



**BEXAR COUNTY HOSPITAL DISTRICT  
BOARD OF MANAGERS**

Tuesday, December 10, 2019

2:00 p.m.

Encino 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  
Dianna M. Burns, M.D., Secretary  
Robert Engberg  
James C. Hasslocher  
Janie Barrera

**BOARD MEMBERS ABSENT:**

Roberto L. Jimenez, M.D, Immediate Past Chair

**OTHERS PRESENT:**

George B. Hernández, Jr., President/Chief Executive Officer, University Health System  
Bryan Alsip, MD, Executive Vice President/Chief Medical Officer, University Health System  
Tommye Austin, Ph.D., Senior Vice President/Chief Nurse Executive, University Health System  
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System  
Ted Day, Executive Vice President, Strategic Planning and Business Development, University Health System  
Roe Garrett, Vice President/Controller, University Health System  
William Henrich, MD, President, UT Health San Antonio  
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, Senior Vice President, Strategic Communications and Patient Relations, University Health System  
Teresa Nino, Director, Epic, University Health System  
Andrea M. Marks, Senior Executive Vice President/Chief Operating Officer, UT Health, San Antonio  
Bill Phillips, Senior Vice President/Chief Information Officer, Information Services, University Health System  
Serina Rivela, Vice President/Chief Legal Counsel, University Health System  
Michael Roussos, Hospital Administrator, University Hospital  
Don Ryden, Vice President/Project, Design, and Construction, University Health System  
Travis Smith, Deputy Chief Financial Officer, University Health System  
Rajeev Suri, M.D., Medical Director, Radiology Services; and President, Medical/Dental Staff, University Health System; Professor, Vascular Interventional Radiology, UT Health San Antonio  
Sally Taylor, MD, Chief, Behavioral Health Services, University Health System

Jim Willis, Associate Administrator, University Hospital  
Ricardo Villarreal, President, Community First Health Plans, Inc.  
Emily Volk, MD, Senior Vice President/Clinical Services, University Health System  
Kenny Wilson, President/CEO, Haven for Hope of San Antonio

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

Mr. Adams called the meeting to order at 2:10 p.m.

**INVOCATION AND PLEDGE OF ALLEGIANCE**

Mr. Adams introduced Mr. Travis Johnson-Esparza, Evangelical Lutheran Church of America, for the invocation, and he led the Pledge of Allegiance.

**CITIZENS' PARTICIPATION:** None.

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

**SUMMARY:** Dr. Henrich invited the Board of Managers to a welcome reception on Wednesday, December 11, 2019 at 4:30 pm, honoring Dr. Allen Anderson, who will serve as Chief of Cardiology and physician leader of the Heart Vascular Institute at University Hospital. He also introduced Andrea M. Marks, Senior Executive Vice President/Chief Operating Officer, UT Health San Antonio. Ms. Marks previously served as Vice President/Chief Financial Officer, and was promoted this past summer upon the retirement of Michael Black, former Chief Operating Officer. Ms. Marks has been attending Joint Conference Council meetings, a monthly event for senior leaders of UT Health SA and University Health System. Dr. Hromas invited Board members to the School of Medicine's Holiday party, which he and his wife will co-host with Dr. Richard Becker, a UT Health alumnus, on Saturday, December 14, 2019 at 6:00 pm, at the San Antonio Museum of Art, and he yielded the floor to Dr. Rajeev Suri. Dr. Suri acknowledged physician leaders and reported the Epic rollout continues strongly, with 800 individuals having signed up for training. The new PACS (Picture Archiving & Communication System) imaging system, AFGA, will go live on Monday, December 16. In addition, the new online credentialing system went live on December 2, and allows medical staff to be credentialed by University Health System in as little as two days, versus two months. He gave kudos for Mr. Christopher Copeland and the Professional Services Staff for their assistance and courtesy.

