 1, 2020 through December 31, 2021. This is a planned expense and is included in the 2021 operating budget. This item is exempt from competitive acquisition because temporary staffing services are utilized as occasioned by critical staffing shortages for professional services as needed on a daily basis to ensure the highest quality of patient care is provided. The workforce composition of Accountable Healthcare Staff was provided for the Board's review.

- RECOMMENDATION: Staff recommends Board of Managers' approval of a 13-month contract with Accountable Healthcare Staffing for temporary staffing services in an amount not to exceed \$5,025,280.
- ACTION: A **MOTION** to approve staff's recommendation was made by Dr. Jimenez, **SECONDED** by Mr. Morris, and **PASSED UNANIMOUSLY**.
- EVALUATION: Mr. Morris' asked if the staff had considered on-boarding specialized nurse recruiters who are able to connect University Health with nurses from all over the country, rather than pay the 23 percent agency fee. The advantage of a working with a staffing agency is that they network all the time and are already well-connected. Dr. Jimenez feels that it would take a while for University Health to develop the same talent that the staffing agencies offer. To Dr. Jimenez's question about the role of graduate nurses during the pandemic, Dr. Austin replied that the State Board of Nurse Examiners has issued temporary licenses to these nurses so that they are able to work during the pandemic. Some of these new graduate nurses staff the internal STARS float pool at University Health, and the State of Texas is also waiving Texas licensing requirements for those nurses with out-of-state licenses. University Health accepts nurses who have multi-state licenses. Currently, the STARS float pool has approximately 300 nurses available. The agreement with Accountable Healthcare Staffing serves as a buffer for the well-being of the nursing staff to avoid burn out and to ensure there are no lapses in patient care when there are vacancies, especially on the Medicine Unit, the Operating Room, and the Emergency Department. Use of temporary staff nurses will be the last resort after all other internal means have been exhausted. At the present time University Hospital has approximately 80 high need patients that need one to one care, and has received only three COVID-19 patients from El Paso, Texas. During this year, on average, the staffing agency has provided 20-30 nurses per month. Also noted was University Health's very robust on-boarding program for nurses accredited through the American Nurses Credentialing Center. This is a good place for nurses to work.
- FOLLOW-UP: Mr. Adams asked for Mr. Morris and Dr. Austin to visit with each other at some point regarding his insight on temporary nurse staffing.

**CONSIDERATION AND APPROPRIATE ACTION FOR THE WOMEN'S AND CHILDREN'S HOSPITAL AND ASSOCIATED PROJECTS REGARDING FUNDING OF MEDICAL EQUIPMENT, ACTIVE I.T., FURNITURE, FIXTURES AND INCIDENTAL COSTS; CONTRACT AMENDMENTS WITH BROADDUS & ASSOCIATES FOR PROJECT MANAGEMENT SERVICES; TERRACON CONSULTANTS, INC. FOR MATERIALS TESTING; ENGINEERING ECONOMICS INC. FOR COMMISSIONING SERVICES; PREMIER HEALTHCARE SOLUTIONS, INC. FOR LIFE SAFETY CONSULTING' AND A GUARANTEED MAXIMUM PRICE PROPOSAL (GMP #12B) FOR THE BIOMED BUILD-OUT WITH JOERIS+JE DUNN, A JOINT VENTURE — DON RYDEN**

- SUMMARY: In March 2020, the Board approved an increase to construction costs and design fees to align with programming increases including: Core and shell growth in the Tower, including six (6) new loading dock bays; Programming true-up of functional departmental areas;

Mechanical/electrical infrastructure; 12<sup>th</sup> Floor addition (Core and Shell); Build-out of Floors 8-12; and Podium Expansion (Core and Shell). Medical equipment (MEQ), active IT, and furniture, fixtures, and non-medical equipment (FFE) costs were excluded from the March funding for the build-out of floors 8-12 and the Podium expansion core and shell. Adjustments to these soft costs and other non-construction costs were deferred pending completion of the design and the Construction Manager's assessment of overall construction schedule based on the construction documents. Completion of the initial construction documents in August allowed the Architectural/Engineering team, in coordination with University Health staff, to jointly refine project budget estimates. Mr. Ryden presented detailed tabulated adjustment amounts for each item (projected cost to completion, current approved budget, and increase request amounts).

- A. Medical Equipment, Active I.T.; Furniture & Fixtures, and Incidental Costs, BioMed Build-Out, Consultant Fees, and Owner's Alliance.  
Total increase requested: **\$86,025,167**
- B. Amendments to Supporting Consulting Contracts  
Cumulative amount of additional services required: **\$10,255,830**  
(Of this \$10.25 million, **\$6.91** million will fund consultant fees under A. above).
- C. Guaranteed Maximum Price (GMP #12B)  
Proposal for BioMed Build-Out **\$5,625,167**  
Total contract value for GMPs #1 through #11: **\$415,274,880**  
Combined revised contract total: **\$420,900,047**

Services provided by Broaddus (Program Manager); Terracon (Construction Materials Testing); EEI (Commissioning Agent) and Premier (Life Safety Consultant) were originally budgeted for the base scope of work and as additional scope of work for the Women's and Children's Hospital and Associated Projects; however, the requirement for oversight and inspection services has increased across the duration of the project as indicated below:

Current contract value	<b>\$10,055,655</b>
Additional fees to be committed	<b><u>\$10,225,830</u></b>
Proposed contract value to completion	<b><u>\$20,281,485</u></b>

Staff recommends the cost for this increased scope of work be funded from the Board Designated Fund, of which the Board has \$170.3 million in unencumbered as of October 31, 2020:

This request:	<b>\$80.40 million</b>
GMP #12B	<b>\$5.6 million</b>
Increases total approved Project budget to:	<b>\$777.6 million</b>

The workforce composition data for Joeris+JE Dunn, a Joint Venture, Broaddus & Associates, Engineering Economics, Inc., Premier Healthcare Solutions, and Terracon was provided for the Board's review.

In addition, Mr. Ryden provided an updated summary of the Board approved Project budget and the proposed increased funding for the Board's perusal.

RECOMMENDATION:

Staff recommends Board of Managers' approval for the President/Chief Executive Officer to execute respective contract amendments accordingly:

- A) Additional funding for Women's and Children's Hospital and Associated Projects for Medical Equipment, Active I.T., Furniture & Fixtures and Incidental Costs; and the BioMed Build-Out:  
**\$86,025,167**
- B) Resulting amendments to the respective consultant contracts:
  - \* Broaddus & Associates \$7,893,602  
**New (Revised) Contract Amount: \$15,880,462**
  - \* Terracon Consultants, Inc. \$1,439,718  
**New (Revised) Contract Amount: \$2,235,888**
  - \* Engineering Economics, Inc. \$679,165  
**New (Revised) Contract Amount: \$1,750,075**
  - \* Premier Healthcare Solutions, Inc. \$213,345  
**New (Revised) Contract Amount: \$415,060**
- C) Amendment to the Construction Manager at Risk Agreement with Joeris+JE Dunn, a Joint Venture, for GMP #12B for BioMed Build-Out (not to exceed):  
**\$5,625,167**

ACTION:

A **MOTION** to approve staff recommendation was made by Ms. Fernandez, **SECONDED** by Mr. Morris, and **PASSED UNANIMOUSLY**.

EVALUATION:

Mr. Adams asked Mr. Ryden about his role at University Health and whether he was happy with the quality of the team he has established for himself. Mr. Ryden is very pleased, overall, about his team after making a few staffing adjustments regarding project managers; he is happy with the Joeris+Dunn joint venture and the program manager. This is a huge project with lots of moving parts so he and Mr. Hernandez are absolutely pleased. Dr. Jimenez touched upon a past construction catastrophe that occurred in 2011 at University Hospital; and he emphasized that faith and trust in all contractors involved is of the essence. Mr. Ryden recalled the incident and reported that he and his team try to learn from past mistakes, one of the team's first meeting was about lessons learned while constructing the Sky Tower, and he emphasized their due diligence process to replicate and improve where it is possible. Dr. Jimenez asked about the new hospital's impact on teaching and recruiting of physicians, to which Dr. Hromas replied that he has 13 pediatric specialists in the pipeline who want to come here, and eight (8) new obstetrics and gynecology physicians. Dr. Hromas is receiving inquiries from the very best nationally, renowned physicians due to the new Women's and Children's Hospital. For the newer Board members, Mr. Hernandez explained that the current capital improvement project is comprised of four projects: Women's & Children's Hospital, and the associated projects include the Advanced Diagnostic Center, the parking garage, and the podium. Also noted was the fact that every year since the Sky Tower opened in 2014, University Health has had double digit growth

once marketing started for the Sky Tower. The 12<sup>th</sup> floor of the Women's and Children's Hospital was added because it was the least expensive way to add 30 more beds. Mr. Hernandez is proud that University Hospital is now ranked number one (up from #4) in the city because of the Sky Tower. As chair of the Board's committee, Dr. Kelley is astounded with the leadership, preparations, and oversight of the capital improvement project. She is most impressed with the integration of nurses and physicians during the planning process, and the community outreach by UT Health, which she noted is different for an academic medical center than in other parts of the country. Dr. Kelley has toured mock labor and delivery rooms and neonatal intensive care unit (NICU) rooms. The Labor and Delivery Unit in the new hospital has been designed to accommodate the birth of 5,200 babies up from 2,200 in the old birthing area. Pediatrics is projected to double in capacity from 50 to 100 patients, and the NICU is projected to increase from 50 to 90. University Health staff is working with local Federally Qualified Health Centers (FQHCs) and the School of Medicine as this census is expected to increase. Pediatrics has the greatest opportunity for growth; University Hospital cannot grow right now and the new hospital is about two years away, so the staff is trying to grow incrementally due to current capacity. Mr. Smith asked if the new hospital would be closed to physicians outside of UT Health and UMA. Mr. Banos replied that University Health is in the process of credentialing a couple of subspecialists so that they can bring their practice on board, and also negotiating with CommuniCare on births, and working with the School of Medicine to build a stronger and larger maternal fetal program. Mr. Adams thanked Mr. Ryden for his work. He has a vast amount of experience and is demanding of the people who work with him, he runs a well-managed process and will produce a quality facility. The Board of Managers feels very comfortable with this and eagerly awaits the new hospital.

FOLLOW-UP:

None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONSTRUCTION SERVICES CONTRACT WITH THE PORRAS GROUP, LLC D/B/A BRYCO CONSTRUCTION FOR COUNTER TOP REPAIRS AND UPGRADES AT THE UNIVERSITY FAMILY HEALTH CENTER - SOUTHWEST — DON RYDEN**

SUMMARY:

University Health is continuing with a system-wide repair and upgrade of its outpatient clinics. The University Family Health Center - Southwest, located at 2121 S.W. 36<sup>th</sup> Street is 24 years-old and has experienced deterioration of the plastic laminate countertops in exam rooms, breakrooms, clean and soiled supply rooms and workstations with chipped, broken and missing laminate conditions found throughout. An assessment was made and it was determined to replace countertops with the University Health standard solid surface tops to include integral sinks in order to maintain a clean environment while minimizing the spread of infectious diseases. Procurement Services solicited formal bids (RFCSP-220-06-034-CNST) and received seven (7) responses. The pricing ranges from \$282,711 to \$741,998 and construction schedules, in calendar days, range from 60 to 280 days. The proposals were evaluated

based on the criteria provided to the firms in the RFCSP. Of the firms that responded, Bryco Construction is recommended for selection based on their competitive pricing in the amount of \$489,722, proposed schedule - 77 calendar days, healthcare experience and safety record. This purchase is to be funded from 2020 operational funds. The workforce composition data for Bryco was provided for the Board's review.

RECOMMENDATION: Staff recommends the Board of Managers approve the selection of Bryco Construction as Contractor for Counter Top Repairs and Upgrades at the Southwest Clinic and authorize the President/Chief Executive Officer to execute a contract with The Porras Group, LLC, d/b/a Bryco Construction in the amount of \$489,722.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Smith, **SECONDED** by Ms. Fernandez, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW-UP: None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FINANCIAL REPORT FOR OCTOBER 2020 — REED HURLEY**

SUMMARY: In October, University Health operations continued to be significantly impacted by the COVID-19 crisis resulting in stay at home and social distancing directives reducing patient activity. Clinical activity (as measured by inpatient discharges) was down 7.3 percent for the month compared to budget. Community First Health Plans (CFHP) fully insured membership was up 12.3 percent to budget. On a consolidated basis, gain from operations was \$22.7 million, \$16.8 million better than budget. The consolidated bottom line gain (before financing activity) was \$17.9 million, \$16.2 million better than the budgeted gain of \$1.7 million. Higher other operating revenue partially offset by higher operating expense resulted in performance better than budget. CFHP experienced a bottom line gain of \$7.0 million, which was \$8.4 million better than the budgeted loss of \$1.4 million. Higher premium revenue accounted for the improved performance to budget. Mr. Hurley reviewed notable increases and/or decreases from the December 31, 2019 Consolidated Balance Sheet in detail with the Board.

