



University Health System

SPECIAL MEETING OF THE BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Thursday, December 6, 2018

11:30 a.m.

Silver Banquet Hall
St. George Maronite Center
6070 Babcock Road
San Antonio, Texas 78240

MINUTES

BOARD MEMBERS PRESENT:

Jim Adams, Chair
Ira Smith, Vice Chair
Dianna M. Burns, M.D., Secretary
Roberto L. Jimenez, M.D, Immediate Past Chair
Robert Engberg
James C. Hasslocher
Janie Barrera

OTHERS PRESENT:

George B. Hernández, Jr., President/Chief Executive Officer, University Health System
Bryan Alsip, M.D., Executive Vice President/Chief Medical Officer, University Health System
Tommye Austin, Ph.D., Senior Vice President/Chief Nurse Executive, University Health System
Awoala Banigo, Senior Vice President/Chief Revenue Officer, University Health System
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System
Lourdes Castro-Ramirez, President, University Health System Foundation
Ted Day, Executive Vice President, Strategic Planning and Business Development, University Health System
Theresa De La Haya, Senior Vice President/Health Promotion, Clinical Prevention, Texas Diabetes Institute, University Health System
Sergio Farrell, Senior Vice President/Chief, Ambulatory Services, University Health System
Rob Hromas, M.D., Dean, Long School of Medicine, UT Health San Antonio
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System
Monika Kapur, M.D., President, University Medicine Associates
Leni Kirkman, Senior Vice President, Strategic Communication and Patient Relations, University Health System
Teresa Nino, Director, Epic Communications, University Health System
Bill Phillips, Senior Vice President/Chief Information Officer, University Health System
Kirsten Plastino, M.D., President, Medical/Dental Staff, University Health System; and Professor,

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Department of Obstetrics & Gynecology, UT Health, San Antonio
Serina Rivela, Interim Chief Legal Officer, University Health System
Michael Roussos, Administrator, University Hospital
Laura Rodriguez, Executive Director, Business Development and Strategic Planning, University Health System
Don Ryden, Vice President/Planning, Design, and Construction, University Health System
Irene Sandate, Assistant Chief Nursing Officer, Women's & Children's Services, University Health System
Steve Seidner, M.D., Professor, Division of Neonatology/Department of Pediatrics, UT Health, San Antonio; and Medical Director, Neonatal Intensive Care Unit, University Hospital
Andrew Smith, Director, Government Relations and Public Policy, University Health System
Travis Smith, Deputy Chief Financial Officer, University Health System
And other attendees.

CALL TO ORDER AND RECORD OF ATTENDANCE: JIM ADAMS, CHAIR, BOARD OF MANAGERS

Mr. Adams called the meeting to order at 11:30 a.m., and yielded the floor to Mr. Hernandez and Mr. Day for a meeting overview.

MEETING OVERVIEW — GEORGE B. HERNÁNDEZ, JR./TED DAY

SUMMARY:	The purpose of the Board Retreat is for the Board of Managers to receive information on two key initiatives: Implementation of Epic and development of the Women's & Children's Tower. Additionally, staff will provide updates to the Board of Managers on important external factors affecting the Health System including priorities and issues for the upcoming 2019 legislative session and changes and issues facing the Health and Human Services Commission (HHSC). Staff solicited Board feedback on proposed approaches in these important areas.
RECOMMENDATION:	None.
ACTION:	None.
FOLLOW UP:	None.

LEGISLATIVE SESSION AND THE HEALTH AND HUMAN SERVICES COMMISSION (HHSC) UPDATE - GEORGE B. HERNÁNDEZ, JR./ANDREW SMITH

SUMMARY: Staff presented information to the Board of Managers on priorities and issues for the 86th Legislative Session, which begins January 8, 2019, and runs until May 27, 2019 (assuming all business can be conducted during the Regular Session). This year, the Health System plans to focus on the following major priorities:

- Workforce
- San Antonio State Hospital
- Opioids and Substance Abuse
- Behavioral Health
- Healthcare Financing

RECOMMENDATION:

ACTION:

FOLLOW UP:

Staff also briefed the Board of Managers on developments at the key health-care related state agency of the HHSC, including changes in leadership, priorities, and challenges faced.

None.

None.

Board feedback on this topic included:

- Encouragement to understand the issues behind the recently published rate of increase in uninsured children in Texas and of such related issues as advocacy for extending the length of continuous enrollment for Medicaid beneficiaries;
- Encouragement for staff to keep the Board apprised of progress in the legislative session and of the impact of changes in legislative leadership driven by the mid-term elections;
- Endorsement of the staff plan to continue building relationships with new leadership at HHSC;
- Encouragement to continue to align UT Health – San Antonio and Health System priorities and initiatives for government relations and legislative priorities where possible;
- Endorsement of the staff plan to continue updating the Board of Managers on such key developments as progress on Delivery System Reform Incentive Payment (DSRIP) replacement program options for the coming years; and
- Request to staff to incorporate involvement of members of the Board of Managers in where appropriate in promotion of legislative priorities.

EPIC IMPLEMENTATION — ED BANOS/BILL PHILLIPS/REED HURLEY/BRYAN ALSIP, M.D.

SUMMARY:

Staff presented updates on several key elements of implementing Epic: Quality and Safety implications, Operational Implications, and Approaches to Assuring Effective Revenue Cycle Management during and after implementation.

