## **Board of Managers Meeting**

By Telephone Tuesday, 7/28/2020 6:00 - 8:00 PM CT

- 1. Call to Order and Record of Attendance *Presented By: Jim Adams, Chair* (:01)
- 2. Invocation Father Brian Garcia, Campus Priest for The University of Texas at San Antonio and Texas A&M University- San Antonio *Presented By: Jim Adams, Chair* (:03)
- 3. Pledge of Allegiance Presented By: Jim Adams, Chair (:01)
- 4. Special Recognition: Quarterly Employee Recognition Awards *Presented By: George B. Hernández, Jr./Board Members*

7.28.20 Employee Recognition 2nd Qtr 2020 - Page 4 7.28.20 EOQ Bios - Page 5

- 5. Public Comment: (:05)
- 6. Approval of Minutes of Previous Meetings: (:03)

June 23, 2020 (Regular Meeting)

June 30, 2020 (Regular Meeting)

6.23.20 minutes - Page 8

6.30.20 minutes - Page 21

- 7. Report from UT Health San Antonio Presented By: William Henrich, MD, President (:15)
  - A. Acknowledgement of Staff
  - B. Upcoming Events
- 8. New Business: *Presented By: Jim Adams, Chair* (:15) Consent Agenda
  - A. Consideration and Appropriate Action Regarding Medical-Dental Staff Recommendations for Staff Membership and Privileges *Presented By: Rajeev Suri, MD, President, Medical/Dental Staff 7.28.20 MD Staff Recommendations for Membership and Privileges Page 38*
  - B. Consideration and Approval of Medical-Dental Staff Recommendations for Staff Membership and Delineation of Privileges *Presented By: Rajeev Suri, MD, President, Medical/Dental Staff* 7.28.20 MD Staff Recommendations and Delineation of Privileges Page 164
  - C. Consideration and Appropriate Action Regarding Policy No. 4.06.01 Controlled Substance Diversion Prevention, Detection, Reporting, and Response Program *Presented By: Elliott Mandell/Rebecca Cedillo*

7.28.20 policy 4.0601 Cover - Page 225

7.28.20 Policy 4.0601 Controlled Substance Diversion - Page 227

D. Consideration and Appropriate Action Regarding Policy No. 5.12.01 Conflict-of-Interest in Research Presented By: Roberto Villarreal, MD/Rebecca Cedillo
7.28.20 Policy No 5.12.01\_Cover Memo\_Conflict of Interest in Research\_ - Page 232
7.28.20 Policy 5.12.01\_CONFLICT OF INTEREST IN RESEARCH - Page 234

E. Consideration and Appropriate Action Regarding Policy No. 9.01.02 Expanded Access and Use of Investigational Device, Drug, or Biologic Research *Presented By: Roberto Villarreal*, *M.D./Rebecca Cedillo* 

7.28.20 Policy 9.01.02 Cover Memo\_Expanded Acess - Page 245

7.28.20 Policy 9.01.02\_Expanded Access - Page 247

7.28.20 Policy 9.01.02\_Attachment I\_ - Page 261

F. Consideration and Appropriate Action Regarding Policy No 10.12 Peer Review Process *Presented By: Emily Volk, M.D./Rebecca Cedillo* 

7.28.20 Policy 10.12 Cover Peer Review - Page 262

7.28.20 Policy 10.12 Peer Review Process - Page 264

G. Consideration and Appropriate Action Regarding the 2nd Quarter 2020 Investment Report Presented By: Roe Garrett/Reed Hurley

7.28.20 Investments - Page 278

H. Consideration and Appropriate Action Regarding Purchasing Activities (See Attachment A) Presented By: Antonio Carrillo/Travis Smith

7.28.20 Purchasing activities - Page 318

- 9. Action Items: (:30)
  - A. Consideration and Appropriate Action Regarding Selected Purchasing Items:
    - (1) Consideration and Appropriate Action Regarding tConsideration and Appropriate Action Regarding an Amendment to the Lease with Maseho, Inc., Located at Corporate Square Tower, 4801 NW Loop 410, San Antonio, Texas *Presented By: Don Ryden 7.28.20 Lease Amend with Maseho Corp.Sq Page 330*
    - (2) Consideration and Appropriate Action Regarding Consideration and Appropriate Action Regarding an Authorization to Order Electrical Switchgear through CPS Energy for the Women's and Children's Hospital and Associated Projects *Presented By: Don Ryden* 7.28.20 CPS Energy LOI Page 333
    - (3) Consideration and Appropriate Action Regarding Consideration and Appropriate Action Regarding an Agreement with UT Health San Antonio for Radiation Therapy Services at the Mays Cancer Center *Presented By: Awoala Banigo*7.28.20 Radiation Safety with UT Page 336
    - (4) Consideration and Appropriate Action Regarding an Amendment to the Contract between Community First Health Plans and TriZetto Corporation for Medicare Advantage and Dual Eligible Special Needs Plans Infrastructure Enhancements *Presented By: Theresa Scepanski/Daverick Isaac* 
      - 7.28.20 TriZeto Corporation Contract Amendment Page 339
    - (5) Consideration and Appropriate Action Regarding an Extension of the Agreement with Luby's Fuddruckers Restaurants, LLC for Management of Hospital Bistro, Robert B. Green Café, and Texas Diabetes Institute Cafeteria *Presented By: Jim Willis* 7.28.20 Agreement Extension Luby's Page 344
  - B. Consideration and Appropriate Action Regarding the Financial Report for June 2020 *Presented By: Reed Hurley* 
    - 7.28.20 Financial Highlights and Exhibit A Page 348
    - 7.28.20 Financial Activities Page 352

#### 7.28.20 Financial Presentation - Page 359

#### 10. Presentations and Education:

A. Epic Electronic Health Record Project Update *Presented By: Bill Phillips/George B. Hernandez, Jr.* 

7.28.20 Epic Update - Page 368

B. Update on the Women's and Children's Hospital and Associated Projects *Presented By: Don Ryden* (:20)

7.28.20 Womens & Childrens Update - Page 370

7.28.20 WC Hospital Presentation - Page 375

#### 11. Information Only Items:

- A. Annual CareLink Report Presented By: Virginia Mika, PhD/Roberto Villarreal, MD 7.28.20 2019 CareLink Annual Report Page 386
- B. Community First Health Plans Bi-Annual Report Presented By: Theresa Scepanski 7.28.20 CFHP 2019 Annual Operations Report Page 399
- C. Report on Recent Recognitions and Upcoming Events Presented By: Leni Kirkman 7.28.20 Recent Recognitions Upcoming Events Page 411
- D. University Health System Foundation Update *Presented By: Leni Kirkman/Randy Harig* 7.28.20 Foundation Update Page 414 7.28.20 Foundation Update Page 417
- 12. Adjournment Presented By: James Adams, Chair

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.

Closed Meeting: A closed meeting will be held pursuant to TEX. GOV'T CODE, Section 551.072 to receive information to deliberate the purchase, exchange, lease or value of real property.

Courtesy Notice: A closed meeting will be held pursuant to TEX. HEALTH & SAFETY CODE, Section 161.032 to evaluate the quality of medical and/or health care services and receive records, information, or reports provided by a medical committee, medical peer review committee, or compliance officer.



## BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

## **Quarterly Employee Recognition Awards**

Professional: Joana Novodvorschi

(Nursing) Clinic Staff Nurse II, OB/GYN Emergency Services

Professional: Rishi Goswamy

(Non-Nursing) Senior Analyst, Operations Support

Management: Darrel Hughes

Pharmacy Programs Manager

Technical: Adrian O'Prey

Senior Registered Pharmacy Technician

Clerical Audrey Martinez

Registration Access Specialist, Renal Dialysis Southeast

Service: Ana G. Oliva

Environmental Associate, Environmental Services

Volunteer: Carolyn Grill

Volunteer, Volunteer Services

Provider: Olga Ali, PA

Physician Assistant, Detention Health Care Services - Adult

Team: The Clinical Pharmacy COVID-19 Team

Ana Franco-Martinez, Jose Gonzalez, Gloria Gutierrez Elizabeth Hand, Kristi Traugott, Amanda Fowler

All of this year's quarterly recipients will be our special honored guests at the Annual Recognition Awards Ceremony at the Omni on Thursday, February 25, 2021.

Employees of the Quarter receive a plaque, embossed pen and an opportunity to select one of numerous awards valued at \$100 on the Employee Recognition website.

Theresa Scepanski George B. Hernández, Jr.

Sr. Vice President/Chief Administrative Officer

President/Chief Executive Officer

## Employee of the 2nd Quarter – 2020

# Professional Nursing Joana Novodvorschi – Clinic Staff Nurse II – OB/GYN Emergency Services

During leadership rounds, many patients mentioned Joana by name and talked about the great patient experience she provided them. A patient said, "Joana made me laugh so much, I forgot about my labor pains". Another patient and their husband said, "We were in AWE when we saw Joana and she remembered us by name and our personal story. She gave us the birthing experience we wanted". Joana is a rehire and has been with the Health System for a total of 7 years.

#### **Professional**

Rishi Goswamy - Senior Analyst - Operating Room

Rishi has done an amazing job utilizing the First Case On-Time Starts and room Turn-Around Times to help facilitate improved Operating Room time and personnel utilization. He has used this data to troubleshoot and identify areas needing process improvement. Recently, Rishi created a report to maximize staffing during COVID. He always has an extremely positive, helpful attitude and continues to do such a fantastic job. Rishi has been with University Health System for 2 years.

#### Management

**Darrel Hughes – Pharmacy Programs Manager – Pharmacy Inpatient** 

Mr. Hughes has served as an invaluable leader. His previous experience as an emergency medicine pharmacist and expansive clinical knowledge has helped the Pharmacy Department adapt quickly to changes related to COVID-19. Mr. Hughes led a group to create and implement a number of COVID-19 medication guidelines for healthcare providers. He also worked with Pharmacy operations and clinical teams to adjust workflow, coordinate staffing, and manage drug inventory. Darrel is committed to motivating and mentoring the pharmacy team. Darrel has been with University Health System for 13 years.

#### **Technical**

Adrian O'Prey, Senior Registered Pharmacy Technician – Inpatient

Adrian has exceeded expectations in her role and epitomizes the UHS Pharmacy mission by consistently providing the highest level of quality Pharmaceutical Care to all patients within the University Health System. She is the dedicated Pharmacy Tech Trainer, she volunteers to enhance staffing and escorts the Pharmacists during Code Blue calls. Adrian has worked on process improvements for Inpatient Pharmacy operations/workflow to meet management goals and ensure patient safety. Adrian has been with University Health System for 4 years.

#### Clerical

#### Audrey Martinez - Registration Access Specialist - Renal Dialysis, Southeast

Audrey always goes above and beyond by volunteering to train new staff and diligently assisting her co-workers to screen patients, family and employees. Audrey always makes it a point for her co-workers to feel important and recognized by decorating the staff break room during each of their birthdays and by taking the lead on important events for each team to be recognized. Audrey is a great asset to the Health System and to the Southeast Dialysis clinic as she demonstrates proficiency and competency allowing her to share her core knowledge with others on the team. Audrey has been with the Health System for 2 years.

#### **Service**

#### Ana Gloria Oliva – Environmental Service Associate

Ana has exceeded expectations when it comes to job outcomes, leadership, being a team player and recognizing room for improvement. Ana not only goes out of her way to disinfect our treatment areas thoroughly but also strives to always make improvements. Ana cleans our facility Monday through Friday, but has now volunteered to come in on the weekends to ensure our facility is continuously sanitized to proper standards. Ana has been a beacon of light and hope during COVID. Ana has been with University Health System for 17 years.

# Volunteer Services Carolyn Grill

In December 2018, Carolyn "Carol" Grill joined the Volunteer Services department at University Health System. Carolyn volunteers two days a week to work the information desk and assisted microbiology during the first initial COVID-19 wave. She has volunteered in the NICU providing comfort and care to our tiniest patients. She works in the office, delivers patient mail, completes inventory, and even assisted Corporate Communications with the Shoe project which including sorting and delivering new shoes to employees. Carolyn has contributed over **245** volunteer hours to University Health System.

#### **Provider**

#### Olga Ali – Physician Assistant – Adult Detention Center

Olga is a knowledgeable professional and has a positive attitude toward staff and patients. She regularly volunteers to assist with patient care issues and will even come in on her days off to ensure patients receive the best care. Olga maintains excellent clinical control over her chronic care and urgent care patients. She implemented several process improvement initiatives in her assigned areas that improved efficiencies. Olga has practiced with University Health System for 5 years.

#### Team

#### Clinical Pharmacy COVID-19 – Pharmacy Inpatient

Comprised of: Ana Crystal Franco-Martinez, Clinical Specialist, Jose Gonzalez, Clinical Pharmacist, Gloria Gutierrez, Clinical Pharmacist Specialist, Elizabeth Hand, Clinical Specialist, and Kristi Traugott, Clinical Specialist

These team members worked together with other multidisciplinary teams to manage and resolve medication issues related to COVID. These efforts resulted in numerous resources for healthcare providers, including consensus treatment guides, strategies to optimize drug therapy, contributions to educational reference tools, and revisions to the Adult ICU/ED IV Drip Quick Reference. Lastly, the team worked with the Resuscitation Services Committee to create an Enhanced Isolation Code Blue process and Pocket Card for code responders to COVID-19 patients. The Pharmacy Inpatient Team has a combined service to University Health System of 71 years.



#### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

By Telephone

Tuesday, June 23, 2020 2:00 p.m. University Hospital 4502 Medical Drive San Antonio, Texas 78229

#### **MINUTES**

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

James R. Adams, Chair Ira Smith, Vice Chair James C. Hasslocher Roberto L. Jimenez, M.D, Immediate Past Chair Robert Engberg Margaret Kelley, MD Thomas ("TJ") C. Mayes, JD

#### **OTHERS PRESENT:**

George B. Hernández, Jr., President/Chief Executive Officer, University Health System
Bryan Alsip, MD, Executive Vice President/Chief Medical Officer, University Health System
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System
Ted Day, Executive Vice President, Strategic Planning and Business Development, University Health
System

Rob Hromas, MD, Dean, Long School of Medicine, UT Health, San Antonio Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System Bill Phillips, Senior Vice President/Chief Information Officer, Information Services, University Health System

Serina Rivela, Vice President/Chief Legal Officer, University Health System Rajeev Suri, MD, Professor/Department of Radiology; President, Medical/Dental Staff, University Health System

Don Ryden, Vice President/Project, Design, and Construction, University Health System James 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 2:01 pm. On behalf of the Board of Managers, he greeted and welcomed the two newly appointed Board members, Dr. Margaret Kelley and Mr. Thomas ("TJ") Mayes. He then yielded the floor to the Recording Secretary for the roll call to confirm a quorum. Dr. Jimenez was noted absent; and all other Board members, indicated "present." Upon confirmation of a quorum, Mr. Adams asked Board members to hold their questions until after each presentation. Mr. Adams noted that

while members of the public are not able to ask questions during today's meeting, should any citizen or member of the media have any questions or comments, he asked they be emailed to <a href="mailto:Public.Relations@uhs-sa.com">Public.Relations@uhs-sa.com</a>. This email address is on the Health System's corporate website in the Contact Us section. A staff member will follow up within a day or two.

