



**SPECIAL MEETING OF THE
BEXAR COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS**

Tuesday, January 30, 2024
6:00 pm
Cypress Room, University Hospital
4502 Medical Drive
San Antonio, Texas 78249-4493

MINUTES

BOARD MEMBERS PRESENT:

James R. Adams, Chair
Jimmy Hasslocher, Vice Chair
Margaret Kelley, MD, Secretary
Anita L. Fernandez
Pat Jasso
Diana Burns, MD
David J. Cohen, MD

OTHERS PRESENT:

George B. Hernández, Jr., President/Chief Executive Officer, University Health
Edward Banos, Executive Vice President/Chief Operating Officer, University Health
Ted Day, Executive Vice President/Strategic Planning & Business Development, University Health
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health
Shelley Kofler, Senior Public Relations Manager, Corporate Communications, University Hospital
Robert Hromas, MD, Dean and Professor of Medicine, Vice President for Medical Affairs, UT Health San Antonio
Michael Little, MD, President, Medical/Dental Staff, University Health; and Associate Professor, Department of Anesthesiology, UT Health SA
Dr. Sally Taylor, Senior Vice President, Chief of Behavioral Medicine, University Health
Serina Rivela, Vice President / Chief Legal Officer, University Health
Bill Phillips, Executive Vice President/Chief Information Officer, University Health
Christopher Sandles, President/Hospital Operations, University Health
Don Ryden, Vice President/Project, Design & Construction, University Health
Travis Smith, Chief Financial Officer/Clinical Operations, University Health
Andrew Smith, Executive Director, Government Relations and Public Policy
Horacio Vasquez, Executive Director, Supply Chain Management, University Health
Larry Wallis, Director, Internal Audit Services, University Health
Sherrie King, Chief of Police, BCHD Protective Services, University Health
Andrea Casas, Vice President, Chief Human Resources Officer, University Health
Dr. Brian Alsip, Executive VP, Chief medical Officer, University Health

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Dr. Juan Garza, Sr. VP, Chief Quality & Health Informatics Officer, University Health
Brian Freeman, Executive Director, Capital Improvements, University Health
Elizabeth Allen, Director, External Communications, Corporate Communications, University Health
And other attendees.

CALL TO ORDER:

Mr. Adams called the Board meeting to order at 6:04 pm

INVOCATION AND PLEDGE OF ALLEGIANCE — JIM ADAMS, CHAIR

Invocation – Jeanene Atkinson, University Health Chaplain — *Jim Adams, Chair*

Mr. Adams led the pledge of allegiance.

PUBLIC COMMENT: None at this time

APPROVAL OF MINUTES OF PREVIOUS MEETING: November 14, 2023 (Special Meeting)

SUMMARY: The minutes of the Board meeting of Tuesday, November 14, 2023 were submitted for the Board’s approval.

RECOMMENDATION: Staff recommends approval of the minutes as submitted.

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

EVALUATION: None.

FOLLOW UP: None

SPECIAL RECOGNITION:

Quarterly Employee Recognition Awards — *Andrea Casas / George B. Hernández, Jr.*

All of this year’s quarterly recipients will be our special honored guests at the Annual Employee Recognition Awards Ceremony. Employees of the Quarter receive a plaque, embossed pen and an opportunity to select one of numerous awards valued at \$100 on the Employee Recognition website.

Professional Daniel Rubalcaba
Nursing: Staff Nurse II, Hematology Oncology Outpatient Clinic

Professional: Jordan Suh
 Clinical Pharmacist I, Outpatient Pharmacy

Management: Wendy Dagenais
 Social Work Manager, Detention Healthcare Services

Technical: Yvonne Molina
License Vocational Nurse III, University Medicine Associates
Naco Perrin Clinic

Clerical Felicia McAtee
Unit Clerk, Rio Tower, 9 Medicine Acute

Service: Diana Rodriguez
Environmental Associate, Environmental Services

Volunteer: Carolyn Grill
Volunteer, Volunteer Services

Provider: Amanda Garis, NP
Nurse Practitioner, University Medicine Associates, Westgate Pediatrics

Team: Pediatric Emergency Team
Edwien Allen, Debra Bayard, John Diaz Jr., Ramiro Garcia, Rocio Garcia,
John Gidcumb, Kendra Prince, Jackie Stegman, Rachel Totterdale

Report from UT Health San Antonio — Robert Hromas, MD., Dean and Professor of Medicine, Vice President for Medical Affairs, UT Health San Antonio

SUMMARY: Dean Hromas provided an update as UT Health has been selected as one to of the Top 10 Best Places to work at in Texas. In the McDemott Building there is a sismotron and are working on FDA approval to make a novel isotrop that images Alzheimers and predict the disease earlier. The Michael J. Fox Foundation donated funds to aid in using the isotope in patients. Dr. Rebecca Wong is the New Director of the Center for Healthy Hispanic Aging, she has 35,000 Hispanic patients between here and Mexico City and is following Alzhiemer's within these patients. Dr. Little added that he has heard some positive feed back from the Residents regarding the Women's and Children's new cafeteria in a positive way for the extra healthy options now available.

NEW BUSINESS – CONSENT AGENDA – JIM ADAMS, 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 December 18, 2023 and reviewed the credential files of the individuals listed on the attached Credentials Report and the Professional Performance Evaluation Report. In its meeting of January 2, 2024, 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 December 18, 2023 and reviewed proposed revisions to Delineation of Privilege and the Professional Performance Evaluation Report and forms. In its meeting of January 2, 2024, the Executive Committee of the Medical-Dental Staff recommended approval the attached Delineation of Privileges and Focused/Ongoing Professional Performance Evaluation Report.

Consideration and Appropriate Action Regarding Appointment of Service Line Chairs — *Michael Little, Medical /Dental Staff*

SUMMARY: In accordance with the University Health Medical-Dental Staff Bylaws, approved by the Board of Managers on November 14, 2023, the Medical-Dental Staff shall be organized around service lines and Medical Staff members with clinical privileges shall be organized into Clinical Service Lines.

The Clinical Services Lines of the Staff at University Hospital are designated as the following:

- Emergency Medicine
- Medicine
- Medicine Specialty
- Neurology
- Obstetrics and Gynecology
- Orthopedics
- Pediatrics
- Surgery
- Surgery Specialty
- Other Specialty

Individuals serving as a previous Clinical Department Chair were appointed by the Board of Managers Resolution to serve as the newly designated Clinical Service line Chair equivalent for that particular service line. Three new Service Lines were designated with the amended Bylaws including: Medicine Specialty, Surgery Specialty, and Other Specialty, which require the appointment of a Clinical Service Line Chair.

