



# University Health System

## BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Tuesday, March 19, 2019

2:00 p.m.

Cypress Room

University Hospital

4502 Medical Drive

San Antonio, Texas 78229

### MINUTES

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

James R. Adams, Chair  
Ira Smith, Vice Chair  
Dianna M. Burns, M.D., Secretary  
Robert Engberg  
Janie Barrera  
James C. Hasslocher

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

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

#### **OTHERS PRESENT:**

George B. Hernández, Jr., President/Chief Executive Officer, University Health System  
Bryan Alsip, M.D., Executive Vice President/Chief Medical Officer, University Health System  
Awoala Banigo, Senior Vice President/Chief Revenue Officer, University Health System  
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System  
Tommye Austin, Ph.D., Senior Vice President/Chief Nurse Executive, University Health System  
Dallas Connor, Administrative Resident, Texas State University  
Ted Day, Executive Vice President, Strategic Planning and Business Development, University Health System  
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System  
Rob Hromas, M.D., Dean, Long School of Medicine, UT Health, San Antonio  
Leni Kirkman, Senior Vice President, Strategic Communications and Patient Relations, University Health System  
Virginia Mika, Ph.D., Executive Director, CareLink Financial Assistance Program, University Health System  
Brian Lewis, Vice President/Quality, University Health System  
Teresa Nino, Director, Epic Communications, University Health System  
Bill Phillips, Senior Vice President/Chief Information Officer, Information Services, University Health System  
Lourdes Castro-Ramirez, President, University Health System Foundation  
Serina Rivela, Associate General Counsel/Legal Services, University Health System  
Michael Roussos, Hospital Administrator, University Hospital  
Don Ryden, Vice President/Project, Design, and Construction, University Health System

Rajeev Suri M.D., Medical Director/Radiology and President, Medical/Dental Staff, University Health System; and Professor, Radiology/Vascular Interventional Radiology, UT Health, San Antonio  
Anna Taranova, Executive Director/Research, University Health System  
Sally Taylor, M.D., Senior Vice President/Chief, Behavioral Health Services, University Health System  
Shelby Walker, Administrative Resident, Texas State University  
Roberto Villarreal, M.D., Senior Vice President/Research and Information Management, University Health System  
And other attendees.

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

Mr. Adams called the meeting to order at 2:00 p.m.

**INVOCATION AND PLEDGE OF ALLEGIANCE**

Ms. Mildred Manzano of St. Anthony Claret Catholic Church said the invocation and Mr. Adams led the Pledge of Allegiance.

At this time, Mr. Adams welcomed meeting attendees and announced that earlier today he and Mr. Smith attended UT Health San Antonio's Frank Bryant, Jr., M.D. Memorial Distinguished Lecture by Alondra Nelson, Ph.D. Dr. Nelson is President of the Social Science Research Council and he spoke on racial reconciliation, institutional morality, and the social life of DNA. It was a very informative lecture sponsored by the Center for Medical Humanities, a Board co-chaired by Mr. Adams.

**APPROVAL OF MINUTES OF PREVIOUS MEETING(S):**

SUMMARY:	Two (2) sets of Board minutes for Tuesday, January 22, 2019, and January 29, 2019, were submitted for approval.
RECOMMENDATION:	Staff recommends approval of the minutes as submitted.
ACTION:	There being <b>NO OBJECTION</b> , the minutes were <b>APPROVED</b> as submitted by the staff.
EVALUATION:	None.
FOLLOW-UP:	None.