**RECOMMENDATION:** This report was provided for informational purposes only.

**ACTION:** No action was required by the Board of Managers.

**EVALUATION:** None.

**FOLLOW-UP:** None.

**CONSENT AGENDA –JIM ADAMS, CHAIR**

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

**MEDICAL/DENTAL STAFF**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR MEDICAL-DENTAL STAFF OFFICERS FOR 2020-2021 — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE RENEWAL OF THE FOLLOWING CONTRACTS FOR MEDICAL AND DENTAL SERVICES IN THE ADULT AND JUVENILE (TO INCLUDE THE CYNDI TAYLOR KRIER CENTER) DETENTION HEALTH CARE SETTINGS: (1) UT HEALTH SAN ANTONIO, DEPARTMENT OF FAMILY & COMMUNITY MEDICINE FOR JUVENILE MEDICAL SERVICES; (2) UT HEALTH SAN ANTONIO, DEPARTMENT OF ADOLESCENT PSYCHIATRY SERVICES; (3) JOE EDWARDS, D.D.S. FOR PART-TIME DETENTION HEALTH CARE DENTAL SERVICES; (4) ROBERT E. RANEY, D.D.S. FOR PART-TIME DETENTION HEALTH CARE DENTAL SERVICES; AND (5) WILLIAM DUNN, D.D.S. FOR FULL-TIME DETENTION HEALTH CARE DENTAL SERVICES — THERESA SCEPANSKI**

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

SUMMARY:

Consideration and Appropriate Action Regarding Medical-Dental Staff Recommendations for Staff Membership and Delineation of Privileges — Rajeev Suri, M.D., President, Medical/Dental Staff - Monthly Credentials Committee Report (listing of providers in accordance with the Health System's Credentialing and Privileging Process); Delineation of Privileges; and Focused/Ongoing Professional Performance Evaluation Reports, submitted by the Executive Committee of the Medical/Dental Staff to the Board of Managers for approval.

Consideration and Appropriate Action Regarding Medical-Dental Staff Recommendations for Medical-Dental Staff Officers for 2020-2021 — Rajeev Suri, M.D., President, Medical/Dental Staff - The Bylaws of the Medical-Dental Staff of the University Health System outline the process and description of Officer Positions of the Medical-Dental Staff. The Professional Staff Services Department is responsible for facilitating the annual process for the election of new Officers. The Bylaws define the specific details for Officers of the Staff, Qualification of Officers, Term of Office, and Vacancies in Office. The process of recommending new Medical-Dental Staff Officers begins with the Nominating Committee of the Medical-Dental Staff, composed of: Past President and Chair (or designee), and two (2) members of the Executive Committee appointed by the President of the Medical-Dental Staff. The Executive Committee, and Active/Provisional Medical-Dental Staff member via ballot, submit the following Members at Large Officers for 2020-2021 for Board of Managers approval: Dr. Leslie Greebon – Pathology; and Dr. John Walker – Radiology.

Consideration and Appropriate Action Regarding the Renewal of the Following Contracts for Medical and Dental Services in the Adult and Juvenile (to include the Cyndi Taylor Krier Center) Detention Health Care Settings – Theresa Scepanski

UT Health San Antonio, Department of Family & Community Medicine for Juvenile Medical Services - This is a professional services contract to secure twenty (20) hours per week, with consultation services by phone after hours, on weekends and holidays. Services include physical exams, health classes, screening and counseling, prenatal care, suicide observations, and referrals to external agencies. The current contract allows for up to two successive one-year renewals. This contract exercises the second renewal option. The contract renewal period is for one year beginning January 1, 2020 and ending December 31, 2020, for \$127,823. This is a planned expense and has been included in the 2020 Annual Operating Budget.

UT Health San Antonio, Department of Adolescent Psychiatry Services - This is a professional services contract to secure faculty physicians specializing in psychiatry for clinical patient care for a total of 20 hours per month at the Bexar County Juvenile Detention Center and a total of 12 hours per month at the Cyndi Taylor Krier Center. Services include psychiatric assessments and medication management Monday through Friday during the hours of 8:00 a.m. and 5:00 p.m. At other times, Psychiatrists will provide the Health System with on-call physician coverage seven (7) days a week on a shared rotational call schedule. The current contract allows for up to two successive one-year renewals; this contract exercises the first renewal option. The renewal period is for a one-year term beginning January 1, 2020 through ending December 31, 2020 for \$49,920. This is a planned expense and has been included in the 2020 Annual Operating Budget.

Joe Edwards, D.D.S. for Part-time Detention Health Care Dental Services - This is a professional services contract with Joe Edwards, D.D.S. for dental services at the Juvenile Detention facilities, with consultation services by telephone after hours, on weekends and holidays. Scheduled hours will remain flexible to ensure adequate coverage for high volume periods. Services are provided in a dental clinic setting to relieve any immediate pain and suffering and include general exams, diagnostics, extractions, fillings, and educational/informational oral hygiene programs. The current contract with Dr. Joe Edwards allows for up to two successive one-year renewals; this request exercises the second renewal option. The contract is for a one-year term beginning January 1, 2020 through December 31, 2020, for \$83,200. Dr. Joe Edwards has provided dental services at the Bexar County Juvenile Detention facilities for 11 years, and is a sole proprietor.