On January 2, 2024, the System Executive Committee of the Medical-Dental Staff recommended approval of the following Service Line Chairs:

- Medicine Specialty: Monica Gutierrez, MD
- Surgical Specialty: John Floyd, MD
- Other Specialty: Marsha Kinney, MD

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

SUMMARY: The Board of Managers of University Health has approval authority for the appointment of clinical providers to the Medical-Dental Staff, and the granting of clinical privileges for overseeing the quality of care and provision of treatment to patients. University Health's Professional Staff Services Department (PSS) is responsible for ensuring compliance regarding all applicants for the credentialing and privileging of providers, to include those approved for Telehealth privileges.

In accordance with section 7.8, Telehealth, of the Bylaws, when University Health facilities are the originating site, University Health may use the privileging and credentialing decision from the distant site to make a final privileging decision provided all required elements are met. The list of providers have been reviewed by Professional Staff Services in accordance with University Health's Bylaws and Joint Commission Medical Staff standards (13.01.01). Professional Staff Services submits this list for Board of Manager approval of Radiology Telehealth privileges.

Consideration and Appropriate Action Regarding Renewal of the Following Agreements with Acadian Ambulance Service; 1) Medical Transportation Services Agreement and 2) Ground Lease Agreement for the Substation at Robert B. Green Campus — *Travis Smith*

SUMMARY: University Health initially established an ambulance service over fifty-five (55) years ago to support the expedient transfer of patients from the Robert B. Green campus to University Hospital. As University Health clinical services and locations have increased over time so has the demand for ground ambulance transport services. University Health staff pursued a partnership with a vendor who had a greater base of ground ambulance vehicles and staff to appropriately scale to the peaks of service demand. Acadian Ambulance Service of Texas, an employee-owned entity, was awarded the 2018 contract to provide ground ambulance service on behalf of University Health patients.

In October 2023 staff issued a Request for Proposal (RFP) for ground ambulance service. Five highly qualified vendors responded to the RFP as shown below.

- En Route Transit, LLC
- Everything Health, LLC
- Shurmed EMS
- United Medevac Solutions, Inc
- Acadian Ambulance Service

Of the five RFP respondents, Acadian Ambulance Service was scored the highest due to their high quality of service, ability to scale capacity to meet the needs of varying business levels, and the lowest cost of service to University Health for uninsured patients.

Specifically, Acadian Ambulance Service has a fleet of over 63 local ground ambulance vehicles and 340 highly trained staff in support of this specialized service. In addition, during disaster or times of additional need, Acadian Ambulance Service can scale up service deliverables by calling upon their region-wide fleet of 673 ground ambulance transport vehicles, 138 transport vans, 22 bariatric transport units, and over 5,000 staff across their service area.

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Acadian Ambulance Service is a large, regional, employee-owned vendor with a total of 5,131 employees. The company-wide workforce composition data is as follows:

Workforce	American Indian	Asian American	African American	Hispanic	White	Other	Subtotal
Non-Professional	34	68	745	474	3,539	115	4,975
Professional	1	1	3	5	146	0	156
Combine Total	35	69	748	479	3,685	115	5,131
TOTAL	.7%	1.5%	14%	9.4%	72%	2.4%	100%

Acadian Ambulance Service workforce composition for the South-Texas region is as follows:

Workforce	American Indian	Asian American	African American	Hispanic	White	Other	Subtotal
Non-Professional	3	6	14	147	164	14	348
TOTAL	1.0%	1.7%	4.0%	42.2%	47.1%	4.0%	100%

Staff are requesting a new three (3) year contract with Acadian Ambulance Service to lease the Robert B. Green campus building D garage at the monthly amount of \$2,934. These contracts will allow for the continued service delivery to University Health patients and locations.

Consideration and Appropriate Action Regarding a Lease Extension with El Centro Del Barrio d/b/a Centro Med for the University South Dialysis Clinic Located at 3750 Commercial Avenue, San Antonio, Texas — Don Ryden

SUMMARY: University Health (UH) has been leasing 6,036 rentable square feet of space located at 3750 Commercial Avenue in San Antonio since 2009, which has served dialysis patients on the Southside. On April 27, 2021, a First Amendment was approved by the Board that would allow a 3-year lease term renewal that is due to expire March 31, 2024. This First Amendment also provided two, one-year renewal options, one which would begin April 1, 2024 and expire March 31, 2025, and the other, would begin April 1, 2025 and expire March 31, 2026.

Exercising the renewal option would allow continuation of operations on the first floor suite, consisting of 6,036 rentable square feet. Due to the number of diabetic patients within San Antonio, there is a continued need to have clinics available to provide dialysis services for the community.

The First Amendment, contained the First Renewal Option which provided a three (3) year lease term rate in 2021 that was \$21.00/sq. ft. with a 3% increase at each anniversary date. If exercised, the Second Renewal Option, for a one-year term, would begin April 1, 2024 at a lease rate of \$22.95/sq.ft. and an estimated Common Area Maintenance (CAM) of \$2,142/month. Total estimated financial obligation for exercising the Second Renewal Option is estimated at \$164,232. The Third Renewal Option, for a one-year term, would begin April 1, 2025 at a lease rate of \$23.64/sq.ft. and an estimated CAM of \$2,206/month. If the Third Renewal Option is exercised, the financial obligation for an additional year of term would be an estimated additional \$169,164. In total, if both Renewal Options are exercised the total fiscal impact for Rent and Estimated CAM expenses would be \$333,396. The breakdown of respective expenses during the Renewals Term(s), the rent expense is as follows:

Extension Terms	Dates	Rent/SF	Monthly Rent	Total
Second Renewal Option	4/1/24-3/31/25	\$22.95	\$11,544	\$138,528
Third Renewal Option	4/1/25-3/31/26	\$23.64	\$11,891	\$142,692
			Total	\$281,220

During the Renewal Term(s), the CAM expense estimates are as follows:

Extension Terms	Dates	Monthly CAM Est.	Total Est.
Second Renewal Option	4/1/24-3/31/25	\$2,142	\$25,704
Third Renewal Option	4/1/25-3/31/26	\$2,206	\$26,472
		Total	\$52,176

CentroMed has a total of 752 employees in their organization. The workforce composition data is as follows:

NON PROFESSIONAL WORKFORCE	American Indian	Asian American	African American	Hispanic	White	Other	Total
Total	1	0	8	457	25	3	494
PROFESSIONAL WORKFORCE	American Indian	Asian American	African American	Hispanic	White	Other	Total
Total	0	14	7	197	38	2	258
TOTAL WORKFORCE	1	14	15	654	63	5	752
Percentage of Total Workforce	.1%	1.8%	2.0%	87.0%	8.4%	.7%	100%

Consideration and Appropriate Action Regarding an Amendment to the Lease Agreement with Post Acute Medical at San Antonio, LLC Located at 5101 Medical Drive, San Antonio, Texas 78229 — Don Ryden/Ed Banos

SUMMARY: On July 25, 2023, an agreement was approved by the Board of Managers, for UH to sublease 2,351 sq. ft. of space at Post-Acute Medical at San Antonio, LLC (PAM) d/b/a Warm Springs Rehabilitation Hospital located in the Medical Center. This space is to be utilized to support Rehab and Pain Clinic Operations. PAM and University Health have an existing partnership with University Health owning a minority interest in PAM. University Health has identified Rehab and the Pain Clinic as departments with complementary services which would benefit by sharing space.