RECOMMENDATION: Staff recommends approval of the financial report for the month of November, subject to audit.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Smith, **SECONDED** by Ms. Fernandez, and **PASSED UNANIMOUSLY**

EVALUATION: Travel restrictions during the pandemic total approximately \$30 million in savings for University Health.

FOLLOW-UP: None.

**PRESENTATIONS AND EDUCATION:**

**OPERATIONS REPORT AND SOUTHWEST TEXAS CRISIS COLLABORATIVE UPDATE — ED BANOS/SALLY TAYLOR, M.D.**

SUMMARY: In the interest of time, this presentation was delayed until the December Board meeting. Instead, Board members were invited to tour University Health's new Advanced Diagnostic Center (Heart/Vascular & Endoscopy Suite).

RECOMMENDATION: None.

ACTION: None.

EVALUATION: None.

FOLLOW-UP: None.

**INFORMATION ONLY ITEMS:**

**3<sup>RD</sup> QUARTER SUPPLIER DIVERSITY REPORT — EDWARD CRUZ/ANTONIO CARRILLO**

**UNIVERSITY HEALTH SYSTEM FOUNDATION REPORT — LENI KIRKMAN**

**REPORT ON RECENT RECOGNITIONS AND UPCOMING EVENTS — LENI KIRKMAN**

**UPDATE ON THE WOMEN'S AND CHILDREN'S HOSPITAL AND ASSOCIATED PROJECTS — DON RYDEN**

SUMMARY: Mr. Adams directed his colleague's attention to the four informational reports above and urged them to contact staff members directly with questions and/or comments.

RECOMMENDATION: These reports were provided for informational purposes only.

ACTION: No action was required by the Board.

EVALUATION: None.

FOLLOW-UP: None.

**ADJOURNMENT:**

Mr. Adams reconvened the public meeting and there being no further business, adjourned the meeting at 8:20 pm.

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James R. Adams  
Chair, Board of Managers

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Margaret A. Kelley, MD  
Secretary, Board of Managers

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Sandra D. Garcia, Recording Secretary



# University Health System

## BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Tuesday, December 15, 2020  
6:00 p.m.  
Cypress Room, University Hospital  
4502 Medical Drive  
San Antonio, Texas 78229

### MINUTES

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#### **BOARD MEMBERS PRESENT:**

James R. Adams, Chair  
Ira Smith, Vice Chair  
Margaret Kelley, M.D.  
Anita L. Fernandez  
Jimmy Hasslocher

#### **BOARD MEMBERS ABSENT:**

Roberto L. Jimenez, M.D., Immediate Past Chair  
L.P. Buddy Morris

#### **OTHERS PRESENT:**

George B. Hernández, Jr., President/Chief Executive Officer, University Health System  
Bryan J. Alsip, MD, Executive Vice President/Chief Medical Officer, University Health System  
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System  
Rob Hromas, MD, Dean, Long School of Medicine, UT Health San Antonio  
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System  
Leni Kirkman, Executive Vice President/Chief Marketing, Communications & Corporate Affairs Officer,  
University Health System  
Serina Rivela, Vice President/General Counsel, Legal Services, University Health System  
And other attendees.

#### **CALL TO ORDER:**

Mr. Adams called the meeting to order at 6:00 pm, and read the following statement: In light of the recent spike in Covid-19 cases and as a precautionary measure to mitigate the spread of COVID-19 and allow the Board, our staff and the public to participate in this meeting in a safe manner, this meeting will be conducted both in person and by telephone. An amended emergency notice was posted in support of this special meeting as authorized by the Governor's Emergency COVID-19 Executive Order. He then yielded the floor to the Recording Secretary for roll call and to confirm a quorum. Dr. Jimenez and Mr.

Morrison were noted absent; and all other Board members, indicated “present.” Voting today will be conducted by individual roll call to clearly identify each Board member by name and vote.

Mr. Adams welcomed Mr. Hasslocher, who was re-appointed by Judge Nelson Wolff to the Board of Managers on Tuesday, December 1, 2020.

Mr. Adams asked Ms. Leni Kirkman to introduce Ms. Sara Alger, who joined University Health as Foundation President in November of 2020. Ms. Alger brings over 20 years of fundraising experience and a proven track record of success in donor engagement, team building and comprehensive fundraising strategies. Prior to joining University Health, she served as Vice President of Foundation Development for Advocate Aurora Health based in Wisconsin. Advocate Aurora Health is one of the 10 largest non-for-profit integrated health care systems in the U.S., with 27 hospitals and more than 500 clinics across two states. In this role, she established and led fundraising strategies for nine hospitals, and their affiliated clinics and programs.

### **INVOCATION AND PLEDGE OF ALLEGIANCE**

In Ms. Jeanene Atkinson’s absence, Mr. Adams introduced Ms. Julie Rowe, Chaplain, Spiritual Care Services, University Health, for the invocation, and he led the pledge of allegiance.

### **PUBLIC COMMENT:**

Mr. Hernandez informed Mr. Adams that there were no members of the public signed up to address the Board of Managers.

Immediately following pledge of allegiance at 6:05 pm, Mr. Adams announced a Public Hearing of the Mandatory Payment for the Bexar County Hospital District Local Provider Participation Fund for Fiscal Year 2021. There being no speakers to comment on the proposed mandatory payment, Mr. Adams concluded the Public Hearing and resumed the public Board meeting.

### **CONSIDERATION AND APPROPRIATE ACTION REGARDING A RESOLUTION SETTING THE MAXIMUM RATE OF MANDATORY PAYMENT(S) FOR THE BEXAR COUNTY HOSPITAL DISTRICT’S LOCAL PROVIDER PARTICIPATION FUND THROUGH FISCAL YEAR 2021 — GEORGE B. HERNÁNDEZ, JR./REED HURLEY**

#### **SUMMARY:**

Senate Bill (SB) 1545 signed by the Governor on June 10, 2019 authorized the establishment of a Local Provider Participation Fund (LPPF) for Bexar County. On June 25, 2019, the Board of Managers approved the creation of the Bexar County Hospital District LPPF which will be the source of Intergovernmental Transfer (IGT) funding for private hospitals in Bexar County. Based on estimated IGT needs, the LPPF can assess a fee not to exceed six percent on the annual net patient revenues of private hospitals in Bexar County. There are several required steps including publication of a notice of a public hearing on the assessment, which took place just now. To generate funding for IGTs due in 2021, the Bexar County Hospital District LPPF assessment is necessary. A notice for the public hearing was published in the San Antonio Express News on December 10, 2020 and the public hearing will be held at the December 15, 2020 Board of Managers meeting. The assessment will be due at various times in calendar year 2021, as IGTs are necessary. The annual LPPF assessment is based on the maximum allowed annual percentage rate of 6.0. The total assement based on a rate

of 6.0 percent of eligible hospitals net patient revenue, projected at \$4.2 billion, will generate up to \$252 million for the 2021 IGT needs for the Bexar County private hospitals. The actual assessment amounts invoiced to Bexar County hospitals during 2021 will depend on the IGT requirements to be determined as the year progresses. There is no impact to Bexar County Hospital District taxpayers from the LPPF levy and paying providers may not add a surcharge to a patient bill.

RECOMMENDATION: Staff recommends that the Board of Managers adopt a Resolution authorizing the Bexar County Hospital District to set the 2021 assessment rate for the Bexar County Hospital District Local Provider Participation Fund at 6.0 percent.

ACTION: A **MOTION** to approve staff's recommendation was made by Dr. Kelley, **SECONDED** by Mr. Hasslocher, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW-UP: None

**NEW BUSINESS:**

**CONSENT AGENDA — JIM ADAMS, CHAIR**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF MEMBERSHIP AND PRIVILEGES — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF**

SUMMARY: Pursuant to Article III, Section 3.3-1 of the Medical-Dental Staff Bylaws, initial appointments and reappointments to the Medical-Dental Staff of University Health shall be made by the Board of Managers. The Board of Managers shall act on initial appointments, reappointments, or revocation of appointments only after there has been a recommendation from the Executive Committee of the Medical-Dental Staff. If approval is granted by the Board of Managers, the clinical provider is placed on a two-year reappointment cycle. After 12 months' provisional review, the provider's status changes from Provisional to Active or Courtesy Staff depending on board certification and the frequency of patient encounters during the previous 12 months. The Credentials Committee met on November 23, 2020, and reviewed the credential files of the individuals listed in the written Credentials Committee Report provided to the Board of Managers. At its meeting of December 1, 2020, in accordance with University Health's credentialing and privileging process, the Executive Committee of the Medical-Dental Staff approved the Credentials Committee's Report and its recommendation for clinical privileges for staff membership. The Executive Committee recommends approval by the Board of Managers of the Credentials Committee Report.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR PROFESSIONAL PRACTICE EVALUATIONS AND DELINEATION OF PRIVILEGES — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF**

SUMMARY: The Credentials Committee met on November 23, 2020, and reviewed proposed revisions to Delineation of Privileges and the Professional

Performance Evaluation Reports and forms, which were provided to the Board of Managers. In its meeting of December 1, 2020, the Executive Committee of the Medical-Dental Staff approved the Focused/Ongoing Professional Performance Evaluation Reports and therefore, recommends approval by the Board of Managers

**CONSIDERATION AND APPROPRIATE ACTION REGARDING REAPPOINTMENTS TO THE UNIVERSITY HEALTH FOUNDATION BOARD OF DIRECTORS — JIM ADAMS, CHAIR**

SUMMARY:

The University Health Foundation, a 501(c)(3) charitable organization, was established in 1984 to solicit, receive and maintain funds exclusively for the benefit of University Health System and its community missions. A volunteer Board of Directors representing the community, University Health Board of Managers, and UT Health San Antonio, governs the Foundation. The Board takes an active role in all fundraising campaigns and special events, serving as a lifeline of support for patients and staff, by inspiring donors to participate in efforts to advance this mission. The following Foundation Board members have terms expiring on December 31, 2020:

- Mr. Jason Fraser
- Mr. James C. Hasslocher
- Dr. Margaret Kelley
- Mr. Joe Linson
- Judge Rene Yanta

Mr. Adams recommends the re-appointment of all five (5) individuals to the University Health Foundation Board of Directors for three-year terms each through December 31, 2023.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN APPOINTMENT TO THE COMMUNITY FIRST HEALTH PLANS BOARD OF DIRECTORS — JIM ADAMS, CHAIR**

SUMMARY:

The Bylaws of Community First Health Plans, Inc., state that the Board of Managers as the governing body for the sole member of the corporation shall approve the appointments of the Board of Directors to manage the affairs of the corporation. There are currently six Board members and one vacancy created by the resignation of Mr. Thomas (“TJ”) Mayes last month. Ms. Anita L. Fernandez was appointed to the Board of Managers by Bexar County Commissioner Justin Rodriguez on September 15, 2020. Ms. Fernández is co-founder and co-owner of Our Community Inc., LLC, a social purpose consulting group focused on government relations and public affairs. The Board’s Nominating Committee recommends the appointment of Ms. Anita L. Fernandez to fill the unexpired term of Thomas (“TJ”) Mayes effective immediately through September 30, 2021.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN APPOINTMENT TO THE UNIVERSITY HEALTH PENSION PLAN BOARD OF TRUSTEES — JIM ADAMS, CHAIR**

SUMMARY: The Bylaws of the University Health System Pension Plan Board of Trustees state that the Bexar County Hospital District Board of Managers, as the governing body, shall approve the appointments of Pension Plan Trustees. There are currently eight (8) Trustees and one vacancy created by the resignation last month of Mr. Thomas (“TJ”) Mayes. His three-year term expires on December 31, 2020; however, this is a request for a new three-year term effective immediately through December 31, 2023. Bexar County Judge Nelson Wolff appointed Mr. James C. Hasslocher for a new term on the Board of Managers on Tuesday, December 1, 2020. Mr. Hasslocher is the President/Chief Executive Officer of Frontier Drive-Ins and Jim’s Restaurant Division of Frontier Enterprises. Being a very civic-minded individual, he serves on various local Boards and is a highly respected business leader in the community. Mr. Adams recommends the Board of Managers approve the appointment of Mr. James C. Hasslocher to the Pension Plan Board of Trustees effective immediately through December 31, 2023.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN APPOINTMENT TO THE ALAMO AREA COUNCIL OF GOVERNMENTS BOARD OF DIRECTORS — JIM ADAMS, CHAIR**

