



**BEXAR COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS**

Tuesday, October 31, 2023
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
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
Carol Huber, Deputy Chief Public Health & Equity Officer, Institute for Public Health, University Health
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health
Leni Kirkman, Executive Vice President, Chief Marketing, Communications & Corporate Affairs Officer
Robert Leverence, MD, Vice Dean for Office of Clinical Affairs & Executive Director, UT Health San Antonio
Richard Nutall, Vice Dean Finance and Administration, UT Health SA
Michael Little, MD, President, Medical/Dental Staff, University Health; and Associate Professor, Department of Anesthesiology, UT Health SA
Serina Rivela, Vice President / Chief Legal Officer, University Health
Joshua H. Nieto, General Counsel, Chief Compliance/HIPAA Officer, University Health
Bill Phillips, Executive Vice President/Chief Information Officer, University Health
Katherine Reyes, Senior Vice President, Pre-Acute Services, Robert B. Green Campus
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
Theresa Scepanski, President, Chief Executive Officer, Community First Health Plans
Daverick Isaac, Senior VP, Chief Financial Officer, Community First Health Plans
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
And other attendees.

CALL TO ORDER:

Mr. Adams called the Board meeting to order at 6:02 pm

INVOCATION AND PLEDGE OF ALLEGIANCE — JIM ADAMS, CHAIR

Invocation – Heather Dobie, Oak Meadows United Methodist Church — *Jim Adams, Chair*

Mr. Adams led the pledge of allegiance.

PUBLIC COMMENT: None.

APPROVAL OF MINUTES OF PREVIOUS MEETING: September 19, 2023 meeting

SUMMARY:	The minutes of the Board meeting of Tuesday, September 19, 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 Dr. Cohen, SECONDED by Ms. Jasso, and PASSED UNANIMOUSLY .
EVALUATION:	None.
FOLLOW UP:	None

Report from UT Health San Antonio — *Robert Leverence, Vice Dean for Office of Clinical Affairs*

SUMMARY: Dr. Leverence provided a brief update to the group. Dean Hromas and Dr. Leverence took a field trip to the Retama area near our future hospital to potentially build a medical office building to compliment the new hospital and found some sites that may work and will continue to move forward as well.

Dr. Little commented on how busy things have been and he wanted to acknowledge the Professional Staff Services department, Christopher Copeland and his team on their efforts of On-boarding new medical staff, Physicians, Advance Practice Providers and Residents.

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 September 25, 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 October 3, 2023, 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 September 25, 2023 and reviewed proposed revisions to Delineation of Privilege and the Professional Performance Evaluation Report and forms. In its meeting of October 3, 2023, 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 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 3.7, 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.

Consideration and Appropriate Action Regarding the 3rd Quarter 2023 Investment Report — *Reed Hurley*

SUMMARY: In total, the value of all invested funds as of September 30, 2023, was \$2,163,810,722 consisting of University Health, Project, Certificate, LPPF and Community First Funds. The reports include all information required by the Texas Public Funds Investment Act. In addition, the University Health and Community First portfolio reports have been provided separately. The portfolios earned \$25,368,386 of interest income during the third quarter, nearly 7% higher than the previous quarter's \$23,655,656, and more than 2½ times the same period a year ago as higher interest rate have dramatically improved investment earnings.

As of September 30, 2023, the University Health portfolio for operations (excluding Community First and the debt related funds) was valued at \$1,260,982,306. The portfolio, consisting of the Operating, Contingency, Capital and Tax Funds, had a weighted average yield of 4.36% and a weighted average maturity of 265 days. The portfolio has fallen behind the 6-month Constant Maturity Treasury (CMT) benchmark, which yielded 5.38%, and is below the 1-year CMT benchmark's 4.93% yield.

University Health also collects property taxes for debt service which are segregated into the Certificate Fund. The amount held in this account as of September 30, 2023, was \$3,953,144 with a weighted average yield of 5.32%. The Certificate Fund monies are held in highly liquid, short-term investments for debt service payments on February 15, 2024.