**NEW BUISNESS - CONSENT AGENDA:**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN EXTENSION OF THE AGREEMENT WITH ACCESS QUALITY THERAPY SERVICES FOR CARELINK MEMBERS AND UNFUNDED PATIENTS DISCHARGED FROM UNIVERSITY HOSPITAL — VIRGINIA MIKA, PH.D./ROBERTO VILLARREAL, M.D./AWOALA BANIGO**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING AN EXTENSION OF THE LEASE AGREEMENT WITH METHODIST HEALTHCARE MINISTRIES OF SOUTH TEXAS, INC. FOR THE NORTHWEST FAMILY HEALTH CENTER — DON RYDEN**

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A LEASE AGREEMENT WITH WINTER FAMILY BYPASS TRUST, ET AL. FOR CARELINK OFFICES AT 126 WEST RECTOR STREET — DON RYDEN**

SUMMARY: The items above were presented for the Board's consideration as consent items. The following details are associated with these consent items:

Consideration and Appropriate Action Regarding an Extension of the Agreement with Access Quality Therapy Services for CareLink Members and Unfunded Patients Discharged from University Hospital — Virginia Mika, Ph.D./Roberto Villarreal, M.D./Awoala Banigo

This is an agreement for home health services for CareLink members and unfunded patients at University Hospital through an agreement with Access Quality Therapy. The agreement allows the Care Coordination Department at University Hospital to authorize home health services for inpatients that are unfunded and require such services upon discharge. The services are based on a fee for service reimbursement model. The term of this extension is two (2) years beginning April 1, 2019 and ending March 31, 2021. Rates will be 93 percent of current the Medicare fee schedule. Staff anticipates the 2019 approved claims will be \$504,340 for one year and \$1,008,680 for a two-year contract period. Of this amount, \$275,000 per year is estimated for services to be provided to CareLink members and \$229,340 per year is estimated for services to be provided to other unfunded patients originating from the hospital. This increase was due to a 3 percent increase in payment to the supplier from 90 to 93 percent of the current Medicare fee schedule. Staff recommends Board of Managers approval to execute an extension Agreement with Access Quality Therapy Services for a total estimated contract amount of \$504,340 annually for two (2) years beginning April 1, 2019 and ending March 31, 2021.

Consideration and Appropriate Action Regarding an Extension of the Lease Agreement with Methodist Healthcare Ministries of South Texas, Inc. for the Northwest Family Health Center — Don Ryden - This lease agreement with Methodist Healthcare Ministries for the Northwest Clinic expires July 31, 2019. The Northwest Clinic has been at this location since 2010. The current agreement has one remaining one year option renewal period. The rental rate for the renewal term is \$284,833.13. This clinic has nine (9) Family Practice Provider positions and one (1) Endocrinologist. In 2018, the clinic had 22,806 patient visits and is projected to see 23,294 visits in 2019. The clinic has a 72% funded patient population. The new annual base rental rate for the one (1) year renewal beginning August 1, 2019 will be \$17.17 per sq.ft. This represents a 3% increase over the current rental rate. The total base rent expense will be \$284,833.13 (\$23,736.09 per month). Staff recommends the Board of Managers give approval to amend the current lease agreement with Methodist Healthcare Ministries of South Texas, Inc. for the Northwest Clinic building located at 7726 Louis Pasteur, San Antonio, Texas. The term of the amended agreement will be for a one year period; for the amount of \$284,833.13.

Consideration and Appropriate Action Regarding a Lease Agreement with Winter Family Bypass Trust, et al. for CareLink Offices at 126 West Rector Street — Don Ryden - The Health System's CareLink financial assistance program has multiple offices in San Antonio, but has been at the 126 West Rector location since 2013. Last year this office had over 12,000

unique patient encounters, and staff expects to see a slight increase in volume in 2019. The landlord for the lease agreement for this property is Winter Family Bypass Trust, Louis and Annette Winter Family Trust & Winter Family Survivor's Trust, as successor in interest to Gray Street Rector Partners, Ltd. The current annual base rental rate is \$16.00 per sq. ft. or \$34,047.96. The current term expires April 30, 2019. The base rental rate for the renewal term is the following:

- Year 1: \$36,176.00 per year / \$17.00 per square foot
- Year 2: \$37,261.28 per year / \$17.51 per square foot
- Year 3: \$38,379.12 per year / \$18.04 per square foot

The total base rent to be paid over the renewal term is \$111,816.40.

