



**BEXAR COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS**

Tuesday, February 24, 2026
6:00 pm
Cypress Room, University Hospital
4502 Medical Drive
San Antonio, Texas 78229

MINUTES

BOARD MEMBERS PRESENT:

Jimmy Hasslocher, Chair
Anita L. Fernández, Vice Chair
Margaret Kelley, MD
Beverly Watts Davis
David Cohen, MD
Melinda Rodriguez, PT, DPT.
Patricia (Pat) Jasso

OTHERS PRESENT:

Edward Banos, President/Chief Executive Officer, University Health
Bill Phillips, Executive Vice President/Chief Operating Officer, University Health
Reed Hurlley, Executive Vice President/Chief Financial Officer, University Health
Dr. Bryan Alsip, Executive VP, Chief medical Officer, University Health
Francisco G. Cigarroa, M.D., EVP/Health Affairs and Health System, Ut Health San Antonio
Robert Hromas, MD, Dean and Professor of Medicine, UT Health San Antonio
And other staff attendees.

CALL TO ORDER:

Mr. Hasslocher called the Board meeting to order at 6:05 pm.

INVOCATION AND PLEDGE OF ALLEGIANCE — *Jimmy Hasslocher, Chair*

Invocation – Gabi De Faria Lira, University Health Chaplain — *Jimmy Hasslocher, Chair*

Mr. Hasslocher led the pledge of allegiance.

PUBLIC COMMENT: NONE

Approval of Minutes of Previous Meeting:

November 18, 2025 (*Regular Meeting*)
December 16, 2025 (*Special Meeting*)
January 20, 2026 (*Regular Meeting*)
January 27, 2026 (*Regular Meeting*)

SUMMARY:

The minutes of the Board meetings of Tuesday, November 18, 2025; December 16, 2025; January 20, 2026 and January 27, 2026 were submitted for the Board's approval.

RECOMMENDATION:

Staff recommends approval of the minutes as submitted.

COMMENTS /DISCUSSIONS:

None

ACTION:

A **MOTION** to **APPROVE** staff's recommendation was made by Ms. Fernández, **SECONDED** by, Dr. Cohen and **PASSED UNANIMOUSLY**.

EVALUATION:

None

FOLLOW UP:

None

Report from UT Health San Antonio — Francisco G. Cigarroa, M.D., EVP/Health Affairs and Health System.

SUMMARY:

Dr. Robert Leverage provided comments on behalf of Dr. Cigarroa. Dr. Hromas was taking a well-deserved break and spending time with his family back in Los Angeles. Dr. Leverage commented that Dr. Robert De Lorenzo, UT Health Emergency Medicine, was elected to the National Academy of inventors, honoring the US as the best inventors. Dr Greg Abrahamian, UT Health Transplant Surgery, was named Director of the Alvarez Transplant Center, and he did go to medical school here, 25 years ago, and served in the armed forces. UT ACO, our regional Physicians Network, accountable care organization, is named in the top 10 by Beckers. The Regional Medicine Department, which is huge with the most residencies and fellowships in our school, was fully accredited by the ACGME without a single citation the Blue Ridge rankings in medical schools, which is NIH research funding ranked by school, the long School of Medicine, which ranked Number 50 of 165 medical schools, but we had eight departments in the top 40, neurology, biochemistry, pharmacology, genetics, urology and neurosurgery. Finally, it was just announced today that the Barshop Institute for Longevity and Aging Studies was awarded a \$38 million federal grant for the first nationwide clinical study in longevity. Dr. Little added comments regarding the Lung Transplant Team as Dr. Mayes requested that every year UT Health needs to invest more in Lung Transplant Team. Last year there were very good patient outcomes and taking on some higher acuity cases.

COMMENTS /DISCUSSIONS:

Dr. Cohen asked where we are ranked in the country. In his opinion , we are ranked number one in the country.

NEW BUSINESS:

CONSENT AGENDA — Jimmy Hasslocher, Chair

Consideration and Appropriate Action Regarding Medical-Dental Staff Membership and Privileges — Michael Little, M.D., President, Medical/Dental Staff

SUMMARY:

The Credentials Committee met on January 26, 2026 and reviewed the credential files of the individuals listed on the attached Credentials Report and the Professional Performance Evaluation Report.

In its meeting of February 3, 2026, the Executive Committee of the Medical-Dental Staff recommended approval of the Credentials Committee Report.

