



**BEXAR COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS**

Tuesday, September 28, 2021
6:00 p.m.
Cypress Room, University Hospital
4502 Medical Drive
San Antonio, Texas 78229

MINUTES

BOARD MEMBERS PRESENT:

James R. Adams, Chair
Ira Smith, Vice Chair
Margaret A. Kelley, MD
Anita L. Fernández
Jimmy Hasslocher
L.P. Buddy Morris

BOARD MEMBERS ABSENT:

Roberto L. Jimenez, MD, Immediate Past President

OTHERS PRESENT:

George B. Hernández, Jr., President/Chief Executive Officer, University Health
Bryan J. Alsip, MD, Executive Vice President/Chief Medical Officer, University Health
Antonio Arrey, Special Assistant to the 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
William Henrich, MD, President, UT Health San Antonio
Rob Hromas, MD, Dean, Long School of Medicine, UT Health San Antonio
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health
Monika Kapur, MD, President/Chief Executive Officer, University Medicine Associates
Leni Kirkman, Executive Vice President/Chief Marketing, Communications & Corporate Affairs Officer,
University Health
Serina Rivela, Vice President/General Counsel, Legal Services, University Health
Michael Roussos, Administrator, University Hospital
Don Ryden, Vice President/Project, Design, and Construction, University Health
Travis Smith, Deputy Chief Financial Officer, University Health
Rajeev Suri, MD, Professor/Department of Radiology, UT Health; and President/Medical-Dental Staff,
University Health
Laura Garcia, Business Reporter, San Antonio Express-News
Juanita Salinas, Bexar County Resident
Cynthia Teniente-Matson, Ed.D, President, Texas A&M University-San Antonio
And other attendees.

CALL TO ORDER:

Mr. Adams called the meeting to order at 6:01 pm.

INVOCATION AND PLEDGE OF ALLEGIANCE

Mr. Brian Glover, University Health Chaplain, provided the invocation and Mr. Adams led the pledge of allegiance.

PUBLIC COMMENT None.

APPROVAL OF MINUTES OF PREVIOUS MEETING(S): AUGUST 31, 2021 (REGULAR MEETING)

SUMMARY: The minutes of the regular meeting held on Tuesday, August 31, 2021, were submitted for Board approval.
RECOMMENDATION: Staff recommends approval of the minutes as submitted.
ACTION: A **MOTION** to approve the minutes was made by Mr. Hasslocher, **SECONDED** by Dr. Kelley, and **PASSED UNANIMOUSLY**.
EVALUATION: None.
FOLLOW-UP: None.

REPORT FROM THE NOMINATING COMMITTEE ON THE ELECTION OF OFFICERS — JIMMY HASSLOCHER, CHAIR,

SUMMARY: On September 1, 2021, Mr. Adams appointed an ad hoc committee for the Nomination and Election of Officers comprised of Dr. Margaret Kelley, Mr. Buddy Morris, with Mr. Hasslocher serving as Chair. The Nominating Committee's role is to recommend a slate of officers for the Chair, Vice Chair, and Secretary positions.
RECOMMENDATION: After consulting with each member of the Board of Managers, the Nominating Committee recommends the following slate of officers for the upcoming term, September 2021 to September 2022:

 Mr. James R. Adams, Chair
 Mr. Ira Smith, Vice Chair
 Dr. Margaret Kelley, Secretary

ACTION: A **MOTION** to approve the Nominating Committee's recommendation was made by Ms. Fernández, **SECONDED** by Dr. Kelley, and **PASSED UNANIMOUSLY**.
EVALUATION: Mr. Adams thanked the Nominating Committee for their work and expressed that it is an honor and privilege to serve on the BCHD Board of Managers.
FOLLOW-UP: None.

REPORT FROM UT HEALTH SAN ANTONIO — WILLIAM HENRICH, M.D., PRESIDENT

SUMMARY:

