



University Health System

SPECIAL MEETING OF THE BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Tuesday, May 15, 2018
2:00 p.m.
Cypress Conference Room
University Hospital
4502 Medical Drive
San Antonio, Texas 78229

MINUTES

BOARD MEMBERS PRESENT:

Jim Adams, Chair
Ira Smith, Vice Chair
Dianna M. Burns, M.D., Secretary
Robert Engberg
Janie Barrera
James 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
Tommye Austin, Ph.D., Senior Vice President, Chief Nurse Executive, University Health System
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System
Gabriela Canales, Director, Healthcare Transformation/Research & Information Management, University Health System
Antonio Carrillo, Executive Director, Procurement Services, University Health System
Ted Day, Executive Vice President, Strategic Planning and Business Development, University Health System
Donald Finley, Director, External Communications/Corporate Communications, University Health System
Ron Hromas, M.D., Dean, Long School of Medicine, UT Health, San Antonio
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System
Monika Kapur, M.D., President/Chief Executive Officer, University Medicine Associates
Leni Kirkman, Senior Vice President/Strategic Communications & Patient Relations, University Health System
Brian Lewis, Vice President, Quality, University Health System
Winga Manning, Coordinator, Supplier Diversity/Procurement Services, University Health System
Rosa Olivares, Administrative Resident, Trinity University
Kirsten Plastino, M.D., President, Medical/Dental Staff, University Health System; and Professor, Department of Obstetrics & Gynecology, UT Health, San Antonio

Serina Rivela, Interim Chief Legal Officer, University Health System
Don Ryden, Vice President/Project, Design, and Construction, University Health System
A.J. Sandoval, Chief of Police/Protective Services, University Health System
Travis Smith, Deputy Chief Financial Officer, University Health System
Allen Strickland, Vice President, Hospital Administration, University Hospital
Anna Taranova, Senior Director of Research/Research and Information Management, University Health System
Roberto Villarreal, M.D., Senior Vice President, Research & Information Management, University Health System
Emily Volk, M.D., Senior Vice President/Clinical Services, University Health System
Jim Willis, Vice President, Associate Administrator, University Hospital
And other attendees.

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

Mr. Adams called the meeting to order at 2:20 p.m.

INVOCATION AND PLEDGE OF ALLEGIANCE

Mr. Adams introduced Ms. Laura Gonzales-Rodriguez of New Hope Church for the invocation and he led the Pledge of Allegiance.

NEW BUSINESS – ACTION ITEMS:

Mr. Adams asked Dr. Plastino to provide an oral update regarding the Medical/Dental staff. She reported that daily chest x-rays will no longer be taken while a patient is in the intensive care unit, only when needed. This is a major change to the usual practice and will be rolled out on May 29, 2018. She thanked the Board for their support.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A REAPPOINTMENT TO THE ALAMO AREA COUNCIL OF GOVERNMENTS BOARD OF DIRECTORS – ROBERT ENGBERG, CHAIR NOMINATING COMMITTEE

SUMMARY: In March 2006 the Board of Managers approved: a) the transfer of the Center for Health Care Services Mental Retardation Authority (MRA) role to the Alamo Area Council of Governments (AACOG); and, b) redirection of the Health System's 10 percent local match from CHCS to the new AACOG MRA. The MRA transition also provided for continued Health System oversight of the new MRA through representation on the AACOG Board. Mr. Hasslocher has been an exceptional representative of the Health System since November 2015; his current appointment will expire June 30, 2018.

RECOMMENDATION: The Nominating Committee recommends the reappointment of Mr. Hasslocher to the AACOG Board of Directors as primary representative, with Robert Engberg serving as alternate appointee, effective July 1, 2018 through June 30, 2020.