Robert E. Raney, D.D.S. for Part-time Detention Health Care Dental Services - This is a professional services contract with Robert E. Raney, D.D.S for dental services at the Adult and Juvenile Detention facilities. Services include exams, diagnostics, extractions and fillings, and educational/informational oral hygiene programs, with consultation services by telephone after hours, on weekends and holidays when activity demands increase. Scheduled hours will remain flexible to ensure adequate coverage for high volume periods. The current contract with Dr. Robert Raney allows for up to two successive one-year renewals; this request exercises the second renewal option. The contract is for a one-year term beginning January 1, 2020 through December 31, 2020, for \$99,840. Dr. Robert Raney has provided dental services at the Bexar County Juvenile Detention facilities for 8 years, and is a sole proprietor.

William Dunn, D.D.S. for Full-time Detention Health Care Dental Services - This is a professional services contract with William J. Dunn, D.D.S for dental services at the Adult and Juvenile Detention facilities, with consultation services by telephone after hours, on weekends and holidays. Scheduled hours will remain flexible to ensure adequate coverage for high volume periods. Services are provided in a dental clinic setting to relieve any immediate pain and suffering and includes general exams, diagnostics, extractions, fillings, and educational/informational oral hygiene programs. The current contract with Dr. William Dunn allows for up to three successive one-year renewals; this request exercises the second renewal option. The contract is for a one-year term beginning January 1, 2020 through December 31, 2020, for \$176,800. Dr. William Dunn has provided dental services at the Bexar County Adult facilities for three years, and is a sole proprietor.

Consideration and Appropriate Action Regarding Purchasing Activities (See Attachment A) — Antonio Carrillo/Travis Smith – A total of 13 contracts with a value of \$36,486,844 are presented to the Board of Managers during the December meeting. The following contracts require approval by the Board of Managers: Seven (7) consent contacts with a total value of \$6,054,482; and six (6) presented contracts with a total value of \$30,432,362. During the month of December there were four contracts classified as Small, Minority, Woman, or Veteran Owned Business Enterprises. The SMWVBE report for this month reflects items submitted for Board approval.

RECOMMENDATION: Staff recommends approval of the items listed on the consent agenda above.

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

EVALUATION: None.

FOLLOW-UP: None.

**ACTION ITEMS:**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FOLLOWING:**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A GUARANTEED  
MAXIMUM PRICE (GMP#7) PROPOSAL FOR SITE WORK, EXCAVATION AND  
FOUNDATIONS FOR THE CONSTRUCTION MANAGER AT RISK AGREEMENT  
WITH JOERIS/J.E. DUNN JOINT VENTURE FOR THE WOMEN'S AND CHILDREN'S  
HOSPITAL AND ASSOCIATED PROJECTS — DON RYDEN**

**SUMMARY:** The North Garage demolition is underway in preparation for construction of the Women's and Children's Hospital and Parking Garage. GMP#7 will allow the site work, excavation, retention and foundations, which is anticipated to take approximately seven (7) months to complete for an amount not to exceed \$13,139,516. The scope of work for GMP#7 includes the following:

- Site demolition, clearing area and earthwork of the area of construction
- Excavation to prepare the site for foundations of the new garage and tower
- Temporary drainage as required
- Temporary and permanent retention system
- Drilled piers and caps

Mr. Ryden reviewed previously approved GMPs 1 – 6, and respective amounts for a total contract value \$41,416,287. This amount includes GMP #7 for \$13,139,516, which he noted is the largest contract to date with Joeris+Dunn. Costs for this GMP will be paid from Women's and Children's Hospital capital funds. The scope of this work includes the building footprint of the Podium Expansion to ensure best pricing value with the sequencing of similar construction. The cost for this associated work is \$1,198,110, and is included in the total for GMP #7. Consequently, this portion of the GMP #7 is contingent upon the Board of Managers' future funding for the Core and Shell construction of the Podium Expansion, which is expected to occur in the first Quarter of 2020. If the funding does not take place at that time, this work will not occur. Mr. Adams reiterated that the podium expansion is planning by current staff for future growth of the Women's & Children's Hospital. The workforce composition for Joeris+JE Dunn was provided for the Board's review.