SUMMARY: In March 2006, the Board of Managers approved: a) the transfer of the Center for Health Care Services Mental Retardation Authority (MRA) role to the Alamo Area Council of Governments (AACOG); and, b) redirection of the Health System’s 10 percent local match from CHCS to the new AACOG MRA. The MRA transition also provided for continued Health System oversight of the new MRA through representation on the AACOG Board. To fulfill the Health System oversight requirement, a position was created on the AACOG Board in June 2006, which a Board appointee has filled since then. Mr. Hasslocher and Mr. Engberg have served as alternates for a number of years. Mr. Hasslocher previously served as the Board’s primary representative since November 2015 through August 2020, when he was replaced on the AACOG Board by Mr. Thomas (“TJ”) Mayes, who, as you know, no longer serves on this Board. Mr. Adams recommends the appointment of Mr. James C. Hasslocher to the AACOG Board of Directors as primary representative and Ms. Anita L. Fernandez as an alternate appointee. Mr. Hasslocher will finish the term left vacant by Mr. Thomas (“TJ”) Mayes, effective immediately through June 30, 2022.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A TIME SHARE AGREEMENT AT THE LUCKEY RANCH CAMPUS WITH BARRIO COMPREHENSIVE FAMILY HEALTH CARE CENTER, INC. D/B/A COMMUNICARE HEALTH CENTERS — TED DAY**

SUMMARY: University Health proposes to pursue a new location for deployment of urgent care and select specialty services in concert with University Medicine Associates (UMA) physicians. That organization has assessed

the opportunity to provide adult and pediatric primary care and related services in southwestern Bexar County, a quickly growing area within San Antonio. The specific location is a new physician office clinic being developed and leased by CommuniCare Health Centers in the area of Luckey Ranch, off of Highway 90. Their plan is to provide family medicine, pediatrics, and women's health services at this location. University Health would provide complementary services of after-hours urgent care and part-time, rotating day clinic specialty services. The proposed time share agreement would enable University Health to have somewhat flexible access to approximately 3,000 square feet, with designated exam rooms, dedicated storage, and shared access to common spaces for nursing and provider documentation, point of care testing, patient intake, and other areas as needed for routine clinic operations. This clinic will have signage showing branding for both organizations. The time share agreement is slated to begin in January, 2021, and will continue for ten years. The total amount due for the ten-year period is \$300,000, payable at a rate of \$2,500.00 per month. The workforce composition data for CommuniCare Health Centers was provided for the Board's review. Staff recommends Board of Managers approval to negotiate and execute a time share agreement with Barrio Comprehensive Family Health Care Center d/b/a CommuniCare Health Centers in the amount of \$300,000 for a ten-year term.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AMENDMENT TO UNIVERSITY MEDICINE ASSOCIATES' BYLAWS — MONIKA KAPUR, M.D.**

**SUMMARY:**

In 1999, University Health created a 5.01a nonprofit healthcare organization certified by the Texas Medical Board which allowed the employment of primary care and multi-specialty physicians to serve as University Health's physician practice group. As a nonprofit health care organization, Community Medicine Associates d/b/a University Medicine Associates (CMA) operates pursuant to Bylaws which were last reviewed and amended in 2015. As outlined in Article XI of the Bylaws, every five years a Special Committee will be created by the CMA Board to review the Bylaws and propose recommended changes. On November 18, 2020, certain amendments to the Bylaws were unanimously approved by CMA's Board of Directors. The amendment to the Bylaws are now presented to University Health's Board of Managers for final approval. Due to the number of proposed changes, the Bylaws, in their entirety, were provided to the Board of Managers with the recommended changes clearly visible with underlined edits and any proposed deletions noted in overstrike. In her written report, Dr. Kapur outlined the majority of the proposed changes to the Bylaws under Article III., Members (suggested updates to these reserve powers were presented), and Article IV., Board of Directors. The Community Medicine Associates Board of Directors recommends the University Health Board of Managers approve the proposed amendment to the Community Medicine Associates Bylaws.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AMENDMENT TO COMMUNITY FIRST HEALTH PLAN, INC., BYLAWS — THERESA SCEPANSKI**

SUMMARY:

In September of 1993, the Texas Legislature authorized certain hospital districts to create health maintenance organizations (HMOs) to provide or arrange for health services. In May of 1994 University Health established Community First Health Plans, Inc. (Community First), in the form of a Texas nonprofit corporation, to serve as University Health's HMO. As a nonprofit corporation, Community First operates pursuant to Bylaws which were last reviewed and amended in 2010. As outlined in Article XI, Amendment to Bylaws, these bylaws may be altered, amended or repealed and new bylaws may be adopted by two-thirds (2/3) of the Directors which is subject to approval of the Board of Managers of the University Health. On October 23, 2020, the amended Bylaws were unanimously approved by the Community First Board of Directors. The amendments to the Bylaws are now presented to University Health's Board of Managers for final approval. Due to the number of proposed changes, the Bylaws, in their entirety, were provided with the recommended changes clearly visible with underlined edits and any proposed deletions noted in overstrike. In her written report, Ms. Scepanski outlined the proposed changes under Article II., Members (suggested updates to reserve powers), and Article III., Board of Directors (subject to the requirements of the Texas Business Organizations Code, as amended, or these bylaws for notice of meetings). The Community First Board of Directors recommends the University Health Board of Managers approve the proposed amendments to the Community First Health Plans Bylaws.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING CONTRACTS WITH UT HEALTH SAN ANTONIO FOR SERVICES IN THE JUVENILE DETENTION HEALTHCARE SETTING FOR: (1) ADOLESCENT PSYCHIATRY SERVICES; AND (2) MEDICAL SERVICES — THERESA SCEPANSKI**

SUMMARY:

The mission of Detention Health Care Services is to provide basic health care services, to include health education, mental health care and preventative care to detained persons who are in the Bexar County Adult and Juvenile Detention Centers. The Juvenile Detention Center is a 300-bed facility located on Mission Road, and the Cyndi Taylor Krier Center is a 96-bed facility located on Southton Road.

Adolescent Psychiatry Services - Psychiatrists associated with the Division of Child and Adolescent Psychiatry, UT Health San Antonio provide psychiatric assessment and medication management. Psychological evaluations are conducted to assist the Juvenile Probation Department and the Juvenile Courts in securing proper placement of juveniles in residential, treatment and educational programs. "Fitness to Proceed (competency)" and "Responsibility for the Offense or Conduct (sanity)" evaluations are also conducted as ordered by the Courts whenever such questions are raised during the judicial process. "Certification and Transfer" evaluations are performed on all youths for whom the Juvenile Courts are considering waving its jurisdiction and transferring the juvenile to an adult or criminal court. Counselors

manage crisis and routine care on an individual as well as group basis 24 hours daily. They also conduct group sessions on such topics as substance abuse prevention, social skills, problem solving, placement orientation and orientation to the Texas Youth Commission. The annual contract amount is \$49,920. This expense is included in the 2021 Annual Operating Budget. The contract renewal period is for one-year beginning January 1, 2021. The workforce composition data for the Department of Psychiatry was provided for the Board's review. Staff recommends the Board of Managers approve the contract renewal for professional services with UT Health San Antonio, Department of Psychiatry in the amount of \$49,920 for a one-year renewal period.

Medical Services – Upon admission into a Detention Center, the nursing staff will medically screen each juvenile for medical or mental health problems. Physicians from UT Health San Antonio, Department of Family Practice, provide sick call and examinations. This is a professional services contract with UT Health through the Department of Family & Community Medicine for physical exams, health classes, screening and counseling, prenatal care, suicide observations, and referrals to external agencies. This contract provides family practice physician services to the Bexar County Juvenile Detention Center and the Cindy Taylor Krier Center, up to fifteen (15) hours per week, with consultation services by phone after hours, on weekends and holidays. The annual contract amount is \$132,000. This expense is included in the 2021 Annual Operating Budget. The contract renewal period is for a one-year term beginning January 1, 2021. The workforce composition data for the Department of Family & Community Medicine was provided for the Board's review. Staff recommends Board of Managers' approval of the contract for professional services with UT Health San Antonio, Department of Family & Community Medicine in the amount of \$132,000 for a one-year period.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING PURCHASING ACTIVITIES (SEE ATTACHMENT A) — ANTONIO CARRILLO/TRAVIS SMITH**

**SUMMARY:**

A total of 19 contracts with a value of \$26,266,846 are presented to the Board of Managers during the month of December 2020. The following contracts require approval by the BCHD Board of Managers: Seven (7) consent contracts with a total value of \$5,651,873; Twelve (12) presented contracts with a total value of \$20,614,973. During the month of December 2020, there were two (2) contracts classified as a Small, Minority, Woman, or Veteran Owned Business Enterprises (SMWVBE). The December 2020 SMWVBE Status Report reflects items submitted for Board approval.

**CONSENT AGENDA  
RECOMMENDATION:**

Staff recommends approval of the items presented on the Consent agenda.

**CONSENT AGENDA**

**ACTION:** A **MOTION** to approve staff's recommendation was made by Dr. Kelley, **SECONDED** by Ms. Fernandez, and **PASSED UNANIMOUSLY**.

**CONSENT AGENDA**

**EVALUATION:** None.

**CONSENT AGENDA**

**FOLLOW-UP:** None.

**ACTION ITEMS:**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED ITEMS:**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT BETWEEN UNIVERSITY MEDICINE ASSOCIATES AND UT HEALTH SAN ANTONIO FOR PEDIATRIC CARDIOLOGY AND CARDIO-THORACIC SURGERY SERVICES — TED DAY/MONIKA KAPUR, M.D.**

**SUMMARY:**

This is a proposed agreement between UMA and UT Health San Antonio to ensure that there are a sufficient number of qualified providers in pediatrics subspecialty areas available to provide high quality specialty heart care to the neonates and children seen by University Children's Health. This agreement assumes that both direct clinical care and appropriate medical direction will be delivered by these physicians. Quality metrics for the performance of these services covered under this agreement will be developed in discussion with the relevant leaders over these areas and these physicians as they start practice. UMA will compensate UT Health San Antonio an amount not to exceed \$1,217,000 per year, which includes salary and fringe benefits for these new physicians. The nature of the agreement requires that University Health is able to bill the professional collections for two physicians and keep those funds as an offset for the expense. The physicians are joining UT Health San Antonio in the near future and will be ramping up their practices in 2021 and 2022. An estimate of their combined collections, exclusive of hospital billing and collections, grows from about \$175K in the first partial year to about \$500K in subsequent years. UMA plans to bill for and retain all collections from payers and patients for services rendered by these physicians, regardless of the locations of those services. To the extent that some of their services are provided in a UT Health San Antonio-managed ambulatory clinic, then a companion lease agreement will be put in place to facilitate the collection of necessary data for appropriate billing from that site on which UMA can collect. This is a planned expense and is included in the 2021 operating budget. The workforce composition data for UT Health San Antonio was provided for the Board's review.

**RECOMMENDATION:**

Staff recommends Board of Managers' approval to execute a two-year agreement with UT Health San Antonio for 1.0 FTE pediatric cardiology and 1.0 FTE pediatric cardiothoracic surgery physician at an amount not to exceed \$1,217,000 combined per year. The total contract is for an amount not to exceed \$2,434,000 for the two-year period from January 1,

2021 – December 31, 2022. UMA will keep professional collections as a partial offset to these expenses.

ACTION: A **MOTION** to approve staff’s recommendation was made by Dr. Kelley, **SECONDED** by Mr. Smith, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW-UP: None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT WITH METROPOLITAN CONTRACTING COMPANY, L.L.C. TO PROVIDE CONSTRUCTION SERVICES FOR THE SUBSTATION 2 REPLACEMENT PROJECT AT UNIVERSITY HOSPITAL — DON RYDEN**

SUMMARY: The existing electrical substation 2 located on the ground level of the Rio Tower at University Hospital is over 50 years old, is obsolete, without availability of parts and places the areas and departments serviced at high risk in case of equipment failure. Procurement Services solicited Request for Proposals (RFCSP#220-07-042-CNST) for Construction Services with four (4) firms responding. The spread from highest to lowest bid, was \$779,861 in construction costs, and 260 calendar days to complete the project. All four (4) firms participated in oral interviews as part of the evaluation process to clarify their submitted bid responses, discuss their identified project team’s expertise and planned ability to keep to their submitted project budget and schedule. Metropolitan was selected based on their competitive pricing, \$2,428,134, proposed schedule of 595 calendar days, healthcare experience and safety record. The Metropolitan Contracting project team was well prepared, highly skilled, experienced, and demonstrably capable to do the detailed work for this project resulting in the highest overall evaluation scores. Staff has reviewed the Metropolitan pricing for construction services and recommends approval of their proposal in the amount of \$2,428,134. This project will be funded from designated 2020 capital funds. The Project Budget Summary is as follows: Design services \$205,200; construction cost (this request) \$2,428,134; for a total of \$2,633,334. The workforce composition data for Metropolitan Contracting Company was provided for the Board’s review.