Consideration and Appropriate Action Regarding Medical-Dental Staff Recommendations for Professional Practice Evaluations and Delineation of Privileges — *Michael Little, M.D., President, Medical/Dental Staff*

SUMMARY: The Credentials Committee met on January 26, 2026 and reviewed proposed revisions to Delineation of Privilege and the Professional Performance Evaluation Report and forms. In its meeting of February 3, 2026, the Executive Committee of the Medical-Dental Staff recommended approval of the attached Delineation of Privileges and Focused/Ongoing Professional Performance Evaluation Report.

Consideration and Appropriate Action Regarding Telemedicine Privileges — *Bryan Alsip, M.D.*

SUMMARY: The Board of Managers of University Health holds approval authority for appointing clinical providers to the Medical-Dental Staff and for granting clinical privileges, as part of its oversight of the quality of care and the provision of treatment to patients. The Professional Staff Services Department (PSS) is identified as the department responsible for ensuring compliance for all applicants undergoing credentialing and privileging, including providers seeking approval for Telehealth privileges.

Consideration and Appropriate Action Regarding an Appointment to the University Health Foundation Board of Directors — *Jimmy Hasslocher, Chair, Nominating Committee*

SUMMARY: The University Health Foundation, established in 1984, is a 501(c)(3) charitable organization dedicated to soliciting, receiving, and managing funds exclusively for the benefit of University Health and the communities it serves. The Foundation is governed by its Board of Directors, with all appointments requiring approval by the Directors and final confirmation by the University Health Board of Managers.

Prospective members of the Board of Directors undergo a thorough vetting process prior to recommendation. This process includes a review of the applicant's résumé, statement of interest, and letters of recommendation, as well as an interview with the Nominating Committee and participation in a Foundation Board meeting.

During the February 18, 2026 University Health Foundation Board meeting, the Board of Directors reviewed the nomination packet, which is available upon request, and unanimously approved the following candidate for appointment to the Board of Directors. New Appointments University Health Foundation Board of Directors requests Board of Managers' consideration to appoint the first term of Giovanna Rueda. Ms. Rueda as a member to the University Health Foundation Board of Directors, effective January 1, 2026, through December 31, 2028.

Consideration and Appropriate Action Regarding Re-Appointments to the University Health Pension Plan Board of Trustees — *Jimmy Hasslocher, Chair, Nominating Committee*

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 nine positions on the Pension Plan Board of Trustees. The members consist of two University Health staff, two members from the Board of Managers, and five community members who are investment professionals. Board members serve four-year terms and have a sixteen-year term limit, members that are University Health staff are exempt from the term limit restriction due to their position.

Ms. Anita L. Fernández was appointed to the Board of Managers by Bexar County Commissioner Justin Rodriguez in 2020. She has served on the Pension Board since 2022.

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.

Mrs. Andrea Casas, Vice President, Chief Human Resources Officer, has served one four-year term on the Pension Board. Mrs. Casas has been with University Health for 30 years in progressive leadership roles in the Human Resources area and she has a wealth of knowledge of University Health's employee benefit plans. A short bio is attached for the Board's review. The Nominating Committee of the Board of Managers recommends the re-appointment of Ms. Anita Fernandez and Ms. Andrea Casas to the Pension Plan Board

Consideration and Appropriate Action Regarding Professional Services Agreements with:

- 1. Alamo Area Resource Center, Black Effort Against the Threat of AIDS Coalition Trust, and San Antonio AIDS Foundation in Support of the Ryan White Ending the HIV Epidemic Program — *Anna Taranova, M.D.***

SUMMARY: University Health proposed funding agreements with AARC, SAAF, and BEAT AIDS using FY 2026–2027 HRSA Ending the HIV Epidemic grant funds, which supplement Ryan White support for Operation BRAVE. The program connects people with HIV to treatment and support services, especially those newly diagnosed, out of care, or not virally suppressed. Funding also addresses housing instability by covering housing and security deposits for eligible clients, supporting better viral suppression and health outcomes.

Operation BRAVE uses federal grant funding allocated to Bexar County to reimburse providers and nonprofit partners for HIV/AIDS services that support continued high-quality care and improved viral suppression. Through contracts with University Health, AARC, SAAF, and BEAT AIDS, the program funds medical, behavioral health, substance use, housing, food, emergency finance, and other support services for people living with HIV. Staff noted all partners follow HRSA HIV/AIDS guidelines and performance measures to ensure quality, cost-effective care and strengthen the local HIV continuum of care.