#### INVOCATION AND PLEDGE OF ALLEGIANCE

Mr. Adams introduced Pastor Tom Robinson, Evangelical Lutheran Church of America, for the invocation and he led the pledge of allegiance.

#### PUBLIC COMMENT: None.

#### **APPROVAL OF MINUTES OF PREVIOUS MEETING(S):** May 19, 2020 (Regular Meeting)

SUMMARY: The minutes of the regular Board meeting of Tuesday, May 19, 2020,

were submitted for the Board's approval.

RECOMMENDATION: Staff recommended approval of the Board minutes as submitted.

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.

At this time, Mr. Adams asked Dean Rob Hromas to provide an update regarding the Long School of Medicine. Dr. Hromas addressed the COVID 19 surge of patients; the number of positive cases has increased more than 20-fold. He expressed gratitude for Mr. Mike Roussos, Dr. Bryan Alsip, and Dr. Emily Volk in their work with Dr. Bob Leverence to create a buffer regarding patient beds. The Health System has testing capacity and is helping the state with the unique ability to process over 2,000 Covid-19 test results in 24 hours. Elective surgeries have been postponed again. Currently there are no cases scheduled; therefore not cancelling. Masking is required of all patients and staff at UT facilities. This time around, staff is better prepared with more staff on hand, better testing, and personal protective equipment and supplies. Both entities are going all out with public service announcements to educate the public, with UT Health launching a social media campaign last week titled "Masking Saves Lives." People mask out of respect for their neighbors, to not make them sick. Regarding recent protests against racism and inequality, the Long School of Medicine held an event, "White Coats for Black Lives." Approximately 1,200 people attended; 150-200 faculty, 600 medical students, and 100 nursing students. It was a great crowd, UT Police were involved as well, they sponsored a hydration station, and the event was a tremendous show of unity for restorative justice. By the same token, UT Health San Antonio has added one full day of mandatory training for all students, faculty and staff on how to go from by-stander to up-standing racial inequality and how to de-escalate such situations without violence. Dr. Hromas thanked Health System leadership for the wonderful partnership in fighting Covid-19. UT Health SA has set up their own Covid-19 testing mainly for UT patients at the UT Dental Building. Unfortunately, Dr. Hromas predicts at last two more weeks of this surge. Back-up hospital teams have been activated and he was proud to report that there has yet to be one case where a patient has transmitted Covid-19 to the physician.

Mr. Smith asked how screenings for Covid-19 are being handled at Health System clinics. The clinics are conducting the same screening and masking process being used at University Hospital. University Medicine Associates has adopted tele visits and telehealth. The resident clinic at Robert B. Green also went from in person visits to telehealth. If a patient needs to come in for a clinical visit, there is signage indicating that masking and social distancing are required in all of the clinics. All of the ambulatory

clinics are operating to some degree, Express Med has seen an increase in visits. The majority of the physicians are encouraging tele visits, and some of the more remote locations ask visitors to wait in the car until provider is ready to see them. At the present time, Health System clinics are testing only symptomatic patients and sending asymptomatic patients to Metropolitan Health District. Dr. Kelley asked about the process within a clinic for a patient to get tested. Patients who suspect they have COVID are tested when they present with symptoms. Those patients who are being admitted and are suspicious for Covid-19 are directly admitted to a special unit. Staff is not turning patients away, only re-directing them to appropriate testing sites. Mr. Adams urged the staff not talk to friends and families about the number of Covid patients at University Hospital since Mayor Nirenberg and Judge Wolff are only sharing the total number of patents in local hospitals. Mr. Hernandez agreed that it is important to communicate with the community that this surge is real and every age group is being affected, not only the elderly. More recently, the largest single age group is 40 to 49 years old, and it appears to be growing on the younger age groups.

#### CONSENT AGENDA – JIM ADAMS, CHAIR

REPORT FROM THE NOMINATING COMMITTEE AND ELECTION OF THE BOARD OF MANAGERS SECRETARY — ROBERT ENGBERG, CHAIR, NOMINATING COMMITTEE

CONSIDERATION AND APPROPRIATE ACTION REGARDING RE-APPOINTMENTS TO THE BOARD OF TRUSTEES OF THE CENTER FOR HEALTH CARE SERVICES — ROBERT ENGBERG, CHAIR, NOMINATING COMMITTEE

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN APPOINTMENT TO THE BOARD OF DIRECTORS OF COMMUNITY FIRST HEALTH PLANS, INC. — ROBERT ENGBERG, CHAIR, NOMINATING COMMITTEE

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN APPOINTMENT TO THE UNIVERSITY HEALTH SYSTEM FOUNDATION BOARD OF DIRECTORS — ROBERT ENGBERG, CHAIR, NOMINATING COMMITTEE

SUMMARY:

Report from the Nominating Committee and Election of the Board of Managers Secretary — Robert Engberg, Chair, Nominating Committee — Board Bylaws call for the Election of Officers annually in September and they allow for the election of an officer to fill the unexpired term for a position left vacant due to loss of Board membership at the next regular meeting of the Board, as is the case with Dr. Dianna Burns. The Nominating Committee recommends the election of Mr. James C. Hasslocher to fill the unexpired term of the Board Secretary position previously held by Dr. Dianna Burns effective immediately through September, 2020.

Consideration and Appropriate Action Regarding Re-Appointments to the Board of Trustees of The Center For Health Care Services — *Robert Engberg, Chair, Nominating Committee* — Richard Usatine, M.D., has represented the Board of Managers on the Center's Board of Trustees since August, 2009. He currently serves on the Planning & Operations Committee, bringing a wealth of knowledge to the Center. Graciela Cigarroa, J.D., has represented the Board of Managers on the Center's Board of Trustees since July, 2014. Currently, she serves as Board

Secretary, member of the Finance Committee, member of the Center's Advisory Committee, and President of the Center's Foundation Board. The Nominating Committee recommends the re-appointment of Dr. Usatine and Ms. Cigarroa to The Center for Health Care Services Board

of Trustees for a two year term beginning July 1, 2020 through June 30,

2022.

Consideration and Appropriate Action Regarding An Appointment to the Board of Directors of Community First Health Plans, Inc. — *Robert Engberg, Chair, Nominating Committee* - Mr. Thomas C. ("TJ") Mayes was appointed to the Board of Managers by Judge Nelson Wolff on May 12, 2020. He is a local attorney in private practice with public service interests centered on healthcare and education. Currently, he is the chair of the Bexar County Opioid Task Force. The Nominating Committee recommends the appointment of Mr. T.J. Mayes to fill the unexpired term of Dr. Johnny Lovejoy, II, effective immediately through September 30, 2021.

Consideration and Appropriate Action Regarding An Appointment to the University Health System Foundation Board of Directors — *Robert Engberg, Chair, Nominating Committee* - Dr. Margaret Kelly was appointed to the Board of Managers by Judge Nelson Wolff on May 12, 2020. She is a board-certified obstetrician and gynecologist in private practice, and has served on many community boards, `such as, The Center for Healthcare Services. The Nominating Committee recommends the appointment of Dr. Margaret Kelley to fill the unexpired term of Ms. Janie Barrera as a Board of Managers representative on the University Health System Foundation Board of Directors, effective immediately through December 31, 2020.

RECOMMENDATION:

Nominating Committee of the Board of Managers recommends approval

of the appointments and re-appointments as indicated above.

ACTION:

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

UNANIMOUSLY.

**EVALUATION:** 

Mr. Engberg noted the quality of Board appointees who serve and he thanked Dr. Kelley and Mr. Mayes for their willingness to serve on

subsidiary committees.

FOLLOW-UP: None.

#### <u>ACTION ITEMS – JIM ADAMS, CHAIR</u>

<u>CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED</u> PURCHASING ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING A LEASE AMENDMENT WITH 5282 MEDICAL DR., LLC FOR THE NW FAMILY HEALTH CLINIC — DON RYDEN

SUMMARY:

The NW Family Health Center located at 7726 Louis Pasteur operates out of leased space owned by Methodist Healthcare Ministries (MHM).

The lease for the facility ends July 31, 2020 but MHM is willing to extend the lease through December 31, 2020 to allow for a smooth transition to another location. The NW Family Health Center serves as a primary care hub for northwest Bexar County. To better serve this large geographic area, staff recommends a lease of two separate locations. In January 2020, the Board of Managers approved a lease for a NW Pediatric and Women's Health Services Clinic at the Westgate Medical Office Building located at 5282 Medical Drive. This lease allowed the Health System to co-locate both pediatric and women's services. This proposed lease allows the Health System to supplement those services with adult primary care in an adjacent 3939 sq. ft. suite (Suite 250). Colocation of these clinics improves efficiency of back office operations. The landlord has agreed to amend the current lease to include the additional clinical space at the existing rental rate and terms. This base rental rate is \$27.00 per sq. ft., with annual escalations of 3 percent. The landlord will provide a \$25.00 per sq. ft. allowance for tenant improvements. The landlord is 5282 Medical Dr., LLC, as successor in interest to Welltower OM Group, LLC. The lease term will be for five (5) years commencing on the date a certificate of occupancy is issued by the City of San Antonio, but no later than sixty (60) days following Lease execution. The lease expense for the five (5) year term is approximately \$568,512. Mr. Ryden reviewed annual base rates amounts for years one to five. The rental rate is on a modified gross basis which includes an operating expense stop for the calendar year 2019 at \$11.96 per sq. ft. Assuming a 2 percent escalation per year in operating expenses, Mr. Ryden reviewed annual expense for year one through year five not to exceed \$3,896. The landlord is providing a tenant improvement allowance of \$98,475 (\$25 per sq. ft.). The cost of the renovations required for this space is not expected to exceed this amount. The costs for setting up the necessary information technology components at this location are estimated to be \$ 81,616. In addition, estimated expenditures as part of the associated costs for occupying this space are at \$ 24,500. As an affiliate of Welltower, Inc., 5282 Medical Dr., LLC is a single purpose entity and has no employees. The local branch office of the Welltower management group has a total of four The workforce composition data was provided for the employees. Board's review.

RECOMMENDATION:

Staff recommends Board of Managers' approval of lease Amendment with 5282 Medical Dr., LLC for Suite 250 at 5282 Medical Drive, San Antonio, Texas. The five year cost of the lease is \$568,512. In addition to the lease agreement, staff recommends Board or Managers approve I.T. expenditures of \$81,616 and the purchase of medical equipment and furniture, and other related costs at a cost not to exceed \$24,500.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr.

Smith, SECONDED by Mr. Hasslocher, and PASSED

UNANIMOUSLY.

EVALUATION: None. FOLLOW-UP: None.

Dr. Jimenez phoned in at 2:33 pm.

# CONSIDERATION AND APPROPRIATE ACTION REGARDING A LEASE AGREEMENT WITH HUEBNER COMMONS, LTD. FOR THE NW WOMEN'S HEALTH CENTER — DON RYDEN

**SUMMARY:** 

This second clinic site is located at Huebner Commons, 11703 Huebner Road, San Antonio, Texas. The clinic will be staffed with two full time primary care providers and support a grant funded program for women that need Opioid-related Sub Oxone treatment. Volume for this location is estimated to be 6,800 patient encounters per year. The grant will be used to help pay the rental expense. The proposed new location is a former urgent care clinic at Huebner Commons, at 1703 Huebner Road. This vacant clinic is already built out and will require only minor modification. The space is 2283 sq. ft. and the Health System will also be able to purchase the existing furniture at a reduced price of \$15,000 from the bank lien. The furniture is estimated to have a value at over \$50.000 and is in excellent condition. This base rental rate is \$24.00 per sq. ft., with annual escalations of \$.50 per sq. ft., (or approximately 2 percent per year). The lease term will be for five (5) years commencing on the lease execution date. However, the rent will not start for sixty (60) days following lease execution.

The base rental rates for the five-year term total: \$285,375

The rental rate is on a triple net basis with includes a common area maintenance (CAM) charge for the first year of \$10.78 per sq. ft. This CAM charge covers the tenant's pro-rata share of taxes, insurance, and other related real estate expenses: Assuming a 2 percent escalation per987year in operating expenses, the additional estimated rental expenses that will be incurred for year one through year five:

\$413,452

Total construction costs for minor renovations are estimated not to exceed: \$42,317

Total costs for setting up the necessary information technology components at this location: \$129,539

Total estimated expenditures for associated costs for occupying this space: \$29,500

Huebner Commons, Ltd. utilizes local contract help; and does not directly hire employees.

RECOMMENDATION:

Staff recommends Board of Managers' approval of a five (5) year lease agreement with Huebner Commons Ltd. located at 1703 Huebner Road, San Antonio, Texas in the amount of \$413,452. In addition to the lease agreement, staff recommends the Board or Managers approve miscellaneous construction costs of \$42,317, I.T. expenditures of \$129,539 and the purchase of medical equipment and furniture, and other lease related costs up to but not exceeding \$29,500.

ACTION: A MOTION to approve staff's recommendation was made by Mr.

Hasslocher, **SECONDED** by Mr. Mayes, and **PASSED** 

UNANIMOUSLY.

EVALUATION: Women's services to be provided at this location include post-partum

care for those women in the Mommy's Program and other postpartumopioid-dependent women enrolled in grant-funded programs, in addition to counseling services. This location will not have a dedicated obstetrician. Primary care services will be provided by family practitioners at the 5282 Medical Drive location (also known as

Westgate).

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT WITH DELOITTE TRANSACTIONS AND BUSINESS ANALYTICS, LLP FOR CONSULTING AND CONSTRUCTION AUDITING SERVICES — JOSHUA NIETO/LARRY WALLIS

SUMMARY:

Staff is seeking professional auditing services for the Health System's current Capital Improvement Program (CIP) to ensure good stewardship of resources and to maximize the Health System's ability to carry out its mission to the community. The Women's and Children's Hospital and associated projects exceed \$675 million. Deloitte Transactions and Business Analytics, LLP has more than thirty-five (35) years' experience conducting construction audits, and Mr. Nieto described similar projects they previously worked on across the country, in addition to the Health System's Sky Tower and Robert B. Green campus expansions. Given Deloitte's prior demonstration of its ability to provide competent construction related consulting and auditing services as well as the fiscal impact of the project, the staff began negotiations with Deloitte for expert professional services in construction auditing and general Deloitte's proposed audit team for the Health consultation services. System's current CIP Project includes accountants and engineers with healthcare construction auditing, consulting, and risk and fraud advisory experience. Mr. Nieto reviewed the scope of professional services in Deloitte will ensure that bond funding detail during his presentation. expenditures in furtherance of the project meet or exceed regulatory requirements. The audit will also better ensure good stewardship of resources and maximizes the Health System's ability to carry out its mission to the community. The proposed term of the contract is three years with the option to renew for up to two additional one-year terms at the discretion of the Health System. For the proposed contract, pricing will remain fixed throughout the initial three-year contract term with a maximum financial outlay of \$693,600. This is a planned operating expense that will be incurred over three years. The workforce composition data for Deloitte Transactions & Business Analytics LLP was provided for the Board's review. The audit team will also include a local, Minority-owned-certified Business consultant with past experience supporting the Health System's projects. Deloitte proposes to engage Garza Gonzales & Associates to assist in the audit work with a commitment to subcontracting at least 18 percent of the total professional

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services to the local firm. Garza/Gonzalez & Associates is a certified

HUB, MBE and SBE local business.