RECOMMENDATION: Staff recommends the Board of Managers approve the selection of Metropolitan Contracting Company, LLC as Contractor for the Substation 2 Replacement Project and authorize the President/Chief Executive Officer to execute a Construction Services Agreement with Metropolitan Contracting Company, LLC in the amount of \$2,428,134.

ACTION: A **MOTION** to approve staff’s recommendation was made by Mr. Hasslocher, **SECONDED** by Ms. Fernandez, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW-UP: None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT WITH STANDARD PARKING PLUS FOR PARKING SERVICES — JIM WILLIS**

SUMMARY: This contract was awarded to Standard Parking by request for proposal (RFP#213-01-003-SVC). Since November 26, 2013, there has been five subsequent amendments to the contract with the current amendment

expiring December 31, 2020. Most recently, Standard Parking provided operational assistance with the closure of visitor parking within the North Garage and surface lots at University Hospital for the planned construction of the new Women's and Children's Hospital. All patient and visitor parking from the North Garage and surface lots were moved into the West Garage. This change has required ongoing increased monitoring of the West Garage as patients and visitors must navigate a larger and more complex garage alongside parking with 3,000 daily staff members. Standard Parking Plus Healthcare Services has provides parking services at University Hospital, Robert B. Green Campus and University Family Health Center Southwest. This is a request for a final amendment to the current contract for an extension through December 31, 2022 valued at \$792,593. This amendment will allow University Health to retain the existing management team until the new parking structure serving the Women's and Children's Hospital is near completion. University Health will post a new RFP for parking management services in early 2022. This extension will allow the Garage Operations Department sufficient time to analyze the future needs of parking services for all of University Health System to include expanded scope of services and replacement of aging parking equipment throughout the organization. There are no increased expenses from the previous contract, and all contract expenses are budgeted. The cost of this contract is offset by parking revenue of approximately \$956,000 per year. Associated costs are comprised of salaries and benefits, RMS fees, general liability, operational expenses, and management fees in the annual amount of \$396,296. The workforce composition data for Standard Parking was provided for the Board's review.

RECOMMENDATION: Staff recommends Board of Managers' approval of a parking services contract amendment for two years not to exceed \$792,593 with Standard Parking Plus Healthcare Services.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Smith, **SECONDED** by Dr. Kelley, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW-UP: None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT WITH HHS ENVIRONMENTAL SERVICES, LLC FOR ENVIRONMENTAL SERVICES MANAGEMENT — JIM WILLIS**

SUMMARY: On September 24, 2019, the Board of Managers approved a three-year contract with a small local vendor to provide janitorial services at 23 University Health clinics located throughout Bexar County. On June 10, 2020, University Health posted request for proposal #220-06-030-SVC (RFP) to solicit qualified respondents to provide oversight and management services of Environmental Services supporting 2.8 million square feet of clinical and office space located at University Hospital, Robert B. Green, Texas Diabetes Institute, University Hospital Pavilion and three dialysis centers. This contract will be inclusive in scope of future additional expansion projects to include the Advanced Diagnostic Center as well as the Women's and Children's Hospital. On July 2, 2020, three responsive submittals were received by Procurement from the following vendors:

- ABM Healthcare – *St. Clair Shores, MI*

- Crothall Healthcare – *Wayne, PA*
- HHS Environmental Services, LLC – *Dripping Springs, TX*

Subsequently, all three vendors were invited to provide the evaluation committee with a full presentation. Presentations were completed on August 28, 2020. Upon completion of the presentations, all three vendors returned for a mandatory tour of the facilities covered under the RFP on September 17, 2020. The evaluation committee recommends award of the environmental services management contract to HHS Environmental Services, LLC (HHS). Final scores for the three vendors were as follows:

- HHS Environmental Services, LLC – 91.25 points
- Crothall Healthcare – 88.88 points
- ABM Healthcare – 87.33 points

HHS provided University Health with the best overall detailed proposal addressing leadership transition, training, education, implementation of new operational processes, and rigorous quality control at a competitive price. HHS will provide on-going leadership training through their state-of-the-art training facility located in Dripping Springs, Texas. HHS Environmental Services demonstrated the greatest depth of experience related to complex healthcare environments by providing services to over 500 accounts with 13,675 employees. The value of a three-year contract with HHS is \$4,120,405. Associated costs are comprised of salaries and benefits, general liability, robotics, overhead, management fee, and potential bonuses for a total estimated annual amount of \$1,373,468. These contract costs are a budgeted operational expense beginning in 2021. The contract will provide onsite 24/7 management 7 days a week to enhance services and ensure quality across 2.8 million square feet of space. A total of \$429,731 in management fees will be at 100 percent at risk during the term of the contract with accountability tied to measurable key performance indicators. Potential performance indicators will include goals for Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) scoring for overall hospital cleanliness, ED cleanliness, employee retention, and productivity. The workforce composition data for HHS Environmental Services was provided for the Board's review.

RECOMMENDATION: Staff recommends that the Board of Managers approve an environmental management contract for three years not to exceed **\$4,120,405** with HHS Environmental Services, LLC with the option for two one-year renewals.

ACTION: A **MOTION** to approve staff's recommendation was made by Dr. Kelley, **SECONDED** by Ms. Fernandez, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW-UP: None.

**MEMORANDUM OF UNDERSTANDING WITH THE SOUTHWEST TEXAS REGIONAL ADVISORY COUNCIL AND LOCAL HEALTH SYSTEMS FOR SERVICES PROVIDED THROUGH THE SOUTHWEST TEXAS CRISIS COLLABORATIVE — ED BANOS/SALLY TAYLOR, M.D.**

SUMMARY: In 2017 mental health service stakeholders and Bexar County health systems collaborated to formalize an innovative, private/public payor coalition, namely the Southwest Texas Crisis Collaborative (STCC),

a division of the Southwest Texas Regional Advisory Council (STRAC), of which University Health is a member. The 2021 Southwest Texas Crisis Collaborative (STCC) Memorandum of Understanding includes funding from several entities. Funding is based on net revenue market share; however, in 2020 University Health further contracted with STRAC to support additional services through MEDCOM, namely the Clarity Child Guidance Center's Psychiatric Emergency Services, and for STCC to provide community coordination, visibility and collaborative oversight for the newly opened UT Health Department of Psychiatry Behavioral Health New Opportunities for Wellness Clinic which provides rapid access from the community for adults needing outpatient behavioral health treatment. The funding distribution in 2021 is as follows:

• Methodist Healthcare	\$ 1,620,450
• Baptist Health System	\$ 810,225
• Tenet Healthcare Foundation	\$ 810,225
• University Health	\$ 1,920,450
• CHRISTUS Santa Rosa	\$ 875,300
• <u>Southwest General Hospital</u>	<u>\$ 173,000</u>
Total	\$ 6,209,650

In addition, Methodist Healthcare Ministries has committed \$4.9M to STRAC for other related projects such as the Haven for Hope Acute Care Station, Adult PES beds, and Crosspoint residential treatment services while Bexar County has committed to provide \$1.9M to support Signify Health, STRAC Administration and a newly created Specialized Multidisciplinary Alternate Response Team (SMART). The 2021 STCC MOU proposes to fund the following programs (with any reasonable variances as agreed to by the STCC Steering Committee) with University Health contribution to overall costs of each program:

MEDCOM/Law Enforcement Navigation - University Health's contribution is \$848,408 out of a total cost for the program of \$2,300,000

Adult Psychiatric Emergency Services System of Care (PES) - University Health's contribution is \$386,952 out of a total cost for the program of \$1,411,181

Program for Intensive Care Coordination (PICC) - University Health's contribution is \$394,434 out of a total cost for the program of \$1,438,469

Meadows Mental Health Policy Institute - University Health's contribution is \$16,452 out of total cost of \$60,000

STCC Infrastructure - University Health's contribution is \$274,204 out of a total cost of \$1,000,000

All of the Bexar County health systems and Methodist Healthcare Ministries have agreed to fund the services outlined with the cost split agreed upon by all the System's CEOs. University Health has, with Board of Managers' approval in 2019, expanded support in 2020 for various behavioral health programs. The agreement provided by this MOU will be for a 12-month period beginning January 1, 2021. The

financial outlay for this MOU is \$1,920,450 which is a \$300,000 increase from 2020. This contract amount is included in the 2021 operating budget.

RECOMMENDATION: Staff recommends Board of Managers' approval to execute a 12-month agreement in the amount of \$1,920,450 with the Southwest Texas Regional Advisory Council for support of the Southwest Texas Crisis Collaborative for MEDCOM, Law Enforcement Navigation, Adult Psychiatric Emergency Services System of Care, Program for Intensive Care Coordination, Meadows Mental Health Policy Institute and STCC Infrastructure.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Smith, **SECONDED** by Mr. Hasslocher, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW-UP: None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FOLLOWING FUNDING AGREEMENTS WITH SOUTHWEST TEXAS REGIONAL ADVISORY COUNCIL FOR: (A) CLARITY CHILD GUIDANCE CENTER'S CHILD/ADOLESCENT PSYCHIATRIC EMERGENCY SERVICES; AND (B) CROSSPOINT, INC.'S BEHAVIORAL HEALTH SERVICES — SALLY TAYLOR, M.D.**

SUMMARY: Since 2017, the Southwest Texas Crisis Collaborative (STCC) has coordinated funding of programs serving those with behavioral health needs in Bexar County with the ultimate goals of decreasing preventable hospital emergency department and inpatient visits and improving the overall quality of life of persons suffering from these conditions by addressing their social determinants of health. As part of University Health's 2020 expansion of funding support for behavioral health services across the continuum of care, two such programs funded through STRAC include Clarity Child Guidance Center's Child/Adolescent Psychiatric Emergency Services (CAD-PES); and Crosspoint Inc.'s Behavioral Health Services transition program. The agreements proposed for 2021 include continued funding as follows:

Clarity Child Guidance Center Child/Adolescent Psychiatric Emergency Services (CAD-PES) - The need for a child/adolescent focused PES was determined to be high priority. To assure that this population has ready access to emergent/urgent evaluation when in a mental health crisis, particularly in light of the current COVID-19 pandemic, and its potential mental health effects on youth, the CAD-PES launched in April 2020 on the Clarity CGC main campus in a specifically designated area, and operates four beds 365 days per year, operational 24/7. This agreement is for a 12-month period with automatic renewals for up to two successive one-year terms, with a maximum financial outlay of \$940,000 annually. Funding is included in University Health's 2021 operating budget.

RECOMMENDATION: Staff recommends Board of Managers' approval to execute a 12-month agreement with automatic renewals for up to two successive one-year terms, in the amount of \$940,000 annually, or \$2,820,000 for the entire

three-year term, with the Southwest Texas Regional Advisory Council, specifically in support of Clarity Child Guidance Center's Child/Adolescent Psychiatric Emergency Services.

**ACTION:** A **MOTION** to approve staff's recommendation was made by Mr. Smith, **SECONDED** by Ms. Fernandez, and **PASSED UNANIMOUSLY**.

**SUMMARY:** Crosspoint, Inc., Behavioral Health Services - More recently the focus of the STCC has broadened toward expanding the continuum of care, including Crosspoint Inc.'s supported transitional housing facility and outpatient behavioral health treatment as an alternative to inpatient psychiatric admission or as a step-down from inpatient units. Crosspoint, Inc. has been providing outpatient and residential services since 1963, and in 2018 opened a behavioral health program for those with mental health and/or substance use disorders who transition out of jail or inpatient hospitalization. During 2020, University Health provided \$288,000 in support through STCC for the Crosspoint men's program, and proposes to increase support in the 2021 agreement to \$358,000 which in total will provide for treatment personnel for both the men's and women's programs. This agreement is for a 12-month period beginning January 1, 2021, with automatic renewals for up to two successive one-year terms, with a maximum financial outlay of \$358,000 annually, or \$1,074,000 over the entire three-year contract term. University Health's support accounts for approximately 18 percent of Crosspoint's total budget. This contract is included in University Health's 2021 operating budget. The workforce composition data for Clarity Child Guidance Center and Crosspoint, Inc., was provided for the Board's review.

**RECOMMENDATION:** Staff recommends Board of Managers' approval to execute a 12-month agreement beginning January 1, 2021, which shall automatically renew for up to two successive one-year terms in the amount of \$358,000 annually, or \$1,074,000 for the entire three-year term, with the Southwest Texas Regional Advisory Council in support of Crosspoint, Inc.'s Behavioral Health Services.

**ACTION:** A **MOTION** to approve staff's recommendation was made by Mr. Smith, **SECONDED** by Dr. Kelley, and **PASSED UNANIMOUSLY**.