This First Amendment to the Sublease will allow for expanded service to include an additional 2,580 sq. ft. of space for a waiting area, a reception area, additional exam rooms, a clean room, a soiled room, a med room and work spaces for both the Rehab and the Pain Clinics. In addition to providing a more cohesive and comprehensive patient care space, this increase also allows UH the opportunity to take Suite 225 in its entirety and for patient safety and security, control common area walkways, as well as access to Suite 225. Originally UH would have only occupied certain rooms within Suite 225, which meant that unoccupied spaces and walkways could be used by outside entities.

The term of the Sublease begins on the Effective Date, and shall continue for ten (10) years after Subtenant’s First Day of Operations. The Sublease has two (2) renewable terms of five (5) years each on the same terms as this Sublease. Either Tenant or Subtenant gives written notice to the other of such party’s desire to terminate this Sublease at the expiration of the term, or then current renewal term, as the case may be, such notice to be delivered no later than one hundred twenty (120) days prior to the end of the original term or the then current renewal term as may be applicable. Both parties have the option to terminate the lease after the first anniversary of the First Day of Operations without cause with one hundred eighty (180) days’ notice. Rent expense is a Gross Full Service Rent and increases 2% per year. The revised sublease expense is shown below:

Gross Rent – Commencement Date is Estimated:

Lease Year	Beg_Date	End_Date	Monthly Rent	Annual Rent Total
1	4/1/2024	3/31/2025	\$6,910.42	\$82,925
2	4/1/2025	3/31/2026	\$7,048.63	\$84,584
3	4/1/2026	3/31/2027	\$7,189.60	\$86,275
4	4/1/2027	3/31/2028	\$7,333.39	\$88,000
5	4/1/2028	3/31/2029	\$7,480.06	\$89,761
6	4/1/2029	3/31/2030	\$7,629.66	\$91,556
7	4/1/2030	3/31/2031	\$7,782.26	\$93,387
8	4/1/2031	3/31/2032	\$7,937.90	\$95,255
9	4/1/2032	3/31/2033	\$8,096.66	\$97,160
10	4/1/2033	3/31/2034	\$8,258.59	\$99,103
TOTAL:				\$908,006

Consideration and Appropriate Action Regarding the 4th Quarter Investment Report — *Reed Hurley*

SUMMARY: Attached for your review and approval are the Investment Portfolio Summaries for the fourth quarter of 2023. The investments are reported in two portfolios which each contain multiple funds. The portfolio labeled as University Health contains all funds except those related to Community First. The Community First portfolio contains two funds which are tied to Community First.

The reports include all information required by the Texas Public Funds Investment Act. In total, the value of all invested funds as of December 31, 2023, was \$2,534,980,158. The portfolios earned \$27,279,434 of interest income during the fourth quarter, an increase of 8% from the previous quarter's \$25,368,386, and nearly double the same period a year ago as higher interest rates have led to greater investment income throughout 2023. The portfolios unrealized loss, itself a result of the rapid increase in rates during 2022-23, improved during the fourth quarter as interest rates fell in the final months of the year.

As of December 31, 2023, the University Health portfolio for operations was valued at \$1,598,661,417. The portfolio, consisting of the four funds mentioned above earned \$16,274,109 during the quarter, had a weighted average yield of 4.73% and a weighted average maturity of 258 days. The portfolio trails behind the 6-month Constant Maturity Treasury (CMT) benchmark, which yielded 5.49%, and is below the 1-year CMT benchmark's 5.08% yield.

Proceeds from Bond sales are segregated into separate funds. As of December 31, 2023, proceeds from the Series 2022 bonds named "13-Project Fund Series 2022" were valued at \$255,555,733 with a weighted average yield of 4.44% and a weighted average maturity of 233 days. These proceeds have been invested above the bond issue's 4.14% arbitrage yield. Proceeds from the Series 2023 bonds named "14-Project Fund Series 2023" are held primarily in the TexPool and TexPool Prime local government investment pools, which provide full liquidity. The funds were valued at \$168,757,315 with a weighted average yield of 5.48% as of December 31st. The combined bond funds total \$424,313,048 with a weighted average maturity of 141 days and a weighted average yield of 4.85%.

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

SUMMARY: University Health's Purchasing Consent package includes new contracts or modification of existing contracts that require Board of Managers approval.

The Purchasing Consent package includes three sections that provide the following information.

- "Attachment A" provides a list of each item under consideration by the Board of Managers.
- The "Summary of Purchasing Activity" includes the detail of monthly purchasing activity among vendor categories: SMWVBE, Local, and Not-for Profit.
- The subsequent numbered pages follow the reference number in "Attachment A". These pages provide additional supporting detail for each proposed contract within the Purchasing Consent.

University Health's Purchasing Consent attachment for the month of January 2024 includes 18 proposed contracts for Board of Managers action. The total requested Board of Managers approval for these 18 contracts is \$10,102,864. Additional Presented contracts during the January 2024 Board of Managers meeting total \$100,371,373 and are considered for approval separate from the Purchasing Consent.

RECOMMENDATION: Staff recommends Board of Manager's approval of Purchasing Consent Agenda Items in the amount of \$10,102,867.

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

Action Items:

Consideration and Appropriate Action Regarding Selected Purchasing Items:

Consideration and Appropriate Action Regarding Renewal of a Memorandum of Understanding with the Southwest Texas Regional Advisory Council and Local Health Systems for Support of the Southwest Texas Crisis Collaborative — *Sally Taylor, M.D.*

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. Currently, the STCC Steering Committee is composed of a diverse coalition of community partners. Funding for STCC programs include University Health, Methodist Healthcare, Baptist Health System, CHRISTUS Santa Rosa Health System, Methodist Healthcare Ministries of South Texas, Bexar County, and the City of San Antonio, which is memorialized in a multi-party Memorandum of Understanding (MOU) on an annual basis.