RECOMMENDATION: Staff recommends approval of the selection of Deloitte Transactions and

Business Analytics, LLP to provide auditing and consulting services for the Health System's Capital Improvement Project for an amount not to exceed \$693,600 for the initial three year term and an amount not to

exceed \$195,200 per renewal term thereafter.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr.

Smith, SECONDED by Mr. Hasslocher, and PASSED

UNANIMOUSLY.

EVALUATION: Mr. Smith commended the community outreach efforts by Deloitte. Mr.

Engberg expressed support for the staff's recommendation, saying that this is a very appropriate activity that saved dollars with the Sky Tower

when significant items were discovered.

FOLLOW-UP: None.

## CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH U.S. FOOD FOR FOOD DISTRIBUTION SERVICES — JIM WILLIS

SUMMARY:

The current Labatt food distribution contract with University Health System expired on December 31, 2019. The contract was extended to allow the evaluation committee adequate time to review RFP solicitations for a new contract. The food distributor will supply food products for all Health System locations. On December 9, 2019, a Request for Proposal (RFP) was published by University Health System for the provision of food distribution services. The RFP required respondents to provide written answers and/or data for the key criteria, such as product pricing, rebates and discounts, scope of services, qualitative responses, and facility locations. By January 21, 2020, five responsive submittals were received by the Health System from Ben E. Keith Foods, Labatt Food Service, LLC, Gordon Food Service, Inc., Sysco Food Services, and U.S. Foods. Labatt Food Service, LLC and U.S. Foods were identified as the top two scoring finalists. The evaluation committee recommended that the two finalists provide the Health System with best and final offer by February 10, 2020. After careful consideration, the evaluation committee recommends full award of the contract to U.S. Foods as best value for the Health System, the deciding factor for this selection being pricing. The proposed three-year contract with U.S. Foods shall not exceed \$15,100,000. In partnership with Premier, the Procurement Department will evaluate contract performance on a quarterly basis to include review of invoices, discounts/savings, and rebates. There will be additional opportunities to move another \$1M per year in purchases from other vendors to this agreement which would generate even further savings for the Health System. Through Premier, the three year savings is comprised of \$476,000 in lower food costs for the top usage items, \$1,068,000 in tier savings, and \$912,000 in delivery drop rebates. These rebates are additional incentives for the Health System and not part of the calculated savings of \$2.4 million. The workforce composition data for U.S. Foods was provided for the Board's review. U.S. Food, Buda Division is considered a local business enterprise due to the contract with Premier. .

RECOMMENDATION: Staff recommends that the Board of Managers approve a non-assignable

food service contract for three years in the total amount of \$15,100,000

with two additional one year renewal terms with U.S. Foods.

ACTION: A MOTION to approve staff's recommendation was made by Mr.

Hasslocher, SECONDED by Mr. Smith, and PASSED

UNANIMOUSLY.

EVALUATION: Mr. Hasslocher commended the staff for negotiating lower food costs

along with rebates and discounts under this agreement for significant savings for the Health System. These type of contracts are not easy to negotiate. Mr. Adams thanked Mr. Hasslocher for sharing his expertise in this area, and he then stated for the benefit of the new Board members, that each Board member is tapped for their individual experience and

talent.

FOLLOW-UP: None.

Mr. Adams departed the meeting at 2:53 pm and returned at 2:55 pm.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A PROFESSIONAL SERVICES AGREEMENT WITH MEDICAL CENTER CARDIOLOGY, PLLC D/B/A CARDIOLOGY PARTNERS OF SAN ANTONIO FOR OUTPATIENT CARDIOLOGY SERVICES — JIM WILLIS

SUMMARY:

In June 2018, the Board of Managers approved a one-year agreement with Cardiology Partners of San Antonio to provide outpatient cardiology consult services. This pilot program was initiated to reduce the growing number of unseen patients in the Health System cardiology queue. Prior to this agreement, cardiology consult services had been solely provided by UT Health San Antonio since 2009. In March 2017, University Medicine Associates (UMA) hired a dedicated cardiologist to support cardiac consults. By May 2018, the cardiology queue of unseen patients had peaked at 580 unseen patients with an average wait time of 71 days for the next available appointment. Within the first year of this contract being initiated, the combined cardiology queue (UMA and UT) dropped to approximately 60 unseen patients with an average wait of 7 days for the next available appointment. In June 2019, the Board of Managers approved the first one-year renewal with Cardiology Partners of San Antonio. Today, the combined cardiology queue (UMA and UT) holds approximately 80 unseen patients with an average wait of 7-10 days for the next available appointment. Within the UMA practice, requests for immediate consults can be accomplished within one business Staff is seeking a second one-year renewal with Cardiology Partners of San Antonio. Contract services will continue to be provided at the dedicated clinic located at University Hospital on the second floor of Rio Tower. In addition to providing primary cardiac care during 2019, the clinic has continued to generate a significant volume of diagnostic testing to include 200 cardiac catheterization consults, 500 stress tests, 2,000 EKGs, 800 cardiac ultrasounds and 350 miscellaneous procedures. The clinic referred 12 patients for open heart consults and 11 for vascular consults. Mr. Willis provided a comparison of clinic volumes for the three locations during 2019 for a grand total of 8,925 The proposed contract with Cardiology Partners of San Antonio will be for a period of 12 months beginning July 9, 2020. Costs

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remain unchanged from the initiation of the original contract at \$287 per hour. This amount was confirmed to be at or below fair market value by VMG Health, an independent valuation consultant. The total value for this contract is not to exceed \$650,000, which is a budgeted operational expense. The workforce composition for Cardiology Partners of San Antonio was provided for the Board's review. The assumptions made in the original pro forma, the contribution margin for this contract less collections was \$24,000 better than budget.

RECOMMENDATION:

Staff recommends Board of Managers' approval for a contract with Cardiology Partners of San Antonio to provide outpatient cardiology services in the amount of \$650,000 for a 12-month period beginning July 9, 2020.

ACTION:

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

**EVALUATION:** 

Dr. Kelley was interested in knowing under which process Cardiology Partners was selected to provide this service. The Health System did not issue a formal Request for Proposals. Staff did, however, reach out to multiple entities all of which presented hourly schedules, which were in turn, reviewed by an independent valuator. Cardiology Partners was rated as having competitive hourly rates for contract services. Working with Cardiology Partners has been a very positive experience for the patients and the staff, and the practice also has a great collaboration with UT Health SA. The Health System went from a three-month wait to 7day wait. Some of the other group practices in town were interested in learning more about the Health System and toured the clinic space at University Hospital. Dr. Kelley cautioned the staff about the need to demonstrate a very clean, written process to justify the selection of Cardiology Partners for the protection of the Health System, should a member of the community want to know which groups were approached and what they presented. Mr. Hernandez agreed with Dr. Kelley and referenced the Health System's purchasing policy which is a very detailed document that guides the staff on how to proceed when The policy allows flexibility in soliciting professional services. recruiting professional services because staff is actually looking into the professional quality of the services. Mr. Adams also cautioned the staff regarding the point brought forward by Dr. Kelly as the staff moves forward and finds itself making these type of decisions on other subjects. The Health System as a whole needs to be known as one who plays fair and square, which is part of Mr. Hernandez's philosophy, as well. Mr. Smith recalled that the Health System has struggled with this in the past and has been accused of having favorites. The purchasing policies states that the Health System will use RFPs and other methods to involve the local business community. Mr. Smith re-emphasized the importance of prioritizing local businesses. Mr. Adams, Dr. Jimenez, and Mr. Hernandez did not agree that the Health System has been formally accused in the fashion described by Mr. Smith; none could recall grievances nor accusations of not being fair. There was a time when vendors may have perceived the Health System had favorites because the staff tended to lean towards vendors who had previously done business with the Heath System. Moreover, Mr. Adams was pleased with this

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discussion, a reaffirmation of how important written policies and procedures are in selecting professional services. The Health System's reputation needs to be based on what the Board knows to be true, a continuation of high quality selection. Mr. Hasslocher acknowledged the staff's foresight in seeking help for its patients and in eliminating long wait periods for patients with heart problems.

FOLLOW-UP: None.

# $\frac{\text{CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT}{\text{WITH PEDIATRIX MEDICAL SERVICES, INC. FOR PEDIATRIC AND NEONATAL}}{\text{SURGICAL SERVICES} - ALLEN STRICKLAND}$

**SUMMARY:** 

The current agreement with Pediatrix expires June 30, 2020. Health System leadership, working in conjunction with UT Health 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 the Health System's r 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. Although UT Health provides professional services across numerous specialty areas, at the present time, UT Health does not have the specialized providers to support pediatric surgical services. The UT Departments of Surgery and Pediatrics are supportive of this agreement which complements the current UT Health Surgery and Pediatric practices at the Health System. Pediatrix is a multi-specialty group practice that has an excellent reputation for providing specialized pediatric surgical services in the community. 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 2020 operating budget. workforce composition data for Pediatrix Medical Services, Inc., was provided for the Board's review. Pediatrix is a publicly traded company. Staff recommends Board of Managers' approval to execute the 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, 2020 with an option to renew for an addition one year period under

RECOMMENDATION:

ACTION:

**EVALUATION:** 

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

the same terms and conditions.

In light of the Board's discussion regarding Cardiology Partners, Mr. Strickland noted that this vendor provides unique specialty services that no other alternative practice in town provides. Years back they provided many of these services to other local hospitals, and they have since acquired additional physician practices. Pediatrix also provides women's services, such as maternal fetal medicine. Dr. Kelley was interested in knowing what the Pediatrics Department, in partnership with the Surgery Department at UT Health plan to do to address the shortage of pediatric surgeons and those in other subspecialties. Has there been traction over the last several years to recruit since the Health System took on this service line? Dean Hromas responded that with the opening of the new Women's and Children's Hospital, the Health System needs full-time

service dedicated to pediatric surgery and pediatric medicine, however, for now, this contract is the Health System's best bet, as they have created a monopoly. However, Pediatrix is a competent group. Hromas believes that by the time the new hospital opens, the School of Medicine will be in a better position to provide dedicated service by physicians who are dedicated to the Health System's mission. For now, Dr. Hromas fully supports work by this group at University Hospital. Many of the specialists with Pediatrix used to be full-time faculty physicians with UT Health. Mr. Adams followed up on Dr. Kelley's question regarding plans to recruit substitutes. Dr. Jimenez provided a historical perspective in that the cost of such specialty practices has always haunted the Health System. He acknowledged that these specialists are rare and competitive to recruit; however, cost has always been the main issue. In Dr. Jimenez's experience, hospitals, especially on the east and west coasts, generally rely on these type of specialty groups. Mr. Hernandez concurred that this is a step in the right direction so that the staff can control the Health System's future. As a community several years ago, a free standing pediatric hospital was not possible due to the inability to recruit such specialists. Mr. Adams thanked Mr. Hernandez and Dr. Jimenez for recounting history with the Pediatrics Department, a conversation that needs to be had and remains on the Health System's radar. He expressed appreciation for Dr. Kelly's questions.

FOLLOW-UP: None.

### **ANNOUNCEMENTS**:

Mr. Adams announced that after contacting each member of the Board individually, he has updated the Board Responsibility/Role and Subsidiary Board Appointment Roster identifying principals and assister roles. Board members will received an updated copy with their next Board packet. He asked to be contacted with any problem or concern regarding the assignments. These assignments are recognition of the value that each of the Board members brings to the table. Again, he welcomed Dr. Kelley and Mr. Mayes and expressed gratitude for the level of their caliber. The next meeting is planned for Tuesday, June 30, 2020 in person. However, due to the Covid-19 surge and out an abundance of caution, Mr. Hernandez has decided that it is best at this time to stick with telephonic meetings. It would have been an opportunity to meet the two new Board members in person.

Dr. Jimenez requested permission to obtain the floor. He stated that historically, organizations like the University Health System have shied away from exposing systemic racial injustices and discrimination, with the exception of the American Nurses' Association, whose President has come out publicly several times on national television to support change. He urged Mr. Adams and Mr. Hernandez to discuss what the Board of Managers can do both formally and informally to bring about change and to review the impact on healthcare disparity. It is what large organizations on the east and west coasts are doing, the time is right to bring about useful and constructive change. Mr. Hernandez concurred and informed the Board that in early June he sent a call to action letter to the workforce soliciting their ideas and comments regarding what staff can do as individuals and together as a Health System to address racial inequities to help drive future conversations, opportunities for engagement as well as action planning. He will share this same letter with the Board of Managers. Mr. Hernandez will set up a committee to review responses and develop an action plan to address some of these issues. It's his personal belief that as CEO, he needs to take a

stand on this important matter. Dr. Jimenez thanked Mr. Hernandez and requested that Mr. Adams consider assigning a Board member to work with Mr. Hernandez to review the responses, so as to elevate the matter among the workforce. Mr. Adams agreed to think about this assignment.

## **ADJOURNMENT:**

There being no further business, Mr. Adams adjourned the Board meeting at 3:41 pm.		
James R. Adams	James C. Hasslocher	
Chair, Board of Managers	Secretary, Board of Managers	
Sandr	a D. Garcia, Recording Secretary	



#### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

By Telephone

Tuesday, June 30, 2020 6:00 p.m. Board Room Cypress Room, University Hospital 4502 Medical Drive San Antonio, Texas 78229

#### **MINUTES**

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

James R. Adams, Chair
Ira Smith, Vice Chair
Roberto L. Jimenez, M.D., Immediate Past Chair
Robert Engberg
James C. Hasslocher
Margaret Kelley, M.D.
Thomas C. ("TJ") Mayes, J.D.

#### **OTHERS PRESENT:**

George B. Hernández, Jr., President/Chief Executive Officer, University Health System Bryan J. Alsip, MD, Executive Vice President/Chief Medical Officer, University Health System Edward Banos, Executive Vice President/Chief Operating Officer, University Health System Ted Day, Executive Vice President/Strategic Planning, University Health System Rob Hromas, MD, Dean, School of Medicine, UT Health San Antonio Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System Leni Kirkman, Senior Vice President, Strategic Communications, Patient Relations, University Health System; and Interim President, University Health System Foundation Bill Phillips, Senior Vice President/Information Services, University Health System Serina Rivela, Vice President/General Counsel, Legal Services, University Health System Don Ryden, Vice President, Project, Design and Construction, University Health System Crystal Senesac, Executive Director/Marketing, Strategic Communications, University Hospital Theresa Scepanski, Interim President/Chief Executive Officer, Community First Health Plans, Inc. Travis Smith, Deputy Chief Financial Officer, University Health System Allen Strickland, Vice President/Hospital Administration-Fiscal, University Health System Rajeev Suri, MD, Professor/Department of Radiology, UT Health; and President/Medical-Dental Staff, University Health System And other attendees.