**EVALUATION:** During her presentation, Dr. Taylor reviewed outcomes for the period January through October 2020 for Clarity CGC as well as the metrics for the 2021 contracts which include average length of stay, number of assessments provided, new intake appointments, number of patients transitioned to inpatient care versus outpatient follow-up. Metrics and outcomes for Crosspoint, Inc., include rate of patients who were uninsured, those considered successfully discharged, rate of patients connected to stable housing, rate of those who obtained employment, rate of those who connected with treatment providers, and rate of those who had started the process to secure benefits.

**FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FOLLOWING AGREEMENT WITH BEXAR COUNTY BOARD OF TRUSTEES FOR MENTAL HEALTH MENTAL RETARDATION SERVICES, D/B/A THE CENTER FOR HEALTH CARE SERVICES FOR (A) COMMUNITY ALTERNATIVES TO INCARCERATION PROGRAM; AND (B) PHARMACOTHERAPY SERVICES — SALLY TAYLOR, M.D.**

SUMMARY:

The Center for Health Care Services (the Center) is the Local Mental Health Authority for Bexar County, providing treatment for persons with mental illness, intellectual and developmental disabilities, and substance use disorders at various locations throughout Bexar County. Since 2000, through an inter-local agreement, University Health contractually supports funding for various behavioral health services provided by the Center for the community:

Community Alternatives to Incarceration Program (CAIP): When the Delivery System Reform Incentive Payment (DSRIP) Program was revised for Community Mental Health Centers in 2018, the Deferred Institutionalization Program (DIP) was no longer eligible for funding through the DSRIP program. Therefore, since September 2018 University Health has provided funding for the Center to allow continuation of the Deferred Institutionalization Program, renamed the Community Alternatives to Incarceration Program (CAIP). The current agreement ends December 31, 2020. The Center's wraparound treatment approach in CAIP targets improving psychiatric symptoms, reducing recidivism rates and improving quality of life for those with mental illness who are on probation or in pre-trial status. In the 2019 contract, housing support was added to assist individuals in accessing or maintaining safe and affordable housing including rental application fees, start-up household supplies to help facilitate independent living, initial rent/utilities or temporary rental/utilities assistance related to the individual's recovery/treatment plan. University Health has provided \$1,207,734 annually for CAIP, and the current agreement proposes the same level of support in 2021. For the preceding 12 months through September 2020, CAIP has served 397 unduplicated patients, and is projected to serve approximately 489 patients by the end of 2020. Dr. Taylor indicated that the rate of patients showing improvement in treatment outcome scores has increased with an average of 48 percent of patients improved on various measures (behavioral health symptoms, life functioning and risk-taking behaviors). However, the recidivism rate of new arrests average 22.3 percent with a target of rate of 15 percent. Additionally, 240 patients completed satisfaction surveys, with scores averaging 6.9 on a 7.0 point scale. This agreement is for a 12-month period beginning January 1, 2021, with automatic renewals for up to two successive one-year terms at the same amount for each year, with a maximum financial outlay of \$1,207,734 annually, or \$3,623,202 over the entire three-year contract term. This contract is included in University Health's 2021 operating budget.

Pharmacotherapy Services: Since February 1996, University Health has contracted with the Center to assist in subsidizing Level IV Pharmacotherapy Services, also known as medication-assisted treatment (MAT) for those with opioid use disorders, for male and female adults. The

provision of MAT is evidence-based and additionally diminishes risk for women who have opioid use disorder during pregnancy. The Center operates a MAT program, referred to as the Opioid Addiction Treatment Services (OATS), by providing methadone maintenance to those enrolled in the program. Funding for the Center's MAT program is derived primarily from the Department of State Health Services, and the Center secures additional funding for the program from private and other public payors. The Center's program has required outcome metrics defined by the Department of State Health Services which include length of time in the program, arrest rates, and abstinence rates. These are also reported by the Center to University Health. The proposed agreement will continue to assist the Center by providing funds to support the current MAT program as a payor of last resort. University Health provides up to a maximum of \$450,000 annually, and the agreement proposed for 2021 is for the same level of support. In her written report, Dr. Taylor provided the successful outcomes for this contract from January through November 2020, including the number of number of unduplicated patients, the rate of patients with a length of service of least one year, and the rate of patients with no arrest since admission to the program. However, the rate of abstinence fell short of the target goal of 65 percent, averaging 61 percent. University Health is the payor of last resort for the services covered by this agreement. Dr. Taylor also provided the Center's funding mix data covering January through September 2020. Under the previous contracts, University Health reimbursed the Center based on the Texas Medicaid reimbursement rate of \$11.76 per methadone dose. In State FY 2020, this rate increased to \$17.79 per methadone dose. Additionally, University Health wants to support the use of buprenorphine (another evidence-based medication for treating patients with opioid use disorder) by the Center. Buprenorphine, a partial opioid agonist and a Schedule III medication (methadone is Schedule II), has increased safety in cases of overdose, and lower potential for misuse. The Texas Medicaid reimbursement rate for buprenorphine is \$25.12. The maximum financial obligation by University Health will remain \$450,000 for 2021. This agreement is for a 12-month period beginning January 1, 2021, with automatic renewals for up to two successive one-year terms at the same amount for each year, with a maximum financial outlay of \$450,000 annually, or \$1,350,000 over the entire three-year contract term. Under the new contract, University Health will reimburse the Center based on the 2020 Texas Medicaid reimbursement rate of \$17.79 per methadone dose and \$25.12 per buprenorphine dose. This contract is included in University Health's 2021 operating budget. The Center's workforce composition data was provided for the Board's review.

**RECOMMENDATIONS:**

Staff recommends Board of Managers' approval to execute a 12-month agreement beginning January 1, 2021, which shall automatically renew for up to two successive one-year terms at the same amount for each year, in the amount of \$1,207,734.00 annually, or \$3,623,202.00 for the entire three-year term, with the Center for Health Care Services in support of the Community Alternatives to Incarceration Program. Staff also recommends Board of Managers' approval to execute a 12-month agreement beginning January 1, 2021, which shall automatically renew for up to two successive one-year terms at the same amount for each year, in the amount of \$450,000.00 annually, or \$1,350,000.00 for the entire

three-year term, with the Center for Health Care Services in support of Pharmacotherapy Services.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Smith, **SECONDED** by Dr. Kelley, and **PASSED UNANIMOUSLY**.

EVALUATION: Dr. Taylor informed Mr. Adams that the staff tracks metrics and outcomes for Crosspoint, Inc., *via* a monthly invoice which identifies the patients treated and the drug given, re-arrests, if any, and abstinence information.

FOLLOW-UP: None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FINANCIAL REPORT FOR NOVEMBER 2020 — REED HURLEY**

SUMMARY: In November, University Health operations continued to be significantly impacted by the COVID-19 crisis resulting in stay at home and social distancing directives reducing patient activity. Clinical activity (as measured by inpatient discharges) was down 10.7 percent for the month compared to budget. Community First Health Plans (CFHP) fully insured membership was up 13.8 percent to budget. On a consolidated basis, gain from operations was \$36.1 million, \$27.9 million better than budget. The consolidated bottom line gain (before financing activity) was \$29.6 million, \$25.6 million better than the budgeted gain of \$4.0 million. Higher supplemental and CFHP premium revenue slightly offset by higher operating expense resulted in performance better than budget. CFHP experienced a bottom line gain of \$8.5 million, which was \$8.4 million better than the budgeted loss of \$48 thousand. Higher premium revenue accounted for the improved performance to budget. Mr. Hurley also reviewed notable increases and/or decreases from the December 31, 2019 Consolidated Balance Sheet in detail with the Board of Managers.

RECOMMENDATION: Staff recommends approval of the finance reports subject to audit.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Hasslocher, **SECONDED** by Dr. Kelley, and **PASSED UNANIMOUSLY**.

EVALUATION: Length of stays contributed to hospitalization of COVID-19 patients, these are longer than a typical hospital stay. Outpatient visits to the ED are not occurring as they used to pre-COVID. CFHP is having a very good year. CFHP premium revenue is up due to state is not dis-enrolling members during the pandemic. Main drivers for positive financial performance discussed and includes supplemental funding, which is up \$15.5 million and over-budget for November.

FOLLOW-UP: None.

**ANNOUNCEMENTS:**

Mr. Adams asked Mr. Hernandez to say a few words regarding COVID-19 management of patients and staff. Mr. Hernandez credited Mr. Banos, Mr. Roussos, and Dr. Austin for the operational changes made to accommodate testing and hospitalizations of COVID-19 patients. The Reeves Rehabilitation Unit at University Hospital has been closed and converted to a medicine unit. At this time, there are approximately 60 COVID-19 positive patients at University Hospital, compared to the month of November when there were about 25, which has since more than doubled. Bexar County has about 800 patients in the hospital, as compared to the surge in July when there were over 1,200 patients in Bexar

County hospitals. Mr. Hernandez urged social distancing, wearing masks, and hand sanitizing. At University Hospital, there is a staffing issue as there are beds available and a pent up demand for elective surgeries; however, not enough staff to operate all beds in a safe manner.

University Health is expecting the Pfizer vaccine on Thursday this week so that Tier 1 employees can begin receiving vaccines as scheduled on Friday, Saturday and Sunday until after Christmas. Dr. Alsip has coordinated a well-organized process in conjunction with the Employee Health Clinic. The team has been incredible. As of this afternoon, 1,200 staff had registered for the vaccine and an additional 1,500 had registered one hour later; University Health is expected to vaccinate over 6,000 employees. Board members have been identified as Tier 2 individuals so Mr. Hernandez reminded them to check their email for next steps.

The City of San Antonio did not receive any vaccines for their Emergency Medicine Technicians (EMTs). STRAC saw the need and coordinated with UT Health, University Health, and CHRISTUS who received an over-allotment of vaccines, and all three organizations agreed to share their own allocations so that EMTs could receive their vaccines, as well as those volunteer EMTs who cover the unincorporated areas of Bexar County. Mr. Banos met with the assistant fire chief and set up a plan for University Health to vaccinate up to 600 EMTs starting next Monday at the Robert B. Green campus. UT Health will vaccinate the remaining EMTs. Upon arrival at the RBG, the EMTs will be scheduled for the required follow up vaccine in 21 days.

Southwest General Hospital also did not receive any vaccines and expressed a need for about 190. Again, CHRISTUS stepped up and is working directly with Southwest General Hospital to meet that need.

The Center for Health Care Services did not receive an allotment of vaccines, and University Health is currently working with them to identify their Tier 1 employees and vaccinate to the extent possible. The state has asked all of the hospitals to maximize use, and in Bexar County, health leaders threw out a wide net. University Health will use its Epic Electronic Health System for Covid-19 vaccine tracking purposes.

Dr. Kelley asked whether employees would be able to visit private physician practices for the vaccine, to which Dr. Alsip replied that there is no such plan. However, that is one of the challenges, in that this initial distribution is focused on hospitals. As more vaccines come along, private providers will be able to receive and make available to their patients. Dr. Alsip and Mr. Hernandez both emphasized that health care workers must be a priority during this phase. Mr. Adams suggested that the press would be pleased to know about these collaborative efforts that are ongoing in the community.

**ADJOURNMENT:**

There being no further business, Mr. Adams adjourned the meeting at 7:22 pm.

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James R. Adams  
Chair, Board of Managers

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Margaret A. Kelley, MD.  
Secretary, Board of Managers

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Sandra D. Garcia, Recording Secretary



**BEXAR COUNTY HOSPITAL DISTRICT  
BOARD OF MANAGERS**

**Tuesday, January 19, 2021**

**Consideration and Appropriate Action Regarding a Contract between Community  
First Health Plans and Clarity Software Solutions, Inc.  
for Member Fulfillment Services**

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**Background:**

Community First Health Plans (Community First) provides member materials to all new members across all lines of business. Product lines of business include STAR Medicaid, CHIP, STAR Kids and commercial, of which all member materials are highly regulated. Community First currently mails over 10,000 new member on-boarding materials on a monthly basis that include member identification cards and new member welcome packets.

The contract for member material fulfillment services was competitively bid on September 9, 2020. Two (2) vendor responses were received including bids from Dialog Direct (HealthLogix) and Clarity Software Solutions, Inc. The bids were compared utilizing a decision matrix and reviewed for responsiveness to the request for proposal (RFP) specifications. The bids were then equally weighed based on administrative and financial criteria.

Clarity Software Solutions, Inc. provides the best value for the following reasons: (1) certified security measures for member protected health information (PHI); (2) meets all production capabilities and needs; (3) offers extensive quality assurance measures and extensive data reporting; (4) meets technical functionality and requirements; and (5) offers competitive fees.