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

EVALUATION: Mr. Adams thanked Mr. Hasslocher for his service on this important community Board.
FOLLOW UP None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING PROFESSIONAL SERVICES AGREEMENTS WITH THE FOLLOWING ORGANIZATIONS FOR THE RYAN WHITE PROGRAM, SERVING HIV AFFECTED CLIENTS:

Ryan White (RW) Program funds are administered by the U.S. Department of Health and Human Services, Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau (HAB). Grant funding is made available through federal funding directly to Bexar County; additional funds are available through Texas Department of State Health Services (DSHS) grants to Bexar County. These grants are provided on a cost-reimbursement basis. On August 9, 2017, the Administrative Agency (AA) and related RW grant funding transferred from Bexar County to Bexar County Hospital District. The AA administers funds by contracting with health care providers and non-profit agencies to provide services to affected individuals. Contracts below will facilitate access to medical care for HIV/AIDS affected patients residing in the San Antonio Transitional Grant Area, to include the following counties: Bexar, Comal, Guadalupe and Wilson; and Health Service Delivery Area of San Antonio which includes: Atascosa, Bandera, Bexar, Comal, Frio, Gillespie, Guadalupe, Karnes, Kendall, Kerr, Medina and Wilson. The Alamo Area Resource Center (AARC) was founded in 1990 to assist in meeting needs of individuals who face life threatening diseases, including but not limited to HIV in Bexar County and surrounding areas. The 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.

ALAMO AREA RESOURCE CENTER (AARC) TO PROVIDE SERVICES INCLUDING WRAPAROUND SERVICES, MENTAL HEALTH, AND MEDICAL NUTRITION FUNDED THROUGH A TEXAS DEPARTMENT OF STATE HEALTH SERVICES PART B SERVICE DELIVERY GRANT

SUMMARY: Part B Service Delivery and Part B Supplemental Program includes the following categories for AARC during fiscal years 2018-19: AIDS Pharmaceutical Assistance (Local) {LPAP}; Early Intervention Services, Emergency Financial Assistance, Food Bank/Home Delivered Meals, Health Insurance Premium Cost Sharing Assistance, Medical Case Management, Medical Nutrition, Medical Transportation Services, Mental Health, Non-medical Case Management, Outpatient Ambulatory Health Services, and Outpatient Substance Abuse Treatment. The term of this agreement is April 1, 2018 through March 31, 2019:

Contract Amount: Ryan White Part B Service Delivery	\$ 419,740.71
Ryan White Part B Supplemental #2	\$ 103,164.91
<u>Ryan White Part B Supplemental #1</u>	<u>\$ 93,205.66</u>
Total:	\$ 616,111.28

The funding source is TDSHS, contract number HHS000084600001. HIV services shall be invoiced monthly for actual costs incurred, and will be reimbursed. It is a cost reimbursement contract. The Ryan White Program is a payer of last resort. This program provides financial and social services to those not covered by other resources. The workforce composition of the Alamo Area Resource Center was provided for the Board's review.

RECOMMENDATION: Staff recommends approval of a new agreement 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 \$616,111.28, funded through a Texas Department of State Health Services Part B Service Delivery Grant.

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.

ALAMO AREA RESOURCE CENTER (AARC) TO PROVIDE MENTAL HEALTH, MEDICAL NUTRITION AND OTHER COMPREHENSIVE WRAPAROUND SERVICES FUNDED THROUGH A TEXAS DEPARTMENT OF STATE HEALTH SERVICES (TDSHS) GRANT; AND

SUMMARY: The Ryan White Grants consist of multiple parts, with each part having its own budget and objectives. State Services Program includes the following categories for AARC during fiscal years 2018-19: AIDS Pharmaceutical Assistance (Local) {LPAP}; Early Intervention Services, Emergency Financial Assistance, Food Bank/Home Delivered Meals, Health Insurance Premium Cost Sharing Assistance, Medical Case Management, Medical Nutrition, Medical Transportation Services, Mental Health, Non-medical Case Management, Outpatient Ambulatory Health Services, and Outpatient Substance Abuse Treatment. The term of this agreement is April 1, 2018 through August 31, 2018.