#### **CALL TO ORDER:**

Mr. Adams called the meeting to order at 6:00 pm. He yielded the floor to the Recording Secretary for the roll call to confirm a quorum. All Board members indicated "present." Upon confirmation of a quorum, Mr. Adams asked Board members to hold their questions until after each presentation. Voting today will be conducted by individual roll call to clearly identify each Board member by name and vote. Mr. Adams addressed the audience and noted that while members of the public are not able to ask questions during today's meeting, should any citizen or member of the media have any questions or comments, please email them to <a href="Public.Relations@uhs-sa.com">Public.Relations@uhs-sa.com</a>. This email address is on the Health System's corporate website in the Contact Us section. A staff member will follow up within a day or two.

Mr. Smith left the Board meeting at 6:06 pm and returned at 6:09 pm.

#### INVOCATION AND PLEDGE OF ALLEGIANCE

Mr. Adams introduced Ms. Anna-Melissa Cavazos, University Health System Foundation Employee and Eucharistic Minister at University Hospital, for the invocation. However, Ms. Cavazos had technical difficulties and Mr. Smith was asked to step in with a brief invocation. Mr. Adams led the pledge of allegiance.

#### **PUBLIC COMMENT**: None.

### <u>REPORT FROM UT HEALTH SAN ANTONIO — WILLIAM HENRICH, M.D., PRESIDENT</u>

SUMMARY: Dr. Henrich greeted the Board and thanked the senior leadership team for

the collaboration during these difficult times. Dr. .Hromas reported that as of July 1, 2020, there will be 220 new medical students for a total of 880 medical students at the Long School of Medicine. The average

number of residents at any given time is 800.

RECOMMENDATION: None.

ACTION: None.

EVALUATION None.

FOLLOW-UP None.

At this time, Mr. Adams acknowledged receipt of a letter – A Call to Action - that was sent to all employees from Mr. Hernandez, President/CEO, regarding racial injustices. In the letter, Mr. Hernandez asks the workforce to reflect upon what can be done as individuals and "public servants," and as a health organization and one of the largest employers in the community, to champion for diversity, equity, inclusion and justice. He also reminds the workforce that as public servants, one must never become complacent or cavalier about the duty to root out racism and equality. Ms. Kirkman reported that Mr. Hernandez had received about 100 responses to his letter. The plan is to set up a committee to be chaired by Mr. Hernandez and supported by Ms. Kirkman, Vice President, Corporate Communications; and Ms. Scepanski, Senior Vice President/Chief Administrative Officer. Mr. Adams and Dr. Jimenez requested that Mr. Hernandez provide the Board with periodic updates on the committee's work.

#### **NEW BUSINESS**

CONSENT AGENDA – JIM ADAMS, CHAIR

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN APPOINTMENT/REAPPOINTMENT TO THE BOARD OF DIRECTORS OF THE ALAMO AREA COUNCIL OF GOVERNMENTS — ROBERT ENGBERG, CHAIR, NOMINATING COMMITTEE

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN APPOINTMENT TO THE UNIVERSITY HEALTH SYSTEM FOUNDATION BOARD OF DIRECTORS—
ROBERT ENGBERG, CHAIR, NOMINATING COMMITTEE

CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR STAFF MEMEBERSHIP AND DELINEATION OF PROVILEGES — DRAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FOLLOWING ONE-YEAR CONTRACT EXTENSIONS FOR EMPLOYEE BENEFITS: A) TRUSTMARK INSURANCE COMPANY (THROUGH BENEFIT SOURCE) FOR UNIVERSAL LIFE INSURANCE; B) TOTAL ADMINISTRATIVE SERVICES CORPORATION (TASC) FOR FSA, COBRA, ACA REPORTING AND RETIREE BILLING THIRD PARTY ADMINISTRATION SERVICES, AND RELIANCE STANDARD (THROUGH INSURANCE POINT) FOR SHORT AND LONG-TERM DISABILITY AND TERM LIFE INSURANCE BENEFITS - — THERESA SCEPANSKI

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

SUMMARY:

Consideration and Appropriate Action Regarding Appointment/Reappointment to the Board of Directors of The Alamo Area Council of Governments — Robert Engberg, Chair, Nominating Committee - 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. To fulfill the Health System oversight requirement, Mr. Hasslocher has now served as the Board's primary representative since November 2015, with his most recent term expiring on June 30, 2020. The alternate representative has been Mr. Engberg. The Nominating Committee recommends the reappointment of Mr. James C. Hasslocher to the AACOG Board of Directors as primary representative, with Mr. Thomas ("TJ") Mayes as an alternate appointee, effective July 1, 2020 through June 30, 2022.

Consideration and Appropriate Action Regarding An Appointment to the University Health System Foundation Board of Directors — *Robert Engberg, Chair, Nominating Committee* - The University Health System Foundation is a 501(c)(3) charitable organization founded in 1983 to solicit, receive and maintain funds exclusively for the benefit of University Health System and the community served through its charitable mission. The Board of Managers, as the governing body, shall approve appointments to the Board of Directors of the Foundation. On

June 23, 2020, the Board of Managers appointed Dr. Margaret Kelley to fill the unexpired term of Ms. Janie Barrera through December 2020. However, Ms. Barrera would like to stay connected to the Health System *via* a community position on the Foundation Board of Directors. The Nominating Committee recommends approval of the appointment of Ms. Janie Barrera to fill a vacant community representative position on the University Health System Foundation Board of Directors, effective immediately through December 31, 2022.

Consideration and Appropriate Action Regarding Medical-Dental Staff Recommendations for Staff Membership and Delineation of Privileges — Rajeev Suri, M.D., President, Medical/Dental Staff - Monthly Credentials Committee Report (listing of providers in accordance with the Health System's Credentialing and Privileging Process); and Focused/Ongoing Professional Performance Evaluation Reports submitted to the Board of Managers for approval.

Consideration and Appropriate Action Regarding the Following One-Year Contract Extensions for Employee Benefits:

- a) Trustmark Insurance Company (Through Benefit Source) for Universal Life Insurance - The contract was competitively bid on RFP-217-02-009-SVC in 2017. A total of fifteen (15) bid responses were received. This contract was competitively bid and awarded based on the best value, which includes favorable pricing and meeting the Health Systems bid requirements assigned by the Evaluation Team. Trustmark Insurance Company (through Benefit Source) provides the best value for the following reasons: (1) provides lowest premiums based on sample illustrations, (2) provides a 43 percent reduction in non-smoking premiums for employees, (3) provides a 49 percent reduction in non-smoking premiums for spouses; and (4) expanded dependent coverage availability. The workforce composition for Trustmark Insurance Company was provided by the Board's review. Staff recommends Board of Managers' approval of the contract with Trustmark Insurance Company (through Benefit Source) for universal life insurance for an estimated amount of \$290,516 for a one-year period.
- b) Total Administrative Services Corporation (TASC) for FSA, COBRA, ACA Reporting and Retiree Billing Third Party Administration Services This contract was competitively bid on RFP-217-02-006-SVC. A total of nine (9) responses were received. Based on best value, the evaluation committee recommends a one-year contract renewal with Total Administrative Services Corporation (through Benefit Source) for Flexible Spending Accounts (FSA), Consolidated Omnibus Budget Reconciliation Act (COBRA), Affordable Care Act (ACA) Reporting and Retiree Billing benefits for regular full and part-time staff, house staff and departing employees. Best value includes favorable pricing and meeting the Health Systems bid requirements assigned by the Evaluation Team. Total Administration Services Corporation (through Benefit Source) provides the best value for the following reasons: (1) competitive

administrative fees; (2) enhanced administrative services, and; (3) additional reporting services. Based on current utilization, the estimated cost to the Health System is \$218,376 for a one-year period. There are no planned changes in the monthly administrative fees. This is a planned expense and funding will be included in the 2021 Annual Operating Budget. This request exercises the renewal option, for a one-year period beginning January 1, 2021 and ending December 31, 2021. The workforce composition for Total Administrative Services Corporation was provided for the Board's review. Staff recommends Board of Managers' approval of the contract for FSA, COBRA, ACA Reporting and Retiree Billing third party administration services with Total Administrative Services Corporation (through Benefit Source) for an estimated amount of \$218,376.

c) Reliance Standard (through Insurance Point) for Short and Long-Term Disability and Term Life Insurance Benefits — *Theresa Scepanski* - This contract was competitively bid on RFP-217-02-009-SVC in 2017. The Health System received a total of fifteen (15) bid responses. This is a request for a one-year contract renewal for universal life insurance for regular full and part-time staff. This bid response is provides best value for the following reasons: (1) provides lowest premiums based on sample illustrations, (2) provides a 43 percent reduction in non-smoking premiums for employees, (3) provides a 49 percent reduction in non-smoking premiums for spouses; and (4) expanded dependent coverage availability.

<u>Long-Term Disability</u> - There are 3,341 regular and house staff participants in the employer sponsored long-term disability. Estimated cost to the Health System is \$499,383 for the one-year period. There are currently 1,569 regular staff participants in the voluntary long-term disability. Contractual value is 100 percent contributory in nature and accrued through employee premiums.

Short-Term Disability - There are currently 787 house staff participants in the employer sponsored short-term disability. The estimated cost for house staff participants is \$41,931 for the one-year period. There are currently 4,847 regular staff participants in the voluntary short-term disability. The short-term disability for regular employees' contractual value is 100 percent contributory in nature and accrued through employee premiums.

<u>Supplemental Life Insurance</u> - There are currently 3,776 regular staff participants in supplemental life insurance. The supplemental life insurance for regular employees' contractual value is 100 percent contributory in nature and accrued through employee premiums. The estimated cost is \$1,092,054 for the one-year period. There is no change to the premium rate compared to the current contract.

<u>Dependent Life Insurance</u> - There are currently 2,560 participants in dependent life insurance. The dependent life insurance contractual value is 100 percent contributory in nature

and accrued through employee and house staff premiums. The estimated cost will be \$161,598 for the one-year period.

<u>Basic Life Insurance</u> - There are currently 8,220 participants in basic life insurance. The estimated cost to the Health System will be \$108,960 for the one-year period. There is no increase in fees or premiums for the 2021 plan year.

The workforce composition for Reliance Standard was provided for the Board's review. Staff recommends the Board of Managers approve the contract for Short and Long-Term Disability and Term Life insurance benefits with Reliance Standard (through Insurance Point) for an estimated premium cost to the Health System of \$650,273. The cost to employees is \$3,932,200. The total cost for a one year period is \$4,582,473.

Consideration and Appropriate Action Regarding Purchasing Activities (See Attachment A) — *Antonio Carrillo/Travis Smith* - A total of 39 contracts with a value of \$64,698,082 are being presented to the Board of Managers for approval during the month of June 2020. Twenty-two (22) consent contracts with a total value of \$14,041,611, and seventeen (17) presented contracts with a total value of \$50,656,471. Five (5) contracts are classified as Small, Minority Woman or Veteran-Owned Business Enterprises (SMWVBE).

RECOMMENDATION:

Staff recommends approval of the items listed on the consent agenda.

ACTION:

A **MOTION** to approve staff's recommendation as made by Dr. Jimenez, **SECONDED** by Mr. Engberg, and **PASSED** 

UNANIMOUSLY.

EVALUATION: None. FOLLOW-UP: None.

*Mr. Ira Smith left the Board meeting at 6:26 pm and returned at 6:27pm.* 

#### **ACTION ITEMS:**

<u>CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED</u> PURCHASING ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH DELTA DENTAL INSURANCE COMPANY (THROUGH BENEFIT SOURCE) FOR DENTAL BENEFIT SERVICES— THERESA SCEPANSKI

**SUMMARY:** 

The Health System solicited Request for Proposals (RFP-220-01-005-SVC) for dental benefit services. A total of six (6) responses were received. The bids 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. The Evaluation Committee rated Delta Dental Insurance Company (through Benefit Source) as providing the best value for the following reasons: (1) lower negotiated discounted fees, (2) enhanced and variety of plan designs, (3) extensive plan implementation support, (4) large provider network; and; (5) lower

premiums. Benefit Source is recommended as the broker based on the outstanding quality of service they have provided to University Health System employees and their responsiveness to administrative needs. Ms. Scepanski provided a table in her written report that listed the six agencies that submitted bids and their corresponding pricing; as well as the contract's scope of service. She also provided some of the covered services and estimated patient charges for the HMO and PPO (both low and high plans) and benefit coverages provided by each. The contractual value is 100 percent contributory in nature and is accrued through employee premiums; the Health System does not incur a cost for this contract. There is a slight increase in monthly premiums (13.7 percent average) as the new plan offers lower co-pays on several services. The average increase in premium is \$2.89 per month. Ms. Scepanski also broke down new monthly premiums and benefit coverages for the HMO and PPO (both high and low plans) for employee only, for employee & spouse, employee & children, and employee & family). The HMO plan value is estimated to be \$655,223 annually (\$1,965,668 over a three-year period) and the PPO plan value is estimated to be \$3,175,798 annually (\$9,527,395 over a three-year period). Overall, the total estimated amount for the contract is \$3,831,021 annually (\$11,493,063 over a three-vear period). The contract period is for three years beginning January 1, 2021. The workforce composition for Delta Dental and Benefit Source was provided for the Board's review.

RECOMMENDATION:

Staff recommends the Board of Managers approve the three-year contract with Delta Dental Insurance Company (through Benefit Source) for a total estimated amount of \$3,831,021 annually, or \$11,493,063 over a three-year period.

ACTION:

A MOTION to approve staff's recommendation as made by Mr. Hasslocher, SECONDED by Mr. Engberg, and PASSED UNANIMOUSLY.

EVALUATION: None. FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH CONTINENTAL AMERICAN INSURANCE COMPANY - AFLAC GROUP (THROUGH BENEFIT SOURCE) FOR CANCER AND CRITICAL ILLNESS INSURANCE — THERESA SCEPANSKI

**SUMMARY:** 

This contract was competitively bid on RFP-220-02-011-SVC. A total of ten (10) responses were received. The bids 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. The evaluation committee rated Continental American Insurance Company – Aflac Group as providing the best value for the following reasons: (1) Enhanced plan designs, (2) fewer plan limitations, (3) extensive plan implementation support, and; (4) no conditions on multiple years. Benefit Source is recommended as the broker based on the outstanding quality of service provided to University Health System employees and their responsiveness to administrative needs. The contract includes the cost for cancer and critical illness insurance for a four-year period and includes optional coverage amounts, increased coverage of different illnesses and varied

plan options. Employee premiums are determined by age, coverage amount and smoker/non-smoker rates. The total estimated cost for cancer and critical illness insurance is \$671,064 annually for a total of \$2,684,256 for a four-year period. The contractual value is 100 percent contributory in nature and is accrued through employee premiums. The Health System does not incur a cost for this contract. The contract shall be for a four-year term beginning January 1, 2021. The workforce composition for Continental American Insurance Company – Aflac Group and Benefit Source was provided for the Board's review

RECOMMENDATION: Staff recommends the Board of Managers approve the four-year contract

with Continental American Insurance Company – Aflac Group (through Benefit Source) for a total estimated amount of \$671,064 annually for a

total of \$2,684,256 for a four-year period.

ACTION: A MOTION to approve staff's recommendation as made by Mr.

Hasslocher, **SECONDED** by Mr. Smith, and **PASSED** 

UNANIMOUSLY.