- 2. Alamo Area Resource Center, Black Effort Against the Threat of AIDS Coalition Trust, CentroMed, and San Antonio AIDS Foundation in Support of the Ryan White Part A and Minority AIDS Initiative HIV Care Services — *Anna Taranova, M.D.***

SUMMARY: The agreement provides HRSA Ryan White Part A and Minority AIDS Initiative funding to AARC, BEAT AIDS, SAAF, and CentroMed to deliver medical and support services for individuals with HIV/AIDS. Ryan White funding supports outpatient care and services in eligible areas, with MAI targeting disproportionately affected populations. Covering March 1, 2026, through February 28, 2027, the agreements enable these organizations to provide comprehensive care and support services to residents of Bexar County and surrounding South Texas communities.

Ryan White funding supports continued delivery of high-quality HIV care and support services while improving viral suppression for low-income individuals across Bexar County and surrounding South Texas communities. Through agreements with AARC, BEAT AIDS, CentroMed, and SAAF, the program expands access to comprehensive primary care, wraparound support, and multiple HRSA-defined service categories. Staff noted the partnerships strengthen the regional continuum of care, reduce disparities, support the Ending the HIV Epidemic initiative, and allow flexible, cost-effective use of public resources.

Ryan White funding serves as a safety net for uninsured and underinsured individuals living with HIV/AIDS in Bexar County and surrounding areas, expanding access to care and non-medical support services for populations disproportionately affected by the epidemic.

Staff noted the program emphasizes equitable, culturally responsive, high-quality care to improve outcomes and reduce disparities. All recipients must comply with HRSA and U.S. Department of Health and Human Services requirements, including federal assurances, HIV/AIDS clinical and testing guidelines, bureau policies, and performance measures.

Ryan White funding will support AARC, BEAT AIDS, CentroMed, and SAAF as safety net partners with University Health in addressing HIV/AIDS in Bexar County. The agreements help serve uninsured individuals, fill service gaps for insured patients, and provide insurance affordability assistance. Staff noted these services promote sustained viral suppression, better health outcomes, and progress toward ending the HIV epidemic, while reinforcing University Health's broader commitment to community health and patient care.

Consideration and Appropriate Action Regarding an Amendment to the Professional Services Agreement between University Medicine Associates and UT Health San Antonio for Pediatric Otolaryngology Services and Pediatric Cardiology Services — *Monika Kapur, M.D./Edward Banos*

SUMMARY: University Health requested an amendment to its Professional Services Agreement with UT Health San Antonio and UMA to maintain and expand essential pediatric specialty coverage within its standardized physician contracting framework. The amendment would renew and transition pediatric otolaryngology services into the agreement with updated market-aligned compensation and add pediatric cardiology services for Dr. Elaine Maldonado. Staff noted the changes support continuity, coordinated pediatric care, operational flexibility, and long-term program stability across pediatric service lines.

The amendment transitions pediatric otolaryngology services from a stand-alone lease into the Professional Services Agreement while maintaining the existing staffing model of 2.46 clinical FTEs, including 1.58 physician FTEs and 0.88 advanced practice provider FTE, with no changes to scope, coverage, call requirements, incentives, or productivity expectations. It also adds pediatric cardiology services for Dr. Elaine Maldonado at 1.00 FTE to provide inpatient consults, echocardiography, transesophageal echocardiography, and seven weeks of annual call coverage for the Pediatric Heart Center. Staff noted the collaborative coverage model with UMA supports continuity, access, accountability, and reduced care delays.

Consideration and Appropriate Action Regarding the Organ and Tissue Air and Ground Transport Services Agreement with Nationwide Organ Recovery Transport Alliance (NORA) — *Patricia Jones*

SUMMARY: University Health recommended an agreement with Nationwide Organ Recovery Transport Alliance (NORA) to support the Transplant Institute's growing organ retrieval needs. In 2025, the program required 131 fixed-wing air transports and 167 ground transports at a cost of \$2.4 million. NORA was selected through an RFP based on its larger fleet, national hub network, larger aircraft capacity, and unique ability to transport perfusion machines for Donation after Circulatory Death cases. Pricing includes an average \$4,400 per block hour and \$1,795 dispatch fee, with costs expected to be partially offset through Medicare organ acquisition reimbursement.