The rental rate is on a triple net basis indicating the tenant (Health System) will pay as additional rent its pro rata share of real estate taxes, common area maintenance (CAM) charges, and insurance. Currently, the allocated annual share of these operating expenses is \$14,130.96 (\$1,177.58 per month) or \$6.64 per sq. ft. Staff recommends the Board of Managers approve amendment of the current lease agreement for the CareLink office located at 126 West Rector Street, San Antonio, Texas. The term of the amended agreement will be for a three year period; for the amount of \$111,816.40.

RECOMMENDATION: Staff recommended approval of the items on the consent agenda.

ACTION: A **MOTION** to approve staff's recommendation for the items on the consent agenda was made by Mr. Engberg, **SECONDED** by Mr. Hasslocher, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW-UP: None.

### **ACTION ITEMS:**

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

#### **CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT FOR CONSTRUCTION SERVICES FOR THE RENOVATION OF THE REEVES REHAB INPATIENT UNIT IN THE HORIZON TOWER — DON RYDEN**

SUMMARY: The Reeves Rehabilitation Inpatient Unit at University Hospital is located on the 6th floor of the Horizon Tower; it was originally built in 1988. The 27-bed unit with both private and semi-private rooms has received regular maintenance and minor renovations over the years but is in need of interior finish enhancements. This project provides upgrades to include new millwork, lighting, headwall and door finishes, flooring, painting and corridor wall protection. The Health System solicited Requests for Proposals (RFCSP-218-12-064-CNST) for Construction Services with four (4) firms responding to this RFCSP, with their pricing as follows:

- Bryco - \$791,000
- CGC - \$1,010,359
- SpawGlass - \$801,734.36
- Tejas Premier \$852,456.85

The proposals were evaluated based on the criteria provided to the firms in the RFP. Of the firms that proposed, Bryco Construction was selected

based on their competitive pricing, proposed schedule, qualifications, healthcare experience and safety record. Staff has reviewed and negotiated the pricing for these services and recommends approval of construction services for the renovation of the Reeves Rehab Unit in the amount of \$791,000.00. This project will be funded from 2019 operational funds. Mr. Ryden presented an overall project budget for the project at a total of \$977,499. Bryco Construction's workforce composition data was provided for the Board's review.

**RECOMMENDATION:** Staff recommends the Board of Managers approve the selection of Bryco Construction as Contractor for the renovation of the Reeves Rehab Inpatient Unit Located on the Sixth Floor of Horizon Tower and authorize the President/Chief Executive Officer to execute the Construction Services Agreement with Bryco Construction in the amount of \$791,000.00.

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

**EVALUATION:** None.

**FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A MEMORANDUM OF UNDERSTANDING WITH THE SOUTHWEST TEXAS REGIONAL ADVISORY COUNCIL ("STRAC") AND LOCAL HEALTH SYSTEMS FOR THE SUPPORT OF THE SOUTH TEXAS CRISIS COLLABORATIVE ("STCC"), A SUBDIVISION OF STRAC – ED BANOS/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. Health Systems in Bexar County including University Health System, Methodist Healthcare System, Baptist Health System, CHRISTUS Santa Rosa Health System, Southwest General Hospital, along with Methodist Healthcare Ministries of South Texas, STRAC, Haven for Hope and the Center for Health Care Services have collaborated to formalize an innovative, private/public payor coalition, namely the Southwest Texas Crisis Collaborative (STCC), a division of STRAC. These local Health Systems make up the membership of the STCC. Given the problem faced by local hospital emergency departments with psychiatric patients boarding, the delay of definitive care in an appropriate behavioral health setting, and over-utilization of hospital emergency department and inpatient settings, as a group, these mental health service stakeholders, through the STCC Steering Committee, identified the need for a coordinated effort to focus on development of a comprehensive, integrated crisis intervention system across all major public payors, philanthropy, non-profit organizations, hospital providers, and behavioral health providers. The ultimate goal is to decrease preventable emergency department and inpatient visits by identifying these patients early and managed to an appropriate setting. In addition, the plan is to improve the overall quality of life of persons suffering from mental illness by addressing their social determinants of health. Linking the continuum of care, while also streamlining processes and identifying evidence-based practices for start-up and expansion are guiding principles.