Yields were up sharply over the quarter, with much of the increase occurring at the long end of the yield curve as investors worried about the massive federal debt and factored-in the heightened possibility that inflation could linger along with surprisingly resilient consumer demand. Two-year Treasury notes reached cycle highs just below 5.20% before settling at 5.04% to close the quarter. The 10-year T-note rose 73bps to close at 4.57%, the highest level since 2007.

Consideration and Appropriate Action Regarding an Agreement between Community First Health Plans, Inc. with Healthmine Services, Inc., for an Auto-dialer Software System— Theresa Scepanski

SUMMARY: In collaboration with the University Health Procurement Department, the contract for an Auto-dialer Software System was competitively bid on July 3, 2023. A total of two (2) responses were received from Healthmine Services, Inc., and IntelePeer. The bid submissions were compared utilizing a decision matrix and reviewed for responsiveness to the request for proposal (RFP) specifications. The bids were then equally weighed based on administrative and financial criteria.

After careful consideration and review of the proposals submitted, Healthmine Services, Inc. provided Community First with the best overall value and solution based on the following key strengths: (1) a well-designed solution that meets all specifications and requirements, (2) extensive implementation support, (3) implementation timeline meets requirements, (4) platform capabilities exceed Community First deliverables, (6) National Committee for Quality Assurance (NCQA) Accredited and; (5) highly competitive fees.

The requested contract with Healthmine Services Inc. is for a three-year period. The total estimated cost is \$563,940 over the three-year contract period (including one-time implementation fees). Services and annual fees are illustrated below:

NEW SERVICES	FEES YEAR 1	TOTAL (3-YEAR PERIOD)
One-time Implementation Fee	\$27,000	\$27,000
Campaigns, Caller ID Branded Text Display, Spam Remediation	\$178,980	\$536,940
Total Cost	\$205,980	\$563,940

This is a planned expense and funding is included in the Annual Operating Budget. The requested contract shall be for a three-year term beginning January 1, 2024, and ending December 31, 2026, unless earlier terminated pursuant to the Community First Health Plans, Inc., Standard Purchase Terms and Conditions.

Healthmine Services Inc. has 104 employees. The workforce composition data is as follows:

	American Indian	Asian American	African American	Hispanic	White	Two or More Races	Unspecified	TOTAL
Female Total	0	2	3	4	30	1	9	49
Male Total	0	1	2	3	35	2	12	55
TOTAL	0	3	5	7	65	3	21	104
	0%	2.88%	4.81%	6.73%	62.50%	2.88%	20.20%	100.0%

Consideration and Appropriate Action Regarding an Agreement between Community First Health Plans, Inc. and Hyland Software, Inc. for OnBase Software for Document Archiving, Processing, and Retrieval and for Maintenance and Support Thereof — Theresa Scepanski

SUMMARY: University Health has used the OnBase software solution for more than 10 years experiencing positive results in business workflows and operations. In collaboration with the University Health Procurement and Legal Services Departments, Community First has engaged Hyland Software Inc., to establish an agreement that will meet our operational needs. Implementing this software solution will meet our goal to capture, manage, access, automate, integrate, measure, and store information to inform critical decision-making by securely receiving mission-critical content from our Provider Network such as:

Appeals and Grievances: Accurately triage, manage, and document every appeal and grievance. Connect to our core operating platform, track status, and deadlines, generate letters, and view real-time dashboards to ensure audit-friendly, compliant processes.

Claims: Streamline internal processes by securely capturing data from paper CMS 1500s and UB04s to avoid manual data entry. Output data directly into an 837 EDI file and store images directly in an image repository. Expedite suspended claims processing and auditing with automated workflows.

Claims Review: Request medical documentation from Providers through OnBase workflows. At times, Community First will request the medical records of Providers based on the claim type. The secure electronic solution eliminates delivery through faxing and postal mail.