Reliable air transport is essential to sustaining and expanding University Health's transplant program by enabling timely organ recovery across a broad geographic area. Staff noted that this access supports clinical excellence, strong patient outcomes, and the ability to procure more complex organs. The agreement also supports the continued success of the University Transplant Institute, which was described as a nationally recognized transplant program with superior patient outcomes.

Consideration and Appropriate Action Regarding Participation in the Tenth Year of the Quality Incentive Payment Program (QIPP) for Skilled Nursing Facilities with Licenses Owned by University Health and Managed by Touchstone Communities and Authorizing All Actions In Support Thereof — *Ted Day*

SUMMARY: University Health holds the licenses for four skilled nursing facilities managed by Touchstone Communities and has participated in the Texas HHSC Skilled Nursing Facility Quality Incentive Payment Program since September 1, 2017. The program uses CMS quality measures to incentivize improvements in nursing facility care for Medicaid recipients. Staff noted the relationship with Touchstone began under the predecessor MPAP program in 2015, which later evolved into QIPP after HHSC added quality metrics. The Board first approved participation in May 2017 and has continued authorizing annual participation through Year 9, most recently on February 25, 2025.

For Year 10, participating organizations must enroll between February 16 and March 18, 2026. Staff explained that SNF QIPP allows skilled nursing facilities to earn supplemental payments based on quality performance. While Years 1 through 7 included both pay-for-reporting and pay-for-performance measures, HHSC restructured the program in Year 8 so all components are now pay-for-performance and tied to nationally recognized quality measures. University Health and Touchstone participate as non-state government-owned facilities, making all four partnered facilities eligible to earn incentives under all four program components, including quality improvement and workforce-related measures.

University Health staff remain actively involved in Touchstone's quality assurance and performance improvement processes for participating in skilled nursing facilities, including monthly committee meetings to support compliance with CMS, SNF QIPP, and University Health reporting requirements. Staff noted that Touchstone maintains a robust internal quality program for these facilities. For SNF QIPP Year 10, finalized quality measures include ten Minimum Data Set metrics, which assess resident health status, and three Payroll Based Journal metrics tied to staffing hours per resident day.

University Health continues to oversee partnered Touchstone facilities through monthly QAPI meetings, quarterly leadership meetings, and annual site visits to monitor quality performance. Under the agreement, University Health recoups its intergovernmental transfer funds and receives 40% of supplemental payments, while Touchstone receives 60%. Of Touchstone's share, 40% is tied to QIPP performance metrics and 20% is at risk based on readmissions and CMS Star Ratings. Staff noted Year 10 IGT and statewide pool figures have not yet been released, though the current year pool was \$1.75 billion. University Health received \$2.8 million in net SNF supplemental revenue in calendar year 2025.

Consideration and Appropriate Action Regarding Purchasing Activities (See Attachment A) — Reed Hurley/Travis Smith

SUMMARY: University Health's Purchasing Consent package consists of new contracts or modifications to existing contracts that require Board of Managers approval. The items are generally supply and third-party service contracts that support routine, day-to-day business operations. The Consent Agenda is typically approved through one motion and vote; however, the Board may select or pull individual items for separate discussion and action. The package is organized into two sections. "Attachment A" provides the list of each item under consideration by the Board. The subsequent numbered pages correspond to the reference numbers shown in Attachment A and provide supporting detail for each proposed contract included in the Purchasing Consent agenda.

University Health's Purchasing Consent attachment for February 2026 includes 18 proposed contracts requiring Board of Managers action. The total approval amount requested for these 18 contracts is \$20,806,039. All other Board of Managers agenda items and contracts will be addressed and approved separately by the Board.