Dr. Henrich announced that the Eileen Breslin, PhD., RN, Dean, School of Nursing, is retiring in March 2022, after 15 years. She has done a spectacular job at the School of Nursing and in partnering with University Health and working closely with Dr. Tommye Austin. She will be missed dearly as she has worked tirelessly for patients and students. There is an official search for her replacement underway. The search committee anticipates they will need 6 to 7 months to complete the search. Ms. Deborah Morrill, Vice President of Institutional Advancement/Chief Development Officer, will retire in October, also after 15 years to spend more time with family. She will serve as Special Advisor to the President after retirement for a number of months. Ms. Anamaria Repitti will be her replacement, she comes from the University of California in San Diego, she is currently a principal gifts officer, with a great deal of experience and is an exceptionally competent person. Dr. Henrich yielded the floor to Dr. Hromas who announced that last week, the School of Medicine chartered a Center for Health Analytics in conjunction with The University of Texas at San Antonio; its the way of the future and the Long School of Medicine needs to train physicians in this important area. UTSA has an existing strong, world-class data analytics and cybersecurity department. Mr. Bill Phillips and Dr. Bryan Alsip will be key players in this project with University Hospital data, which will not be an easy feat due to the separation of health data from financial data to keep it private. The School of Medicine has received final approval for the post-acute Hispanic COVID-19 study involving 990 individuals from South Texas who have had COVID and continue to have symptoms post COVID. UT Health will be one of only 6 to 8 sites in the country that has this co-hort for \$8 million/year. Researchers are trying multiple interventions to prevent these symptoms. Dr. Hromas is working to establish a Drug Development Consortium with Southwest Research Institute, UTSA and the South Texas Spinal Clinic. All parties have signed conflict of interest statements and clinical trials will be held at University Hospital. The Graduate School has one great candidate for the Department of Biochemistry Chair and three great candidates for the Department of Microbiology Chair. UT Health San Antonio has ended its fiscal year in the black.

RECOMMENDATION:

This report was provided for informational purposes.

ACTION:

No action was required by the Board of Managers.

EVALUATION:

Mr. Hernández expressed appreciation for Dr. Breslin help's during the early stages of planning and selecting architects for the women's and children's hospital, she was instrumental in this regard. He also noted that Mr. Mike Roussos, University Hospital Administrator, has accepted a position with Virginia Commonwealth University Medical Center and will leave University Health next week; he will relocate to Virginia closer to the holidays.

FOLLOW-UP:

None.

NEW BUSINESS

CONSENT AGENDA – JIM ADAMS, CHAIR

Dr. Kelley pulled Consent Item E., Consideration and Appropriate Action regarding a Resolution Supporting the Redesignation of University Hospital as a Level IV Maternal Care Program, for deliberation by the Board of Managers.

CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF MEMBERSHIP AND PRIVILEGES — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF

SUMMARY: Pursuant to Article III, Section 3.3-1 of the Medical-Dental Staff Bylaws, initial appointments and reappointments to the staff shall be made by the Board of Managers. The Board of Managers shall act on initial appointments, reappointments, or revocation of appointments only after there has been a recommendation from the Executive Committee. The Credentials Committee met on August 30, 2021, and reviewed the credential files of the individuals listed on the Credentials Report and the Professional Performance Evaluation Report provided to the Board. The Executive Committee of the Medical-Dental Staff met on September 7, 2021, and approved the Credential Committee Reports. The Executive Committee, in turn, recommends approval of clinical privileges for the list of providers presented to the Board of Managers today.

CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR PROFESSIONAL PRACTICE EVALUATIONS AND DELINEATION OF PRIVILEGES — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF

SUMMARY: As part of continuous quality improvement, and in alignment with The Joint Commission standards, University Health's Professional Staff Services Office monitors the clinical privileges of all privileged providers through the Professional Practice Evaluation process. Professional Practice Evaluation is a process whereby Medical-Dental staff member(s) are evaluated in regards to his/her competency and professional performance. New privileges, results of Peer Review, and assessment of Supervision are all examples of Professional Practice Evaluation. Also in alignment with The Joint Commission standards, the Professional Staff Services Office maintains Delineation of Privileges (DOP) for the Medical-Dental Staff. The Delineation of Privileges is a process in which the organized Medical-Dental staff evaluates and recommends an individual practitioner be allowed to provide specific patient care services with well-defined training criteria. The Credentials Committee met on August 30, 2021, and reviewed proposed revisions to Delineation of Privilege and the Professional Performance Evaluation Report and forms. In its meeting of September 7, 2021, the Executive Committee of the Medical-Dental Staff approved

the Focused/Ongoing Professional Performance Evaluation Report, and in turn, recommends approval by the Board of Managers

CONSIDERATION AND APPROPRIATE ACTION REGARDING REAPPOINTMENTS TO THE COMMUNITY FIRST HEALTH PLANS, INC., BOARD OF DIRECTORS — JIMMY HASSLOCHER, CHAIR, NOMINATING COMMITTEE

SUMMARY: The Bylaws of Community First Health Plans, Inc., state that the Board of Managers as the governing body for the sole member of the corporation shall approve the appointment of the Board of Directors to manage the affairs of the corporation. There are currently seven members on the Board of Directors. The following Board members have terms that will expire September 30, 2021: Ms. Anita L. Fernández and Mr. George B. Hernández, Jr. The Nominating Committee recommends the re-appointment of Ms. Fernandez and Mr. Hernandez, respectively, for two-year terms beginning October 1, 2021.