Utilization Management: Further reduce manual data entry by automating the capture, indexing, and attachment of medical documentation for new and existing clinical requests. This will allow our nurse case managers to focus on member healthcare by providing a complete view of documents integrated with our medical management application.

Information Technology: Integrates with our existing systems to provide staff with access to critical documents from within a core screen. Expedites processes by automatically routing exceptions to end users and queues.

The requested contract with Hyland Software Inc. is for a three-year period. The total estimated cost is \$595,419 over the three-year contract period (including one-time implementation fees). Services and annual fees are illustrated below:

NEW SERVICES	FEES YEAR 1	FEES YEAR 2	FEES YEAR 3	TOTAL (3-YEAR PERIOD)
One-time Implementation Fee	\$182,200			\$182,200
SaaS OnBase Licenses, Storage, Robotic Process Automation	\$128,550	\$137,515	\$147,154	\$413,219
Total Cost	\$310,750	\$137,515	\$147,154	\$595,419

Board of Managers Meeting

Tuesday, October 31, 2023

Page 6 of 13

This is a planned expense and funding is included in the Annual Operating Budget. The requested contract shall be for a three-year term beginning January 1, 2024, and ending December 31, 2026, unless earlier terminated pursuant to the Community First Health Plans, Inc., Standard Purchase Terms and Conditions.

Hyland Software Inc. has 2,509 employees. The workforce composition data is as follows:

	American Indian	Asian American	African American	Hispanic	White	Two or More Races	Unspecified	TOTAL
Female Total	1	41	39	40	714	17	10	862
Male Total	3	78	66	74	1,346	29	44	1,640
Gender Not Disclosed					7			7
TOTAL	4	119	105	114	2,067	46	54	2,509
	0.2%	4.7%	4.2%	4.5%	82.4%	1.8%	2.2%	100.0%

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

SUMMARY: The Purchasing Consent items generally contain supply and third party service contracts that are ordinary for daily business operations. The Consent Agenda is normally approved with one motion and vote, but any of the individual items can be selected or pulled for detailed Board discussion and action.

Analysis:

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 October 2023 includes 25 proposed contracts for Board of Managers action. The total requested Board of Managers approval for these 25 contracts is \$22,278,260. Additional Presented contracts during the October 2023 Board of Managers meeting total \$178,120,960 and are considered for approval separate from the Purchasing Consent.

University Health’s Purchasing Consent attachment for the month of October 2023 includes 25 proposed contracts for Board of Managers action. The total requested Board of Managers approval for these 25 contracts is \$22,278,260. Additional Presented contracts during the October 2023 Board of Managers meeting total \$178,120,960 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 \$22,278,260.

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

EVALUATION: None.

FOLLOW UP: None

Action Items:

Consideration and Appropriate Action Regarding Selected Purchasing Items:

Consideration and Appropriate Action Regarding the Master Health Care Services Agreement with UT Health San Antonio — *Edward Banos*

SUMMARY: The purpose of the Master Health Care Services Agreement (MSA) is to ensure that qualified health care professionals are available to assist in the diagnosis and treatment of patients at University Health facilities. In addition, the agreement provides a fair and legally compliant mechanism that financially supports UT Health San Antonio professionals for services rendered. The UT Health San Antonio practice income does not generate sufficient revenue to cover costs despite diligent and prudent billing and collection practices. In large part, this is the result of three factors. First, Texas has the highest percentage of uninsured persons of any state in the country. Secondly, existing Texas Medicaid programs for pregnant women and children reimburse providers like UT Health San Antonio less than the cost of providing the services. Finally, state appropriations for the Long School of Medicine and its physicians are not adequate to support the needs of the academic clinical enterprise.

The current Master Health Care Services agreement with UT Health San Antonio expired August 31, 2023. The Master Health Care Services agreement is composed of financial compensation to support physician services, on-call medical coverage, and administrative services provided by UT Health San Antonio.