**RECOMMENDATION:** Staff recommends the Board of Managers approval of GMP#7 with Joeris+JE Dunn for Site Work, Excavation, Retention and Foundations in the amount not to exceed \$13,139,516.

**ACTION:** A **MOTION** to approve staff's recommendation, with a caveat that podium expansion work will not occur until it is funded by the Board of Managers, was made by Mr. Hasslocher, **SECONDED** by Ms. Barrera, and **PASSED UNANIMOUSLY**.

**EVALUATION:** Mr. Hasslocher noted that the work to be performed under GMP#7 will be the most disruptive, to date. SMWVBE participation for Joeris+JE Dunn is 70 percent local, which represents 61 percent of \$13 million.

**FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH FALKENBERG CONSTRUCTION FOR PHASE II COUNTER TOP REPAIRS AND UPGRADES AT THE TEXAS DIABETES INSTITUTE — DON RYDEN**

**SUMMARY:** Clinics within the Texas Diabetes Institute (TDI) include, Pedi Endo, Pharmacy, UT Brace Shop, Radiology, UT Eye Clinic, Nutrition, and Research have experienced deterioration of their plastic laminate countertops in their exam rooms, classrooms, breakrooms, clean and soiled supply rooms and workstations with chipped, broken and missing laminate conditions found throughout. Procurement Services solicited formal bids from three Group Purchasing Organizations (GPO) and received one response. Falkenberg Construction proposes a pricing amount of \$442,523 and a 70 construction schedule. Mr. Ryden reviewed the criteria provided in the RFP and recommends the selection of Falkenberg Construction, Inc. based on their competitive pricing, proposed schedule, healthcare experience and safety record. Falkenberg's unit pricing was similar to their previous unit pricing for the Phase I counter top repairs and upgrades previously approved by the Board on July 30, 2019. The workforce composition data for Falkenberg Construction was provided for the Board's review.

**RECOMMENDATION:** Staff recommends the Board of Managers approve the selection of Falkenberg Construction as Contractor for Counter Top Repairs and Upgrades at the Texas Diabetes Institute and authorize the President/Chief Executive Officer to execute a contract with Falkenberg Construction in the amount of \$442,523.

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

**EVALUATION:** None.

**FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FOLLOWING AGREEMENTS: PROFESSIONAL MEDICAL SERVICES WITH UT HEALTH SAN ANTONIO (SPONSORED CARE PROVIDER AGREEMENT); AND PROFESSIONAL DENTAL SERVICES WITH UT HEALTH SAN ANTONIO SCHOOL OF DENTISTRY (SPONSORED CARE PROVIDER AGREEMENT) - ED BANOS**

**SUMMARY:** Professional Medical Services (Sponsored Care Provider) Agreement - The Sponsored Care Provider Agreement has been in effect since 2001 to provide reimbursement to UT Health San Antonio for healthcare services provided to unfunded patients in the Health System's emergency department. This agreement will facilitate payment to UT Health for these services for a 20-month period beginning January 1, 2020 through August 31, 2021. This 20-month period is being used to align the term of this agreement with the fiscal year of UT Health. Payments for healthcare services are negotiated at 65% of the current Medicare rate. Sponsored Care is intended to cover urgent and emergent medical conditions. This agreement requires the deduction of charges for services rendered pursuant to the Master Healthcare Services Agreement,

formerly Bexar County Clinical Services (BCCS) or the CareLink/UT Health Provider Agreement, or any other third party payer including payment made directly by the patient. The anticipated payments to UT Health for the 20- month period total \$5,915,000, or \$295,750 per month. As of November 15, 2019 the Health System tax division has paid \$3,322,086, or \$307,000 per month. The increase for payments in 2019 is due to a delay of invoices from services provided in 2018, which skewed the 2019 monthly amount slightly higher than what is anticipated over the term of this agreement. The workforce composition for UT Health was provided for the Board's review.

**RECOMMENDATION:** Staff recommends the Board of Managers' approval of the Sponsored Care Provider Agreement for Medical Services with UT Health San Antonio for a 20-month period beginning January 1, 2020 to August 31, 2021, for \$5,915,000.