CONSIDERATION AND APPROPRIATE ACTION REGARDING CORPORATE POLICY NO. 2.08, GENERAL SYSTEM OF INTERNAL CONTROLS — LARRY WALLIS/ REBECCA O. CEDILLO

SUMMARY: Corporate Policy No. 2.08, General System of Internal Controls is a revised policy which identifies guiding principles, authority and responsibilities of the Internal Audit function. The internal control framework will ensure proper stewardship of University Health's assets and achievement of operational, compliance and reporting objectives. Staff recommends approval of Policy no. 2.08, General System of Internal Controls.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT AMENDMENT WITH STAR SHUTTLE, INC. FOR ADDITIONAL SUPPORT SERVICES RELATED TO THE COVID-19 PANDEMIC — DON RYDEN

SUMMARY: University Health engaged Star Shuttle, Inc. in October 2019 to provide shuttle services after an extensive review and evaluation of proposals received from three companies. Initially, this contracted service was based on a staffing and equipment matrix for 24/7/365 shuttle coverage to supplement patients/visitors access between the west parking garage and the hospital. With the arrival of COVID-19 pandemic protocols being implemented in the third quarter of 2020, this service changed from a supplemental transportation method to the only mode of transportation for all patients/visitors arriving and leaving the hospital. Those protocols increased the number of shuttles due to not only the increased number of passengers, but also each shuttle capacity was reduced to ensure social distancing. The initial matrix for shuttle services under the original scope of the contract was based on 18,720 hours per year. With the implementation of additional shuttle coverage for the reasons stated above, the revised matrix is now at approximately 26,312 hours per year, which represents a 41% increase in utilization. Consequently, because of the COVID-19 protocols, the contract with

Star Shuttle, Inc. needs to be increased by \$2.9M to \$6.3M. Staff recommends Board of Managers' approval of an amended contract with Star Shuttle, Inc., in the amount of \$6,266,790.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT AMENDMENT WITH STAR SHUTTLE, INC. FOR SHUTTLE SERVICES IN SUPPORT OF THE WOMEN'S AND CHILDREN'S HOSPITAL AND ASSOCIATED PROJECTS — DON RYDEN

SUMMARY: This is a temporary contract with Star Shuttle, Inc., only during the construction of the Women's and Children's Hospital and patient/visitor parking structure. The original contract was for \$3,372,470 and commenced in September 2019. The contract was increased by \$2,894,320 in 2021 to adjust for additional shuttles required for patients/visitors due to COVID-19 protocols. The revised contract is for a total of forty five (45) months with an extended termination date of June 2023, which coincides with the projected completion of the Women's and Children's Hospital. Staff recommends Board of Managers' approval of the amended contract total with Star Shuttle, Inc., for a total of \$7,467,990.

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FOLLOWING ITEMS WITH ACADIAN AMBULANCE SERVICE: A TWO-YEAR EXTENSION OF THE CONTRACT FOR GROUND AMBULANCE AND WHEEL CHAIR SERVICE; AND A TWO-YEAR EXTENSION OF THE LEASE FOR THE EMS SUBSTATION PREMISES AT THE ROBERT B. GREEN CAMPUS — TRAVIS SMITH

SUMMARY: As part of a conversion in 2018, Acadian Ambulance Service purchased University Health's fleet of ground ambulances to retain University Health's branding engagements and leased the Ambulance substation at Robert B. Green campus to maintain fast response times for University Health patients. Acadian Ambulance Service delivers efficient service to University Health patients under the terms of agreement 24 hours, 7 days a week dispatch service of Basic Life Support, Advanced Life Support, Medical Intensive Care Unit, Pediatric Intensive Care Unit, Neonatal Intensive Care Unit (BLS, ALS, MICU, PICU, NICU), Maternal and Bariatric levels, wheelchair service, and more. All of the services provided were outlined in detail in Mr. Smith's written report. Acadian Ambulance Service is a large, regional, employee-owned corporation with 325 staff members supporting Bexar County service. The workforce composition data for Acadian Ambulance Service in Bexar County was provided for the Board's review. Staff recommends the Board of Managers approve and authorize the President/Chief Executive Officer to execute the following agreements with Acadian Ambulance Service d/b/a Acadian Ambulance for the following agreements:

1. A two-year extension for ground ambulance and wheelchair transport service in an amount not to exceed \$2,600,000; and
2. A two-year extension of the lease agreement for the EMS Substation Premises located at Robert B. Green Campus for \$35,200 annually.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING PURCHASING
ACTIVITIES (SEE ATTACHMENT A) — ANTONIO CARRILLO/TRAVIS SMITH**

SUMMARY: A total of 23 contracts with a value of \$113,526,592 are being presented to the Board of Managers during the September 2021 meeting. The following contracts require approval by the Board of Managers: 16 consent contracts with a total value of \$25,397,907; and 7 presented contracts with a total value of \$88,128,685. During the month of September 2021, there were five (5) contracts classified as a Small, Minority, Woman, or Veteran Owned Business Enterprises (SMWVBE). The September SMWVBE Status Report reflects all items submitted for Board approval.