A study by Capital Healthcare Planning regarding the incidence of homelessness, chronic physical health and mental health/substance related conditions in those patients receiving care from emergency departments and inpatient services, the STCC Steering Committee determined that funding was needed to sustain STCC staffing to deliver ongoing data analyses, technology tools, and personnel, but also to fund certain programs essential to meet the defined goals. In 2018, these programs included MEDCOM for Law Enforcement Navigation, the Nix Psychiatric Emergency Services (PES), and STCC Infrastructure. The 2019 STCC Memorandum of Understanding includes funding from the entities listed below. Funding is based on net revenue market share, including 2018 utilization of the PES by various health systems:

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

In 2019, Nix Hospital Systems **will not** provide Psychiatry Emergency Services, and negotiations are ongoing to determine the feasibility of providing these services at another location. Methodist Healthcare Ministries has committed \$4.9M to STRAC for other related projects including the PES. The 2019 STCC MOU funds, included in the 2019 operating budget, will fund the following:

1. MEDCOM (\$2,000,000): Provides Law Enforcement Navigation (LE NAV) of medically stable patients who are emergently detained for psychiatric emergencies to appropriate psychiatric facilities.
2. Psychiatric Emergency Services (\$2,909,650): Designed to decompress local Emergency Departments and to provide enhanced access to law enforcement, including access for those patients navigated by MEDCOM.
3. STCC Infrastructure (\$1,000,000): Works on behalf and in support of STCC and the STCC Steering Committee, and includes, but is not limited to, personnel for IT, HR, and/or Finance.

RECOMMENDATION: Staff recommends the Board of Managers approve funding in the amount of \$1,620,450.00 for one year, January 1, 2019 – December 31, 2019 for the Southwest Texas Regional Advisory Council for support of the Southwest Texas Crisis Collaborative and authorize the President/CEO to execute an appropriate agreement.

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

EVALUATION: None.

FOLLOW-UP: None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING EPIC ELECTRONIC HEALTH RECORD PROJECT CONTRACTS WITH PERIGEN, INC. FOR OB DATA MANAGEMENT SOLUTIONS SERVICES — BILL PHILLIPS**

**SUMMARY:** Since 2009, the Health System has been using GE's Centricity Perinatal software to provide electronic fetal heart monitoring. However, as part of the Health System's Epic implementation, there is a need to have a more robust fetal surveillance and documentation system in place. Staff recommends procurement of a PeriGen's advanced perinatal early warning and clinical decision support system. PeriGen is an Epic recommended product to integrate electronic fetal heart monitoring with Epic's Stork system. This system is designed to enhance fetal monitoring with an automated early warning system, highlighting patients needing priority clinical review. PeriWatch will provide the clinical team access to a continuum of documentation from prenatal through delivery, postpartum, newborn and Level 3 NICU. The PeriGen system is unique in the industry and Mr. Phillips listed all of the system's functionalities in his written report. PeriGen Advanced Perinatal Systems one-time cost for this acquisition is \$490,321. The annual maintenance fee is \$71,313. The total cost of this acquisition, including maintenance for a five-year period is \$846,886. The vendor's workforce composition was not available at this time.

**RECOMMENDATION:** Staff recommends Board of Managers' approval to procure PeriGen Advanced Perinatal Systems for the core Epic enterprise suite in the amount of \$846,886.

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

**EVALUATION:** UT Health has a sophisticated outpatient Epic system that has been modified and because time is of the essence, Health System leadership opted to bring this item to the Board at this time. Mr. Phillips noted that much of the data, such as x-rays and lab results, can pass between the two different systems; however, Dr. Hromas confirmed that the system is having trouble transferring order sets. Both parties agree that the merger of systems will have to retain data for every patient that is shared for ACO, DSRIP and population health efforts. Mr. Adams asked the staff to reach a long term agreement and to resolve to make sure the Health System does not create any issues for practitioners. Mr. Hernandez and Dr. Hromas have also suggested an alternative, which is to add the School of Medicine to the Health System's PeriGen license. At this time, Mr. Adams asked Dr. Hromas to provide a brief School of Medicine update to the Board. The leadership has been reviewing strategic plans in certain areas, the Powerthrough! Project is doing quite well on the hospital medicine service, and the entire faculty is working hard trying to make patient lives better together. The Emergency Department at University Hospital had a record-breaking 1,500 visits last week, and the house was full. Dr. Hromas cautioned the Board that there is a need to start planning the next hospital expansion now, in three years when the Women's and Children's Tower opens patient volumes will exceed what the staff is budgeting today.

**FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING EPIC ELECTRONIC HEALTH RECORD PROJECT CONTRACTS WITH SURESCRIPTS, LLC FOR PHARMACY CONNECTIVITY SERVICES — BILL PHILLIPS**

- SUMMARY:** Currently, the Health System uses Surescripts to provide pharmacy functionality through its current EHR vendor Allscripts, and is licensed through the Allscripts master license agreement. The current integrated version of Surescripts is limited in functionality due to the integration with Allscripts. As part of the Health System's Epic implementation, this software product will need to be acquired as a standalone license from Surescripts. This software product is required by Epic for generation of electronic prescriptions inside the Epic system workflow. Surescripts transmits nearly 13.7 billion transactions annually, including nearly 4.8 million e-prescriptions daily. Surescripts conversion cost for this acquisition is \$13,000 one-time. The annual maintenance fee is \$223,596 for a period of three years, based on 590 staffed beds. The total cost of this acquisition including maintenance for a three-year period is \$683,788. Funds will be obligated, but no expense recognized for maintenance until the Epic go-live. Mr. Philips provided Board members with a list of SureScripts products that are included in this acquisition and their individual costs. The vendor's workforce composition was not available for the Board's review.
- RECOMMENDATION:** Staff recommends Board of Managers' approval to procure Surescripts for the core Epic enterprise suite in the amount of \$683,788.
- ACTION:** A **MOTION** to approve staff's recommendation was made by Mr. Hasslocher, **SECONDED** by Ms. Barrera, and **PASSED UNANIMOUSLY**.
- EVALUATION:** None.
- FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING SUBCONTRACT PROFESSIONAL SERVICES AGREEMENTS IN SUPPORT OF PART A AND PART B FUNDED RYAN WHITE PROGRAMS WITH THE FOLLOWING ORGANIZATIONS: ALAMO AREA RESOURCE CENTER (AARC) FOR MENTAL HEALTH, MEDICAL CASE MANAGEMENT, MEDICAL NUTRITION AND WRAP-AROUND SERVICES; CENTROMED FOR MEDICAL CASE MANAGEMENT, AIDS PHARMACEUTICAL ASSISTANCE, MENTAL HEALTH, AND OUTPATIENT AMBULATORY SERVICES; AND SAN ANTONIO AIDS FOUNDATION (SAAF) FOR AIDS PHARMACEUTICAL ASSISTANCE, EARLY INTERVENTION SERVICES, MEDICAL TRANSPORTATION, AND OUTPATIENT AMBULATORY HEALTH SERVICES, ORAL HEALTH, AND OTHER WRAP-AROUND SERVICES - — ROBERTO VILLARREAL, M.D.**

- SUMMARY:** Alamo Area Resource Center (AARC) - Provides referrals for healthcare and support services, pharmaceutical assistance, medical and non-medical case management, medical nutrition, mental health, and emergency financial assistance services to enable clients from Bexar County and surrounding counties to receive necessary care for HIV/AIDS. The Ryan White Grants consist of multiple parts, with each part having its own budget and objectives. Part A Formula, Part A Supplemental Program, Part B Service Delivery, Part B Supplemental #1, and Part B Service Delivery



Supplemental #2 services includes additional categories (which were provided in the written report) for AARC during fiscal years 2019-20. The term of Part A Subagreement is March 1, 2019 through February 28, 2020. Contract Part A Amount:

Part A Formula	\$ 999,779.00
<u>Part A Supplemental</u>	<u>\$ 494,952.00</u>
Total of	\$1,494,731.00

The term of Part B Subagreement is April 1, 2019 through March 31, 2020.