Professional Dental Services (Sponsored Care Provider) Agreement - The Sponsored Care Provider Agreement has been in effect since 2001 to provide reimbursement to the UT Health San Antonio School of Dentistry for dental services provided to unfunded patients in the Health System's emergency department. This agreement will facilitate payment to the School of Dentistry for these services for a 20-month period beginning January 1, 2020 through August 31, 2021. This 20 -month period is being used to align the term of this agreement with the fiscal year of UT Health. Payments for dental services are negotiated at 100% of the current Medicaid rate. Sponsored Care is intended to cover urgent and emergent medical conditions. This agreement requires the deduction of charges for services rendered pursuant to the Master Healthcare Services Agreement formerly Bexar County Clinical Services (BCCS)] or the CareLink/UT Health Provider Agreement. Payment under this agreement will only be made for professional services that are not covered under the MSA, the CareLink/UT Health Provider Agreement or any other third party payer including payment made directly by the patient. The anticipated payments to the UT Health San Antonio School of Dentistry for the 20-month period beginning January 1, 2020 and ending August 31, 2021 are \$325,000 or \$16,250 per month. This is an 8% increase over the current average of \$15,000 per month due to anticipated continuing increase in volume which has been experienced over the last several years.

**RECOMMENDATION:** Staff recommends the Board of Managers' approval of the Sponsored Care Provider Agreement for Dental Services with UT Health San Antonio for a 20-month period beginning January 1, 2020 to August 31, 2021, for \$325,000.

**ACTION:** A **MOTION** to approve staff's recommendations for 1) sponsored-care provider agreement for medical services; and 2) the sponsor-care provider agreement for dental services, both with UT Health San Antonio was made by Mr. Hasslocher, **SECONDED** by Mr. Engberg, and **PASSED UNANIMOUSLY**.

**EVALUATION:** None.

**FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A MEMORANDUM OF UNDERSTANDING WITH THE SOUTHWEST TEXAS REGIONAL ADVISORY COUNCIL (“STRAC”) FOR SERVICES TO INCLUDE MEDCOM/LAW ENFORCEMENT NAVIGATION, PSYCHIATRIC EMERGENCY SERVICES AND TO SUPPORT INFRASTRUCTURE FOR THE SOUTHWEST TEXAS CRISIS COLLABORATIVE (“STCC”) — SALLY TAYLOR, M.D./ED BANOS**

**SUMMARY:** The Southwest Texas Regional Advisory Council (STRAC) is designated by the Texas Department of State Health Services (DSHS) to develop, implement and maintain the regional trauma and emergency healthcare system for the 22 counties in Trauma Service Area-P. Local health systems make up the membership of the South Texas Crisis Collaborative (STCC) Steering Committee, and as a group, these stakeholders identified the need for a coordinated effort to decrease preventable emergency department and inpatient visits and to improve the overall quality of life of persons suffering from psychiatric conditions by addressing their social determinants of health. The current request is to continue funding in 2020 for Law Enforcement Navigation, MEDCOM, Psychiatric Emergency Services, related support services, and STCC infrastructure. The 2020 South Texas Crisis Collaborative Memorandum of Understanding includes funding from the following entities, which is based on the organization’s respective net revenue market share:

Methodist Healthcare System*	\$ 1,620,450
Baptist Health System	\$ 810,225
Tenet Healthcare Foundation	\$ 810,225
University Health System	\$1,620,450
CHRISTUS Santa Rosa Health System	\$ 875,300
Southwest General Hospital	\$ 173,000
<b>TOTAL</b>	<b>\$5,909,650</b>

*\*In addition, Methodist Healthcare Ministries has committed \$4.9M to STRAC for other related projects such as the Haven for Hope Acute Care Station, PES beds, and Crosspoint residential treatment services.*

The term of this MOU will for a one-year period beginning January 1, 2020 and ending December 31, 2020. The financial outlay for this MOU is \$1,620,450. This contract amount is the same as 2019 and has been included in the 2020 budget.

**RECOMMENDATION:** Staff recommends Board of Managers’ approval of funding in the amount of \$1,620,450 for a one-year period for the Southwest Texas Regional Advisory Council in support of the Southwest Texas Crisis Collaborative.