Contract Amount: State Services	\$ 139,467.00
State Rebate	\$ 112,025.00
<u>State Rebate Eligibility Worker</u>	<u>\$ 27,778.00</u>
Total of	\$ 279,270.00

The funding source is TDSHS, contract number HHS000084300001. HIV services shall be invoiced monthly for actual costs incurred, and will be reimbursed. It is a cost reimbursement contract. The Ryan White Program is a payer of last resort. This program provides financial and social services to those not covered by other resources. The workforce composition of the Alamo Area Resource Center was provided for the Board's review.

RECOMMENDATION: Staff recommends approval of a new agreement 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 \$279,270.00, funded through a Texas Department of State Health Services Grant.

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.

SAN ANTONIO AIDS FOUNDATION (SAAF) TO PROVIDE SERVICES INCLUDING AMBULATORY SERVICES, MEDICAL AND NON-MEDICAL CASE MANAGEMENT, AND PHARMACEUTICAL ASSISTANCE FUNDED THROUGH THE TEXAS

DEPARTMENT OF STATE HEALTH SERVICES (TDSHS) PART B SERVICE DELIVERY GRANT – ROBERTO VILLARREAL, M.D.

SUMMARY: The Ryan White Grants consist of multiple parts, with each part having its own budget and objectives. Part B Service Delivery and Part B Supplemental Program include the following categories for SAAF during fiscal years 2018-19: AIDS Pharmaceutical Assistance (Local) {LPAP}; Emergency Financial Assistance, Food Bank/Home Delivered Meals, Medical Case Management, Medical Transportation Services, Mental Health, Non-medical Case Management, Oral Health, and Outpatient Ambulatory Health Services. The term of this agreement is April 1, 2018 through March 31, 2019.

Contract Amount:

Ryan White Part B Service Delivery	\$ 260,472.73
Ryan White Part B Supplemental #2	\$ 78,852.37
<u>Ryan White Part B Supplemental #1</u>	<u>\$ 68,893.12</u>
Total	\$ 408,218.22

The funding source is TDSHS, contract number HHS000084600001. HIV services shall be invoiced monthly for actual costs incurred, and will be reimbursed. It is a cost reimbursement contract. The Ryan White Program is a payer of last resort. This program provides financial and social services to those not covered by other resources. Workforce composition of the San Antonio AIDS Foundation 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 \$408,218.22.

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 AN AGREEMENT WITH PEDIATRIX MEDICAL SERVICES, INC. TO PROVIDE PEDIATRIC AND NEONATOLOGY SURGICAL SERVICES – ALLEN STRICKLAND

SUMMARY: University Health System and the Pediatric Department, School of Medicine, UT Health San Antonio, work together to provide and meet patient demand for pediatric health care services in Bexar County. The current agreement with Pediatrix expires June 30, 2018. Health System leadership, working in conjunction with UT Department of Surgery leadership, has determined that it is necessary to enter into a new agreement with Pediatrix to continue providing their specialized services due to our complex pediatric and neonatal surgical patients. This agreement with Pediatrix will ensure that the Health System maintains access to the highest quality pediatric and neonatal surgical coverage. The cost of this contract is \$650,000 per year for pediatric surgical coverage and \$150,000 per year for neonatal surgical coverage for a total of \$800,000 per year. This is a planned expense and is included in the 2018 operating budget. This agreement supports our strategic goal of expanding pediatric and neonatal

surgical services and the pediatric and neonatal service lines at University Health System. The workforce composition for Mednax Services, Inc., (including its subsidiaries Pediatrix Medical Services, Inc.), was provided for the Board's review

RECOMMENDATION: Staff recommends Board of Managers' approval to execute a contract with Pediatrix Medical Services, Inc., for specialized pediatric and neonatal surgical services at a cost of \$800,000 for the year ending June 30, 2019 with an option to renew for an addition one year period under the same terms and conditions.

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

EVALUATION: None.