The 2024 STCC MOU includes funding from several entities based on net revenue market share. STCC provides community coordination, visibility and collaborative oversight. The 2024 STCC MOU will fund the following programs:

1. MEDCOM/Law Enforcement Navigation (LE NAV) with Embedded Center for Health Care Services (CHCS) Clinicians – This service provides for law enforcement navigation of medically stable patients experiencing a mental health crisis and who are emergently detained, in rotation to age-appropriate behavioral health facilities, thereby reducing wait times in emergency departments. Receiving facilities include freestanding psychiatric hospitals along with general medical hospitals with inpatient psychiatric units. In 2023, MEDCOM navigated 12,343 persons (average 34 per day), including 1,794 children, in mental health crises to behavioral health facilities. Of those navigated, University Hospital received 2,157 adults navigated (20% of adults). In addition, more patients are being connected to treatment as <0.3% of potential navigation requests result in a transport to jail.
2. Adult Psychiatric Emergency Services (PES) System of Care – The PES is designed to decompress local emergency departments through inter-facility transfers of those patients not requiring inpatient level of care. Additionally it aims to provide access to law enforcement for those patients navigated by MEDCOM. The ultimate goal is to stabilize patients in crisis within a 48-hour timeframe and facilitate their transition to the next appropriate level of care. In 2023, PES programs provided 2,250 adult visits including 398 (18%) transferred from University Hospital.
3. Program for Intensive Care Coordination (PICC) – This program, launched in 2019 in collaboration with San Antonio Fire Department Mobile Integrated Healthcare, San Antonio Police Department Mental Health Unit, and CHCS, provides a comprehensive mobile team approach to address the unique needs of patients who may be more difficult to engage and who utilize hospital services at a higher rate. STCC identifies those patients who are emergently detained by law enforcement greater than six times per year, and PICC employs various interventions such as ongoing engagement, case management, medication management, psychosocial rehabilitation, transportation and connection to needed resources.

The program adopts a patient-centered approach by addressing both physical and mental health needs, as well as the social determinants of health that hinder access to care. The PICC team provided interventions for 166 unduplicated patients resulting in 8,045 contacts. A study conducted by Capital Healthcare Planning in 2021 focused on a group of 47 patients, revealing a significant decrease in the average number of emergency detentions per month per person. The study showed a decrease from 8.85 visits/patient for the three months pre-enrollment in the program to 1.21 visits/patient in the fourth month after the PICC team engaged and helped the patient transition to definitive outpatient care.

4. Meadows Mental Health Policy Institute (MMHPI) – MMHPI provides strategic policy consultation to STRAC/STCC and helps link STCC strategic goals through data to evaluate investments and outcomes in filling gaps in the continuum of care, and leveraging MMHPI’s work across the state as part of the evaluation and application of evidence-based models of care and treatment. Their partnership was particularly important during the 88th session of the legislature in 2023.
5. Capital Healthcare Planning (CHP) – CHP is a recognized data analytics team from Houston, Texas, and provides data analysis for the safety net population, with a focus on the intersection of behavioral health, high healthcare utilization, and homelessness. All of the health systems have contributed data for the past 5 years, which has allowed the STCC Steering Committee to engage in data driven decision-making processes regarding investments in programming. In 2023, CHP completed a study of the LE NAV program since inception in 2017 and found that MEDCOM has responded to approximately 100,000 calls, with 95% resulting in navigation to a behavioral health facility. This has led to a potential annual cost savings of approximately \$8.6M by reducing duplicative emergency department evaluations and inter-facility transfers.
6. STCC Infrastructure –The STCC Steering Committee meets monthly and oversees the outcomes of programs and services related to this population. STCC requires personnel for IT, HR, Finance and program implementation and oversight management for monitoring and reporting outcomes of the above programs, along with all contracts, and to strategically plan for future expansion of programs that address gaps in the behavioral health system of care.
7. Social Determinants of Health Platform – Julota has been selected as the Social Determinants of Health platform to be used throughout STCC projects. With a late 2023 initial launch, the STCC team is working to roll out Julota to multiple providers throughout the first quarter of 2024. Julota will allow for cross program referrals, as well as referrals to much needed social resources and loop closure on those referrals.

The term of the 2024 MOU is January 1, 2024 through December 31, 2024. The financial outlay for this MOU is \$2,199,763, an increase of \$279,313 from 2023. This increase includes offsets from other contracts, for a total net increase of \$136,969.

The following is included in the 2024 MOU:

- \$1,757,419 for STCC programs outlined above, including adding two CHCS FTE’s in MEDCOM for 24/7 coverage with two clinicians, one FTE CHCS Transitional Liaison to provide improved linkage from hospital services to outpatient care, and one CHCS FTE clinician for the PICC team (all totaling \$88,101), and \$48,868 due to TVMC closure and redistribution of their STCC MOU funding;

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- \$300,000 for enhanced behavioral health navigation by MEDCOM (already part of University Health’s expansion of behavioral health services in 2020);
- \$47,336 for navigation of referrals to Crosspoint Inc.’s BH program through MEDCOM to improve efficiency and transparency (budget neutral with reduction in Crosspoint contract); and
- \$95,008 for the CHCS Liaison dedicated to the co-located UT Health Transitional Care Clinic and New Opportunities for Wellness Adult BH Clinic in order to maintain standardization of liaison activities across the continuum (budget neutral with reduction in UT NOW Clinic contract).

The total amount of \$2,199,763 is included in University Health’s 2024 budget.

RECOMMENDATION: Staff recommend that the Board of Managers authorize the President/CEO to execute a renewal of the Memorandum of Understanding with the Southwest Texas Regional Advisory Council for support of the Southwest Texas Crisis Collaborative, in the amount of \$2,199,763 for the period January 1, 2024 through December 31, 2024.

Dr. Cohen asked about reimbursements and where do the funds come from? How do the funds that are supporting these programs get reimbursed thru state or local funds or own budgets? Dr. Taylor explained that there are always Legislative items that come forward and we collaborate to apply to those. Every Hospital falls under IMTALA so they have to do a medical screening of the patient is appropriate for services. Added explanations were provided by Mr. Banos and Dr. Taylor.

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

EVALUATION: None.

FOLLOW UP: None.

Consideration and Appropriate Action Regarding a Support Agreement with the Southwest Texas Regional Advisory Council (STRAC) for the MEDCOM Domestic Violence Navigation Line — Sally Taylor, M.D.

SUMMARY: In tandem with the development of the plan, Bexar County and COSA developed a coordinated community response through the Collaborative Commission on Domestic Violence (CCDV) with goals to prevent, combat, and respond to domestic violence. The CCDV has six subcommittees: Healthcare, Judiciary, Law Enforcement, Policy, Prosecution, and Non-Profit. The Healthcare committee identified a Domestic Violence Navigation Line as a project for implementation.

This Domestic Violence (DV) Navigation Line Support Agreement is within the Southwest Texas Regional Advisory Council’s (STRAC) MEDCOM operation and provides for centralized screening and referral for victims of domestic violence identified by law enforcement. Law Enforcement Officers (LEOs) identifies and screens victims using an evidence-based lethality screen (*Danger Assessment for Law Enforcement*). After responding to a call where domestic violence is evident, LEOs call MEDCOM, who then conducts the lethality screen with LEOs and the victim on the line.

The lethality screen helps determine if a victim is at high-risk for homicide and then appropriate connections are made to safety and other victim services. MEDCOM serves as a single contact for LEOs, and brokers the connection between the victim and a domestic violence advocate, ultimately leading to referral to a San Antonio Metropolitan Health District Domestic Violence High Risk Team coordinator for enhanced services. The DV Navigation Line went live in 2021 and leverages STRAC MEDCOM, already utilized daily by LEOs for navigation of persons on emergency detention to behavioral health facilities.