The annual amount for these services for the 2024 agreement is \$157,425,568. These services are determined with collaborative input by each UT Health San Antonio department and University Health administration. The agreement provides attending physician inpatient coverage at University Hospital 24/7/365 days a year. In addition, attending physicians support University Health’s outpatient resident specialty care clinics located at the Robert B. Green Campus, Texas Diabetes Institute, and at University Hospital.

In total, this agreement provides support for the following UT Health San Antonio departments:

- Medicine (including all medicine sub-specialties) \$44.1 million
- General Surgery/Trauma/Vascular \$21.3 million
- Emergency Medicine \$14.4 million
- Pediatrics \$13 million
- Radiology \$11.2 million

The maximum annual amount payable to UT Health San Antonio for the 2024 MSA is not to exceed \$157,425,568. This is a net decrease of \$10,376,689 from the current 2023 agreement, which totaled \$167,802,257, for the reasons below:

- Elimination of MSA support paid to UT Health San Antonio for Anesthesia, which was recently leased to University Health
- Hiring of two (2) Advanced Endoscopists with UMA, these services were previously provided by UT Health San Antonio in the MSA
- The anticipated leasing of the UT Health San Antonio Pediatric ENT services in January 2024

These changes account for a total reduction of \$24,160,722 from the previous year’s MSA. These decreases in the MSA will increase lease expenses and direct hire salary with UMA. Factoring in these reductions from the previous MSA, the net increase in MSA support is \$13,784,033 or 8.2%.

Year	Amount	% Change
2023 MSA	\$ 167,802,257	
2024 MSA	\$ 157,425,568	
2024 Services removed from MSA	\$24,160,722	
2024 Adjusted MSA with removal added back	\$ 181,586,290	
2023 Difference from 2024 adjusted	\$ 13,784,033	8.2%

The term of this agreement is from September 1, 2023 through August 31, 2024. The total expense for the twelve-month term is an amount not to exceed \$157,425,568.

RECOMMENDATION: Staff recommends Board of Managers’ approval to enter into the Master Health Care Services Agreement with UT Health San Antonio for the twelve-month period from September 1, 2023 through August 31, 2024 in an amount not to exceed \$157,425,568 and to authorize the President and Chief Executive Officer to execute any documents necessary to consummate said agreement.

Dr. Cohen commented on the subsidizing of the departments. Mr. Adams commented on metrics. Mr. Banos responded on the individual metrics set up by the departments that are part of the attachments to the contracts. Some of the key departments such as process patient flow, we can see that the discharges are done in a timely manner so that the percentage of orders are in by 10:00am. Additionally we look at the ER metrics, patients that are turned around and leaving in a certain amount of time, block time utilization in the OR room per case per individual doctors and their practices. Various other metrics are observed in all departments in an effort to improve patient process flow.

Further discussions ensued on staff turnover, adding staff due to the small size of a various departments to include discussion on overhead and the Lease of Physicians and supporting of the Academic side of UT Health.

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 Discussion Regarding Community First Health Plans, Inc.'s Preliminary Operating and Capital Budgets for Fiscal Year 2024 — Theresa Scepanski/Daverick Isaac

SUMMARY: Throughout Fiscal Year (FY) 2024, Community First will manage the healthcare needs for an expected average consolidated membership of 184,265 persons while delivering a budgeted underwriting gain of \$9,464,679. The Net Income budget which includes Investment Income, Premium Deficiency Reserve, Federal Income Tax and the underwriting gain is \$15,116,255.