**CONSENT AGENDA
RECOMMENDATION:** Staff recommends Board of Managers approval of the items listed on the consent agenda.

**CONSENT AGENDA
ACTION:** A **MOTION** to approve staff's recommendation, with the exception of Consent Agenda Item E, was made by Dr. Kelley, **SECONDED** by Ms. Fernández, and **PASSED UNANIMOUSLY**.

**CONSENT AGENDA
EVALUATION:** None.

**CONSENT AGENDA
FOLLOW-UP:** None.

CONSENT AGENDA (CONTINUED) – Item No. E:

**CONSIDERATION AND APPROPRIATE ACTION REGARDING A RESOLUTION
SUPPORTING THE REDESIGNATION OF UNIVERSITY HOSPITAL AS A LEVEL IV
MATERNAL CARE PROGRAM — IRENE SANDATE/PATRICK RAMSEY, M.D.**

SUMMARY: University Hospital Maternal Care Program was designated a Level IV (Comprehensive Care) in Perinatal Care Region-P in April 1, 2019, with re-designation assessment due April 1, 2022. The Resolution presented this evening seeks support for re-verification as a Level IV Maternal Care Program. The purpose of the Maternal Level of Care Designation is to comply with legislation passed in 2013 and amended in 2015 which required the development of initial rules to create the neonatal/maternal level of care designations. The maternal level of care designation rule became effective on March 1, 2018. The designation for maternal level of care is an eligibility requirement for Medicaid reimbursement beginning September 1, 2020.

RECOMMENDATION: Staff recommends Board of Managers approval of the Resolution Supporting the Redesignation of University Hospital as a Level IV Maternal Care Program.

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

EVALUATION: Before yielding the floor to Dr. Ramsey, Dr. Kelley addressed attendees saying that it is a huge honor and accomplishment to be recognized as a

Level IV Maternal Care Program. This is a major initiative by the state to improve maternal health outcomes across the state. Dr. Kelley's intent is to make all Board members aware that this achievement is equal to the trauma services University Health is known for delivering. Dr. Ramsey and staff are a tremendous resource to community providers and serve as a referral center for critical care. Dr. Ramsey stated that University Hospital first received this designation in 2018 and it is a result of an amazing team that has been able to maintain this level of excellence. Ms. Sandate noted that the program has since elevated the level of maternal health and ancillary services offered to the community. She is so proud of the team.

FOLLOW-UP: None.

ACTION ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING COMMISSIONING OF A PEACE OFFICER FOR BEXAR COUNTY HOSPITAL DISTRICT — DEPUTY CHIEF SHERRIE KING FOR CHIEF A.J. SANDOVAL, III

SUMMARY: University Health is authorized by the Texas Health & Safety Code to appoint and commission peace officers to provide a safe and secure environment for patients, visitors, staff, and facilities. The Texas Code of Criminal Procedure identifies persons commissioned by the Board of Managers of University Health as peace officers. The credentials of Ms. Rubie Flores have been examined and certified by the Chief of Police as meeting all of the requirements of a University Health Peace Officer, and in addition, has completed all necessary training requirements.

RECOMMENDATION: Staff recommends Board of Managers approval to commissioning Ms. Rubie Flores as a Bexar County Hospital District Peace Officer.

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

EVALUATION: In Chief Sandoval's absence, Deputy Chief Sherrie King introduced Peace Officer candidate Rubie Flores to the Board of Managers. Mr. Hasslocher asked the Board members and staff keep Chief Sandoval in their thoughts and prayers. Mr. Adams asked the staff to send a letter from the Board recognizing Chief Sandoval's work and wishing him a speedy recovery.