During 2022 and 2023, the DV Navigation Line received 2,910 calls from BCSO and of those 2,854 (98%) victims were assessed, with 26% deemed high-risk. Of the high-risk group, 43% of the victims fled their homes to seek safety either with friends and family, a hotel, or shelter, while some were transported to hospitals via EMS (44 people). During 2022 through November 2023, SAMHD provided case management for 1,636 victims and BCSO for 1,797 victims, even if the victim remained at home.

The agreement is for a period of twelve months, beginning January 1, 2024 through December 31, 2024, with an annual maximum financial outlay of \$500,000, with two successive one-year automatic renewals for a total three-year amount not to exceed \$1,500,000. This contract amount is included in University Health's 2024 budget.

RECOMMENDATION: Staff recommends the Board of Managers approve and authorize the President/CEO to execute a Support Agreement with the Southwest Texas Regional Advisory Council specifically for support of a Domestic Violence Navigation Line, in the amount of \$500,000 annually, for the period January 1, 2024 through December 31, 2024, with two successive one-year automatic renewals, for a total three-year amount of \$1,500,000.

ACTION: A **MOTION** to **APPROVE** staff's recommendation was made by MS. Fernandez, **SECONDED** by Dr. Burns, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW UP: None

Consideration and Appropriate Action Regarding an Agreement for Elevator Replacement at the Texas Diabetes Institute with TK Elevator Corporation— *Bill Phillips*

SUMMARY: Texas Diabetes Institute (TDI) has a total of eight elevators, seven passenger and one freight. These elevators have been in service since 1997 and have reached end of life. Currently, three of the passenger elevators are out of service due to water damage. This damage occurred in November 2023, and was caused while a contractor (Siemens) was working to fix a fire sprinkler head. The contractor isolated the wrong water line and removed a sprinkler head from an active line. This resulted in a large amount of water being discharged, which damaged the elevator bank.

Due to the fact that these elevators have reached end of life and parts are no longer available, the time has come to modernize the passenger elevators. This will include the replacement of all major components such as the controller, power unit, door operator, fixtures, and all wiring. The factory lead times are 12-14 weeks for hydraulic equipment. Once work begins, each elevator should take 3-4 weeks to be completed. Total length of time to replace all elevators is approximately 6-8 months. For the three elevators damaged by the contractor, we have filed a claim with Siemens. However, we would like to move forward with

upgrading all seven passenger elevators immediately while the claim is being processed.

The total cost of this acquisition is \$806,915. This purchase is considered to be competitively bid because the services requested are being purchased through the Group Purchasing Organization (GPO) Premier PP-FA-969 and is therefore considered to have been competitively bid.

RECOMMENDATION: Staff recommends Board of Managers' approval to enter into a Professional Services Agreement for Medical Direction, Program Development and Clinical Services with Texas Liver Institute, Inc. for a one-year term from January 1, 2024 through December 31, 2024 in an amount not to exceed \$3,082,386, and to authorize the President and Chief Executive Officer to execute any documents necessary to consummate said agreement.

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

EVALUATION: None.

FOLLOW UP: None

Consideration and Appropriate Action Regarding a Lease Agreement with Housing First Community Coalition for Clinic Space at Towne Twin Village at 4711 Dietrich, Suite 137, Bldg. 9, San Antonio, Texas 78219 — *Katherine Reyes/Ed Banos*

SUMMARY: The Housing First Community Coalition (HFCC), founded in 2017, identified that helping the homeless required actions beyond providing daily meals, clothing, hygiene supplies, etc. While such support is helpful, the HFCC noted that providing those items to the homeless did not address the root cause of why people were homeless, and they continued to experience homelessness. More than seventeen acres of land were purchased on the east side of San Antonio to create the Towne Twin Village community, a housing first permanent supportive housing model that provides access to permanent housing and support services.

More than seventeen acres of land were purchased on the east side of San Antonio to create the Towne Twin Village community, a housing first permanent supportive housing model that provides access to permanent housing and support services. In collaboration with Towne Twin Village, University Health will provide persons residing at Town Twin Village with onsite primary care and preventive care services two days per week. One advanced practice practitioner, one support staff, and one registration access specialist will serve the community at the clinic. The Towne Twin Village clinic will be monitored and evaluated routinely, and additional clinic days will be added based on demand.

This agreement with Towne Twin Village will be for a term of one year beginning March 2024. There will be no charge for the space supplied by Towne Twin Village. University Health will outfit the clinic with the necessary technical infrastructure, furniture and supplies amounting to an estimated cost of \$350,000. This will be a budgeted operational expense.

Patients will be connected to resources such as Medicaid, Medicare, or CareLink, and services provided will be billed accordingly.

RECOMMENDATION: Staff recommends the Board of Managers' approval for a no cost lease agreement with Towne Twin Village to provide primary care and preventive care services via an onsite clinic to the residents of Towne Twin Village starting March 2024 and approval of the estimated project budget of \$350,000.

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

EVALUATION: None.

FOLLOW UP: None

Consideration and Appropriate Action Regarding Guaranteed Maximum Price Proposals for the Community Hospitals for — *Don Ryden*

- a. Major Electrical Gear, Steel Mill Order, Deep Foundations and Steel Superstructure for the Construction Manager at Risk Agreement with Turner/Byrne/Straight Line Management Joint Venture at the Palo Alto Site
- b. Major Electrical Gear, Steel Mill Order, and Sitework for the Construction Manager at Risk Agreement with Layton Construction Company, LLC at the Retama Site

SUMMARY: In March 2023, the Board approved University Health's recommendations for Construction Managers (CMs) to collaborate with the A/E during the design phase and to provide pre-construction services as advisors and estimators. Turner-Byrne-Straight Line (TBS) Joint Venture was assigned as the CM for the Palo Alto site and Layton Construction Company (Layton) will serve as CM for the Retama site.

The CMs contracts were awarded in April 2023. Both CMs have started coordination and collaboration with the A/E and hospital leadership and continue to provide recommendations and solutions as the design phase continues.

Per the coordinated design schedule, a series of early release drawing packages (ERPs #1-#3) will be published that allow the CMs to price, permit, and commence work on the site prior to the completion of the full set of construction documents in March 2024. The early design package approach enables work on site to start approximately four months earlier than waiting for the complete construction document issue.

TBS and Layton prepared their individual GMPs following review of the ERP design documents and supplemental information from the A/E. The current TBS approved contract value is summarized below:

Preconstruction	\$ 1,232,000
GMP#A Public Works Drainage Project	\$ 11,613,724
GMP#1 Design Assist Subcontractors	\$ 3,166,223
GMP#2 Prefabricated Restroom Pods Design Assist	\$ 78,230
GMP#3 Site Utilities and Grading	\$ 10,120,599
Current Contract Value	\$ 26,210,776
Proposed net increase (GMP #4)	\$ 34,729,109
Proposed Total Contract Value	\$ 60,939,885

Layton (GMP #3)

The proposed value of Layton’s GMP #3 is \$37,945,683 including direct and indirect construction costs and appropriate reserves and will increase the Construction Cost Limitation (CCL) established in their CM Agreement to include this new work.