Quality and Safety Implications

Staff communicated to the Board of Managers that Epic provides a variety of tools to connect more effectively with patients in a current way, facilitating the kinds of fluid communications that patients experience as consumers in other industries. Further, Epic provides predictive analytics enabling physicians and other care providers to more effectively plan and deliver patient care. It also facilitates use of the factors of social determinants in helping to address broader issues of life that patients face. These factors and other operations-related issues will be covered in the presentation.

Specifics on quality and patient safety considerations that would be enhanced through the implementation of an effective system such as Epic were presented and were organized along the lines of the Triple-Aim *Plus* – improved quality of patient care, a better patient experience, greater efficiency in clinical workflows, and increased access to care. Standardized documentation, more effective management of preventable

conditions, and various means of improved communications with patients were profiled in the presentation.

Operational Implementation of Epic

Staff presented to the Board of Managers various goals in implementing Epic and some detail on the various phases of preparing for, executing, and proving effective implementation. Given the large scale of this project, a vital ability to project and track progress is very important. Thus staff described tools and plans for reporting on progress to the CEO and to the Board of Managers. Staff presented detail on the six phases of implementation from planning to post-live and optimization, including the organizational chart, approach to staffing, training plan, reporting capabilities, and priorities for implementing best practices. Epic techniques for effective change management and associated decision-making processes were also shared. Staff also covered the status of staffing for Epic and noted that there was strong interest in these positions. Further, staff noted that some of the additional resources added through Epic will enable reduction in current reliance on various manual processes.

Revenue Cycle

Staff presented a summary of the plan for effective management of the transition of the revenue from the old system to the new one. In the course of that transition it was noted that the implementation of Epic brings both opportunity and challenge in the area of revenue cycle. Staff presented to the Board of Managers how such challenges faced by other systems, such as temporary slow-down of cash collections, will be addressed in the implementation of Epic in this Health System. Epic-endorsed approaches that staff presented include parallel revenue cycle testing to assure performance and proactive management of Accounts Receivable (A/R) during the implementation process. It was noted in the presentation that the window to work down the existing AR would likely be 18-24 months. Fortunately, important efficiencies would be gained quickly including the lift in the clean claims rate from 75% to 90% or above.

RECOMMENDATION:

None.

ACTION:

None.

EVALUATION:

Board Feedback on Quality and Safety Implications:

- Encouragement to keep at the forefront in the implementation process the opportunity through Epic to effectively meet community needs as this consideration is a strong element of the mission of the Health System.
- Showed specific interest in the interactive module with community pharmacies (PBMs) to assist in tracking medication adherence as well as case management tools to focus on those patients who require additional assistance.
- Requested updates over time on Epic's current & future capabilities to connect with mobile health devices (e.g., apple watch, fit bit, glucometer, etc.) to monitor effectiveness of medications/interventions.

Board Feedback on Operational Implementation of Epic:

- The Board was pleased that Epic recruitment had gone well, and challenged staff to consider scaling back the Epic-specific workforce when possible at the appropriate time.
- Encouragement to build depth in the Epic team through cross-training to mitigate against loss of knowledge through attrition
- Encouragement for staff to keep the patient perspective in mind when implementing features of the patient portal. Evaluate if Epic's MyChart could have voice recognition capabilities in the future ease of use.
- Encouragement to determine benefits of Epic implementation on training of residents & other allied health professionals
- Encouragement to ensure that implementation satisfies various customer perspectives (UHS-UT staff, end-users, and patients)
- Encouragement to ensure that we are working to improve the system for us, not for Epic
- The board noted that the members look forward to receiving progress reports on Epic implementation over the coming months

Board Feedback on Revenue Cycle:

- Encouragement to communicate effectively both internally and to the community regarding the Epic implementation and what it means for the Health System
- Encouragement to report to the Board progress on both working down existing AR and new AR
- Encouragement to report to the Board in the future how the off-site of ongoing expenses related to Epic (like maintenance & hosting of about \$6M annually) will be offset in expense reductions in third-party software
- Encouragement to share with the Board the break-even analysis on Epic implementation

FOLLOW-UP:

None.

WOMEN'S AND CHILDREN'S TOWER DEVELOPMENT — ED BANOS/DON RYDEN/REED HURLEY

SUMMARY:

Staff provided an update to the Board of Managers regarding the latest development status to include the projected construction commencement dates for the Heart, Vascular and Endoscopy suite, the garage and the Women's & Children's Tower. Details on key project team members and design process were also provided in this presentation.

RECOMMENDATION:

None.

ACTION:

None.

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EVALUATION: Board Feedback on This Topic Included:
• Confirmed Board desire to receive information on dates for HVE ribbon-cutting & ground breaking event for Tower/Garage

FOLLOW-UP: Staff committed to schedule a separate discussion in the future on the need for additional beds leveraging consultant report on throughput opportunities and the plan on internal throughput improvements.

FINANCIAL PROJECTION – REED HURLEY

SUMMARY: Staff presented briefly financial projections covering the next several years. In the interest of time, this topic will be brought forward to the Board of Managers to be discussed in greater detail at a future meeting.

RECOMMENDATION: None.

ACTION: None.

EVALUATION: Board feedback on this topic will be provided at a future time.

FOLLOW-UP: None.

ADJOURNMENT:

There being no further business, Mr. Adams adjourned the special Board meeting at 3:30 pm.

Jim Adams
Chair, Board of Managers

Dianna M. Burns, M.D.
Secretary, Board of Managers

Sandra D. Garcia, Recording Secretary