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A LEASE AGREEMENT BETWEEN COMMUNITY FIRST HEALTH PLANS, INC. AND BUILDING ONE OAKS, LLC/4040 BROADWAY, LTD FOR AN OFFICE BUILDING AT 12238 SILICON DRIVE, SAN ANTONIO, TEXAS — THERESA SCEPANSKI/DON RYDEN

SUMMARY:

Community First Health Plans, Inc., moved to the Building One Oaks in August 2008 occupying 39,424 square feet (Building 1) and has since expanded the space by adding 13,574 square feet (Building 2), for a total of 52,998. This space was not optimal since it was not adjoined. The current lease expires May 31, 2022. Over the last two years, Community First has and continues to grow its line of business. Our goal is to house Community First under one location. A property search was conducted to locate potential new site options for Community First. Several sites were considered, as well as the current location to accommodate all staff and departments, and an adequate number of parking spaces for staff and visitors. The current Landlord offered to build a new space and offered the most competitive pricing per square footage. The total square footage is 69,978 square which will address our current needs and future growth. The blended base rental rate is \$19.72 (\$18.72/Building 1 and \$21.00/Building 5), with a 4% escalation every 2.5 years. The Landlord will also grant a one-time \$591,360 Tenant Improvement Allowance for the existing building and will turn-key the construction of “Building Standard” Tenant Improvements including soft costs for the new building (Building 5). In addition, the Landlord will provide Community First an HVAC allowance of \$230,461 plus the repair cost of \$4,897 for one unit identified in a recent HVAC Inspection report.

RECOMMENDATION:

Community First Board of Directors recommends the Board of Managers approve the lease agreement for a new 10-year term with Building One Oaks, LLC and 4040 Broadway, LTD for office building space located at 12238 Silicon Drive, San Antonio, Texas in the amount of \$22,353,085 and authorize the President/Chief Executive Officer to sign the agreement. In addition to the lease agreement, Community First Board of Directors recommends the Board of Managers approve miscellaneous costs for I.T. expenditures of \$388,310 and the purchase of furniture, signage and associated moving costs estimated at \$179,000.

ACTION:

A **MOTION** to approve staff’s recommendation was made by Mr. Hasslocher, **SECONDED** by Mrs. Fernández, and **PASSED UNANIMOUSLY**.

EVALUATION:

Mr. Hasslocher inquired on the comparison of the rent per square footage and the value of the building. Mr. Ryden replied that the building is worth half as much. He also expressed concerns with the Common Area Maintenance (CAM) charges and as a Tenant, this is what keeps him up at night. Mr. Hasslocher advised that staff ensure that the generators can handle both heat and cold. Caterpillar generators are highly recommended and used for the 911 Call Center (Emergency Communications Center).

FOLLOW-UP:

None.

At this time, Mr. Hernández moved Action Item No. 5 up on the agenda due to the arrival of his guest, Dr. Cynthia Teniente-Matson, President, Texas A&M University-San Antonio, and Mr. Adams introduced her to the Board of Managers.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A PURCHASE SALE AGREEMENT WITH SOUTHSTAR AT VERANO INVESTMENT, LLC TO PURCHASE APPROXIMATELY 68 ACRES OF REAL PROPERTY LOCATED AT ZARZAMORA ST. AND JAGUAR BLVD., SAN ANTONIO, BEXAR COUNTY, TEXAS — DON RYDEN

SUMMARY:

University Health engaged the healthcare consulting firm, Blue Cottage Consulting, Inc., to help develop, identify, and assess community based care delivery options in select sub markets through-out Bexar County. Specifically, Blue Cottage conducted a market analysis and population healthcare assessment in multiple San Antonio based sub-markets. There was a significant population of patients on the Southwest quadrant of Bexar County that meet the criteria for a suburban hospital environment. While staff continues to upgrade and expand existing clinics, the COVID-19 pandemic has highlighted the need for University Health to provide multiple sites of access for acute care services within Bexar County. Additional sites will help University Health to maintain its tertiary and quaternary care services, while creating capacity for the community's increase demand on medical services. In the southwest sub-market, an approximate 68 acres tract has been identified. There is a 600 acres master planned development now known as VIDA, and is located on the northeast corner of Jaguar Boulevard and South Zarzamora Street. It is a mix use development includes residential, multi-family, commercial and town center and is also adjacent to the Texas A&M University-San Antonio campus. Staff worked with Mr. Edward Kelley and Mr. Robert Wehrmeyer of TAB Real Estate Services, who both have extensive experience with identifying, analyzing, and negotiating large land parcels for its clients. They identified a 69 acre parcel as part of this development. The purchase price is \$10,400,000 based upon usable acreage of the tract. The acquisition of this property would position University Health to strategically locate a full service acute care hospital in this suburban area at a future date to be determined; thus, meeting the growing needs of the community.

RECOMMENDATION:

Staff recommends Board of Managers' approval to execute a Purchase and Sale Agreement with Southstar at Verano Investments, LLC in the amount of \$10,400,000 as noted herein, and all related required documents therein.

ACTION:

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

EVALUATION:

Mr. Hasslocher asked if the utilities were sufficient to support the future use of the proposed land acquisition. Mr. Ryden reassured the Board the utilities as well as many other issues will be fully vetted during the due diligence period in which we have negotiated an extremely generous timeline. The property will also need to be rezoned which

should be in place before closing. The staff was applauded for their initiative; this transaction is long overdue.