The current Layton approved contract value is summarized below:

Preconstruction	\$ 890,000
GMP#1 Design Assist Subcontractors	\$ 1,901,467
GMP#2 Prefabricated Restroom Pods Design Assist	\$ 82,674
Current Contract Value	\$ 2,874,141
Proposed net increase (GMP #3)	\$ 37,945,683
Proposed Total Contract Value	\$ 40,819,824

Approval of these increases in allocated Project funding will raise the previously approved total Project obligations of \$117,550,971 by \$72,674,792, to a new total of \$190,225,763.

TBS’s selected GMP #4 vendors include 67% local participation. The workforce composition for TBS current through GMP #3 includes 496 employees and is as follows:

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Category	American Indian/Alaskan Native		Asian/Pacific Islander		African American		Hispanic		White		Other		Total	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Non-Professional	0	0.00%	2	0.40%	9	1.81%	294	59.27%	49	9.88%	0	0.00%	354	71.37%
Professional	0	0.00%	0	0.00%	0	0.00%	101	20.36%	41	8.27%	0	0.00%	142	28.63%
Total	0	0.00%	2	0.40%	9	1.81%	395	79.64%	90	18.15%	0	0.00%	496	100.00%

Layton’s selected GMP #3 vendors will include 65% local participation. The workforce composition for Layton current through GMP #2 personnel includes 82 employees and is as follows:

Category	American Indian/Alaskan Native		Asian/Pacific Islander		African American		Hispanic		White		Other		Total	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Non-Professional	0	0.00%	1	1.22%	0	0.00%	2	2.44%	6	7.32%	0	0.00%	9	10.98%
Professional	0	0.00%	1	1.22%	4	4.88%	14	17.07%	53	64.63%	1	1.22%	73	89.02%
Total	0	0.00%	2	2.44%	4	4.88%	16	19.51%	59	71.95%	1	1.22%	82	100.00%

RECOMMENDATION: Staff recommend the Board of Managers approve the addition of GMP #4 to the CM Agreement with Turner Byrne Straight Line JV and GMP #3 to the CM Agreement with Layton Construction Company, LLC and authorize the President/Chief Executive Officer to execute the appropriate contract actions thereto in amounts not to exceed \$72,674,792:

TBS GMP #4 \$ 34,729,109
 Layton GMP #3 \$ 37,945,683

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

EVALUATION: None.

FOLLOW UP: None

Consideration and Appropriate Action Regarding Agreements for Materials Testing Engineering for the Community Hospitals with Terracon at the Palo Alto Campus and Raba Kistner at the Retama Site — Don Ryden

SUMMARY: In March 2023, the Board approved University Health’s recommendations for Construction Managers (CMs) to collaborate with the A/E during the design phase and to provide pre-construction services as advisors and estimators. Turner-Byrne-Straight Line (TBS) Joint Venture was assigned as the CM for the Palo Alto site and Layton Construction Company (Layton) will serve as CM for the Retama site.

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The CMs contracts were awarded in April 2023. Both CMs have started coordination and collaboration with the A/E and hospital leadership and continue to provide recommendations and solutions as the design phase continues.

The Board approved early infrastructure improvements at Palo Alto in July, and an amendment was executed with TBS Joint Venture to add this work to their Agreement in early August. To support the quality assurance aspect of this early work, the Board also approved staff to issue a Professional Services Agreement to Terracon Consultants, Inc. This agreement provided for materials testing services for the work associated with the early public works project scope that was included in GMP A.

Following the staff evaluation, Terracon Consultants, Inc. was determined to be the prevailing firm for the Palo Alto site due to their qualifications, previous University Health experience and the fact that they are already currently engaged at the site. Since this is an indefinite quantity agreement, some cost savings could be realized by having a single firm for materials testing at the site.

Terracon will include 100% local participation. The workforce composition for Terracon includes 103 employees and is as follows:

Category	American Indian/Alaskan Native		Asian/Pacific Islander		African American		Hispanic		White		Other		Total	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Non-Professional	0	0.00%	0	0.00%	1	0.97%	30	29.13%	21	20.39%	0	0.00%	52	50.49%
Professional	0	0.00%	5	4.85%	0	0.00%	16	15.53%	30	29.13%	0	0.00%	51	49.51%
Total	0	0.00%	5	4.85%	1	0.97%	46	44.66%	51	49.52%	0	0.00%	103	100.00%

For the Retama site, Raba Kistner, Inc. was chosen as the selected firm based on qualifications along with previous University Health and healthcare experience. Staff recommends approval of execution of a new agreement with Terracon, Consultants, Inc. and execution of a new agreement with Raba Kistner, Inc. This award will require a combined increase to the approved Project budget in the amount of \$2 million.

The proposed value of the Raba Kistner allowance is \$1,000,000. A Professional Services Agreement will be issued to Raba Kistner, Inc. per University Health procurement policies.

The total estimated net cost of both Materials Testing fee proposals combined is therefore \$2,000,000, which staff recommend be approved.

Approval of these increases in allocated Project funding will raise the previously approved total obligated Project budget of \$117,550,971 to \$119,550,971.

Raba Kistner will include 100% local participation. The workforce composition for Raba Kistner includes 788 employees and is as follows:

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Category	American Indian/Alaskan Native		Asian/Pacific Islander		African American		Hispanic		White		Other		Total	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Non-Professional	1	0.13%	13	1.65%	40	5.08%	167	21.19%	230	29.19%	19	2.41%	470	59.65%
Professional	1	0.13%	21	2.66%	10	1.27%	77	9.77%	197	25.00%	12	1.52%	318	40.35%
Total	2	0.26%	34	4.31%	50	6.35%	244	30.96%	427	54.19%	31	3.93%	788	100.00%

RECOMMENDATION: Staff recommends the Board of Managers approve additional Materials Testing Services to the Agreement with Terracon Consultants, Inc. for the Palo Alto site and Agreement for Materials Testing Services with Raba Kistner, Inc. for the Retama site and authorize the President/Chief Executive Officer to execute the appropriate contract actions thereto in amounts not to exceed \$2,000,000:

Terracon Amendment	\$ 1,000,000
Raba Kistner Agreement	\$ 1,000,000

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

EVALUATION: None.