RECOMMENDATION: Staff recommends Board of Manager's approval of:

- 1) Purchasing Consent Agenda Items; and,
- 2) Purchasing Consent Attachment "A" in the amount of \$20,806,039

COMMENTS /DISCUSSIONS: None
ACTION: A **MOTION** to **APPROVE** staff's recommendation was made by Dr. Kelley, **SECONDED** by Ms. Rodriguez, and **PASSED UNANIMOUSLY**.
EVALUATION: None
FOLLOW UP: None

Action Items:

Consideration and Appropriate Action Regarding Clinical Affiliation Agreement with Texas A&M University and Texas A&M University Health Science Center and All Other Actions In Support Thereof
— *Ed Banos/ Ted Day/Bryan Alsip, M.D.*

SUMMARY: University Health described its continued expansion of clinical and public health services through added clinical space and increased physician and clinician recruitment. Staff also emphasized the importance of growing the future healthcare workforce by expanding clinical affiliations. University Health's longstanding primary affiliation with UT Health San Antonio began in 1992 and was renewed in 2015 for 15 years, while its affiliation with the University of the Incarnate Word has supported medical training since 2016. Staff noted that the Board approved a new affiliation with Texas A&M-San Antonio and Texas A&M Health Science Center on September 22, 2022, and that negotiations since then have focused on developing a new residency program through the Texas A&M College of Medicine.

The proposed clinical affiliation with Texas A&M College of Medicine would establish a new local training pathway beginning with medical student rotations in academic year 2028–2029 and resident training in academic year 2031–2032. Staff explained that TAMU COM plans to hire faculty in 2026 and 2027, beginning with up to 15 FTEs and potentially growing to 18 FTEs by 2033, with physicians leased into University Medicine Associates to support clinical integration. The program would initially launch family medicine and internal medicine residencies, with general surgery expected to follow later.

The agreement establishes a shared financial model between University Health and Texas A&M College of Medicine. TAMU COM will fund undergraduate medical education and faculty time related to student rotations in San Antonio, while University Health will fund the clinical and graduate medical education time of TAMU COM faculty leased into UMA. UMA will bill for clinical services and retain collections as an offset to expenses. The parties will also collaborate on resident funding, using Medicare, Medicaid, and supplemental funding offsets. Staff stated the program is expected to be budget neutral over its first three years.

RECOMMENDATION: Staff recommends Board of Manager's authorize the President/Chief Executive Officer to execute the Clinical Affiliation Agreement with Texas A&M University and Texas A&M University and all actions in support thereof.

COMMENTS /DISCUSSIONS: Members described the agreement as an "incredible opportunity" for San Antonio, emphasizing that cities of similar size often have multiple medical schools and that residency training helps determine where physicians ultimately practice. Discussion highlighted the importance of expanding medical education, workforce development, and research on the underserved South Side. Board members also asked clarifying questions about the number of residents planned and where family medicine residents would complete OB/GYN rotations. Staff said training was expected to occur primarily on the South Side and at Retama, subject to further coordination.

ACTION: A **MOTION** to **APPROVE** staff's recommendation was made by Ms. Watts Davis, **SECONDED** by Dr. Cohen, and **PASSED UNANIMOUSLY**.

EVALUATION: None

FOLLOW UP: None

Consideration and Appropriate Action Regarding a Property Management Agreement with Ackerman & Co., LLC for the Two Medical Office Towers located at 2829 and 2833 Babcock Road, San Antonio, Texas
— *Christa Olvera*

SUMMARY: University Health previously approved the purchase of two medical office buildings on the Babcock Specialty Hospital campus at 2829 and 2833 Babcock Road. Tower I is a seven-story, approximately 123,000-square-foot building built in 1986, and Tower II is a four-story, approximately 77,000-square-foot building built in 1992. Staff noted the buildings are more than 89% occupied by at least 15 tenant entities under at least 24 lease agreements. University Health already leases space in Tower II for its Asthma and Allergy Clinic and a planned Women's Cardiology Clinic. Estimated FY 2026 rental revenue is \$5.7 million.

University Health stated that, as owner of Towers I and II, it will maintain the properties to professional standards to ensure a safe, high-quality environment for patients, tenants, staff, and visitors. Under the proposed property management arrangement, Ackerman would be compensated for reimbursable expenses and a management fee equal to 3% of gross income collected. Reimbursable costs include management and maintenance salaries, benefits, and other property-related expenses, all subject to University Health audit and documentation requirements. Using the 2025 cash flow report as a baseline, estimated 2026 management costs total \$2,592,840, including \$155,000 in management fees, \$237,840 in staff fees, and \$2,200,000 in property fees, with rental income expected to fully offset these costs.

RECOMMENDATION: Staff recommends Board of Manager's approve the Property Management Agreement with Ackerman & Co., LLC for the Two Medical Office Towers I and II in the estimated amount of \$2,592,840 for fiscal year 2026, which will be funded through rent revenue generated from the lease agreements for tower space.