**Analysis:**

Clarity Software Solutions, Inc. will provide Community First with technology and fulfillment services that include, but are not limited to:

- ✓ Member ID print production and mailing
- ✓ New Member Welcome Packet printing production and mailing
- ✓ Highest-Caliber Security & Compliance

- ✓ Real-Time Dashboards of Activity and Performance

**Quality:**

Clarity Software Solutions, Inc. applies the strictest of Quality Assurance standards and performs quarterly reviews and audits to confirm that all Community First’s expectations are being met in accordance with the requirements as stipulated in the request for proposal. In addition, Clarity Software Solutions, Inc. ensures the production of all items seamlessly both for capacity and redundancy, and maintains extremely tight controls of all data assuring HIPAA data compliance.

**Fiscal Impact:**

Based on current utilization, the estimated value of the contract with Clarity Software Solutions, Inc. is \$445,000 annually (\$1,335,000 over a three-year period). Services and annual fees are indicated below:

<b>FULFILLMENT SERVICES</b>	<b>YEAR 1</b>	<b>YEAR 2</b>	<b>YEAR 3</b>
Implementation Fee	\$0		
Estimated Postage	\$115,000	\$115,000	\$115,000
Estimated Service Fees	\$330,000	\$330,000	\$330,000
<b>Total Annual Cost</b>	<b>\$445,000</b>	<b>\$445,000</b>	<b>\$445,000</b>

There is a five (5) percent decrease from the previous contract period for base fulfillment services. This contract shall be for a three-year period beginning January 1, 2021 and ending December 31, 2023 with an option to renew for two additional years, unless earlier terminated pursuant to the Community First Standard Purchase Terms and Conditions.

**Strategic Note:**

Clarity Software Solutions, Inc. fully supports electronic delivery of all communication that it dynamically composes (identification cards, kits, evidence of benefits, statements, provider directories, evidence of coverage, summary of benefit and coverage), giving Community First the option to print only some pieces, print none, or print only those requested by the member.

The Clarity Software Solutions, Inc. solution maintains electronic images of each communication and integrates them with health plan portals and mobile applications, so the communication can be rendered to a recipient in real-time. The electronic version can be sent to the member via email, a link to the portal an email, or viewed and downloaded directly from the portal.

Communications may also be distributed to mobile applications via the “Clarity Solution” and facilitate other workflow options, such as a prompt for the member to select their preferred method of receiving materials (opt-out/opt-in). The access is secure and instantaneous; single sign-on is another supported feature for our members.

**Workforce Composition:**

Clarity Software Solutions, Inc. has 166 employees. The workforce composition data is as follows:

<b>PROFESSIONAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic or Latino</b>	<b>Two or More Races</b>	<b>White</b>	<b>TOTAL</b>
Female Total		1	1	1		53	56
Male Total		5	4	1		76	86
Professional Total		6	5	2		129	142
<b>NON-PROFESSIONAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic or Latino</b>	<b>Two or More Races</b>	<b>White</b>	<b>TOTAL</b>
Female Total						15	15
Male Total			2		1	6	9
Non-Professional Total			2		1	21	24
<b>TOTAL Workforce</b>		6	7	2	1	150	<b>166</b>
<b>Total percentage</b>		3.61%	4.22%	1.2%	.6%	90.37%	<b>100%</b>

**Recommendation:**

Community First Board of Directors recommends Board of Managers' approval of a contract with Clarity Software Solutions, Inc., for Member Fulfillment Services for a total estimated amount of \$1,335,000 over a three-year period.

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Theresa Scepanski  
President/Chief Executive Officer  
Community First Health Plans, Inc.

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George B. Hernández, Jr.  
President/Chief Executive Officer  
University Health System



**BEXAR COUNTY HOSPITAL DISTRICT  
BOARD OF MANAGERS**

**Tuesday, January 19, 2021**

**Consideration and Appropriate Action Regarding a Contract between  
Community First Health Plans and SPH Analytics for  
Member and Provider Survey Services**

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**Background:**

In 2013, Community First Health Plans (Community First) embarked on a strategic quality improvement journey, to demonstrate compliance with national standards for health plan administration. Community First leadership selected to pursue accreditation from the most rigorous of two national health plan accreditation organizations in the United States, the National Committee on Quality Assurance (NCQA), whose mission is similar to that of Community First, to improve the quality of health care. Three out of four states that contract with managed care plans to provide Medicaid services either require plans to be accredited by NCQA (26 states) or accept NCQA Health Plan Accreditation as part of a broader accreditation requirement (5 states). Several states also “deem” plans that have been accredited by NCQA as meeting federal program standards under the Medicaid Managed Care Rule’s “non-duplication” provisions. Community First completed an Interim NCQA Accreditation survey in May 2014 and attained full NCQA Accreditation in October 2015.

Each year since that time, as a requirement for NCQA Health Plan Accreditation, Community First works with the provider network over a five-month review period, to capture and document the outstanding clinical health care services available to Community First members and to demonstrate ongoing quality improvement efforts through a series of clinical measures called Healthcare Effectiveness Data and Information Set (HEDIS®). In addition, Community First engages a NCQA-Certified survey vendor to evaluate those components of the member and provider experience which cannot be measured through clinical metrics, called Consumer Assessment of Healthcare Providers and Systems (CAHPS®). Member and provider satisfaction surveys and network adequacy surveys are completed through an independent reviewer as a component of the Health Plan Accreditation.

The contract for member and provider survey services was released for competitive bid on October 27, 2020. A total of nine (9) NCQA-Certified survey vendors were notified of the bid opportunity and one vendor responded with a proposal. The bid was evaluated for administrative and financial criteria.

SPH Analytics provided the best value for the following reasons: (1) well-designed survey process and timeline which meets NCQA requirements; (2) recent merger with the previously contracted vendor, DSS Research, retains the existing experienced survey team with a 20-year partnership history with Community First; (3) vendor staff are familiar with Community First, the provider network and the member community; and (4) value-added benefit of providing exclusive reports for the Texas Association of Community Health Plans consortium for regional benchmarking.

### **Analysis:**

SPH Analytics will provide Community First with member and provider survey services that include, but are not limited to:

- ✓ Medicaid Child CAHPS survey
- ✓ Medicaid Adult CAHPS survey
- ✓ Commercial Adult CAHPS survey
- ✓ Provider Satisfaction survey
- ✓ Primary Care Provider Appointment Availability survey
- ✓ Specialist Appointment Availability survey (to include Behavioral Health)
- ✓ After-Hours Primary Care Provider Availability survey

### **Quality:**

As a NCQA-Certified survey vendor, SPH Analytics participates in annual training and complies with all oversight activities required by NCQA to maintain certification. The NCQA Survey Vendor Certification program evaluates, certifies and provides oversight of vendors that collect survey data on behalf of health plans. The program promotes standardized data collection across the nation, in accordance with HEDIS Specifications for Survey Measures.

As a NCQA Accreditation requirement, survey vendors must use the NCQA approved survey instrument to assess the member experience, CAHPS 5.1H. The tool produces measures as question summary rates, composites (composed of multiple questions) and

overall ratings. NCQA scores 4 of the ratings questions and 5 of the composite questions for Health Plan Accreditation. NCQA publicly reports CAHPS 5.1H results in its annual Health Plan Ratings, a national report card of health plan quality.

**Fiscal Impact:**

The requested contract with SPH Analytics is for a three-year period. The total estimated cost is \$467,960 over the three-year contract period. Services and annual fees are illustrated below:

<b>SURVEY VENDOR SERVICES</b>	<b>YEAR 1</b>	<b>YEAR 2</b>	<b>YEAR 3</b>
Medicaid Child	\$22,700	\$23,035	\$23,385
Medicaid Adult	\$16,250	\$16,585	\$16,920
Commercial Adult	\$18,500	\$18,835	\$19,160
Behavioral Health Survey	\$9,750	\$10,050	\$10,350
Provider Satisfaction	\$11,000	\$11,330	\$11,670
PCP After Hours Availability	\$10,200	\$10,400	\$10,650
PCP Appointment Availability	\$14,350	\$14,600	\$14,850
Behavioral Health Appt Availability	\$14,900	\$15,150	\$15,400
Specialist Appt Availability	\$10,400	\$10,650	\$10,900
Medicare Advantage Adult		\$37,670	\$38,320
<b>Total Annual Cost</b>	<b>\$128,050</b>	<b>\$168,305</b>	<b>\$171,605</b>
<b>Total 3-Year Period</b>			<b>\$467,960</b>

Survey fees, which remained unchanged for the previous three years, increased 14 percent from the previous contract, for base services.

The requested contract shall be for a three-year term beginning January 1, 2021 and ending December 31, 2023, unless earlier terminated pursuant to the Community First Health Plans Standard Purchase Terms and Conditions.

**Strategic Note:**

SPH Analytics continues to be an excellent choice and best value for Community First. The vendor has experience in conducting the full range of NCQA Health Plan Accreditation surveys. This experience will support Community First’s strategic plan for product diversification, as SPH Analytics has the knowledge and experience to conduct other national surveys, such as:

- Medicare Patient Experience of Care Survey
- Medicare Health Outcomes Survey
- Qualified Health Plan Enrollee Survey

**Workforce Composition:**

SPH Analytics has 691 employees. The workforce composition data is as follows:

<b>PROFESSIONAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>I am Hispanic or Latino</b>	<b>Native Hawaiian or other Pacific Islander</b>	<b>Not Disclosed</b>	<b>Two or More Races</b>	<b>White</b>	<b>TOTAL</b>
Unknown	0	0	0	0	0	0	0	0	0
Female Total	0	3	4	4	0	0	2	22	35
Male Total	0	4	5	3	0	0	2	31	45
Combined Non-Prof Total	0	7	9	7	0	0	4	53	80
<b>NON-PROFESSIONAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>I am Hispanic or Latino</b>	<b>Native Hawaiian or other Pacific Islander</b>	<b>Not Disclosed</b>	<b>Two or More Races</b>	<b>White</b>	<b>TOTAL</b>
Female Total	0	22	166	123	1	4	10	140	466
Male Total	0	12	38	34	0	1	5	55	145
Combined Prof Total	0	34	204	157	1	5	15	195	611
<b>TOTAL Workforce</b>	<b>0</b>	<b>41</b>	<b>213</b>	<b>164</b>	<b>1</b>	<b>5</b>	<b>19</b>	<b>248</b>	<b>691</b>
	<b>0%</b>	<b>5.93%</b>	<b>30.82%</b>	<b>23.73%</b>	<b>0.14%</b>	<b>0.72%</b>	<b>2.75%</b>	<b>35.89%</b>	<b>100%</b>

**Recommendation:**

Community First Board of Directors recommend Board of Managers approval of a contract with SPH Analytics for Member and Provider Survey Services for a total estimated amount of \$467,960 over a three-year period.

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Theresa Scepanski  
President/Chief Executive Officer  
Community First Health Plans, Inc.

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George B. Hernández, Jr.  
President/Chief Executive Officer  
University Health System



**BEXAR COUNTY HOSPITAL DISTRICT  
BOARD OF MANAGERS**

**Tuesday, January 19, 2021**

**Consideration and Appropriate Action Regarding a Contract with Henock  
Construction, LLC., for Renovations and Repairs at the Edgewood Clinic**

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**Background:**

The Edgewood Clinic (formerly Old Hwy 90 Clinic) has recently been recommissioned for Edgewood ISD school-based clinic and adult primary care. The vinyl wall covering, existing cabinets and millwork are experiencing deterioration to include plastic laminate finish and countertops in exam rooms, breakrooms, workrooms, and nurse's station. The existing restrooms do not meet Texas Accessibility (TAS) standards.

**Analysis:**

An assessment was made and it was determined to replace the aged countertops and millwork with the University Health standard solid surface tops and cabinets to include integral sinks and to remove the old vinyl wall covering and upgrade wall finishes. These upgrades will create an updated and modern environment that is consistent with our ongoing ambulatory facilities improvements while providing a clean environment that minimizes the spread of infectious diseases in keeping with University Health's Infection Control & Prevention Program. All restrooms (2 public, 1 patient and 1 staff) will be designed to meet current TAS accessibility standards and will be upgraded with new fixtures and finishes. In addition, existing light fixtures throughout the clinic will be replaced with energy efficient LED fixtures.

University Health Procurement Services solicited formal bids, RFCSP-220-09-052-CNST with twelve (12) Contractors responding. The spread, highest to lowest bid, was \$219,198. The Project schedule spread, highest to lowest, was 178 calendar days.

The proposals, received by Procurement Services and were evaluated based on the criteria provided to the firms in the RFCSP. Of the firms that proposed, Henock

**Consideration and Appropriate Action Regarding a Contract with Henock Construction, LLC for Renovations and Repairs at the Edgewood Clinic**  
**Tuesday, January 19, 2021**  
**Page 2 of 3**

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Construction, LLC., was selected based on their competitive pricing, proposed schedule, healthcare experience and safety record.

**Quality Note:**

The Contractor will provide services that will optimize the use of available funds while providing the highest quality construction within the established project schedule and budget.