FOLLOW UP: None

Consideration and Appropriate Action Regarding an Amendment for Additional Miscellaneous Works for the Women's & Children's Hospital to the Construction Manager at Risk Agreement with Joeris+JE Dunn, A Joint Venture and Appropriate Funding Thereto — Don Ryden

SUMMARY: The architectural and engineering (A/E) team of Marmon Mok, LLP (a.k.a. Marmon Mok|ZGF) is nearing the completion of its engagement on the Women's and Children's Hospital, which began in 2018 and will run through early 2024. All Construction Documents are complete to support the inpatient programs identified in the Blue Cottage Clinical Space Program, and the full build-out of the 12th floor Adult Medical Surgical space. In the podium expansion, Construction Documents for the Kitchen, Servery, Dining Room, and Conference Rooms, pediatric in-patient and discharge Pharmacy Services, pediatric catheterization services and pediatric computed tomography (CT) spaces are complete. The A/E team is currently focused on adjustments required by various Authorities Having Jurisdiction (AHJ) and field changes identified following University Health occupancy and the commencement of patient care.

Staff have identified three major categories of additional work and alterations recommended before the Construction Manager demobilizes from the project. These include patient safety and experience, previously unknown facility requirements dictated by Authorities Having Jurisdiction (AHJs), and additional design modifications needed to address emergent issues that are impacting construction completion.

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Proposed changes include:

- Utility plant and system modifications: hot water supply balancing, chlorinator exhaust system, chilled water supply and distribution, and boiler system recirculation and conservation equipment changes
- Medical gas supply: add outlets to achieve required minimums for multiple configurations of patient care in certain rooms
- Medical equipment and communications systems: Add low voltage cabling, devices, and support equipment to fully support telemetry, notifications, and medical staff communications
- Food service equipment and kitchen: reconfigure kitchen smoke detectors to prevent steam-caused false alarms; add power and internet for relocated and upgraded food preparation equipment

In October 2020, the Board approved payment of design, procurement, and installation fees to CPS Energy for the new electrical equipment to service the Women’s and Children’s hospital. However, the original fee request did not include additional costs for redundant transformers and service meters that were installed in recognition of the new facilities’ critical energy dependency. During the final activation of the new facilities and the transition from contractor-funded temporary power to University Health-funded permanent power, CPS Energy identified and billed for the additional equipment in the amount of \$270 thousand, bringing the total paid to CPS Energy for new electrical service installations to about \$1.0 million. No new funds are required to make the final payment to CPS Energy.

To facilitate the Construction Manager’s ability to rapidly respond to and complete the additional work that Staff recommends, preliminary discussions regarding scope and schedule have led to a proposal outlining anticipated costs and impacts once a Notice-to-Proceed with new work is issued.

Anticipated additional work items and associated estimated costs for the CM and its subcontractors follow:

Item of Work	Description	Estimated Cost
Patient Care & Patient Experience Improvements	Food service utility adds for upgraded equipment; nurse call system modifications; patient room accessories, signage, and additional medical equipment; garage traffic flow modifications; increased internet accessibility; increased security cameras and system monitoring	\$ 4,254,375
AHJ Changes	CO monitoring system for kitchen; normal to critical power changes; additional emergency response door hardware	\$ 848,925
Design Modifications	Smoke compartment pressurization; additional automated door openers; hot water supply balance improvements; building-central plant utility integration modifications	\$ 2,365,600
ESTIMATED TOTAL		\$ 7,468,900

Staff has also reviewed the subsequent electrical supply equipment billing for \$270 thousand from CPS Energy and determined it is within the original budget for this category of work.

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In summary, Staff recommends the reallocation of Project savings to the CM Agreement’s Owner’s Allowance account of \$7,468,900 and separately, payment to CPS Energy for \$270,465 for redundant power equipment. To avoid the delay and additional costs of a separate construction contract solicitation, Staff recommends executing an Amendment to the existing contract with the current Construction Manager. Staff further proposes that the budget increase be applied to the Owner’s Allowance account, to maintain strict expenditure control by University Health. The increase would also adjust the Construction Cost Limit (CCL) by an equal amount.

Approval will result in a net increase in the Construction Manager’s total contract value of \$7.5 million and a matching increase in the CCL.

WOMEN'S & CHILDREN'S HOSPITAL						
Construction (Shell & Finish-Out)	\$	409.7	\$	2.8	\$	412.5
FFE/IT	\$	46.3	\$	(4.2)	\$	42.1
PARKING STRUCTURE						
FFE/IT	\$	2.1	\$	(1.1)	\$	1.0
PODIUM EXPANSION						
Construction (Shell, Kitchen/Servery, Pharmacy, Pedi-Cath)	\$	91.3	\$	4.7	\$	96.0
FFE/IT	\$	6.7	\$	(2.2)	\$	4.5

The workforce composition for Joeris+JE Dunn (Construction Manager) is detailed below.

Category	American Indian/Alaskan Native		Asian/Pacific Islander		African American		Hispanic		White		Other		Total	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Non-Professional	0	0%	1	0.30%	7	2.12%	88	26.67%	24	7.27%	0	0%	120	36.36%
Professional	1	0.30%	2	0.61%	2	0.61%	65	19.70%	140	42.42%	0	0%	210	63.64%
Total	1	0.30%	3	0.91%	9	2.73%	153	46.37%	164	49.69%	0	0%	330	100%

RECOMMENDATION: Staff recommend the Board of Managers approve the proposed budget adjustments to fund an increase in Owner’s Allowance in the CM’s Agreement and make payment for redundant power supply equipment, and authorize the President/Chief Executive Officer to execute the required contract actions accordingly:

- Amendment to the Construction Manager at Risk Agreement with Joeris+JE Dunn, a Joint Venture to add Owner’s Allowance of \$7,468,900.
- Payment for redundant power supply equipment and metering to CPS Energy for \$270,465.

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

Consideration and Appropriate Action Regarding the Build-out and Purchase of Computed Tomography (CT) Equipment and Other Furnishings from Various Vendors for the Emergency Room at Women’s and Children’s Hospital — *Don Ryden*

SUMMARY: Computed Tomography (CT) is used at University Health to obtain cross sectional anatomy on patients of every age. Philips CT systems are digital, highly technical, and produce low dose radiation with high image quality. University Hospital has averaged over 79,000 CT exams within the last six years with the majority (70%) performed in the Emergency Department. Computed Tomography technology is digital, highly technical, purchasing the dual source spectral CT will assist with lowering the dose while attaining exceptional image quality. The Demand for CT has increased 15% from 2018 to 2023 at University Health and this equipment request is required to keep up with current demand.

Radiology Services has determined the 256 slice Philips Spectral 7500 CT meets or exceeds these standards and best addresses the needs of the Emergency Department patients and attending physicians. The CT was approved and identified in the 2024 Capital Budget and funded in the amount of \$3,500,000. The final budget for the CT project for the Emergency Department is \$4,409,000 leaving a funding difference of \$909,000. The original budget did not include some of the associated equipment and active I.T. components that are necessary to build out shell space for an entire CT suite.

In addition, staff determined that combining the purchase, installation and construction services for the CT as a turnkey project with Philips would provide the best coordinated and expedited equipment installation. The additional funding will be provided by the University Health Foundation.