FOLLOW UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT WITH UT HEALTH SAN ANTONIO FOR PROFESSIONAL ORTHOTIC AND PROSTHETIC SERVICES THROUGH THE DEPARTMENT OF REHABILITATION MEDICINE – ALLEN STRICKLAND

SUMMARY: Since 2008, orthotic and prosthetic devices have been custom designed and fit to individual patient specifications by the UT Health San Antonio Department of Rehabilitation Medicine. They consist of spinal support, upper and lower extremity bracing and supports, shoe wear, and prosthetic devices to allow early mobilization of the patient and efficient discharge from the hospital. The purpose of this agreement is to continue to secure prosthetic and orthotic services for Health System inpatients who are either uninsured or whose insurance will not pay for the devices due to their inpatient status. These services include the actual appliances as well as the services of certified orthotists. These prosthetic and orthotic devices are essential for stabilization, proper recovery, and timely discharge following surgical procedures and/or injury and disease processes. Select devices also assist in preventing the diabetic patient from developing foot and leg ulcerations. The cost of this contract is \$325,000 per year. This is a planned expense and is included in the 2018 operating budget. Significant savings are achieved by reducing the length of stay of approximately 400 patients per year who would be required to stay in the hospital but for the application and use of these devices. The workforce composition for UT Health San Antonio was provided for the Board's review.

RECOMMENDATION: Staff recommends Board of Managers' approval to execute an Agreement with UT Health San Antonio through its Department of Rehabilitation Medicine for the provision of orthotic and prosthetic services at a cost of \$325,000 per year, with an option to renew for an additional one year period under the same terms and conditions.

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

EVALUATION: None.

FOLLOW UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING AMENDMENT NO. 4 TO THE CONSTRUCTION MANAGEMENT SERVICES CONTRACT WITH TURNER

CONSTRUCTION COMPANY FOR THE ROBERT L.M. HILLIARD CLINIC - DON RYDEN

SUMMARY: On May 24, 2016, the Board of Managers approved the selection of Turner Construction Company to provide construction management at risk services for the Robert L.M. Hilliard Clinic. A Selection Committee comprised of staff from Facilities Development, Ambulatory, and Information Technology evaluated the firms that responded to the request for proposals (RFP). The overall budget for this project was approximately \$8.1M. The majority of the scope of work was completed under a series of Guaranteed Maximum Pricing packages (GMP) for a total contract value of \$5,839,434. Ten change orders occurred during the project to address various modifications or clarification in plan design specifications. The most significant change in scope was the addition of a canopy at the main entrance at a cost of approximately \$297,000. The canopy addition was necessary to provide safe patient access during inclement weather. Amendment No. 4 summarized the total cost of the ten change orders at \$453,785. This amount represents approximately 7.8% of the original contract value. The original contract amount was for \$5,839,434, amount requested with this item is \$453,785, for a revised contract amount of \$6,293,219.

Overall Total Project Budget (including design, construction, medical equipment, FF&E, I.T.)

Final Project Costs \$8,428,632

Original Project budget \$8,183,851

Net Difference \$ 244,781 (2.9%)

Turner Construction Company performed the work in association with Straightline Construction Management and exceeded its target of 35 percent for SMWVBE participation.

RECOMMENDATION: Staff recommends Board of Managers' approval of Amendment No. 4 to the Construction Manager at Risk Services contract with Turner Construction Company in the amount of \$453,785.

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.

PRESENTATIONS AND EDUCATION:

SUPPLIER DIVERSITY REPORT FOR THE ROBERT L.M. HILLIARD CLINIC – ANTONIO CARRILLO/TRAVIS SMITH

SUMMARY: Mr. Carrillo introduced and yielded the floor to Ms. Winga Manning, the Health System's Supplier Diversity Coordinator. The Robert L.M. Hilliard Center officially opened its doors to the community on January 20, 2018, with a goal to improve the health of those living and working in neighborhoods east of downtown. An African American A&E firm, KAI-Alliance, was selected to provide the programming and design services. Turner Construction, the project's prime construction partner agreed to a SMWVBE subcontracting target of 35 percent. The robust presence of SMWVBE suppliers in the Hilliard Clinic project reflects the Health