Contract Part B Amount: Part B Service Delivery \$ 323,606.00

Part B Service Delivery	
Supp. #1	\$ 74,849.00
Part B Service Delivery	
<u>Supp. #2</u>	<u>\$ 28,000.00</u>
Total	\$ 426,455.00

The RW Program is a payer of last resort. This program provides financial and social services to those not covered by other resources. Workforce composition data for AARC was provided for the Board's review.

RECOMMENDATION: Staff recommends approval of a new subagreement with the Alamo Area Resources Center, a sub-recipient of Ryan White HIV/AIDS Program funds, to enhance services for Ryan White-eligible patients, for a total of \$1,494,731 for Part A; and \$426,455 for Part B.

SUMMARY: CentroMed - A non-profit Federally Qualified Health Center that offers medical and dental care, behavioral health services, nutritional services and other support services through a network of 21 sites throughout San Antonio and Bexar County. Part A Formula and Supplemental Program includes various categories (provided in the written report) for CentroMed during fiscal years 2018-19. The term of this Sub agreement is March 1, 2019 through February 28, 2020:

Contract Amount: RW Part A Formula	\$622,873.00
<u>RW Part A Supplemental</u>	<u>\$338,443.00</u>
Total	\$961,316.00

The RW Program is a payer of last resort. This program provides financial and social services to those not covered by other resources. CentroMed's workforce composition data was provided for the Board's review.

RECOMMENDATION: Staff recommends approval of the new Subagreement with CentroMed, a sub-recipient of Ryan White HIV/AIDS Program funds, to provide and enhance services for Ryan White eligible patients for a total of \$961,316.

SUMMARY: San Antonio AIDS Foundation (SAAF) is a 501(c)(3) non-profit corporation founded in 1986. They offer a full range of services throughout Bexar County and 11 surrounding South Texas counties. The RW Grants consist of multiple parts, with each part having its own budget and objectives. Part A Formula, Part A Supplemental, Part B Service Delivery, and Part B Supplemental Program services includes various categories (provided in the written report) for SAAF during fiscal years 2019-20. The term of Part A Agreement is March 1, 2019 through February 28, 2020:

Contract Part A Amount: Part A Formula	\$ 575,126.00
<u>Part A Supplemental</u>	<u>\$ 284,721.00</u>
Total of	\$ 859,847.00

The term of Part B agreement is April 1, 2019 through March 31, 2020:

Contract Part B Amount: RW Part B Service	
Delivery	\$ 246,657.00
RW Part B Supp. #1	\$ 74,849.00
<u>RW Part B Supp. #2</u>	<u>\$ 28,000.00</u>
Total	\$ 349,506.00

The RW Program is a payer of last resort. This program provides financial and social services to those not covered by other resources. San Antonio AIDS Foundation's workforce composition data was provided for the Board's review.

**RECOMMENDATION:** Staff recommends approval of this new agreement with the San Antonio AIDS Foundation, a sub-recipient of Ryan White HIV/AIDS Program funds, to enhance services for Ryan White eligible patients for a total of Part A \$859,847 and for Part B \$349,506.

**ACTION:** A **MOTION** to approve staff's recommendations regarding all three subcontracts for professional service agreements in support of Part A and Part B funded Ryan White Programs was made by Mr. Hasslocher, **SECONDED** by Ms. Barrera, and **PASSED UNANIMOUSLY**.

**EVALUATION:** Dr. Villarreal introduced grant management staff to the Board. In the future, Ryan White items will be placed on the consent agenda. Mr. Hernandez informed the Board that the grants management staff has doubled the grants obtained by the Health System since the Ryan White program was transferred from Bexar County in 2017, which he attributes to the quality of the staff's work. Mr. Smith thanked the staff for their work. Dr. Villarreal informed Dr. Hromas that Ryan White covers HIV drugs; Hep C drugs are covered by a different grant and testing for Hep C is performed at the clinics.

**FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FINANCIAL REPORTS FOR FEBRUARY 2019 — REED HURLEY**

**SUMMARY:** In February, clinical activity (as measured by inpatient discharges) was down 2.4 percent for the month compared to budget but higher than prior year by 3.8 percent. Community First Health Plan (CFHP) fully-insured membership was down 0.8 percent to budget. On a consolidated basis, gain from operations was \$17.9 million, \$11.7 million better than budget. The consolidated bottom line gain (before financing activity) was \$14.4 million, \$13.4 million better than the budgeted gain of \$1.0 million. Higher patient and supplemental revenue combined with lower operating expenses resulted in performance better than budget. CFHP experienced a bottom line gain of \$691 thousand which was \$1.1 million better than budget. Lower medical claims expense and premium deficiency reserve accounted for the performance to budget. Debt service revenue was \$5.8 million which matched budget. Mr. Hurley reviewed notable increases and/or decreases from the December 31, 2018 Consolidated Balance Sheet.

**RECOMMENDATION:** Staff recommends approval of the financials reports for February 2019, subject to audit.

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

**EVALUATION:** Regarding inpatient discharges, Mr. Smith asked if lack of hospital beds is still an issue to which Mr. Hurley replied that the staff struggles every day. The hospital is licensed for 1,034 beds. On any given day, Mr. Roussos reported that University Hospital can staff up to 678 beds, which includes those in the pediatrics service. Last week, the hospital operated at 630 beds with 30 patients waiting in the Emergency Department, the other available beds were in pediatrics. Mr. Hernandez briefly discussed GME and other federal forms of revenue available to the Health System next year. Mr. Adams acknowledged Dr. Hromas' point earlier about the need for beds being critical. Mr. Engberg thanked the staff for their work and noted the quality of financial reporting as having been very much improved.

**FOLLOW-UP:** None.

## **PRESENTATIONS AND EDUCATION:**

### **FIRST QUARTER QUALITY REPORT- *BRYAN ALSIP, M.D.***

**SUMMARY:** Dr. Alsip provided a summary regarding the Health System's 2018 and 2019 year to date performance for each of the Quality Composite Metric categories: mortality; hospital readmissions; safety (hospital-acquired infections and patient safety); and process (core measures), which represent the majority of items that comprise the publicly reported Centers for Medicare and Medicaid Services (CMS) Hospital Star Rating. The goals for each of these metrics have been set at the top-decile performance as compared to CMS reported national benchmarks:

Mortality - During 2018, mortality improved by 21 percent from the 2017 baseline with final performance slightly below the 2018 goal. The 2019 year to date performance is 20 percent better than the targeted goal. Continued improvements in this area are due to the success of several initiatives.

Readmissions - Year to date performance (through January 2019) is 24 percent better than the targeted goal. Continued focused readmission review from 2018 and year to date performance reveals opportunities to improve in post-acute care discharge follow up, specific to potentially preventable readmissions. The Health System is building a clinical episode-specific navigation program, initially focused on cardiac patients, using clinical patient navigators to conduct critical acute care patient engagement to improve successful transitions of care, including post-discharge medication and treatment compliance, timely follow-up appointment attendance, and other evidence-based data-driven interventions to reduce readmissions.

Safety - The 2019 infection goals have been set to rates that equal a 10 percent improvement in the standardized infection ratio (SIR) for CDI, CLABSI, MRSA, and SSI Hysterectomy. CAUTI and SSI-Colon goals have been set at rates to achieve an SIR of  $\leq 1.0$ . The Health System safety composite 2019 year to date performance is currently 35 percent better