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

**EVALUATION:** None.

**FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT WITH HAVEN FOR HOPE OF BEXAR COUNTY FOR DETENTION OUTREACH SERVICES— SALLY TAYLOR, M.D.**

- SUMMARY:** In 2015, the Health System entered into an agreement with Haven for Hope of Bexar County to provide financial support for jail outreach services, which has been renewed annually since. During 2019, Bexar County and the Health System shared financial support with a contribution of \$483,333.00 each. The request from the Health System for 2020 is increasing to \$1,483,333.00. Bexar County will continue its contribution of \$483,333.000 for 2020. For comparison purposes, Dr. Taylor reviewed outcomes for this project beginning in 2015 through the third quarter of 2019. The Haven for Hope Jail Release Program (JRP) was created to increase access to services for individuals diverted from jail and to supporting increased outreach, housing, residential treatment services, peer support, and case management on the Haven for Hope campus. To address these needs, the additional funding from the Health System in 2020 will provide support for the creation of a multidisciplinary team at the Haven campus to provide more intensive case management to connect clients to all appropriate Haven for Hope partner services to include comprehensive medical, benefit enrollment specialists, housing and financial sustainability services. The return on investment for the Health System includes improved access to mental health and addiction treatment services on the Haven for Hope campus, moving health care provided from inside the jail (the person can now bond out) to community care, and potential reduction in preventable emergency department visits and inpatient admissions. The amount of \$1,483,333.00 is included in the Health System's 2020 budget. Data collection regarding jail recidivism is ongoing. Reduced recidivism is one indicator that the client has become more stable in terms of income, employment, and/or housing, and can be an indicator of improvement in quality of life. During the past two years, 423 clients from the Jail Release Program were connected to primary healthcare on campus.
- RECOMMENDATION:** Staff recommends Board of Managers' approval to renew an agreement with Haven for Hope for \$1,483,333.00 in support of this initiative, for a one-year period, beginning January 1, 2020 through December 31, 2020.
- ACTION:** A **MOTION** to approve staff's recommendation was made by Mr. Hasslocher, **SECONDED** by Mr. Smith, and **PASSED UNANIMOUSLY**.
- EVALUATION:** Dr. Taylor will review end of year data for Emergency Psychiatric Services and inpatient admissions, and will provide in her next briefing to the Board. Dr. Taylor invited Mr. Wilson, President/CEO at Haven for Hope, to engage in dialogue. Discussion ensued regarding teen-age and young adult suicide rates and the lack of publicity surrounding homelessness and mental health. Board members agreed with Mr. Wilson that the challenge involves the entire city and boils down to lack of mental health facilities and the fragmented services available. This funding helps Haven for Hope do a better job. Mr. Hernandez informed the Board that he is representing the Health System as a member of the Bexar County Domestic Violence Commission, which feeds into a committee on healthcare for domestic violence that he chairs. Dr. Alsip

represents the Health System in a partnership with the City of San Antonio in the initiative to create an Institute for Trauma-Informed Care. The trauma informed-care approach involves a rigorous process of evaluating culture, policies, procedures, and practices in order to better serve the community and support its employees. It is a unified approach to training healthcare workers. The funds for this initiative will come from an additional property tax exemption proposed by the Health System in 2019 for senior citizens for \$25,000. The Health System retracted the 2019 proposal at the request of Bexar County and kept the senior property tax exemption at \$10,000. The cost benefit for the Health System is having the multidisciplinary team available at the Haven campus to provide intensive case management, to include comprehensive medical, benefit enrollment specialists, housing and financial sustainability services.

FOLLOW-UP: None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FOLLOWING CONTRACTS FOR SKILLED NURSING FACILITY CARE SERVICES WITH TOUCHSTONE COMMUNITIES, CANTEX CONTINUING CARE NETWORK, LEGEND SOUTH HEALTHCARE; AND LEGEND OAKS – SONTERRA HEALTHCARE – AWOALA BANIGO**