System's unwavering commitment to the community. The total budget for Hilliard Clinic was \$8,428,632. Total SMWVBE spend, including Tier II was \$3,841,638, reflecting 46 percent of total budget. The prime construction company, Turner Construction, committed to a 35 percent SMWVBE subcontracting target. Turner Construction achieved 40 percent SMWVBE participation of its subcontracting which equates to \$2,499,982 of the total \$6,293,219 construction spend. The achievement exceeds the opportunity provided within the Sky Tower project which attained 38 percent in SMWVBE subcontracting spend.

Design Firm: Kai Texas
 Total A&E and Programming: \$792,397 African/American Business Enterprise (AABE)

Prime Contractor: Turner Construction
 Budget: \$6,293,219 (n)
 SMWVBE Target: 35 percent
 Number of Subcontractors Used: 28
 \$4,867,271 (77%)
 SMWVBE Subcontractors used: 14
 \$2,499,982 (40%)
 Bexar County Spend: \$4,327,105 (69%)

Prime Contractor: Turner Construction
 Total Budget: \$6,293,219 (n)
 SMWVBE Sub - \$2,499,982 – 40 percent
 Prime - \$1,425,948 – 23 percent
 Non-SMWVBE - \$2,367,289 – 37 percent

Prime Contractor: Turner Construction
 SMWVBE Participation Target: 35 percent
 SMWVBE Participation Achieved: 40 percent
 Woman - \$71,840 – 3 percent
 African American - \$392,058 – 16 percent
 Hispanic - \$501,894 - 20 percent
 Small – \$41,531,190 – 60 percent

Prime Contractor: Turner Construction
 Detail of Subcontractor Payments: \$4,867,271

Sub Name	SMWVBE Status	Location	Payment Amt
A&A Landscape	Non SMWVBE	Farmersville, TX	\$ 129,841
Alterman	Non SMWVBE	San Antonio, TX	\$ 119,958
AR-Case	Hispanic	San Antonio, TX	\$ 117,660
Architectural Division 8	Small	San Antonio, TX	\$ 105,356
ARS Specialty	Hispanic	San Antonio, TX	\$ 6,415
Automatic Fire Protection	Non SMWVBE	San Antonio, TX	\$ 50,189
Baker Triangle	Non SMWVBE	San Antonio, TX	\$ 298,537
Bulverde Glass	Non SMWVBE	San Antonio, TX	\$ 217,921
Byrne Metals	Small	Humble, TX	\$ 208,943
Capitol Blind	Non SMWVBE	Austin, TX	\$ 9,970
CHM Weatherguard	Non SMWVBE	Roundrock, TX	\$ 58,522
Cram Roofing	Small	San Antonio, TX	\$ 142,210
Eilers Steel Erection	Small	Fredericksburg, TX	\$ 335,582
FA McComas	Small	San Antonio, TX	\$ 75,331
FJ Enterprises	Small	La Vernia, TX	\$ 123,407
Gillette A/C	Non SMWVBE	San Antonio, TX	\$ 363,480
JMEG	Non SMWVBE	San Antonio, TX	\$ 545,118
Maverick of Texas	Hispanic	San Antonio, TX	\$ 300,683

Sub Name	SMWVBE Status	Location	Payment Amt
Mission City Specialties	Hispanic	San Antonio, TX	\$ 77,136
Mission Rest. Supply	Non SMWVBE	San Antonio, TX	\$ 13,991
Pesado Construction	Small	Schertz, TX	\$ 504,065
Reiland Holdings Inc , dba: Budget Sign	Small	San Antonio, TX	\$ 31,154
SA Quality Fence & Welding	Small	San Antonio, TX	\$ 8,142
Straightline Management	African American	San Antonio, TX	\$ 292,680
Straightline Management	African American	San Antonio, TX	\$ 99,378
TD Industries	Non SMWVBE	San Antonio, TX	\$ 410,227
Unistrut Int	Non SMWVBE	Houston, TX	\$ 9,484
Venice Art Terrazzo	Woman	San Antonio, TX	\$ 71,840
Walker Engineering	Non SMWVBE	San Antonio, TX	\$ 140,052