CT Women's and Children's Tower	
CT and associated equipment (Includes Construction)	\$ 3,750,000
Associated Equipment	\$ 205,000
Furniture	\$ 15,000
Signage	\$ 4,000
IT Equipment	\$ 225,000
Owners Allowance 5%	\$ 210,000
Total	\$ 4,409,000

Philips Health Care has a total of 19,238 employees. The workforce composition data is as follows:

Non—Professional Workforce	American Indian	Asian American	African American	Hispanic	White	Other	Total
Female	10	349	345	285	2338	69	3396
Male	24	400	457	407	4395	108	5791
Combined Non-Professional Total	34	749	802	692	6733	177	9187
Professional Workforce	American Indian	Asian American	African American	Hispanic	White	Other	Total
Female	10	518	171	158	2760	54	3671
Male	20	984	194	271	4837	74	6380
Combined Professional Total	30	1502	365	429	7597	128	10051
Total Workforce	64	2251	1167	1121	14330	305	19,238
	0.3%	12%	6%	5.9%	74.1%	1.7%	100%

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RECOMMENDATION: Staff recommends the Board of Managers approve the additional project funding in the amount of \$909,000 from the University Health Foundation with an updated total project cost of \$4,409,000. Staff also recommends the Board of Managers authorize the President/CEO to approve the Philips purchase order of \$3,750,000 for the purchase and installation of the Philips Spectral CT 7500 for the Emergency Department at the Women's and Children's Hospital.

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

EVALUATION: None.

FOLLOW UP: None

Consideration and Appropriate Action Regarding the Financial Report for December 2023 — *Reed Hurley*

SUMMARY: University Health's consolidated bottom line for the month of December 2023 reflects a gain of \$47.2 million, \$45.0 million better than the budgeted gain of \$2.2 million. This gain to budget is primarily due to patient activity driving positive net patient revenue of \$31.0 million, an HHSC adjustment to the TIPPS program resulting in a \$12.3 million gain to budget and UC revenue of \$11.5 million offset by negative employee compensation expense of \$11.5 million. In December, clinical activity (as measured by inpatient patient days) was up by 16.7% and inpatient discharges were higher than budget by 15.4%. Volumes exceeded budget across all key service delivery areas. Community First experienced a bottom line gain of \$1.0 million, which was \$0.2 million lower than the budgeted gain of \$1.2 million. Community First fully insured membership was down 24.2% to budget, the flat bottom line results were driven by a decrease in premium revenue offset by a decrease in claims expense and increase in investment income.

Operating Revenue: Year to Date

- Net patient revenue is over budget \$206.6 million driven by high patient volumes, acuity of inpatient services, and the continued growth of retail pharmacy volumes.
- Supplemental revenue is over budget \$92.5 million due to UC, TIPPS and DSH payments exceeding budget. The UC and DSH payment formulas were adjusted after the 2023 budget was approved in 2022.
- Community First premium revenue is under budget \$181.7 million related to budgeting for additional Health Insurance Exchange (HIE) members that did not materialize and an experience rebate variance of \$56.2 million.

Operating Expense: Year to Date

- Employee compensation is over budget \$74.8 million related to \$23.2 million in pension expense, \$20.6 million in higher salaries, wages and overtime expense, \$10.8 million in higher incentive pay and \$5.1 million temporary labor premium.
- Supplies are over budget \$50.9 million due to \$32.9 million in higher pharmaceuticals expense from the retail pharmacy programs and \$13.4 million in higher medical supplies from the operating room and procedural departments
- Community First claims expense is under budget \$182.8 million primarily driven by the lower than budgeted HIE membership.

Balance Sheet Report

Consolidated Balance Sheet (Monthly Financial Report page 3) highlights are as follows:

- Days Revenue in Patient Accounts Receivable: 37.2 days on a budget of 39.0 days. Improved cash collections and AR cleanup has moved this metric in a positive direction.
- The Women’s and Children’s Hospital and associated projects has a budget of \$838 million, \$721 million has been paid to date leaving a balance of \$117 million. Most of the remaining balance is encumbered and expected to be paid on the project.
- The Community Hospitals project with a preliminary budget of \$1.2 billion currently has a reserved cash balance of \$892 million. The budget is now being trued-up based on final design development drawings, site conditions, projected workforce shortages in the skilled trades and other inflationary factors. University Health has paid out \$28 million to date on this project.
- Unencumbered funds reserved for future capital needs has a balance of \$121.8 million.
- University Health’s Net Asset Value has increased \$373.4 million year to date on a Generally Accepted Accounting Principles (GAAP) basis including debt service tax revenue and interest expense on bonds.
- Detailed information on Balance Sheet accounts is located on page 7 of the Monthly Financial Report.

RECOMMENDATION: Staff’s recommendation to approve the December 2023 Financial Report as presented to the Board of Managers subject to Audit.

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

EVALUATION: None.

FOLLOW UP: None

CLOSED SESSION:

Consideration and Appropriate Action Regarding the Annual Evaluation of the Performance and Duties of the President/Chief Executive Officer — *Jim Adams, Chair*

The following is an agenda of a closed meeting of the Board of Managers of the Bexar County Hospital District d/b/a University Health, held pursuant to the Texas Open Meetings Act, TEX. GOV'T CODE § 551.001 et seq. (Vernon 2004).

The Board Chair, James R. Adams, announced this meeting closed to the public at 7:30 p.m., on the 30th day of January 2024 with the following Board members present:

- James R. Adams, Chair
- James C. Hasslocher, Vice Chair
- Margaret A. Kelley, M.D., Secretary
- Anita L. Fernández, Member

Dianna M. Burns-Banks, M.D. Member
David J. Cohen, M.D., Member
Pat Jasso, Member

Also present were Mr. George B. Hernández, Jr., President and Chief Executive Officer and Serina Rivela, Vice President/Chief Legal Officer.

At 7:42 p.m., Mr. Hernández left the meeting.

A closed meeting was held pursuant to TEX. GOV'T CODE, Section 551.074 (Vernon 2004) to evaluate the performance, duties and employment of the President/CEO.

After discussion, no action was taken in closed session.

The Chair, James R. Adams, announced that the closed meeting ended at 7:51 p.m., on the 30th day of January 2024.

I certify that this agenda kept pursuant to TEX. GOV'T CODE, §551.103 (Vernon 2004) is a true and correct record of these proceedings.

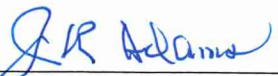
Presentations and Education: None at this time.

Information Only Items:


1. Update on the Women's and Children's Hospital and Associated Projects — *Don Ryden*
2. Update on the Community Hospitals and Associated Projects — *Don Ryden*
3. University Health Foundation Update — *Sara Alger*
4. Report on Recent Recognitions and Upcoming Events — *Leni Kirkman*

Adjournment — *Jim Adams, Chair*

There being no further business Mr. Adams adjourned the public meeting at 7:51pm



James R. Adams
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.

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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.