than the targeted goal. However, current performance for the PSI-90 composite metric is higher than the desired 2019 target. Final provider query and review of these events is not yet complete, which may reflect improved performance. Actions to improve PSI-90 performance include actions of the quality medical information team (QMIT), which conducts real-time review of all patient safety indicators specific to provider documentation opportunities. UT Health San Antonio physician leaders are also working with the Health System to champion efforts in order to reduce these complications to an ultimate goal of zero. Dr. Alsip reviewed recent results for an internal program, Achieving Zero, which challenges the inpatient units to combat four major infections. Six (6) units were able to prevent a single infection in one calendar year; five (5) units were able to prevent two types of infection in one calendar year; and four (4) units were able to prevent 3 of the 4 infections for one full calendar year. Dr. Alsip attributes the success on these units to nursing leadership, infection control and quality departments, they have taken ownership. Dr. Volk and Mr. Brian Lewis are reviewing the data more timely and more in depth on a regular basis and make it a priority. The partnership with the School of Medicine is essential, the physicians are part of the equation, and the medical directors are fully engaged.

Process - For 2019 year to date, the process composite metric is 87 percent to target with opportunities to improve with SEP-1 and IMM-2. Efforts around both of these metrics include real-time reviews of specific case opportunities for improvement and partnership with multidisciplinary teams to review trends and implement solutions. All clinical documentation regarding inclusions and exclusions is also reviewed during abstraction of data. A team consisting of Health System and UT Health San Antonio leadership from the Emergency Department, Hospitalists, Quality, and Nursing has been instrumental to improve outcomes for SEP-1, raising compliance with the entire bundle from 9.3 percent in January 2018 to over 45 percent in December 2018.

RECOMMENDATION: This report was provided for informational purposes only.  
ACTION: No action was required by the Board of Managers.  
EVALUATION: Dr. Hromas commended the Health System for these results; this is good news for the patients. Every one of those numbers is connected to a real person who suffers. He reminded the Board that CMS ratings do not take into account certain quality issues and that there is currently a lawsuit to prevent publication of CMS star ratings. Dr. Hromas believes Vizient is a better measurement tool for academic university hospitals.  
FOLLOW-UP: None.

**CLOSED MEETING:**

Mr. Adams announced the meeting closed to the public at 2:57 p.m., pursuant to the Texas Open Meetings Act, TEX. GOV'T CODE § 551.001 et seq. (Vernon 2004). All of the Board members were present, except for Dr. Roberto Jimenez. After discussion, no action was taken in closed session. Mr. Adams announced that the closed meeting ended at 3:14 pm, and he immediately reconvened the public meeting:

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE ANNUAL EVALUATION OF THE PERFORMANCE AND DUTIES OF THE PRESIDENT/CEO — JIM ADAMS, CHAIR**

- SUMMARY:** Mr. Adams appointed Ms. Janie Barrera to chair an ad hoc committee with the charge of performing the annual evaluation of the President/CEO. Ms. Barrera and the ad hoc committee met and actively solicited input from all members of the Board during the process. The findings of the ad hoc committee have been reviewed with the full Board of Managers in Executive Session.
- RECOMMENDATION:** The ad hoc committee recommends a base salary increase to \$733,000.00 annually, effective January 1, 2019. In addition, the ad hoc committee, in recognition of Mr. Hernandez's performance, recommended that Mr. Hernandez receive a one-time \$100,000.00 bonus, for a total compensation of \$833,000.00 for this year.
- ACTION:** After due discussion and consideration, a **MOTION** to increase Mr. George Hernandez's annual salary to 733,000.00 to be effective January 1, 2019; a one-time annual incentive payment in the amount of \$100,000.00; and an extension of the term of the employment agreement for one additional year was made by Ms. Barrera, **SECONDED** by Mr. Hasslocher and **PASSED UNANIMOUSLY**.
- EVALUATION:** Mr. Hernandez thanked the Board of Managers for their consideration and support.
- FOLLOW-UP:** Discussion pertaining to Mr. Hernandez's 2019 goals will be reviewed during the April 23, 2019 Board meeting which will serve as the basis for the 2020 annual evaluation of the performance and duties of the President/CEO.

**ADJOURNMENT:**

There being no further business, Mr. Adams adjourned the Board meeting at 3:15 p.m.

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James R. Adams  
Chair, Board of Managers

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

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Sandra D. Garcia, Recording Secretary