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A PROFESSIONAL SERVICES AGREEMENT BETWEEN UNIVERSITY MEDICINE ASSOCIATES AND MEDICAL CENTER CARDIOLOGY, PLLC D/B/A CARDIOLOGY PARTNERS OF SAN ANTONIO FOR OUTPATIENT CARDIOLOGY SERVICES — JIM WILLIS/MONIKA KAPUR, M.D.

SUMMARY: This is a request to renew a contract between University Medicine Associates and Cardiology Partners of San Antonio for core services of eight hours of physician coverage per day, Monday through Friday, excluding hospital holidays. Additional contract hours beyond core will be made available to ensure the cardiology queue of unseen patients remains at acceptable levels. Additional contract hours will be adjusted to correspond with consult demand. Consults will continue to be provided at the dedicated clinic located at University Hospital on the second floor of Rio Tower. This hospital location has been strategic for accepting patients directly from the Emergency Department during normal business hours and thus facilitating Emergency Department discharges for low risk cardiology patients. This clinic treated approximately 3,487 patients during 2020. University Health operates three locations providing cardiac consults. University Medicine Associates provides services at two locations to include University Hospital and TDI. UT Health provides services at the Robert B. Green Campus. In 2019, UMA treated 6,643 patients. Those numbers increased to 7,902 in 2020 representing an increase of 19 percent. In total, all cardiology consults (UMA and UT) increased from 8,925 to 11,126 or 25 percent. Below is a 2020 comparison of clinic volumes by location:

Cardiology Consult Volumes 2020

	Clinic Visits	Physician FTE	Mid-Level FTE	Total FTE	Visits per FTE
UMA-UH	3487	1.0		1.0	3487
UMA-TDI	4415	1.0	1.0	2.0	2208
UT-RBG	3224	1.0		1.0	3224

This contract will be for a period of 12 months beginning October 1, 2021. Costs remain unchanged from the initiation of the original contract in 2018 at \$287 per hour. This amount was confirmed to be at or below fair market value by VMG, an independent valuation consultant. University Health, through University Medicine Associates, will bill and collect for all services provided by Cardiology Partners of San Antonio. The total value for this contract is not to exceed \$968,000. This contract amount is a budgeted operational expense.

RECOMMENDATION: Staff recommends Board of Managers’ approval of the Professional Services Agreement between University Medicine Associates and

Cardiology Partners of San Antonio for outpatient cardiology services in an amount not to exceed \$968,000 for a 12-month period beginning October 1, 2021.

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

EVALUATION: Dr. Monika Kapur addressed the Board regarding the difficulty in finding cardiologists to see patients, only. The current UMA cardiologist sees patients, reads echos, and has other medical duties. Dr. Allen Anderson and UT Health Cardiology, have been great partners; however they are focused on performing procedural care, such as stress tests and echos, for inpatients at University Hospital. UMA physicians will see patients and make referrals to cardiology as needed. This contract is important because there are two Cardiology Partners physicians who split their time as one FTE at University Health and they want to keep their own procedural skill set up to date, so they can do this at their own practice and they give University Health the true clinical practice of seeing only patients. She further explained that the term of the renewal agreement is only for one year renewal because UMA's goal is to hire cardiology physicians to have better control of UMA's destiny. For example, she has two interviews scheduled for later this evening because UMA is always trying to recruit physicians. In addition, UMA will bill and collect for these patients and these funds will offset the hourly rates charged by Cardiology Partners; the payer mix for cardiology is pretty good, compared to other clinics. Mr. Adams encouraged Dr. Kapur to use resources as needed to attract the talent and build the UMA practice to properly handle medical surges that may occur.

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING AMENDMENTS TO THE MASTER HEALTH CARE SERVICES AGREEMENT AND ANNUAL OPERATING AGREEMENT WITH UT HEALTH SAN ANTONIO — ED BANOS

SUMMARY: Mr. Hernández commenced discussion of this item by acknowledging that COVID-19 has had a huge impact and is partially the cause for the delay of fully negotiating these agreements, and the reason for needing a four month extension to the contracts. Dr. Hromas acknowledged that COVID-19 has been a huge stress on staff and physician retention. We need assurances of the accuracy of the contracts and we need to get it right. Mr. Banos confirmed that all parties want the negotiations to be a win-win. There needs to be more time to ensure that all aspects of these three agreements, which includes the Master Health Care Services Agreement, Annual Operating Agreements for medical directors as well as the general support services for faculty physicians, fellows and non-physician staff as well as program development are fully analyzed. The four-month cost to University Health for extending this agreement is \$50,942,840. The extension also allows UT Health to earn up to \$3.5 million for meeting or exceeding clearly defined quality incentive metrics identified last year.