EVALUATION: None. FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A FUNDING AGREEMENT WITH THE SOUTHWEST TEXAS REGIONAL ADVISORY COUNCIL ("STRAC") FOR A UT HEALTH BEHAVIORAL HEALTH RAPID ACCESS CLINIC — SALLY TAYLOR, M.D.

**SUMMARY:** 

Dr. Sally Taylor greeted the Board and thanked Dr. Steve Pliszka, Professor and Chairman of the Department of Psychiatry at UT Health, for joining her today. The Southwest Texas Regional Advisory Council (STRAC) is designated by the Texas Department of State Health Services (DSHS) to develop, implement and maintain the regional trauma and emergency healthcare system for the 22 counties in Trauma Service Area-P. The Southwest Texas Crisis Collaborative (STCC), a division of the STRAC, is an innovative, private/public payor coalition comprised of the mental health service stakeholders and Bexar County In March 2020, a City of San Antonio and Bexar County Mental Health Systems Collaborative Gap Analysis identified rapid access to outpatient behavioral health treatment as a needed service in Bexar County. This is a proposed funding agreement that would support a Behavioral Health Rapid Access Clinic (RAC) with the UT Health Department of Psychiatry. Funding the RAC through the STCC will give this treatment service broad visibility as a community service and transparency to the community in treatment outcomes and performance. Since January 2014, initially as a UT Health 1115 Waiver project and later through a contractual arrangement with University Health System, the UT Health Department of Psychiatry's Transitional Care Clinic (TCC) has been providing rapid follow-up for Health System adult psychiatric patients discharged from University Hospital. While providing treatment services, the TCC also trains the future behavioral health workforce in evidence-based practices. The TCC is well-poised to expand services for the RAC. RAC visits will be provided in person and virtually through telehealth. The RAC will include peer support specialists along with a Center for Health Care Services (CHCS) liaison to provide linkage for those patients with severe mental illness who

ultimately need more intensive services for a much longer period of time. With the predicted post COVID-related mental health needs, including new onset depression, anxiety and post-traumatic stress disorder, access to treatment for Health System employees and CareLink members should also improve with the RAC. The funding provided by this agreement will support personnel, including a fulltime psychiatrist (including the role of Medical Director for the clinic), counselors (i.e., licensed professional counselor, licensed clinical social worker, licensed chemical dependency counselor), caseworker, peer support specialist, and a CHCS liaison. In addition the funding supports initial infrastructure (e.g., furniture, phones, computers, etc.), medication assistance, bus passes, lab fees, a computer scheduling system, and space lease. Other personnel (e.g., medical assistant, scheduler, benefit coordinator, etc.) will be supported by UT Health's third party fee collections. The term of this this contract will be for the period beginning approximately August 1, 2020 and ending December 31, 2021, pro-rated for the months during 2020 when the service is in operation, with a maximum financial outlay of \$1,400,000.00 annually. This contract amount is included in the Health System's 2020 budget. The workforce composition of UT Health San Antonio was provided for the Board's review.

RECOMMENDATION:

Staff recommends the Board of Managers approve funding in the amount not to exceed \$1,400,000.00 annually beginning in calendar year 2020 (pro-rated for months of operation), through December 31, 2021, for the Southwest Texas Regional Advisory Council to support the UT Health Department of Psychiatry Behavioral Health Rapid Access Clinic, and authorize the President/CEO to execute an appropriate agreement.

ACTION:

A MOTION to approve staff's recommendation as made by Dr. Jimenez., SECONDED by Dr. Kelley, and PASSED LINANIMOUSLY.

UNANIMOUSLY.

EVALUATION: None. FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT WITH ST ENGINEERING AETHON, INC. FOR AUTOMATED GUIDED VEHICLE SYSTEMS FOR THE WOMEN'S AND CHILDREN'S HOSPITAL AND ASSOCIATED PROJECTS — DON RYDEN

SUMMARY:

Per previous Board authorizations, construction has begun on early design packages for the Women's & Children's Hospital, Garage, and Heart/Vascular & Endoscopy Center (Project). The project design for the Women's & Children's Hospital (WCH) included automated guided vehicle (AGV) elevators, pathing, and support spaces for material management throughout the new facility including patient care, operational support, and administrative support areas. The basement areas of the new facility are included in early design packages and a cost-effective construction plan requires knowledge of all installed equipment requirements (e.g. electrical circuits, communications outlets, structural embeds, etc.) to preclude later rework to accommodate vendor furnished systems like the AGV equipment. At the present time, this is the case with the existing AGV system in the Sky Tower. Staff has determined that open competition for the most appropriate AGV equipment solution would provide the best value. A Request for Proposal (RFP) was

published in April 2020 and interested vendors responded to preproposal discussions and various RFP amendments to clarify the Health System's requirements. Proposals were received in May, and a selection panel evaluated the proposals in early June 2020. From an initial list of four potential vendors, two firms indicated interest in meeting Health System requirements. Savant, the provider of current AGV systems servicing Health System facilities, proposed an enhanced vehicle operating system and new models of AGVs that would be fully compatible with existing Health System material management carts and processes, including radio-frequency identification tagging of carts to reduce human intervention for dispatching. Aethon, a competing firm, offered complete replacement of all AGVs with Autonomous Mobile Robots (AMRs), a different technology that would also require replacement or modification of existing material management carts, but would require no infrastructure support and so is potentially more operationally flexible. Both respondents included rework of portions of the existing AGV system in the Sky Tower, not including the separate system which supplies Sterile Processing and the two operating room floors. These modifications to the system in Sky Tower unify the AGV control system and allow increased interoperability between Sky Tower and WCH without multiple dispatching systems. Updated Sky Tower material management includes supplies, linens, equipment, and waste throughout the building. Evaluators considered several aspects of the offerings including qualifications, technical merit, past performance and experience, and overall price. Aethon's proposal requires modifications to existing carts to work compatibly with the new vehicles. However, the Aethon solution has no reliance on built-in infrastructure and can be readily re-programmed to rapidly accommodate future operational changes. Aethon has experience in over 150 healthcare facilities of all sizes and clearly demonstrated their ability to anticipate and support toptier healthcare material movement requirements. The cost of the Aethon AGV equipment solution is \$2,601,600, which includes lump sum pricing for the equipment installation and commissioning plus \$830,500 for a 5-year post-installation maintenance support program. Only a portion of this cost is included in the current approved Project capital funds. Further, some modification to existing AGV carts may be required, and is currently estimated at \$419,840 to modify 328 carts. Therefore, the total evaluated price for the Aethon proposal is \$3,851,940 while the total cost for the Savant system is \$4,235,845. Therefore, the evaluation panel determined that Aethon offers the best value. In his written report, Mr. Ryden allocated the total cost of \$3,851,940 as follows:

\$1,118,688 – WCH Capital Funds \$ \$1,482,912 – Routine Capital (2021) \$830,500 – Operational Funds \$419,840 – Operational Funds

The workforce composition for ST Engineering Aethon, Inc., was provided for the Board's review.

RECOMMENDATION:

Staff recommends the Board of Managers approve the capital purchase request for ST Engineering Aethon, Inc. AGV equipment described in this document for the Women's and Children's Hospital project in the amount of \$2,601,600.

ACTION: A MOTION to approve staff's recommendation as made by Mr.

Hasslocher, **SECONDED** by Mr. Engberg, and **PASSED** 

UNANIMOUSLY.

EVALUATION: Dr. Jimenez again expressed concern with the vendor's workforce

composition, which is 94.62 percent white. When Dr. Kelley asked whether this component could be factored into the scoring, Mr. Hernandez informed her that the Health System, by law, is not allowed to give preference to a vendor on that basis alone. In response to Mr. Adams' feasibility question, Mr. Hurley and Mr. Banos both expressed support for various reasons, such as the 328 heavy carts that are all over the hospital and can be reused with modification, no previous injuries, less supervision required on the evening and night shifts, and no additional staff needed. Although failure rate information Mr. Smith asked for was not immediately available, Mr. Ryden noted that post

installation maintenance is covered by the agreement for 5 years.

FOLLOW-UP: Mr. Ryden will convey the Board's local and minority procurement

policy to the vendor and encourage workforce diversity.

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AMENDMENT TO THE PROFESSIONAL SERVICES CONTRACT WITH MARMON MOK LLP FOR ARCHITECTURAL SERVICES FOR THE WOMEN'S AND CHILDREN'S HOSPITAL AND ASSOCIATED PROJECTS TO INCLUDE BUILD-OUT DESIGN FOR THE  $12^{\mathrm{TH}}$  FLOOR —  $DON\ RYDEN$ 

SUMMARY:

Phase I of the Women's and Children's Hospital (WCH) and associated projects (Projects) included master planning, program validation, scope alignment, site investigations, and budget development. In July 2018 the Architectural/Engineering (A/E) team commenced full architectural and engineering design services for the WCH and Projects. The Project's design phase is on schedule. The A/E team has completed construction documents for the Heart/Vascular & Endoscopy Center (HVE) which is currently underway. The Underground Utility Reroute and North Garage demolition are complete. The garage retention system, site work, excavation, haul off and foundation drilled piers are currently underway. Construction documents (CD) for the Garage and the Women's and Children's Hospital are nearing completion and on schedule, including the build out of floors 8-11 which will accommodate the inpatient programs identified in the Blue Cottage Clinical Space Program. Upon approval, the A/E will prepare CD's for the build out of an additional thirty (30) private inpatient rooms on Level 12 to address the high demand and future growth at University Hospital. The Kitchen, Servery, Dining Room, Conference Rooms, and corridor connection to the staff bridge are not currently included in the project scope of the Podium expansion. However, in order to support the construction schedule of the core and shell of the Podium expansion, and to effectively plan for the future relocation of these ancillary support areas to the WCH, staff recommends that design services commence for these areas that will comprise approximately 51,000 square feet in the Podium. Time is of the essence in approving Additional Service Request #3R3 and #13R1 to support the current construction schedule and completion dates. The Additional Service Requests include A/E Construction Administration fees to ensure the associated areas are available to support the Women's

and Children's Hospital. Project Manager and staff have reviewed and negotiated the fees associated with Additional Service #3R3 and #13R1 and recommend approval of the following services in the total amount of \$3,746,847, and (funding sources):

Additional Service #3R3 Podium Expansion Partial	
Interior Build Out	\$ 2,562,584
(Board Designated Funds)	

(WCH Capital Budget)	\$ 1,184,263
Total	\$ 3,746,847
Original contract amount:	\$31,981,288
Previously Approved Amendments	\$12,829,691
Total Contract Amount	\$44,810,979
Amount Requested today	\$ 3,746,847
Revised Contract Amount	\$48,557,826

The workforce composition for Marmon Mok|ZGF was provided for the

Board's review.

RECOMMENDATION: Staff recommends Board of Managers' approval to amend the design

services contract with Marmon Mok LLP in the amount of \$ 3,746,847.

ACTION: A MOTION to approve staff's recommendation as made by Mr.

Engberg, SECONDED by Mr. Hasslocher, and PASSED

UNANIMOUSLY.

EVALUATION: Dr. Jimenez asked for a future presentation that details how the

Departments of Pediatrics and Obstetrics will work to attract patients to the new Women's & Children's Hospital. Dr. Hromas assured him that both departments are very collaborative and he will be happy to provide

a presentation.

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH REVIVE PUBLIC RELATIONS, LLC D/B/A REVIVE HEALTH FOR COMPREHENSIVE BRANDING AND MARKETING SERVICES — LENI KIRKMAN

SUMMARY:

Ms. Kirkman introduced and vielded the floor to Ms. Crystal Senesac, Executive Director of Marketing. The purpose of this contract is to engage a branding and marketing services firm with extensive experience in health care, specifically one with experience building brand awareness and preference for academic medical centers across the U.S. The scope of work includes working closely with University Health staff to update and implement a comprehensive brand improvement strategy and ultimately, deploy a brand campaign that clearly differentiates University Health System among key audiences, highlighting the assets of an academic medical center and defining them as benefits to consumers and referrers. Staff also works with a significant number of local and SWMBE marketing and advertising services firms to develop a wide range of specific public service, health promotion and service line campaigns - MarketVison, Design Film, Creative Noggin, ESD & Associates, Sprocket Media Hub, Prost Media, Baymare, Brenner, Caprice Productions, GEOMedia, Jump Communications, CODESM and

YNIS. Previously, the University Health System issued an RFP for a Comprehensive Branding/Advertising Services firm with extensive experience in branding for academic medical centers in July of 2015. In October on 2015, the Board of Managers approved the selection of Neathawk Dubuque, & Packett (ND&P). As the contract with NDP will expire in 2020, the decision was made to issue a new RFP to ensure the Health System was able to contract for this important service with a firm with the strongest team, the best insights and recommendations, and offering the best value. While the incumbent agency, NDP, did submit a proposal for RFP 219-08-005-SVC, following a thorough review of proposals and in-person presentations, the selection committee concluded that Revive Health best meets the current needs of the organization. Revive conducted extensive research to demonstrate their ability to quickly learn the landscape of the San Antonio medical community. Funds for the first year of this contract, as well as campaign implementation costs and media spend are included in the Corporate Communications & Marketing 2020 budget. Revive will be paid a \$30,000 monthly retainer for general account and management services, as well as strategic counsel and planning. Media commissions will be negotiated based on the size of the buy. Additional services will be billed on an hourly basis with rates ranging from \$85 to \$245. Revive will not conduct any work outside of the monthly retainer without prior authorization from University Health System. The Health System will pay all third-party vendors at net rates. Based on the scope of work, and the estimated hours required to perform these functions, the recommended contract total is \$800,000 per year for a term of three years. The workforce composition of Revive Public Relations, LLC d/b/a Revive Health was provided for the Board's review. Revive has extensive experience in building strong academic health brands. They do not know the Bexar County/South Texas community as well as University Health System's internal team, or as well as many local firms. However, Ms. Kirkman noted that the firm conducted extensive research to demonstrate their ability to quickly learn the landscape of the San Antonio medical community. Therefore, to also enable local firms to gain valuable experience, the Health System will continue to partner with several local agencies. Staff plans to continue to hold semi-annual retreats with all partners to maximize collaboration, ensure all are well-educated on Health System goals, priorities and values, and ensure consistency in how the Health System positions itself in all external and internal messaging. The workforce composition for Revive Health was provided for the Board's review. It was noted that out of 88 employees, 80 are white.

RECOMMENDATION:

Staff recommends Board of Managers' approval not-to-exceed three-year contract in the amount of \$2.4 million with Revive Health for comprehensive branding and marketing services.

ACTION:

A MOTION to approve staff's recommendation as made by Mr. Hasslocher, SECONDED by Dr. Jimenez, and PASSED UNANIMOUSLY.