COMMENTS /DISCUSSIONS: Board discussion was brief and focused on operational follow-up. A board member asked about current occupancy, and staff reported the two towers were 89% occupied, with approximately 123,000 square feet in Tower I and 77,000 square feet in Tower II, serving 15 tenants under about 25 lease contracts. Discussion also addressed future use of vacant space, with leadership stating the plan is to relocate UMA practices there over time as leases expire, reducing leased space elsewhere in the Medical Center. When asked why Ackerman was being retained, staff said continuity was important because Ackerman already knows the tenants, manages the buildings, and would keep the same staff. The item was then approved.

ACTION: A **MOTION** to **APPROVE** staff's recommendation was made by Ms. Fernández, **SECONDED** by Dr. Cohen, and **PASSED UNANIMOUSLY**.

EVALUATION: None

FOLLOW UP: None

Finance Agenda – Jimmy Hasslocher, Chair

Consideration and Appropriate Action Regarding the Financial Report for January 2026 — Reed Hurley

SUMMARY: The January 2026 financials showed University Health’s consolidated bottom line for the month to reflect a gain of \$23.6 million, \$22.8 million better than the budgeted gain of \$853 million. This gain to budget is primarily due to patient activity driving positive net patient revenue of \$50.2 million and CFHP Premium Revenue of \$24.3 million and operating expenses under budget by \$4.8 million.

In January, clinical activity (as measured by inpatient days) was up by 6.6% and inpatient discharges were higher than budget by 10.4%. Volumes exceeded prior year’s performance across most key service delivery areas.

Community First experienced a bottom-line loss of \$1.1 million, which was \$2 million better than the budgeted loss of \$3.1 million. Community First membership is down 1.0% compared to budget.

Operating Revenue

Current Month

- Net patient revenue is over budget by \$19.4 million driven by high patient volumes, increase in commercial patients and the continued growth of retail pharmacy volumes.
- Supplemental revenue is under budget by \$0.8 million for the month of January due to lower than budgeted HARP and NAIP program revenue.
- Community First premium revenue was under budget \$1.5 million.

Operating Expense

Current Month

- Employee Compensation is slightly under budget by \$62 thousand or 0.1%.
- Supplies are under budget by \$566 million or 1.1%.
- Community First medical claims expense is over budget by \$615 thousand.
- Purchase Services are under budget \$3.1 million, reduction of lease expenses and other services driving the reduction.

Non-Operating Expense

Current Month

- Investment income of \$6.4 million was higher than budget by \$29 thousand.
- An unrealized loss of \$172 thousand was recorded in January, we do not budget unrealized gain/loss due to the unpredictable nature.
- Unrealized gains and losses occur due to valuing our investments at current market prices each month. No actual gains or losses are realized if the investments are held to maturity, which is our standard practice.

RECOMMENDATION: Staff recommends approval of the February 2026 Financial Report subject to audit.

COMMENTS /DISCUSSIONS: Mr. Hasslocher commented on another great month and thanked Reed Hurley and staff for their hard work. Added board comments recognizing the strength of University Health’s finance team, rating relationships, and bond planning process.

ACTION: A **MOTION** to **APPROVE** staff’s recommendation was made by Ms. Fernández, **SECONDED** by Ms. Watts Davis, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW UP: None

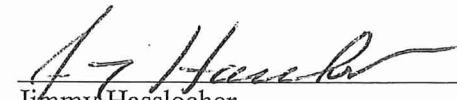
Presentations and Education: None at this time

Information Only Items:

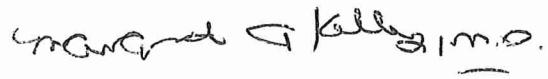
- A. 4th Quarter Vendor Engagement Report — *Latifah Jackson/Horacio Vasquez/Travis Smith*
- B. Update on the Community Hospitals — *Brian Freeman*
- C. University Health Foundation Update — *Sara Alger*
- D. Report on Recent Recognitions and Upcoming Events — *Leni Kirkman*

Adjournment: — *Jimmy Hasslocher, Chair*


There being no further business Mr. Hasslocher adjourned the public meeting at 7:00pm.



Jimmy Hasslocher
Chair, Board of Managers



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



Janie M. Guevara, Recording Secretary

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.