**Fiscal Impact:**

Staff has reviewed the Henock Construction pricing for construction services and recommends approval of their proposal in the amount of \$433,187. This purchase is to be funded from 2021 operational funds.

<b>Project Budget Summary</b>	
<b>Scope</b>	<b>Cost</b>
Design Services	\$ 38,816
Construction Cost (This request)	\$ 433,187
Total	\$ 472,003

**Strategic Note:**

This project will support staff in achieving the Triple Aim Plus objectives, since it will improve efficiencies in the maintenance of the facility, safety, and a positive impact on quality and outcomes.

**Community Outreach Plan/Workforce Composition:**

Henock Construction has a total of 11 employees. The workforce composition data is as follows:

<b>Non—Professional Workforce</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Subtotal</b>
Female	0	0	0	2	0	2
Male	0	0	0	8	0	8
Combined Non-Professional Total	0	0	0	10	0	10

**Consideration and Appropriate Action Regarding a Contract with Henock Construction, LLC for Renovations and Repairs at the Edgewood Clinic**  
**Tuesday, January 19, 2021**  
**Page 3 of 3**

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<b>Professional Workforce</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Subtotal</b>
Female	0	0	0	0	0	0
Male	0	0	0	1	0	1
Combined Professional Total	0	0	0	1	0	1
<b>Total Workforce</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>11</b>	<b>0</b>	<b>11</b>
	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>100%</b>	<b>0%</b>	<b>100%</b>

**Recommendation:**

Staff recommends the Board of Managers approve the selection of Henock Construction, LLC as Contractor for the Renovations, Repairs and Upgrades at the Edgewood Clinic and authorize the President/Chief Executive Officer to execute a contract with Henock Construction, LLC in the amount of \$433,187.

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Don Ryden  
Vice President  
Planning, Design, and Construction

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Edward Banos  
Executive Vice President/  
Chief Operating Officer

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George B. Hernández, Jr.  
President/Chief Executive Officer



**BEXAR COUNTY HOSPITAL DISTRICT  
BOARD OF MANAGERS**

**Tuesday, January 19, 2021**

**Consideration and Appropriate Action Regarding a Support Agreement with  
Haven for Hope of Bexar County for the Jail Outreach Program and  
Continuity of Care Transition Program**

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**Background:**

Since 2015, University Health has provided annual funding support for Haven for Hope of Bexar County for a Jail Outreach Program and in 2020 a Continuity of Care Transition Program was added.

Entering either the Bexar County Adult Detention Center (“jail”) or the Central Magistration Office creates an opportunity to offer a detainee referral to treatment and linkage to other community resources, including housing. Homelessness can be a deterrent to personal recognizance bonds, and so in late 2014, Haven for Hope began accepting arrestees from jail to the Haven for Hope campus for case management, job training, shelter, education, and a broad array of coordinated services from 93 partner agencies. The Haven for Hope Jail Outreach Program (JOP) was created to increase access to services including outreach, housing, residential treatment services, peer support, and case management on the Haven for Hope campus to help link clients with both physical health and behavioral health treatment, with the ultimate goals to reduce recidivism and move clients to permanent housing. Staff members from University Health’s Detention Health Care Services (located at the Bexar County Adult Detention Center), the Center for Health Care Services, and Bexar County work together to identify and refer appropriate candidates for the JOP.

With the addition of the Continuity of Care Transition Program (CCTP) in 2020, Haven for Hope increased case management for linkage to mental health, substance use and physical health treatment services for patients referred by hospitals in addition to persons bonding out of jail. Initially, repeat users of the Haven on-site treatment services or University Hospital were the targeted population for CCTP. In 2021 this will broaden to include first time users of the Haven campus-located services or any patient deemed appropriate by University Health as needing

increased case management or navigation to treatment. Haven for Hope also increased the number of campus residential treatment beds from 50 to 110, and added a housing expert, a case manager (who is also a medical social worker), and a peer support specialist. In addition, an improved intake referral process for patients from University Hospital was implemented.

The ultimate goals of CCTP and JOP are to secure permanent housing and income, reduce recidivism (both returns to Haven for Hope and jail), and improve health care for persons experiencing homelessness. Residents are enrolled into multiple behavioral health treatment services both on and off campus, which provide support to individuals seeking to address their mental health issues and/or recovery from drug use disorders and are linked to primary care treatment at the onsite CentroMed Clinic.

During 2019, Bexar County and University Health shared financial support with an annual contribution of \$483,333.00 each. In 2020, as part of the expansion of behavioral health community funding, University Health increased annual support to \$1,483,333.00. Haven for Hope is requesting \$1,483,333.00 again in 2021. Bexar County will continue its annual contribution of \$483,333.00.

**Analysis:**

During 2020, the COVID-19 pandemic presented unique challenges. Haven for Hope leadership responded with a necessary pause in new intakes from the end of March 2020 until May 2020. They obtained a hotel lease, and in close collaboration with the City of San Antonio Metropolitan Health District, implemented sequentially phased processes for screening, quarantine and isolation, testing, and ongoing staff education during which time they gradually increased capacity while ensuring safety. Additional cleaning and technical requirements for videoconferencing and telemedicine led to increased costs. Additional staff support was needed for the hotel, which served as a low barrier access point for individuals experiencing homelessness who might normally stay in the Haven courtyard (and this need will continue during 2021). The University Health funding in 2020 was allocated as follows: approximately 29% supported necessary partner services (includes Haven staff providing case management, peer support and navigators, among others), 18% community staff (e.g., volunteer coordinator, project manager, media manager, etc.) 19% information infrastructure, and 35% physical infrastructure.

Approximately 90% of CCTP and 71% of JOP clients receive behavioral health services, which may include various Center for Health Care Services (CHCS) treatment programs (Co-Occurring Psychiatric/Substance Use Disorder Treatment Program, Intensive Outpatient Treatment Program, Integrated Treatment Program, Project for Assistance in Transition from Homelessness, and other outpatient mental health services); Sigma Mental Health Urgent Care; Lifetime Recovery; Alpha Home; Crosspoint; community based counseling; peer led recovery support groups (both on campus and in the community); and anger management classes. Haven for Hope is also a key participant in a current community stakeholder collaborative group, The Southwest Texas Crisis Collaborative (STCC), created through the Southwest Texas Regional Advisory Council (STRAC), which has provided funding for additional medical capability on the campus (the Acute Care Station) which also serves to address the complex needs of patients who often access hospital services in lieu of outpatient care.

These services provide the care where and when the client needs them potentially reducing emergency department visits and inpatient readmissions while improving quality of life for participants. Clients are also provided financial sustainability services including vocational and personal finance training and resume writing, which are the underpinnings of successful permanent housing placement.

The table below further summarizes outcomes for this project:

<b>HAVEN FOR HOPE JAIL OUTREACH AND CONTINUITY OF CARE TRANSITION PROGRAMS CY 2019 THROUGH Q3 2020</b>		
<b>Measure</b>	<b>2019</b>	<b>Q1-Q3, 2020*</b>
<b>1. Number of Assessments</b>	<b>847</b>	<b>533</b>
<b>2. Number of Peer Support Services</b>	<b>12,835</b>	<b>9,193</b>
<b>3. Number of Enrollments Onto Campus</b>	<b>383</b>	<b>182**</b>
<b>4. Average Length of Stay on Campus, Days</b>	<b>106</b>	<b>119</b>
<b>5. Number Receiving CHCS ITP Services</b>	<b>59</b>	<b>55</b>
<b>6. Number of Clients connected to Primary Care</b>	<b>248</b>	<b>122</b>
<b>7. Number of Clients Connected to Financial Sustainability</b>	<b>171</b>	<b>123</b>
<b>8. Number of Clients Engaged in Behavioral Health Services</b>	<b>216</b>	<b>163</b>
<b>9. Percent returning to Haven for Hope Campus within six months after placement in permanent housing (82clients placed into permanent housing)</b>	<b>6%</b>	<b>0%***</b>
<b>10. Percent rearrests for new charges and/or return to jail within 6 months after enrollment</b>	<b>28%</b>	<b>22%***</b>

**HAVEN FOR HOPE JAIL OUTREACH AND  
CONTINUITY OF CARE TRANSITION PROGRAMS  
CY 2019 THROUGH Q3 2020**

*2020 data includes CCTP Program which began in Mar 2020
**2020 Campus enrollments include hotel enrollments
***Recidivism data is through Q2 2020

In addition to overall outcomes, typical client stories include one who enrolled in JOP in November 2019, participated in 12-step meetings, received care in CHCS treatment programs, completed his parole, obtained employment, bought a car, and rented an apartment. A CCTP client experiencing posttraumatic stress disorder and stage IV lung cancer when she arrived at Haven received chemotherapy, and community based counseling along with many other services and found permanent housing in October 2020.

**Quality Note:**

The Jail Outreach Program and Continuity of Care Transition Program Support Agreement provides funding for peer support and intake specialists, along with staff who address financial instability, employment readiness, and other income opportunities all of which tend to correspond to ongoing housing stability.

Performance goals will continue to be tracked and outcomes provided to University Health quarterly including: number of assessments conducted and services provided by Peer Support Specialists ; number of enrollments onto the campus; length of stay on the campus; number of persons with stable housing plans; number returning to Haven for Hope or to jail or rearrested within 6 months; number of individuals connected to primary care on campus; number of individuals provided with financial sustainability services; and number of individuals enrolled into behavioral health services.

**Fiscal Note:**

For 2021, the funding request for University Health is \$1,483,333.00. Bexar County's contribution remains at \$483,333.00 annually. The return on investment includes improved access to behavioral health treatment services on the Haven for Hope campus, moving health care provided from inside the jail to community care, along with a potential reduction in preventable emergency department visits and inpatient

admissions. The amount of \$1,483,333.00 is included in University Health’s 2021 budget.

**Strategic Note:**

The JOP and CCTP align with University Health’s Triple Aim *Plus* goals of improving efficiency/cost effectiveness, quality, access, and the patient experience. Access to care is provided at the right location at the right time, in a less costly setting than a hospital: namely at the Haven for Hope campus. Program outcomes also align with STCC, the collaborative community program addressing the needs of patients with complex comorbidities and barriers to improving the social determinants of health, which in turn can improve the health of the community population. In addition, the toll of incarceration on both the detainee and his/her family is costly in terms of quality of life, particularly when untreated mental illness or addiction contributes to the arrest. Homelessness itself is not only a risk factor for incarceration, but is also a risk for poor health, and together these all negatively impact the overall health of our community.

**Community Outreach Plan/Workforce Composition:**

Haven for Hope has a total of 256 employees. The workforce composition data is as follows:

<b>NON PROFESSIONAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Other</b>	<b>TOTAL</b>
	<b>1</b>	<b>1</b>	<b>20</b>	<b>75</b>	<b>24</b>	<b>5</b>	<b>126</b>
	<b>0.8%</b>	<b>0.8%</b>	<b>15.9%</b>	<b>59.5%</b>	<b>19.1%</b>	<b>4.0%</b>	<b>100%</b>
<b>PROFESSIONAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Other</b>	<b>TOTAL</b>
	<b>1</b>	<b>1</b>	<b>21</b>	<b>62</b>	<b>43</b>	<b>2</b>	<b>130</b>
	<b>0.8%</b>	<b>0.8%</b>	<b>16.2%</b>	<b>47.7%</b>	<b>33.1%</b>	<b>1.5%</b>	<b>100%</b>
<b>TOTAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Other</b>	<b>TOTAL</b>
	<b>2</b>	<b>2</b>	<b>41</b>	<b>137</b>	<b>67</b>	<b>7</b>	<b>256</b>
	<b>0.8%</b>	<b>0.8%</b>	<b>16.0%</b>	<b>53.5%</b>	<b>26.2%</b>	<b>2.7%</b>	<b>100%</b>

**Recommendation:**

Staff recommends the Board of Managers authorize the President/CEO to execute a 12-month agreement beginning January 1, 2021, which shall automatically renew for up to two successive one-year terms, in the amount of \$1,483,333.00 annually, or \$4,449,999.00 for the entire three-year term, with Haven for Hope of Bexar County.