**EVALUATION:** 

In light of the heavy Latino market in Bexar County and South Texas, Dr. Jimenez expressed concern regarding the vendor's lack of Hispanics and African Americans on their staff. Dr. Kelley referenced Mr. Hernandez's beautiful letter to the staff – A Call to Action – and expressed that racial relations must be in everything the Health System

does, the geography where this vendor is located is inconsistent with the Board's small and local business policy. In addition, the Health System has been in existence for over 50 years and is affiliated with a worldclass medical school. Dr. Kelley expressed her view that the Health System's marketing strategy ought to reflect what it wishes "to be." Mr. Hernandez agreed in that prior to 2015, the Health System was just Bexar County's "safety net." Since the opening of the Sky Tower, the Health System's updated vision statement is "...to be one of the nation's most trusted health institutions," exactly as Dr. Kelley described. With that said, Mr. Hernandez noted that the best is not always in San Antonio, as is the case with Revive Health. Regarding Dr. Jimenez' request for assurance that Revive Health will work closely with the internal marketing team and the local minority firms that the Health System has previously engaged, Ms. Kirkman stressed that the staff's intent is to maintain contracts with local marketing vendors to work side by side with Revive to address the Board's concern; and she acknowledged that there is indeed local talent to be tapped. Kirkman also agreed to share the extent of this conversation with the vendor and committed to lend encouragement to diversify its workforce as much as possible. In addition, Ms. Senesac agreed with Dr. Jimenez that digital marketing and branding is the way of the future, and although this firm is steps ahead of the game in that regard, the bulk of the digital work is done at the local level. Dr. Jimenez also urged the staff to keep in mind that there is a huge difference between marketing and branding for Academic Medical Centers and private hospitals.

.FOLLOW-UP: As indicted above.

Mr. T.J. Mayes left the Board meeting at 7:54 pm and returned at 7:56 pm.

# CONSIDERATION AND APPROPRIATE ACTION REGARDING A MAINTENANCE AGREEMENT WITH EPIC FOR THE EPIC ELECTRONIC HEALTH RECORD PROJECT — BILL PHILLIPS

**SUMMARY:** 

In October of 2018, the Board of Managers approved acquisition and implementation of the Epic Electronic Health Record Project. At that time, no expenses were recognized for software maintenance as the maintenance fee is not due until go-live. The approaching go-live date is July 11, 2020, and it is now time to complete the contractual agreement with Epic for annual software maintenance. Staying current with software maintenance ensures the Health System has the latest software upgrades and support in the event software issues arise. The total cost of the Epic maintenance agreement is \$3,297,304. This agreement covers maintenance fees for a period of 12 months and will be billed monthly beginning on July 11, 2020. The workforce composition for Epic was provided for the Board's review, and Mr. Phillips noted several discussions with Epic CEO encouraging her to diversify Epic workforce by hiring more minorities.

RECOMMENDATION:

Staff recommends Board of Managers' approval of procurement of the Epic Software Maintenance Agreement from Epic in the amount of \$3,297,304.

ACTION: A **MOTION** to approve staff's recommendation as made by Mr.

Hasslocher, SECONDED by Mr. Engberg, and PASSED

UNANIMOUSLY.

EVALUATION: The impact COVID-19 has had on the Epic implementation has been

minimal, delayed by several weeks.

FOLLOW-UP: None.

# CONSIDERATION AND APPROPRIATE ACTION REGARDING A PROFESSIONAL SERVICES AGREEMENT WITH IMPACT ADVISORS, LLC FOR THE EPIC ELECTRONIC HEALTH RECORD PROJECT — BILL PHILLIPS

SUMMARY: In October of 2018, the Board of Managers approved acquisition and

implementation of the Epic Electronic Health Record Project. As the staff prepares for the July 11 go-live date, at the elbow or bedside assistance for end users is a key role to a successful go-live. To accomplish this function, the Health System will have 630 staff members that have been trained as super-users providing support throughout the Health System. Epic will also provide support staff on site and remotely. Staff has identified three areas that are critical for additional provider support: Emergency Department, Operating Rooms and Hospitalists. These areas have been identified due to the complexity and high patient To assist with this critical additional support, staff is volumes. requesting approval for a contract with Impact Advisors to provide 27 Epic trained clinicians (i.e., RN's, MA's, Therapists) to support these areas for two weeks or 3,648 hours. Impact Advisors has been providing consulting support services since the beginning of the Health System's project and have qualified trained staff available for travel during this period. Mr. Phillips explained to the Board why Impact Advisors is uniquely qualified to fill this role. The total cost of the acquisition of services is not to exceed \$409,000. This contract will provide 27 support staff for two weeks of on-site go-live services for a total of 3,648 hours. The workforce composition for Impact Advisors was provided for the

Board's review.

RECOMMENDATION: Staff recommends the Board of Managers approve procurement of

Provider go-live support services from Impact Advisors in the amount

not to exceed \$409,000.

ACTION: A MOTION to approve staff's recommendation as made by Mr.

Engberg, SECONDED by Mr. Smith, and PASSED UNANIMOUSLY.

EVALUATION: None. FOLLOW-UP: None.

At this time Mr. Adams announced that Dr. Hilda Draeger/University Medicine Physicians, has been selected for Epic's Rheumatology Steering Board. This is a group of highly regarded rheumatologists that collaborate to define the gold standard for workflows, recommendations, and best practices in the Epic system.

### <u>CONSIDERATION AND APPROPRIATE ACTION REGARDING THE FINANCIAL REPORT</u> <u>FOR MAY 2020 — REED HURLEY</u>

SUMMARY: In May, the Health System operations continued to be significantly impacted by the COVID-19 crisis resulting in stay at home and social

distancing directives reducing in and outpatient activity. Clinical activity

(as measured by inpatient discharges) was down 18.1 percent for the month compared to budget. Community First Health Plans (CFHP) fully insured membership was up 8.9 percent to budget. On a consolidated basis, gain from operations was \$23.2 million, \$24.4 million better than budget. The consolidated bottom line gain (before financing activity) was \$19.9 million, \$25.2 million better than the budgeted loss of \$5.3 million. Higher other operating revenue and lower operating expense offset lower net patient revenue to result in performance better than budget. CFHP experienced a bottom line gain of \$9.0 million, which was \$9.7 million better than the budgeted loss of \$734 thousand. Higher premium revenue and lower claims expense accounted for the performance to budget. Debt service revenue was \$5.9 million, which was equal to budget. May 2020 payor mix funded rate is 75.7 percent, the highest the Health System has ever had. Days' worth of revenue in Accounts Receivable excluding SNF and CareLink is 53.89. Main drivers for the month of May include the delay in Epic implementation, CFHP positive bottom line, supplemental funding, and \$14 million from CARES Act. Jimenez was interested in knowing how the Pathology Department is handling the surge of COVID testing. The Pathology Department is running steadily. The staff has significantly increased output on Covid-19 test results, there are multiple machines available in the lab. Mr. Hurley reviewed notable increases and/or decreases from the consolidated balance sheet.

RECOMMENDATION: Staff recommends acceptance of the financial reports subject to audit.

ACTION: A MOTION to approve staff's recommendation as made by Mr.

Engberg, SECONDED by Mr. Hasslocher, and PASSED

UNANIMOUSLY.

EVALUATION: None. FOLLOW-UP: None.

#### PRESENTATIONS AND EDUCATION:

### <u>UPDATE ON THE WOMEN'S AND CHILDREN'S HOSPITAL AND ASSOCIATED</u> PROJECTS — *DON RYDEN*

SUMMARY: In the interest of time, Mr. Adams deferred this presentation. If

encouraged his Board colleagues to review the written report.

RECOMMENDATION: None.
ACTION: None.
EVALUATION: None.
FOLLOW-UP: None.

#### **INFORMATION ONLY ITEMS:**

#### SECOND QUARTER QUALITY REPORT — BRYAN ALSIP, M.D.

<u>2019 ANNUAL REPORT ON LEARNING AND DEVELOPMENT — THERESA SCEPANSKI</u>

EPIC ELECTRONIC HEALTH RECORD PROJECT UPDATE — BILL PHILLIPS

# $\frac{\text{REPORT ON RECENT RECOGNITIONS AND UPCOMING EVENTS} - \textit{LENI}}{\textit{KIRKMAN}}$

SUMMARY:	Mr.	Adams	directed	the	Board's	attention	to	the	informational	reports
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bove. He urge them to review the documents and contact the staff

directly with questions or comments.

RECOMMENDATION: None.
ACTION: None.
EVALUATION: None.
FOLLOW-UP: None.

### ADJOURNMENT — JIM ADAMS, CHAIR

There being no further business,	Mr. Adams adjourned the Board meeting at 8:23pm.
James R. Adams	James C. Hasslocher
Chair, Board of Managers	Secretary, Board of Managers
	Sandra D. Garcia, Recording Secretary



### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

Consideration and Appropriate Action Regarding Medical-Dental Staff
Membership and Privileges

### **Background:**

The Board of Managers of University Health System 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 System's Professional Staff Services department (PSS) is responsible for ensuring compliance regarding all applicants for the credentialing and privileging of providers. Operating under the strict standards, Professional Staff Services handles the Health System's credentialing and privileging process from beginning to end as outlined below.

## **Credentialing Process:**

Requests for the credentialing and privileging of clinical providers are collected and reviewed by UHS Medical-Dental Staff Coordinators who ensure that all necessary information is included in the application. A properly completed application is then sent to the Central Verifications Office (CVO) staff, within the UHS Professional Staff Services department, to perform primary source verifications of all professional activities from graduation of medical school to the present.

Once the CVO staff has completed the primary source verifications, the UHS PSS staff assembles a complete file to be reviewed by the appropriate clinical Department Chair at the UT Health School of Medicine. Once approved by the Department Chair, the complete file is presented to the appropriate Medical-Dental Staff Committee – either the UHS Allied Health or UHS Physician Credentials Committee for review and approval.

Upon approval, Professional Staff Services for UHS will request temporary privileges for the provider. Approval from the following are required in order to grant the Pendency of

## Consideration and Appropriate Action Regarding Medical-Dental Staff Membership and Privileges

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Application for Temporary Privileges: Chief of Medical-Dental Staff; the Director of UHS Professional Staff Services department; the VP of Legal Services; President/CEO of the Health System or designee (Chief Medical Officer); and the Executive Committee of the Medical-Dental Staff. The UHS Board of Managers has final approval of all applicant files.

If final approval is received from the Board of Managers, the provider is placed on a twoyear reappointment cycle. After 12 months' provisional review, the provider's status changes from Provisional to Active or Courtesy Staff depending on board certification and the frequency of patient encounters during the previous 12 months.

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 June 29, 2020 and reviewed the credential files of the individuals listed on the attached Credentials Report and the Professional Performance Evaluation Report. In its meeting of July 7, 2020, the Executive Committee of the Medical-Dental Staff recommended approval of the following:

1) Credentials Committee Report

## Recommendation:

The following list of providers have been reviewed and approved in accordance with the Health System's credentialing and privileging process. We recommend the Board of Mangers approve clinical privileges for the attached list of providers.

Bryan J. Alsip, M.D., M.P.H.

Executive Vice President/

Chief Medical Officer

Rajeev Suri, M.D.

President, Medical-Dental Staff

George B. Hernández, Jr.

President/Chief Executive Officer



## **CREDENTIALS COMMITTEE**

June 29, 2020

Revised July 7, 2020

Initial Appointments			
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
Al Qaysi, Mustafa D., MD	Pending	Medicine/Hospital Medicine	
Ansari, Tahir Saleem, DO	Pending	Family & Community Medicine	
Arango, Alejandro, DDS	Pending	Oral & Maxillofacial Surgery	
Bible, Amy, CNM	Pending	Obstetrics/Gynecology	
Blankenship, Logan M., MD	Pending	Obstetrics/Gynecology	
Bode-Omoleye, Olaoluwa, MD	Pending	Pathology	
Buell, Tamara I., MD	Pending	Family & Community Medicine	
Bui, Diep, MD	Pending	Neurology	
Cantu, Marissa S., MD	Pending	Emergency Medicine	
Casares-Baker, Sara J.	Pending	Pediatric/Neonatology	
Chechani, Ryan, R. MD	Pending	Emergency Medicine	
Clapper, Amber R., MD	Pending	Medicine/Hospital Medicine	
Correia, Greg, MD	Pending	Family & Community Medicine	
Cruz, April, CHW	Pending	Family & Community Medicine	
Curry, Rebecca, PA-C	Pending	Pediatrics/Neonatology	
Davis, Annabelle S., MD	Pending	Medicine/Hospital Medicine	
Davis, Jordan N., PMHNP	Pending	Psychiatry	
Dietrich, Leslie-Anne J., MD	Pending	Pediatrics/Neonatology	
Dodd, Katherine, DO	Pending	Medicine/Cardiology	
Dursun, Furkan, MD, RA	Pending	Urology	
Esteve, Lucy M.A., MD	Pending	Medicine/Hospital Medicine	
Everitt, Bryan, MD	Pending	Emergency Medicine	
Fazeli, Cameron, DO	Pending	Medicine/Hospital Medicine	
Fidellow, Rebecca E., MD	Pending	Family & Community Medicine	
Fields, Taylor, MD	Pending	Ophthalmology	
Fraser, Jenna C., MD	Pending	Medicine/Hospital Medicine	., ., ., ., ., ., ., ., ., ., ., ., ., .
Fulton, Zachary D.	Pending	Radiology/Neuroradiology	
Gao, Han, MD	Pending	Emergency Medicine	
Gutierrez Naranjo, Jose M., RA	Pending	Orthopaedics	
Haley, Kristen, PA-C	Pending	Medicine/Hospital Medicine	
Harfouch, Badr, MD	Pending	Medicine/Hospital Medicine	
Hewitt, Michael, RN, RA	Pending	Medicine/Diabetes	
Hughes, Jessica H., MD	Pending	Obstetrics/Gynecology	
Joseph, Shanty, FNP-BC	Pending	Medicine/Cardiology	
Julia, Jonathan C., MD	Pending	Anesthesiology	
Kendrick, Zachary W. MD	Pending	Emergency Medicine	
Kuecker, Kaytlyn N., PA-C	Pending	Emergency Medicine	
Lam, Christopher, MD	Pending	Medicine/Hospital Medicine	

and the second s		
Littlejohn, Martin R., MD	Pending	Anesthesiology
Manohar, Crystal M., MD	Pending	Anesthesiology
Martin, Elizabeth M., MD	Pending	Obstetrics/Gynecology
Mehta, Dhruv S., MD	Pending	Medicine/Gastroenterology
Meier, Marshall J., DO	Pending	Medicine/Hospital Medicine
Myers, Abigail C., MD	Pending	Family & Community Medicine
Neuhoff, Baraba K., MD	Pending	Obstetrics/Gynecology
Palacios, Tomas M., PA-C	Pending	Emergency Medicine
Patton, Cody D., DO	Pending	Family & Community Medicine
Reddy, Gireesh, DPM	Pending	Orthopaedics/Podiatry
Reddy, Srinidhi R., MD	Pending	Obstetrics/Gynecology
Satsangi, Nancy, MD	Pending	Anesthesiology
Smith, Natalie D., RA	Pending	Medicine/Pulmonary & Critical
		Care
Soekamto, Christa, MD	Pending	Ophthalmology
Svec, Jeff H., MD	Pending	Family & Community Medicine
Tiwari, Ruchi, MD	Pending	Radiology
Tlaseca, Kennedy M., MD	Pending	Family & Community Medicine
Tsau, Jeff H., MD	Pending	Emergency Medicine
Umapathy, Chandraprakash, MD	Pending	Medicine/Gastroenterology
Vasquez, Libia M., MD	Pending	Medicine/Hospital Medicine
Vroman, Penny, MD	Pending	Radiology/Nuclear Medicine
Yu, Gregory G., MD	Pending	Emergency Medicine
Zala, Gaurang, MD	Pending	Family & Community Medicine
The initial application	ons listed below were pre	esented in an ad hoc committee on 05/26/2020
Elliott, Stephanie, FNP	Pending	Obstetrics/Gynecology
Weatherford, Shelly A., PA	Pending	Surgery/Trauma & Emergency
ĺ		Surgery