SUMMARY: In the fall of 2014, the Health System successfully added a post-acute long-term care project to the DSRIP program to provide skilled nursing facility (SNF) services. In February 2015, after an RFP process was completed, the Board of Managers approved the contracts with Chandler Estate Healthcare, Touchstone Communities, Cantex Continuing Care Network and Legend Healthcare for provision of Skilled Nursing Facility Care for unfunded patients. The original contract term was two years for \$2,160,000. Subsequent contract amendments extended SNF services for 5 years for a total value of \$8,826,936. This contract requests providing clinically appropriate uninsured patients access to SNF services. In the fall of 2019, the Health System re-procured SNF services by RFP. Four vendors successfully submitted proposals and all four are recommended for award. In evaluating the proposals, staff took into consideration prior experience, price, capacity and geographic distribution within the county. The four recommended firms are Touchstone Communities, Cantex Continuing Care Network, Legend South Healthcare and Legend Oaks – Sonterra Healthcare. Contracts with Skilled Nursing Facilities are based on daily rates, rates may vary based on individual patient care needs and between companies. Due to increases in hospital volume and the acuity of the patients discharged to the SNFs, it is projected the annual expense for the program will be \$2,502,300. This is based on an estimated 290 patients qualifying for SNF post acute services with an average length of stay of 19 SNF days at an average rate of \$454 per day. In 2018, 202 unfunded patients were sent to SNF's and it is projected that 272 will be discharged to SNF's in 2019. Staff estimates that the use of SNF services for patients, when appropriate, saved the Health System approximately \$2 million in 2019 when compared to the cost of hospital care. To assure the discharge of uninsured patients to the appropriate setting, the Health System contracts for post-acute services like SNF, home health, durable

medical equipment and IV infusion services. Absent such services patient outcomes would suffer and length of stay and hospital. The workforce composition data for Touchstone Communities, Cantex, Legend South, and Legend Oaks was provided for the Board's review.

RECOMMENDATION: Staff recommends Board of Managers' approval of the contracts with Touchstone Communities, Cantex Continuing Care Network, Legend South Healthcare and Legend Oaks – Sonterra Healthcare, in the amount of \$7,506,900 for the period of January 1, 2020 to December 31, 2022.

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

EVALUATION: None.

FOLLOW-UP: None.

**UPDATE ON THE PRELIMINARY FINANCIAL REPORT FOR NOVEMBER 2019 — REED HURLEY**

SUMMARY: Due to the timing of the special Board of Managers meeting earlier in the month today, the financial report not completed in time to follow the normal presentation and approval process. Preliminary November financial information will be provided to the Board of Managers later in the month *via* email and formal approval of the November and December financial reports will be requested at the January 2020 meeting.

RECOMMENDATION: None.

ACTION: None.

EVALUATION: None.

FOLLOW-UP: None.

**PRESENTATIONS AND EDUCATION:**

**FOURTH QUARTER QUALITY REPORT — BRYAN ALSIP, M.D.**

SUMMARY: The Health System's Quarterly Quality Report includes a review of the quality composite metric performance for 2019 with updates regarding ongoing initiatives to improve the Health System's publicly reported quality data:

**Mortality** - The year to date performance of 0.69 is currently 3% better than the targeted goal for 2019. Continued improvements in this area are due to the success of several initiatives. These include provider-focused documentation improvement efforts and the early identification and appropriate placement of patients who require hospice care. Other important work involves the early identification and evidence-based interventions for sepsis patients.

**Hospital Readmissions** – The Health System's goal within this category is to provide a level of care and support for patients that leads to a reduction of potentially preventable readmissions to the hospital within 30 days of the initial admission. For six of the eight readmission categories, the Health System is performing better than 2018, and the all acute-care readmission rate continues to improve through October 2019.

Readmissions for CABG patients and COPD patients are better than target year to date. Readmissions for CHF, PNE, and THA/TKA patients, although below target, are trending better than last year's performance.

**Patient Safety** - Performance has improved in five of the six healthcare associated infection categories compared to 2018 baseline, with rates better than target for four specific infections through October 2019, including:

- 32% better than target for CLABSI
- 19% better than target for CAUTI
- 25% better than target for CDI
- 23% better than target for MRSA

For surgical site infections, the overall colon surgical site infection rate is better than 2018. For hysterectomies, there have been only three surgical site infections per 100 procedures during the past nine months; however, this is worse than the 2018 baseline performance. To minimize the likelihood of infection, each case is reviewed for opportunities to improve specific elements of perioperative surgical care. Collaboration with surgical partners at UT Health San Antonio in the Surgery and OB/GYN Departments is critical to keep the infection rates low.