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Sally E. Taylor, MD  
Senior Vice President/  
Chief of Behavioral Medicine

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Edward Banos  
Executive Vice President/  
Chief Operating Officer

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Reed Hurley  
Executive Vice President/  
Chief Financial Officer

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George B. Hernández, Jr.  
President/Chief Executive Officer



**BEXAR COUNTY HOSPITAL DISTRICT  
BOARD OF MANAGERS**

**Tuesday, January 19, 2021**

**Consideration and Appropriate Action Regarding a Support Agreement with  
UT Health for the Transitional Care Clinic**

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**Background:**

The UT Health San Antonio Department of Psychiatry’s Transitional Care Clinic (“TCC”) provides behavioral health services, particularly rapid follow-up for University Health adult psychiatric patients discharged from University Hospital with an ultimate goal of providing short-term treatment and resolution of symptoms, or transition to longer term outpatient care within approximately 90 days. University Health staff in the University Hospital Emergency Department, Inpatient Psychiatry Unit and on the Psychiatry Consultation Service (providing consultation for patients admitted to medicine/surgery inpatient units), schedule adult patients directly into TCC appointments for seamless care coordination and discharge planning. Without the TCC, appropriate and timely outpatient follow-up would be difficult to access, risking a potential for return visits to the Emergency Department, readmission, or deterioration of patients’ behavioral health conditions. In addition, inpatient admission may be avoided when patients seen in the Emergency Department can be given timely follow-up appointments in the TCC.

For patients referred, the goal is follow-up within seven days of release. Patients who are unfunded, or have CareLink or third party payors are accepted, and particularly those patients not meeting criteria for follow-up by the Local Mental Health Authority. TCC staff provide psychiatric follow-up, nursing support, and evidence-based individual, family, and group psychotherapy targeting a wide range of behavioral health conditions, including treatment for substance use disorders. In addition, TCC patients receive care coordination services including support to enroll in CareLink or other insurance, referrals for housing, food, clothing and other support services in Bexar County, as well as care transition to long-term outpatient behavioral health treatment when needed. Furthermore, the TCC supports behavioral health workforce development by providing training for licensed

professional counselor interns, pre-doctoral psychology interns, social work interns, and psychiatric residents.

The TCC was initially funded through the 1115 Waiver program but when no longer eligible for this support, in 2018 University Health began contracting directly for this service. In 2019 the agreement was renewed for a sixteen-month term in order to align with University Health’s annual budget cycle, and the annual amount was increased in January, 2020 by \$59,448.00 to \$404,448.00. The increased funding covered an additional 0.8 FTE of therapist time and minor cost of living wage increases for other staff covered by this contract. The current request is to renew this agreement for a twelve-month term beginning January 1, 2021, with automatic renewal of two additional successive, one-year terms, at the same annual rate of \$404,448.00.

**Analysis:**

The purpose of this contract is to provide continued access for University Health patients to receive behavioral health outpatient treatment services after hospital discharge. The contract continues to support one fulltime caseworker, three fulltime therapists, one fulltime licensed vocational nurse, and 0.6 FTE clinic director oversight. The TCC improves access and provides timely post-discharge follow up for patients released from the University Hospital’s Emergency Department, Inpatient Psychiatry Unit or Inpatient Medicine/Surgery services. Patients are referred to the TCC through a computerized appointment system coordinated by University Hospital Behavioral Health or Emergency Department Care Coordination/Social Work staff. The contract includes defined benchmarks including maintaining capacity for at least 100 referrals per month, appointments within seven days post-discharge for at least 90% of patients referred, and an initial show rate of at least 50%. In 2020, with the COVID-19 pandemic challenges, patient show rates were initially low; however, TCC staff adjusted to virtual telehealth visits for psychotherapy and psychiatric appointments, which also allowed for social distancing within the clinic for those patients seen in person and for staff.

**Quality Note:**

In 2020, the TCC provided capacity for 1,253 unique patient referrals (average of 105 per month), and 679 of those were seen, for a first visit show rate of 54%.

Of those seen, 89% were scheduled for appointments within seven days of discharge (92% were offered appointments in seven days) with an average of four days from hospital release to first TCC visit; 1.0% had inpatient readmissions within 30 days of discharge; and 2.0% returned to the University Hospital Emergency Department within 30 days after referral. Patient satisfaction for 2020 included a “would recommend” mean score of 95.0 overall. TCC staff will continue to monitor metrics to include: number of patients referred; unduplicated patients served; percent of appointments given within seven days of discharge; show rate; payor mix; 30-day return rate for Emergency Department visits and hospital readmissions; and patient satisfaction.

**Fiscal Note:**

The total cost of the twelve-month contract for 2021 is the same as 2020, and will not exceed \$404,448.00. The payor mix of those referred to TCC includes 72% unfunded, 3.0% CareLink, 14% government sponsored health care coverage, and 11% other forms of insurance including managed care payors. The TCC reduces emergency department visits and potentially preventable admissions by providing quick follow-up for discharged patients and providing drop-in follow up for those patients enrolled in treatment when they experience a crisis. This contract cost is included in University Health’s 2021 budget.

**Strategic Note:**

The TCC provides services aligned with the Triple Aim *Plus* by providing rapid access to outpatient behavioral health care following hospital discharge, improving access to the continuum of care in the right setting, and by supporting much needed outpatient behavioral health treatment capacity that would otherwise be insufficient. In addition, providing timely outpatient care reduces avoidable cost by preventing unnecessary emergency department visits and inpatient admissions.

**Community Outreach Plan/Workforce Composition:**

UT Health has a total of 5,673 employees. The workforce composition data is as follows:

<b>NON PROFESSIONAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Other</b>	<b>Total</b>
#	6	61	100	1,485	541	--	2,193
%	<b>0.3%</b>	<b>2.8%</b>	<b>4.6%</b>	<b>67.7%</b>	<b>24.7%</b>	--	<b>100%</b>
<b>PROFESSIONAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Other</b>	
#	11	552	118	1,053	,1746	--	3,480
%	<b>0.3%</b>	<b>15.9%</b>	<b>3.4%</b>	<b>30.3%</b>	<b>50.2%</b>	--	<b>100%</b>
<b>TOTAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Other</b>	<b>TOTAL</b>
#	17	613	218	2,538	2,287	--	5,673
%	<b>0.3%</b>	<b>10.8%</b>	<b>3.8%</b>	<b>44.7%</b>	<b>40.3%</b>	--	<b>100%</b>

**Recommendation:**

Staff recommends the Board of Managers authorize the President/CEO to execute a 12-month agreement with UT Health San Antonio for the Department of Psychiatry Transitional Care Clinic Support Services, beginning January 1, 2021, which shall automatically renew for up to two, successive, one-year terms at the same amount for each year, in the amount of \$404,448.00 annually, or \$1,213,344.00 for the entire three-year term.

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Sally E. Taylor, MD  
 Senior Vice President/  
 Chief of Behavioral Medicine

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Edward Banos  
 Executive Vice President/  
 Chief Operating Officer

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Reed Hurley  
 Executive Vice President/  
 Chief Financial Officer

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George B. Hernández, Jr.  
 President/Chief Executive Officer



**BEXAR COUNTY HOSPITAL DISTRICT  
BOARD OF MANAGERS**

**Tuesday, January 19, 2021**

**Consideration and Appropriate Action Regarding a Contract with Luby's  
Fuddruckers Restaurants, LLC., d/b/a Luby's Culinary Services for  
Management of Sky Bistro, Robert B. Green Café, and Texas Diabetes  
Institute Cafeteria and Business Center Café**

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**Background:**

In 2016, University Health posted Request for Proposal (RFP) 216-02-004-SVC to solicit bids for food management services for three University Health retail locations. Luby's was selected by an evaluation committee as best value for the organization. On February 21, 2017, the Board of Managers approved a contract with Luby's Culinary Services to provide management services at University Hospital Café (Sky Bistro), Robert B. Green Café, and Texas Diabetes Institute Cafeteria. The initial three-year contract included the option for two, one-year renewals. Under the terms of this agreement, Luby's was compensated a management fee of 10% of gross revenue plus salary/benefits to provide one FTE of food service director. Luby's in turn provided University Health with management and direct supervision for approximately 44 University Health FTEs, catering services, daily operational oversight for all three locations and access to food products/recipes branded by Luby's.

During the first term of this agreement with Luby's, gross sales grew from \$2,386,700 per year to \$3,935,136 per year representing a 65% increase. Growth can be attributed to Luby's implementing an entirely new menu of fresh cooked options to include desserts, expanded grab and go, and the addition of healthy meal options. Patient activity growth for all locations during this same period was 14.7%.

On October 23, 2020, University Health posted RFP 220-10-055-SVC to solicit qualified respondents to provide a new food management services contract for all of the three original retail locations, plus the new Business Center Café.

**Analysis:**

An evaluation committee comprised of leaders from both Hospital and Ambulatory operations was formed to evaluate RFP submittals. Evaluation and scoring criteria for this award included the following:

- Experience and qualifications
- Organization and staffing plans for performing the required food service operations
- Food service management plan to deliver efficient, affordable, and reliable food service to meet or exceed expectation
- Proposed plan to track, improve, and maintain customer service and revenues
- Pricing

On November 11, 2020, two responsive submittals were received by Procurement for RFP 220-10-055-SVC from the following vendors:

- ABM Healthcare – St. Clair Shores, MI
- Luby's Culinary Services – Houston, TX

All submittals were reviewed by the evaluation committee. Both vendors were invited to provide the evaluation committee with full presentations which were completed on December, 15, 2020. After careful consideration and review, the recommendation of the evaluation committee was to award the management agreement to Luby's Culinary Services. Final scores for the two vendors were as follows:

- Luby's Culinary Services – 86.51 points
- ABM Healthcare – 81.25 points

Luby's Culinary Services provided University Health with the best overall value with key strengths addressing continuous quality improvement, customer complaints, and presenting customers with tasty and popular menu options. Luby's Culinary Services currently provides management services to several Texas healthcare systems/facilities to include Harris Health System, DHR Health, Kindred Healthcare, Kelsey Seybold Medical Center, Eastland Memorial Hospital, and Memorial Medical Center.



**Quality Note:**

Luby's will continue to provide high quality meals and management services to all University Health patients, visitors, and staff. Quality food and leadership services enhances each customer experience. At TDI and RBG, Luby's converted both locations from serving primarily fried frozen product to meals cooked with fresh product, which has been an employee satisfier. For all locations, Luby's introduced a line of tasty and healthy meals trade marked as "Living Smart", which contain less than 600 calories and a fat content of less than 30%. Finally, Luby's implemented product labeling for all prepackaged food items at all locations to provide customers with information listing calorie, fat, carbohydrate, and ingredient contents. This effort provided enhanced transparency to nutritional facts so customers can make informed choices on healthy offerings.

**Fiscal Impact:**

Projected gross revenues in 2021 (a non-Covid year) would increase from \$3.9M in 2020 to \$5.8M in 2021. In 2020, Luby's was not able to implement a full menu and will add service to the new Business Center Café. Estimated net income for the Health System in 2021 will be \$100,000 from the four combined retail operations. Net income is impacted by University Health offering a 25% discount on food items as benefit of employment. The cost of that benefit is approximately \$400,000 per year and as visitors increase we expect the profitability to increase.

The value of a one year contract with Luby's Culinary Services is \$385,621. Associated costs included in this amount are \$290,200 in management fees (5% of estimated gross sales) plus \$95,421 in salary/benefits for the provision of 1 FTE of food service director. In comparison to the previous contract with Luby's Culinary Services, this represents a 50% reduction in management fees.

**Strategic Note:**

This contract with Luby's aligns with all aspects of University Health's Triple Aim Plus. Patient/employee experience and quality will continue to be enhanced by providing hot and tasty meals. Efficiency will be maintained by Luby's providing University Health with professional food service operational expertise. Access will be continued by providing customers with a greater variety of food options at all retail locations.

**Workforce Composition:**

Luby's Fuddruckers Restaurants, LLC has 3,532 employees and is headquartered in Houston, Texas.

<b>NON PROFESSIONAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Other</b>	<b>Total</b>
	20	69	730	2054	633	4	3510
	<b>0.6 %</b>	<b>2.0%</b>	<b>20.8 %</b>	<b>58.5 %</b>	<b>18.0 %</b>	<b>0.1%</b>	<b>100%</b>
<b>PROFESSIONAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Other</b>	
			1		21		22
	<b>0 %</b>	<b>0 %</b>	<b>0.6%</b>	<b>0%</b>	<b>95.4 %</b>		<b>100%</b>
<b>TOTAL</b>	<b>American Indian</b>	<b>Asian American</b>	<b>African American</b>	<b>Hispanic</b>	<b>White</b>	<b>Other</b>	<b>TOTAL</b>
	20	69	731	2054	654		3532
	<b>0.6%</b>	<b>2.0%</b>	<b>20.7 %</b>	<b>58.2 %</b>	<b>18.5 %</b>		<b>100.0%</b>

**Recommendation:**

Staff recommends that the Board of Managers approve a non-assignable food service management contract for one year not to exceed **\$385,621** with Luby's Culinary Services to include the option for four one-year renewals.

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James Willis  
Vice President, Associate Administrator  
University Hospital

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Michael Roussos  
Hospital Administrator  
University Hospital

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Edward Banos  
Executive Vice President  
Chief Operating Officer

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George B. Hernández, Jr.  
President/Chief Executive Officer  
University Health