ASC Medical Center				
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS	
Blankenship, Logan M., MD	Pending	Obstetrics/Gynecology		
Diallo, Souleymane Y., MD	Pending	Medicine/Gastroenterology		
Fields, Taylor, MD	Pending	Ophthalmology		
Hughes, Jessica H., MD	Pending	Obstetrics/Gynecology		
Littlejohn, Martin R., MD	Pending	Anesthesiology		
Manohar, Crystal M., MD	Pending	Anesthesiology		
Martin, Elizabeth M., MD	Pending	Obstetrics/Gynecology		
Mehta, Dhruv S., MD	Pending	Medicine/Gastroenterology		
Neuhoff, Baraba K., MD	Pending	Obstetrics/Gynecology		
Reddy, Gireesh, DPM	Pending	Orthopaedics/Podiatry		
Reddy, Srinidhi R., MD	Pending	Obstetrics/Gynecology		
Rocha, Jason P., MD	Pending	Medicine/Gastroenterology		
Soekamto, Christa, MD	Pending	Ophthalmology		
Tiwari, Ruchi, MD	Pending	Radiology		
Umpathy, Chandraprakash, MD	Pending	Medicine/Gastroenterology		

	ASC Rob	ert B. Green	
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
Blankenship, Logan Michelle, MD	Pending	Obstetrics/Gynecology	
Diallo, Souleymane Y., MD	Pending	Medicine/Gastroenterology	
Hughes, Jessica H., MD	Pending	Obstetrics/Gynecology	

Littlejohn, Martin R., MD	Pending	Anesthesiology	
Manohar, Crystal M., MD	Pending	Anesthesiology	
Martin, Elizabeth M., MD	Pending	Obstetrics/Gynecology	
Mehta, Dhruv S., MD	Pending	Medicine/Gastroenterology	
Neuhoff, Baraba K., MD	Pending	Obstetrics/Gynecology	
Reddy, Gireesh, DPM	Pending	Orthopaedics/Podiatry	
Reddy, Srinidhi R., MD	Pending	Obstetrics/Gynecology	
Rocha, Jason P., MD	Pending	Medicine/Gastroenterology	
Tiwari, Ruchi, MD	Pending	Radiology	
Umpathy, Chandraprakash, MD	Pending	Medicine/Gastroenterology	

# REAPPOINTMENTS (July 28, 2020 – May 31, 2022)

ASC- Medical Center - Reappointment			
NAME	STATUS	DEPARTMENT/SECTION COMMENTS	
Alas, Alexandriah N., MD	Active	Obstetrics/Gynecology	
Fakhreddine, Mohamad H., MD	Active	Radiation Oncology	
Freeman, Rachel M., MD	Active	Anesthesiology	
Shah, Amita R., MD	Active	Surgery/Plastic &	
		Reconstructive Surgery	
Sobolevsky, Michael A., DPM	Active	Orthopaedics	

	ASC- Robert B.	Green - Reappointment
NAME	STATUS	DEPARTMENT/SECTION COMMENTS
Alas, Alexandriah N., MD	Active	Obstetrics/Gynecology
Freeman, Rachel M., MD	Active	Anesthesiology
Sobolevsky, Michael A., DPM	Active	Orthopaedics
Startzell, James M., DMD	Active	Oral & Maxillofacial Surgery

	Anes	thesiology
NAME	STATUS	DEPARTMENT/SECTION COMMENTS
Culling, Bradley V., DO	Courtesy	Anesthesiology
Freeman, Rachel M., MD	Active	Anesthesiology

Cardiothoracic Surgery			
NAME	STATUS	DEPARTMENT/SECTION COMMENTS	
Crane, Jessica, PF	Clinical Associate	Cardiothoracic Surgery	
Johnson, Scott B., MD	Active	Cardiothoracic Surgery	
Rodriguez, Rita R., RN	Clinical Associate	Cardiothoracic Surgery	
Schniepp, Heather E., ACPNP	Advance Practice Nurse	Cardiothoracic Surgery	
Wilkinson, Maria, RN	Clinical Associate	Cardiothoracic Surgery	

Grijalva, Cristina E., MD	Active	Emergency Medicine	Addition of Privileges
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
	Emerger	icy Medicine	

	Family & Con	nmunity Medicine	
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
Aktepe, Valarie A., PA	Physician Assistant	Family & Community Medicine	

Ali, Olga, PA	Physician Assistant	Family & Community Medicine	
Alvarado, Maureen, DO	Active	Family & Community Medicine	
Beck, Tina C., PharmD	Affiliate	Family & Community Medicine	
Corchado, Oliverio, PA	Physician Assistant	Family & Community Medicine	
Curry, Brittany G., FNP	Advance Practice Nurse	Family & Community Medicine	
Del Rosario, Albelyh Sergia P., MD	Active	Family & Community Medicine	
Garcia, Adriane R., PA	Physician Assistant	Family & Community Medicine	
Garza, Diana A., FNP	Advance Practice Nurse	Family & Community Medicine	
Huerta, Jose O., ACNP	Advance Practice Nurse	Family & Community Medicine	
Rezai, Shahin, MD	Active	Family & Community Medicine	
Sidhu, Prajna, MD	Active	Family & Community Medicine	
Usatine, Richard P., MD	Active	Family & Community Medicine	
Varma, Archana, MD	Active	Family & Community Medicine	Voluntary Reduction of Privileges
Vasquez, Diana M., FNP	Advance Practice Nurse	Family & Community Medicine	

	Medicine				
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS		
Ahmed, Shah H., MD	Active	Medicine/Cardiology			
Badin, Auroa, MD	Active	Medicine/Cardiology	Additional/Reduction of Privileges		
Berggren, Ruth E., MD	Active	Medicine/Infectious Diseases			
Bresnahan, Leticia Y., RA	Research Associate	Medicine/Infectious Diseases			
Butler, Matthew J., MD	Active	Medicine/ Hematology & Oncology			
Cersosimo, Eugenio, MD	Provisional	Medicine			
Escalante, Agustin, MD	Active	Medicine/ Rheumatology			
Garcia-Everett, Ashley L., MD	Courtesy	Medicine/ Hospital Medicine			
Kim, Mary K., PA-C	Physician Assistant	Medicine/ Hospital Medicine			
Le, Minh-Phuong T., MD	Active	Medicine/ Hospital Medicine			
Mehta, Anjlee M., MD	Active	Medicine/ Cardiology			
Perez, Graciela L., RA	Research Associate	Medicine/Infectious Diseases			
Rosas, Christy A., PA	Physician Assistant	Medicine/ Gastroenterology	Cross Appointed in Transplant		
Ryan, Laurajo, PharmD	Affiliate	Medicine/ Internal Medicine			
Salazar, Mary I., NP	Advance Practice Nurse	Medicine/ Hematology & Oncology			
Serrano Pinilla, Ruth C., MD	Active	Medicine/ Infectious Diseases			
Shamsi, Kinza S., MD	Active	Medicine/ Nephrology			
Sprowls, Jennifer M., PA-C	Physician Assistant	Medicine/Hospital Medicine			
Toro, Nancy, RA	Research Associate	Medicine/ Infectious Diseases			
Trevino, Hector, RA	Research Associate	Medicine/Hematology & Oncology			
Volz, Holly H., MD	Active	Medicine/Dermatology			
Wilber, Judith J., MD	Active	Medicine/Hospital Medicine			

Sonnenberg, Suzanne S., PA	Physician Assistant	Neurology	
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
	Ne	urology	

	Obstetric	s/Gynecology
NAME	STATUS	DEPARTMENT/SECTION COMMENTS
Alas, Alexandriah N., MD	Active	Obstetrics/Gynecology

	Ophth	almology	
 NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
Young, Ryan C., MD	Courtesy	Ophthalmology	Pending Documentation

	Or	al & Maxillofacial Surgery
NAME	STATU	S DEPARTMENT/SECTION COMMENTS
Gordon, Mathew C., MD	Active	Oral & Maxillofacial Surgery
Startzell, James M., DMD	Active	Oral & Maxillofacial Surgery

	Orth	opaedics	
NAME	STATUS	DEPARTMENT/SECTION COMMENTS	
Del Bosque, Brandon L., PA-C	Physician Assistant	Orthopaedics/General	
Sobolevsky, Michael A., DPM	Active	Orthopaedics/Podiatry	

	Pediatrics Pediatrics			
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS	
Abrams, Steven A., MD	Active	Pediatrics/ Neonatology		
Castorena, Jessica M., PNP	Advance Practice Nurse	Pediatrics/ Critical Care		
Fernandez-Restrepo, Lorena M., MD	Active	Pediatrics/ Critical Care		
Gong, Alice K., MD	Active	Pediatrics/Neonatology		
Maldonado, Frances M., RA	Research Associate	Pediatrics/ Hematology- Oncology	Additional Privileges	
May, Leah C., PA	Physician Assistant	Pediatrics/ Neonatology		
Nolan Jr., Robert J., MD	Courtesy	Pediatrics/General Pediatrics		
Odom, Michael W., MD	Active	Pediatrics/ Neonatology		
Woodward, Cathy S., PNP-AC	Advance Practice Nurse	Pediatrics/ Critical Care		

	Psy	chiatry	
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
Lopez, Eliot J., PhD	Affiliate	Psychiatry	

	Radiatio	n Oncology	
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
Fakhreddine, Mohamad H., MD	Active	Radiation Oncology	

	Rehabilita	ition Medicine
NAME	STATUS	DEPARTMENT/SECTION COMMENTS
Davis Jr., Merritt G., DO	Active	Rehabilitation Medicine
Riley, Cynthia R., MD	Courtesy	Rehabilitation Medicine
Jacobs, Claire E., PhD	Affiliate	Rehabilitation Medicine

		urgery	
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
Braverman, Maxwell A., DO	Active	Surgery/ Trauma & Emergency	
		Surgery	**************************************
Butler, William E., PA-C	Physician Assistant	Surgery/ Trauma & Emergency	
		Surgery	

Cestero, Ramon F., MD	Active	Surgery/ Trauma & Emergency Surgery	Additional of Privileges
Dedmon, Mark K., PA-C	Physician Assistant	Surgery/ Transplant	
Ferrer Cardona, Lucas M., MD	Active	Surgery/ Vascular Surgery	
Fritze, Danielle M., MD	Active	Surgery/ Transplant	
Miserlis, Dimitrios, MD	Active	Surgery/Vascular Surgery	
Mitromaras, Christopher R., MD	Active	Surgery/Vascular Surgery	
Saad, Adriana A., PA-C	Physician Assistant	Surgery/ Transplant	
Shah, Amita R., MD	Active	Surgery/Plastic & Reconstructive Surgery	
Shireman, Paula K., MD	Active	Surgery/Vascular Surgery	
Wang, Peter T., MD	Active	Surgery/Plastic & Reconstructive Surgery	
Wilson, Jeni L., APN	Advance Practice Nurse	Surgery/Trauma & Emergency Surgery	

	o and an earlier terms of the color of U	rology	
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
Chowdhury, Wasim H., RA	Research Associate	Urology	
Todd, Grace I., ANP	Clinical Associate	Urology	Additional of Privileges

	Request for Waiver – Board Certification
NAME	STATUS DEPARTMENT/SECTION COMMENTS
None	

Updated DOP Form			
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
Boyd, Angela, MD	Active	Obstetrics/Gynecology	
Fernandez-Restrepo, Lorena M., MD	Active	Pediatrics/ Critical Care	
Fritze, Danielle M., MD	Active	Surgery/ Transplant	
Escalante, Agustin, MD	Active	Medicine/ Rheumatology	

STATUS Active	DEPARTMENT/SECTION  Medicine/Cardiology	COMMENTS  Addition: Watchman  Reductions: Excision of skin and subcutaneous tumors, nodules and lesions; Management of
Active	Medicine/Cardiology	Reductions: Excision of skin and subcutaneous tumors, nodules
		burns, superficial and partial thickness; Nasogastric tube insertion and gastric lavage; Parenteral Hyper-alimentation; Performance of simple skin biopsies; Peripheral Nerve Blocks; Placement of anterior and
		posterior nasal hemostatic packing; Removal of penetrating foreign body from the eye, nose

Boyd, Angela, MD	Active	Obstetrics/Gynecology	Addition: Maternal-Fetal Medicine: Comprehensive obstetrical ultrasound including Doppler studies; Percutaneous umbilical blood sampling (PUBS); Nuchal Translucency; Placental biopsy; Instillation of medications to fetus in utero; Fetal thoracentesis; Invasive fetal procedures (including fetal thoracentesis, puncture of fetal bladder)
Cestero, Ramon, MD	Active	Surgery/ Trauma & Emergency Surgery	Addition: Surgical Critical Care
Dialllo, Souleyman Y., DO	Active	Medicine/Hospital Medicine	Addition: Gastroenterology Core Privileges; Capsule endoscopy; Moderate/Deep Sedation; and Fluoroscopy
Grijalva, Cristian, MD	Active	Emergency Medicine	Addition: Trauma (Extended FAST) evaluation and Limited emergency cardiac evaluation and resuscitative evaluation
Maldonado, Frances, RA	Research Associate	Pediatrics/Hematology & Oncology	Addition: Schedules participant research visit and study procedures; Prepares vouchers for participant payment; Collection of Human Specimens within an OR setting
Rocha, Jason P., MD	Active	Medicine/Hospital Medicine	Addition: Gastroenterology Core Privileges; Capsule endoscopy; Moderate/Deep Sedation; and Fluoroscopy
Todd, Grace I., ANP	Clinical Associate	Urology	Addition: Checks and records vital signs
Varma, Archana, MD	Active	Family & Community Medicine	Reduction: Pediatric and Newborn Core Ambulatory Privileges

Change of Status				
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS	
Dialllo, Souleyman Y., DO	Active	Medicine/Hospital Medicine	Cross Appointment in Gastroenterology	
Rocha, Jason P., MD	Active	Medicine/Hospital Medicine	Cross Appointment in Gastroenterology	
Sallee, Patricia K., PA-C	Physician Assistant	Medicine/Hospital Medicine	Cross Appointment in Infectious Disease and Additional Supervisor Dr. Thomas Patterson	

		Medical Reco	rds Suspensions	
ţ	NAME	STATUS	DEPARTMENT/SECTION	FROM - TO
ij	<sup>7</sup> None			

Suspensions			
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
None			

Reinstatements			
NAME	STATUS	DEPARTMENT/SECTION	COMMENTS
None			

Ending of appointments				
NAME	DEPARTMENT/SECTION	ENDING DATE		
Alkhouri, Naim, MD	Medicine/Gastroenterology	06/13/2020		
Buckley, Kathleen, CPNP	Pediatrics/Child Abuse	05/31/2020		
Darwin, Justin, PA-C	Orthopaedics	05/31/2020		
Darwin, Priscilla, FNP	Neurology	05/29/2020		
Eddins-Folensbee, Florence, MD	Psychiatry	05/31/2020		
Farris, Timothy, MD	Anesthesiology	06/06/2020		
Kim, Andrew, MD	Medicine/Hospital Medicine	06/01/2020		
Lamb, Amy R., CNM	Obstetrics/Gynecology – MFM	06/12/2020		
Lavrynenko, Olga, RA	Medicine/Diabetes	06/19/2020		
Lewis, Jason, MD	Ophthalmology	06/30/2020 ASC MC		
Madhusudanannair- Kunnuparampil, Vinu, MD	Medicine/Hematology & Oncology	06/30/2020		
Mckee-Kennedy, Hannah, MD	Family & Community Medicine	06/19/2020		
Moreland, Christopher, MD	Medicine/Hospital Medicine	05/31/2020		
Newman, Judith Therese, MD	Ophthalmology	06/08/2020		
Orozco, Eduardo, APRN	Emergency Medicine	06/19/2020		
Schwesinger, Wayne H., MD	Surgery/General Surgery	04/30/2020		
Shah, Kush, PHD	Orthopaedics	6/17/2020		
Stowes, Ashlie, MD	Anesthesiology	05/12/2019 – ASC – RBG 8 ASC – MC Only		
Toohey, John S., MD	Orthopaedics	03/31/2020		
Valadez, David Lee, MD	Medicine/Internal Medicine	06/05/2020		

The above listed files have been reviewed by the members of the Credentials Committee and approved as submitted.