- RECOMMENDATION: Staff requests the Board authorize the President/CEO to extend the Master Health Care Services Agreement, the Annual Operating Agreement-Medical Director Services and the Annual Operating Agreement-General Services, with UT Health San Antonio, for an additional four months in an amount not to exceed \$56,982,272.
- ACTION: A **MOTION** to approve staff's recommendation was made by Hasslocher, **SECONDED** by Mr. Smith, and **PASSED UNANIMOUSLY**.
- EVALUATION: Mr. Morris stated that given the monetary value of these agreements, additional time and advance briefing is required. Board members agreed that before the new agreements go before the full Board for final approval in January, they need to be fully vetted through the Finance Committee and possibly other Board committees for full review of the contract details, pay structure and incentives. Mr. Adams again noted that the incentives need to trickle down to practitioners to ensure accountability. He is concerned that there has not been progress and staff needs to focus on quality metrics. Mr. Adams ended the discussion with the charge to staff to take University Health from good to great.
- FOLLOW-UP: As noted above.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH CALIPER CONTRACTING SERVICES, LLC FOR CLINICAL INTERIOR RENOVATIONS AT THE UNIVERSITY FAMILY HEALTH CENTER - SOUTHEAST — DON RYDEN

- SUMMARY: University Family Health Clinic-Southeast opened to the community in 1997; however, the facility has been neglected and has not undergone a significant interior renovation in over 20 years. The purpose of this facility investment project is to create an updated and modern clinical environment that is consistent with our newest Ambulatory clinics. Phase 1 and Phase 2 has been recently completed which included interior renovations to update all public areas (waiting rooms, public restrooms, furniture, etc.) and two (2) clinical areas on the first floor of the clinic to be standardized and consistent with our newest clinics. In addition the facility has received building envelope improvements to include window replacement, exterior painting and installation of a new roof system. This final Phase 3 interior renovation project will renovate and update the remaining clinical (non-public) areas on first and second floors. A RFP was solicited for contracting services with three firms responding. Staff has reviewed the Caliper Contracting Services, LLC, pricing for construction services and recommends approval of their proposal in the amount of \$1,060,498. This purchase will be funded from 2020 operational funds.
- RECOMMENDATION: Staff recommends Board of Managers approve the selection of Caliper Contracting Services, LLC, as Contractor for Interior Renovations at the University Family Health Center – Southeast, and authorize the President/CEO to execute a contract in the amount of \$1,060,498.

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

EVALUATION: None.

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FINANCIAL REPORT FOR AUGUST 2021 — REED HURLEY

SUMMARY: University Health's consolidated bottom line for the month of August 2021 was \$26.6 million, \$23.7 million better than the budget of \$2.9 million. Higher net patient revenue and supplemental funding revenues were the primary driver of the performance better than budget. In August, clinical activity (as measured by inpatient discharges) was down 8.5 percent for the month compared to budget, inpatient days were over by 3.0 percent. Community First Health Plans, Inc., (Community First) experienced a bottom line gain of \$4.3 million, which was \$2.3 million better than the budgeted gain of \$2.1 million. Community First fully insured membership was up 23.8 percent to budget due to the State not dis-enrolling members during the COVID-19 pandemic. This resulted in higher premium revenue. Performance was better than budget even with offsets for higher claims expense and provider incentives. Mr. Hurley reviewed significant items from the Monthly Consolidated Statement of Revenues and Expenses in detail with the Board of Managers.

RECOMMENDATION: Staff recommends Board of Managers approval of the financial report, subject to audit.

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

EVALUATION: Discussion ensued regarding average length of stay, which is close to 6.0 at this time, and inpatient census numbers. Activity at University Hospital has picked up significantly since the pandemic, with COVID patients staying an average of 9 days as compared to medicine patients whose stays average 4-5 days. From a census standpoint, University Health is beating the budgets set. Historically, University Hospital has been very close to budget year after year. The year to date census is 544 as compared to budget of 538; and prior year census was 480. Month to date census is 563 as compared to budget of 547. Mr. Hurley expects a high bottom line at the end of the year, and he notified the Board that DSRIP program will be extended one more year, which is approximately a \$62 million supplemental revenue stream for University Health. Also discussed was the \$10.8 million lower than expected employee compensation. Dr. Kelley asked how the staff would gage the increased cost of nursing next year. Mr. Hernandez informed the Board that nursing salaries were recently raised to remain competitive; however, University Health cannot compete with traveling agency nurses who are making \$101 to \$125/hour, with the agency charging \$150/hour. This year, University Health has benefited from the nurses provided by the state; however, approximately 60 registered nurses and 13 pediatric respiratory therapists have left for travel agency

jobs. Nurses are in high demand and at University Health can earn \$250 with extra shift bonuses and incentive pay so that they see a financial reward. Every hospital/clinic in the country is going through this. It is all about the money, no health insurance or retirement benefits are provided for nurses who agency work. Mr. Adams commended the staff for their work on the financial reports.