**Quality Composite Metric Performance** - Dr. Alsip summarized the Health System's year to date performance for each of the categories through October 2019. PSI-90 is a calculated, risk-adjusted composite metric determined from clinical documentation coding and is composed of ten separate metrics. Current performance for the PSI-90 metric has improved by 20% over 2018 performance, however it is still below the 2019 target. Overall, through October 2019, the Patient Safety Composite Goal (PSI-90 and HAI combined) performance is at the targeted goal, which represents a significant improvement over 2018. Performance has improved by 24% over 2018 baseline results, however, the Health System has not reached its goal for 2019. Mortality outcomes are improving by a 34% increased survival rate among inpatients with severe sepsis/septic shock year-to-date in 2019 as compared to 2017 baseline. A comparison to the 2018 baseline demonstrates a more modest improvement of 7% this year. Performance for the other quality process measures through October 2019 include 100% compliance for STK-4; 95% compliance for IMM-2 (100% compliance in October 2019); and 100% compliance for PC-01, with zero deviations from best practice.

**Quality Initiatives Agreement** - In the 2020 Master Services Agreement, the Health System defined 14 specific quality metrics, known collectively as the Quality Initiative Agreement (QIA), which are associated with incentives or reductions in payment to UT Health San Antonio based on annual performance as compared to baseline data.

RECOMMENDATION:	This report was provided for informational purposes only.
ACTION:	No action was required by the Board of Managers.
EVALUATION:	None.
FOLLOW-UP:	None.

### **EPIC ELECTRONIC HEALTH RECORD PROJECT UPDATE — BILL PHILLIPS.**

SUMMARY:	Charge testing remains a high priority for the team and we have made steady progress versus last month. This improvement is due to the
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efforts from Revenue Integrity, operational subject matter experts and the project team. Training team is gearing up for all the upcoming activities, as Training becomes a project focus. Registration for classroom training continues and the Health System is currently at 40 percent registration. According to Epic, this may be the first implementation they have seen to have such good registration numbers so early on. However, the Health System is not slowing down in its push to make sure the remaining 60 percent register before the January 24, 2020 deadline. The technical team is on schedule for interfaces and data conversions. Data conversion team has completed the initial validation of the converted data and are on track to complete this large-scale validation by the end of December. They are also preparing for the final validation efforts, which will begin in January, and is finishing up in March. Hardware installations are also continuing. The majority of ambulatory areas have all wall mounts and computer upgrades completed. Wall mounts and computer upgrades are underway within University Hospital and most are completed; expected completion for the Sky Tower is end of the month. After hardware installations are complete, the next phase is Technical Dress Rehearsal, which will validate that all computing devices are mapped and functioning correctly. The Health System's financial team has substantially completed the design and build phase of the project and the Revenue Cycle team is actively engaged in the testing phase. Revenue Cycle initiatives to reduce the Health System's patient accounts receivables are underway and achieving success. Days in Accounts Receivable has reduced from 77 at year-end 2017, to 64.0 at year-end 2018, and currently resides at 57.2 as of October 2019. Days in Accounts Receivable through November 2019 are not yet finalized but initial review indicates continued positive performance. The reduction of Days in Accounts Receivable is a reflection of improved performance and reduces the financial risk during system conversion. Staff is progressing through the process to select and engage vendors to achieve a successful project outcome. As of the December 10, 2019 meeting, the Board has approved \$78.0 million, 45.7%, of the total budgeted implementation cost with \$71.8 million, 68.8%, of the implementation capital being encumbered and \$6.2 million, 15.0%, of the project's one time operating expense being encumbered. Mr. Phillips reviewed Epic budget and encumbrances, items that were acquired as part of the Epic project below the Board's authority level, and budgeted reductions based on the Epic implementation.

RECOMMENDATION: This reported was provided for informational purposes only.  
ACTION: No action by the Board of Managers was requested.  
EVALUATION: None.  
FOLLOW-UP: None.

**Information Only Items:**

- (a) Update on the Women's and Children's Hospital and Associated Projects — *Don Ryden*
- (b) University Health System Foundation Update — *Lourdes Castro Ramírez*
- (c) Report on Recent Recognitions and Upcoming Events — *Leni Kirkman*

**SUMMARY:** Mr. Adams directed his colleagues' attention to three (3) informational reports above and asked them to provide feedback, comments, or questions directly to the staff.

**RECOMMENDATION:** These reports were provided for informational purposes only.

**ACTION:** No action by the Board of Managers was required.

**EVALUATION:** None.

**FOLLOW-UP:** None.

**ADJOURNMENT:**

There being no further business, Mr. Adams adjourned the Board meeting at 4:15 p.m.

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James R. Adams  
Chair, Board of Managers

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

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Sandra D. Garcia, Recording Secretary