Mr. Carrillo reviewed the Health System's Supplier Diversity Program, which includes the following plan components: Community outreach and education, management involvement, procurement considerations, recognition, and currently developing an improved report format. Mr. Carrillo and Ms. Manning discussed the impact of SMWVBE efforts in spend, awards, activities, tier 2, local impact, and noted that the staff took deliberate measures to ensure the design and construction of the Hilliard Clinic to reflect the diversity of its patients and staff members.

RECOMMENDATION: This report was provided for informational purposes only.
 ACTION: No action was required by the Board of Managers.
 EVALUATION: Payments to subcontractors are 93 percent complete as of May 15, 2018.
 FOLLOW UP: None.

DELIVERY SYSTEM REFORM INCENTIVE PAYMENT PROGRAM (DSRIP) 2.0 – ED BANOS/ROBERTO VILLARREAL, M.D./MONIKA KAPUR, M.D.

SUMMARY: The original DSRIP structure was in place through September 30, 2017, and is internally referred to as DSRIP 1.0. Dr. Villarreal provided the Board of Managers with details pertaining to the five year extension of the DSRIP program, which has been approved by CMS for the period of October 1, 2017 through September 30, 2022. This extension period coincides with Demonstration Years DYs 7-11 and is internally referred to as DSRIP 2.0. DSRIP 2.0 represents the evolution from project specific healthcare transformation to system-wide healthcare transformation, and focuses on improvement of health outcomes. The Health System has 33 outcome measures with goals and incentives linked to Medicaid/Uninsured Population. DSRIP 2.0 is organized into four categories with each category allocated a percentage of the total financial incentive per year:

Category Description	DY7	DY8
Required Plan Update Submission	20%	N/A
Category A – Required Reporting	0%	0%
Category B – Medicaid Low Income Uninsured Maintenance	10 %	10%
Category C - Measure Bundles: Outcome Measures	65%	85%
Category D - Population Health Measures	5%	5%

Health Outcomes - Highest percentage of incentive, organized into measure bundles, Medicaid / Uninsured Population. To satisfy the requirements of Category C (Measure Bundles), the Health System is required to select system-level outcome measures and achieve measure goals specific to the Medicaid Low Income Uninsured population, which is the DSRIP program's target population. DSRIP 2.0 organizes measures into *Measure*

Bundles, which are groupings of measures that share a unified theme, apply to a similar population, and are impacted by similar improvement activities. The Health System has selected the following:

Measure Bundles	# of Measures
Improved Chronic Disease Management: Diabetes Care	- 6
Improved Chronic Disease Management: Heart Disease	- 5
Primary Care Prevention: Healthy Texans	- 9
Hepatitis C	- 4
Pediatric Primary Care	- 9
Total	33

Dr. Villarreal provided the following diabetes bundle example:

Health outcome/measure: Comprehensive diabetes care - foot exam

Health outcome's intent: Increase percentage of adult diabetic patients (type 1 and 2) who receive foot exam

Baseline year: 2017 – 50 percent

Oversight of the Health System's DSRIP 2.0 projects is provided by George Hernandez and Edward Banos. Dr. Villarreal is responsible for program management, report development, report validation, serves as HHSC's primary point of contact, and coordinates communication and activities among departments. Dr. Monika Kapur, in conjunction with assigned executive/director representatives, is responsible for driving activities to successfully meet measure outcome goals.

RECOMMENDATION: This report was provided for informational purposes only.

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

EVALUATION: None.

FOLLOW UP: None.

ADJOURNMENT:

There being no further business, Mr. Adams adjourned the public Board meeting at 3:20 p.m.

Jim Adams
Chair, Board of Managers

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

Sandra D. Garcia, Recording Secretary