The Executive Management team has considered and incorporated into the preliminary FY 2024 Budget all necessary resources that will enable Community First to achieve its financial targets while still delivering operational excellence and providing quality care. The goals and strategic priorities include:

- 1) Expand market share in the STAR, STAR Kids, and CHIP lines of business as it relates to membership.
- 2) Increase membership in Medicare Advantage, Medicare Dual Special Needs Plan (D-SNP), and Individual Plans.
- 3) Implement STAR+PLUS for an anticipated September 1, 2024 go live.
- 4) Continue development and implementation of advanced alternative payment models and expansion of the provider incentive program.
- 5) Enhance and expand coordination and integration with University Health in support of ongoing evolution towards an industry-leading integrated delivery system.
- 6) Enhance and expand advanced financial and medical economic analytics, including predictive modeling and risk score optimization.
- 7) Continue to improve member and provider satisfaction, and quality medical outcome measures.

The expected change in membership is due to several factors:

- Reinstatement of the Health & Human Services Commission (HHSC) enrollment and disenrollment procedures following the end of the Public Health Emergency.
- Continuing the diversification strategy by expanding Medicare Advantage, Medicare D-SNP, and Individual Plans.
- Execution of the STAR+PLUS beginning September 1, 2024.

The FY 2024 budgeted salaries reflect an average merit increase of 3.0% that is based on the employee's annual performance evaluation date.

Significant changes in the FY 2024 Administrative Expense budget compared to the FY 2023 Outlook include:

- 1) Salaries and Benefits increased approximately \$6.2M due to:
 - a. Additional FTEs
 - b. Market Rate Adjustments
 - c. STAR+PLUS Implementation

- 2) Marketing (market outreach, advertising, agency, sponsorships, value adds, etc.) increased by approximately \$4.2M due to enhanced marketing strategies for STAR+PLUS, Medicare Advantage, D-SNP, and Individual Plans.
- 3) Computer licensing and maintenance increased by approximately \$3.8M due to the continued enhancement of the application systems and PC/Laptop refresh.
- 4) Postage and Supplies increased by approximately \$800K due to enhanced marketing and outreach initiatives.
- 5) Consulting services increased approximately \$1.2M due to departmental support in Executive, Information Systems, and Business Development for enhancements and implementation of services.
- 6) Execution of STAR+PLUS beginning in September 1, 2024, \$8.2M.

Investment Income for FY 2024 is budgeted at \$3.8M and is based on projected assets and yields consistent with the Community First investment policy.

RECOMMENDATION: This information is presented for review and discussion. The Community First Operating and Capital budget was presented and approved by the Community First Health Plans, Inc., Board of Directors on October 27, 2023. Staff will present the proposed, consolidated Operating, Debt Service and Capital Budgets for Fiscal Year 2024 to the Board of Managers in November 2023, for approval and endorsement for Bexar County Commissioners Court for their final approval in December 2023.

ACTION: Presentation was information only as stated in Recommendation Summary. No action needed at this time.
EVALUATION: None.
FOLLOW UP: None

Consideration and Discussion Regarding Bexar County Hospital District d/b/a University Health's Preliminary Operating, Debt Service and Capital Budgets for Fiscal Year 2024 — *George B. Hernández, Jr./Reed Hurley*

SUMMARY: The preliminary 2024 University Health less Community First budget was developed using the Triple Aim Plus as our guiding principles. Improving quality, safety and outcomes, improving the patient experience, improving efficiencies, and improving access to care, were all taken into consideration during the budget planning process. The preliminary 2024 budget incorporates many known or expected changes for 2024. These include inflation impacts, changes in Medicaid supplemental funding, major projects, changes in patient volume, and labor shortages.

The preliminary 2024 budget reflects Total Operating Revenues of \$2.26 billion and Total Operating Expense of \$2.17 billion. Operating Income of \$91.5 million and a bottom line after non-operating items of \$25.6 million. The table below shows a high level Income Statement for the 2024 preliminary budget compared to projected 2023.