FOLLOW-UP:

None.

PRESENTATIONS AND EDUCATION:

THIRD QUARTER QUALITY REPORT — *BRYAN ALSIP, M.D.*

SUMMARY

Dr. Bryan Alsip presented Third Quarter 2021 Quality Metrics and a Year to Date summary including performance and updates regarding initiatives to improve publicly reported quality data in order to achieve the highest outcomes and to reduce or eliminate financial penalties. He outlined current trends in Mortality, Hospital Readmissions, Patient Safety Indicators, Hospital-Acquired Infections, and Sepsis bundle compliance, in detail. Dr. Alsip's presentation can be found as Attachment A to these minutes.

ACTION:

This presentation was provided for informational purposes.

EVALUATION:

None.

FOLLOW-UP:

None.

ROBERT B. GREEN CAMPUS MASTER PLANNING UPDATE — *DON RYDEN*

SUMMARY:

University Health engaged the architectural services of Munoz & Company in 2020 to assist in the evaluation of possible structural repair and rehabilitation of the East Wing of the Robert B. Green Historic Building. The original Robert B. Green Building was completed in 1917. The East Wing and West Wing were two main additions that were constructed in 1939 and 1954 respectively. The Historic Building has experienced numerous structural issues over the years. The East Wing has a failed structural system including foundation, columns and beams with on-going foundation movement linked to seasonal moisture variation in the soil. The floors of the East Wing have risen with a deviation of five (5) to six (6) inches at the east end of the wing. Due to the existing structural issues in the East and West Wings that have been identified from a safety perspective, attempting to stabilize the foundation and repair the structure is cost prohibitive. Consequently, demolition of the entire East and West Wing is the most cost effective alternative. Due to the historical significance of the Historical Building it is proposed to be refurbish future phase and finish out on each 5 floors and to later determine future use. Mr. Ryden then displayed to the Board the structural site of the buildings and facilities that are no longer functional and are recommended to be demolished. Munoz also studied the entire Robert B. Green campus consisting of approximately 24.44 acres, the Robert B. Green Clinical Pavilion, and the various other buildings located on the campus. The master planning study took into consideration the factors that help guide future growth and development

of this property and buildings. More specifically, the study identified site utilization options and capacity for future clinical and administrative buildings, parking, and open space design to best accommodate University Health's strategic plans for serving the community. Mr. Ryden displayed to the Board an illustration of the proposed 113,000 square foot medical building with adjoining garage. This report was provided for informational purposes only, as Munoz & Company continues its feasibility study and master strategic plan.

RECOMMENDATION:

ACTION:

EVALUATION:

FOLLOW-UP:

No action was required by the Board of Managers.

None.

None.

INFORMATION ONLY ITEMS:

UNIVERSITY HEALTH FOUNDATION REPORT — SARA ALGER
REPORT ON RECENT RECOGNITIONS AND UPCOMING EVENTS — LENI KIRKMAN
UPDATE ON THE WOMEN'S AND CHILDREN'S HOSPITAL AND ASSOCIATED
PROJECTS — DON RYDEN

SUMMARY:

Mr. Adams directed his colleague's attention to the informational items above. He asked that Board members review the written reports on their own time.

RECOMMENDATION:

ACTION:

EVALUATION:

FOLLOW-UP:

These reports were provided for informational purposes only.

No action was required by the Board.

None.

None.

ADJOURNMENT — JIM ADAMS, CHAIR

Mr. Adams asked Board members to email him if there are any requests for committee reassignments. He also complimented Dr. Hromas as a valued member of the team and his commitment to University Health is shown by his presence at the Board meetings. Great work leads to great achievements. Mr. Adam then yielded the floor to Mr. Roussos who is leaving University Health at the beginning of October for his new job President of Virginia Commonwealth University Medical Center. Mr. Roussos expressed his gratitude to Mr. Hernández, the Board and his counterparts at University Health, and UT Health faculty. He deeply appreciates the opportunity to serve and to grow, he is especially grateful that University Health has given him the time to expand upon his skillset which has attributed to the next phase his career.

There being no further business, Mr. Adams adjourned the meeting at 8:24 p.m.

James R. Adams
Chair, Board of Managers

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

Sandra D. Garcia, Recording Secretary