University Health (Less Community First)	2023 Projected	2024 Preliminary Budget	Variance from Projected	% Variance
Dollars in Millions				
Total Operating Revenue	\$2,170.1	\$2,262.5	\$92.4	4.3%
Total Operating Expense	\$1,951.0	\$2,171.0	\$220.0	11.3%
Gain/(Loss) from Operations	\$219.0	\$91.5	(\$127.6)	(58.2%)
Depreciation Expense	(\$96.5)	(\$126.4)	(\$29.9)	30.9%
Other Non-Operating	\$72.4	\$60.5	(\$11.9)	(16.4%)
Total Non-Operating Revenue/Expense	(\$24.2)	(\$65.9)	(\$41.7)	(172.7%)
Bottom Line Excluding Debt Service	\$194.9	\$25.6	(\$169.3)	(86.9%)
Debt Service	\$87.6	\$99.6	\$12.0	13.7%
Capital Requirements	\$44.8	\$46.7	\$1.9	4.3%

The Capital Committee, working with the area Vice Presidents, prioritized the 2024 capital request. The capital budget for 2024 is recommended at \$46.7 million, which is \$1.9 million higher than the 2023 routine capital budget. In prioritizing the capital needs for 2024, the Capital Committee met and focused on items that were considered as “Essential: Cannot Function Without,” “Important: Necessary for Improvement,” and “Proactive: Necessary to Avoid Problems.” A summary of the capital by priority category is in the following table:

Exhibit 8 includes the detail of capital requests for the Clinical Services Division.

2024 Routine Capital Requirements				
Priority	Mandated (Regulatory Safety & Required Maintenance)	Replacement	Strategic (New Service / Expansion)	Grand Total
Essential: Cannot Function Without	\$ 8,224,953	\$ 13,773,007	\$ 4,514,074	\$ 26,512,034
Important: Necessary For Improvement	\$ 1,360,053	\$ 6,504,468	\$ 7,217,135	\$ 15,081,656
Proactive: Necessary To Avoid Problems	\$ 3,346,116	\$ 1,567,442	\$ 231,040	\$ 5,144,597
Total Clinical Services	\$ 12,931,122	\$ 21,844,916	\$ 11,962,249	\$ 46,738,287

The required principal and interest payments on University Health’s outstanding bonds due in 2024, is \$99.6 million. This amount is \$12.0 million higher than 2023 debt service. The increase is due to the additional \$200 million in bonds issued in 2023 for the Community Hospitals project and a defeasance of \$8.7 million of existing bonds to support a lower total interest cost on the new debt. The Commissioners Court approved the Debt Service tax levy of \$96.3 million and the planned defeasance on September 12, 2023.

RECOMMENDATION: This information is presented for review and discussion only. On November 14th, Staff will present the proposed consolidated Operating, Debt Service and Capital Budgets for Fiscal Year 2024 to the Board of Managers for approval and endorsement to Bexar County Commissioners Court for final approval on December 12, 2023.

Dr. Cohen asked about the RBG building as future plans for it after sustaining damage from the earthquake? Mr. Hernández commented that we are working with the City Architects to ask for permission to remove the two wings keep the historic structure is the main building was built in 1917 one wing was built 1930s and the second wing was built in the 1950s. Those wings are not repairable. The historic building is completely empty. We are working with the Historic commission and the Architects and hope we can keep the historic building. When permission has been given, we will update to the board.

ACTION: Presentation was information only as stated in Recommendation Summary. No action needed at this time.

EVALUATION: None.

FOLLOW UP: None

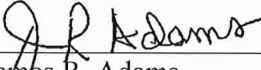
Presentations and Education: None at this time.

Information Only Items:

- A. Update on the Women's and Children's Hospital and Associated Projects — *Don Ryden*
- B. Update on the Community Hospitals and Associated Projects — *Don Ryden*
- C. Update on University Health Foundation — *Sara Alger*
- D. Report on Recent Recognitions and Upcoming Events — *Leni Kirkman*

Adjournment — *Jim Adams, Chair*

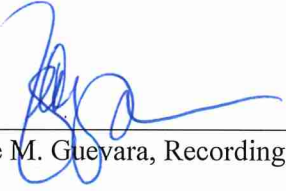
There being no further business Mr. Adams adjourned the public meeting at 7:44pm.



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.

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.