Prepared by:

Gay Lynn Heaney

Medical-Dental Staff Coordinator

Mark T. Nadeau, MD

Date

Chairman, Credentials Committee

Al Qaysi, Mustafa D., MD

### **Personal Information**

Languages:

### **Practice Information**

**UH MAILING ADDRESS** UT HEALTH SAN ANTONIO 7703 FLOYD CURL DR MC 7982

MEDICINE/GENERAL & HOSPITAL MEDICINE SAN ANTONIO, TX 78229

Telephone: (210) 567-0777

Fax Number: (210) 358-0647

#### **UH PRIMARY OFFICE ADDRESS**

UT HEALTH SAN ANTONIO 4502 MEDICAL DRIVE UNIVERSITY HEALTH SYSTEM SAN ANTONIO, TX 78229 Telephone: (210) 743-6000

Fax Number: (210) 358-0647

Comments/Schedule Number State **Expires** Licensure STATE LICENSE

Appointment

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment: Advancement:

Last Reappointment:

Next Appointment

Department:

Division: Section:

Status:

MEDICINE

HOSPITAL MEDICINE HOSPITAL MEDICINE ID: 40145 Data Bank: 05/08/2020 Query Results: PDS Status

Report Category:

**Board Certification** 

Certified

**Initial Cert.** 

PENDING

Last Cert.

**Expires** 

AMERICAN BOARD OF INTERNAL MEDICINE

(INTERNAL MEDICINE)

PENDING/INTEDNING TO SIT FOR THE BOARDS 08-2020

Specialty 1: INTERNAL MEDICINE

Specialty 2:

Verified Negative Method Professional Liability From To UTHSCSA MALPRACTICE 07/01/2020 08/31/2020

Limits: 500,000. - 1,500,000. | Terms: Upon Termination

Verified Medical/Professional Education From To Method Negative UNIVERSITY OF AL-MUSTANSIRIYAH COLLEGE OF MEDICINE 10/01/2005 06/30/2011

Subject: Doctor of Medicine

Verified Method Negative **Training** From To Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 06/30/2020 05/01/2020 07/01/2018 **Fmail** N Subject: INTERNAL MEDICINE 07/01/2017 06/30/2018 05/01/2020 Email N

Internship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX

Subject: INTERNAL MEDICINE

**Employment** From Τo Verified Method Negative UT HEALTH SAN ANTONIO 07/01/2020 PRESENT 05/04/2020 Memo to File Ν Medical City Complex, Baghdad, Iraq 01/20/2012 03/20/2013 AlRashad Hospital, Baghdad, Iraq 03/01/2013 12/30/2014

**Hospital Affiliations** From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Pending 04/30/2020 Memo to File VA MEDICAL CENTER/SOUTH TEXAS VETERANS HEALTH SYS, Pending 05/05/2020 Memo to File Other From Verified Method To Negative

GAP Subject: Seeking a residency position during the interview season and working outside the field of medicine.

08/04/2016 06/30/2017

ANSARI, TAHIR S., DO

**Personal Information** 

Languages:

**Practice Information** 

**UH MAILING ADDRESS** 903 W. MARTIN STREET SAN ANTONIO, TX 78207 Telephone: (210) 358-3427

Fax Number: (210) 358-5940

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY MEDICINE ASSOCIATES 2121 SOUTHWEST 36TH

SAN ANTONIO, TX 78237 Telephone: (210) 358-5100

Fax Number: (210) 358-5157

Licensure

Number

**Expires** State

Comments/Schedule

STATE LICENSE

TX

**Appointment** 

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment: Advancement: Last Reappointment:

Section: Status: Next Appointment

Department: Division:

**FAMILY & COMMUNITY MEDICINE** UNIVERSITY MEDICAL ASSOCIATES

FAMILY MEDICINE PENDING

To

ID: 43113 Data Bank: Query Results:

Category: UMA FULL TIME

**Board Certification** 

Certified PENDING/INTENDING **Initial Cert.** 

Verified

Verified

Last Cert.

Method

Method

**Expires** 

Negative

Negative

AMERICAN BOARD OF FAMILY MEDICINE (FAMILY MEDICINE)

TO SIT FOR THE BOARDS 07/2020

Specialty 1: FAMILY MEDICINE

Specialty 2:

Professional Liability	From	То	Verified	Method	Negative
UTHSCSA MALPRACTICE	08/01/2020	08/31/2020			
Limits: 500,000 - 1, 500,000   Terms: UPON TERMINATION					

Medical/Professional Education NEW YORK INSTITUTE OF TECHNOLOGY COLLEGE OF OSTEOPATHIC

05/31/2017 05/01/2013 Subject: DOCTOR OF OSTEOPATHIC MEDICINE

From

Training	From	То	Verified	Method	Negative
Residency PECONIC BAY MEDICAL CENTER, RIVERHEAD, NY	06/19/2017	06/18/2020	06/09/2020	Print	N
Subject: FAMILY MEDICINE					

From To **Employment** COMMUNITY MEDICINE ASSOCIATE 08/01/2020 PRESENT

**Hospital Affiliations** Verified Method Negative From To UNIVERSITY HEALTH SYSTEM PENDING

Other From To Verified Method Negative

Subject: WAITING TO BE CREDENTIALED 07/31/2020 GAP 06/01/2020

Arango, Alejandro, DDS

### **Personal Information**

Languages: ENGLISH

### **Practice Information**

**UH MAILING ADDRESS** 

8210 Floyd Curl Drive, MC 8124 DEPT. OF ORAL AND MAXILLOFACIAL SURGERY

SAN ANTONIO, TX 78229 Telephone: (210) 450-3100

Fax Number: (210) 949-3006

### **UH PRIMARY OFFICE ADDRESS**

Oral and Maxillofacial Surgery 8210 Floyd Curl Drive, MC 8124 SAN ANTONIO, TX 78229 Telephone: (210) 450-3100

Fax Number: (210) 949-3006

Licensure	Number	State	Expires	Comn	nents/Sched	ule	
STATE LICENSE		TX	12/31/2021				
Appointment							
BEXAR COUNTY HOSPITAL DISTRICT Initial Appointment:		Departm	ent: DEPAR	TMENT OF	ORAL & MAXILLOF	ACIAL SURGERY	ID: 33252
<b>Board Certification</b>			Certif	ied :	Initial Cert.	Last Cert.	Expires

AMERICAN BOARD OF ORAL AND MAXILLOFACIAL SURGERY (ORAL AND MAXILLOFACIAL SURGERY)

07/31/2024

Specialty 1: DENTISTRY

Specialty 2:

Professional Liability	From	То	Verified	Method	Negative
UTHSCSA MALPRACTICE		08/31/2020			_
Limits: 500,000 - 1,500,000   Terms:					
Medical/Professional Education	From	То	Verified	Method	Negative
HEALTH SCIENCES INSTITUTE-MEDELLIN COLOMBIA Subject: DOCTOR OF DENTAL SCIENCE	01/16/1992	06/30/1997	06/05/2020	Print	N
HEALTH SCIENCES INSTITUTE-MEDELLIN COLOMBIA Subject: Epidemiology	06/01/2010	05/31/2012	06/08/2020	Print	N
Training	From	То	Verified	Method	Negative
Internship HEALTH SCIENCES INSTITUTE-MEDELLIN COLOMBIA Subject: Oral and Maxillofacial Surgery	08/01/1998	04/30/1999	06/04/2020	Print	N
Residency HEALTH SCIENCES INSTITUTE-MEDELLIN COLOMBIA Subject: Oral and Maxillofacial Surgery	06/01/1999	08/12/2004	06/04/2020	Print	N
Residency MASSACHUSETTS GENERAL HOSPITAL Subject: Oral and Maxillofacial Surgery	06/12/2015	06/30/2017	06/04/2020	Print	N
Employment	From	То	Verified	Method	Negative
UT HEALTH	05/12/2020		05/26/2020	Print	N
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER SAN ANTONIO	06/01/2013		05/22/2020	Internet	N
Clinica Las Americas, Medellin,	01/01/2009	06/30/2012	06/05/2020	Print	N
BDS MARKETING	07/07/2014	04/25/2016	05/26/2020	Print	N
MASSACHUSETTS GENERAL HOSPITAL	06/15/2015	06/30/2017	05/27/2020	Print	N
HARVARD UNIVERSITY	06/15/2015	06/30/2017	05/27/2020	Internet	N
Midwestern University School of Dental Medicine - IL, Downers Grove,	08/07/2017	03/30/2019	05/27/2020	Print	N
MEDICAL COLLEGE OF WISCONSIN , MILWAUKEE, WI	07/01/2019	04/30/2020	05/27/2020	Internet	N
Hospital Affiliations	From	То	Verified	Method	Negative
NIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX		Present	06/04/2020	Memo to File	N
CHILDREN'S HOSPITAL OF WISCONSIN , MILWAUKEE, WI	09/19/2019	Present	05/22/2020	Print	N

### BEXAR COUNTY HOSPITAL DISTRICT

## **Provider Profile**

Arango, Alejandro, DDS

Clinica Las Americas, Medellin, TX	01/01/2009	06/30/2012	06/05/2020	Mail Merge	N
INSTITUTO DE CIENCIAS DE LA SALUD , MEDELLIN, UNIVERSITY HEALTH SYSTEM-SAN ANTONIO , SAN ANTONIO, TX DEPARTMENT OF MEDICINE , SAN ANTONIO, TX	02/01/2006 02/25/2015 02/25/2015	11/30/2012 06/05/2015 06/05/2015	06/08/2020 05/21/2020	VLETE Verbal	N N
FROEDTERT MEMORIAL LUTHERAN HOSPITAL , MILWAUKEE,	09/26/2019	04/30/2020	06/04/2020	Online	N
Other	From	То	Verified	Method	Negative
Other  GAP Subject: took time off after residency went to flordia to spend time with extended family	<b>From</b> 07/01/2017	<b>To</b> 08/07/2017	<b>Verified</b> 05/22/2020	<b>Method</b> Print	Negative N

Bible, Amy A., CNM

### **Personal Information**

Languages:

### **Practice Information**

**UH MAILING ADDRESS** 

7703 FLOYD CURL DRIVE, MC 7836 SAN ANTONIO, TX 78229

Telephone: (210) 567-5009

Fax Number: (210) 567-5062

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM ROBERT B.

**GREEN CAMPUS** 903 W. MARTIN ST

SAN ANTONIO, TX 78207 Telephone: (210) 358-3582

Fax Number: (210) 358-3252

**UH SECONDARY ADDRESS** 

UT HEALTH

8300 FLOYD CURL DRIVE, 5TH FLOOR

MARC OB/GYN

SAN ANTONIO, TX 78229 Telephone: (210) 450-9500

Fax Number: (210) 450-6027

Licensure	Number	State	Expires	Comments/Schedule	
STATE LICENSE		TX			
STATE LICENSE		TX			

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment: Advancement:

Last Reappointment:

Next Appointment

07/28/2020

Department: Division:

Section: Status:

OBSTETRICS/GYNECOLOGY OBSTETRICS/GYNECOLOGY ID: 02268

Data Bank: 06/04/2020 Query Results:

Category:

<b>Board Certification</b>		Certified	Initial Cert.	Last Cert.	Expires
AMERICAN MIDWIFERY CERTIFICATION BOARD	(MID-WIFE)	CURRENT	01/01/2002		12/31/2025
NATIONAL CERTIFICATION CORPORATION	()	CURRENT	06/05/2020		06/15/2021

Specialty 1: MID-WIFE

Specialty 2:

Professional Liability		From	To	Verified	Method	Negative
CHAPTERS 101, 104, 108 OF TEXAS CIVIL Limits: 100,000 - 300,000   Terms: 1 mo	PRACTICE AND REMEDIES	07/01/2020	12/31/2050			
Undergraduate Education		From	To	Verified	Method	Negative
UNIVERSITY OF KANSAS SCHOOL OF MEDI Subject: BACHELOR OF SCIENCE		08/01/1995	05/18/1997	06/03/2020	National Student Clearinghouse	N
Medical/Professional Educatio	n	From	То	Verified	Method	Negative
University of Kansas School of Medicine, Ka Subject: MASTER OF SCIENCE I	* *	08/01/1995	08/01/2000	06/03/2020	National Student Clearinghouse	N
UNIVERSITY OF PENNSYLVANIA  Subject: POST-MASTER'S CERT.  MIDWIFERY	PGM IN NURSING-NURSE-	09/01/2000	12/21/2001	06/03/2020	National Student Clearinghouse	N
Employment		From	То	Verified	Method	Negative
LONE STAR OB/GYN ASSOCIATES		02/19/2007		06/10/2020	Print	N
UT HEALTH SAN ANTONIO		07/01/2020		06/03/2020	Memo to File	N
Hospital Affiliations		From	То	Verified	Method	Negative
INIVERSITY HEALTH SYSTEM	, SAN ANTONIO, TX		Present	06/03/2020	On Line	N

04/26/2007

Present

06/11/2020

, SAN ANTONIO, TX

್ರಿಕಿT LUKES BAPTIST HOSPITAL

Memo to

File

Ν

BLANKENSHIP, LOGAN M., MD

**Personal Information** 

Languages: ENGLISH

### **Practice Information**

**UH MAILING ADDRESS** 

7703 FLOYD CURL DRIVE, MC 7836 SAN ANTONIO, TX 78229

Telephone:

Fax Number:

**UH PRIMARY OFFICE ADDRESS** 

ROBERT B GREEN 903 W MARTIN SAN ANTONIO, TX 78207

Telephone: (210) 358-3582

Fax Number: (210) 358-3252

**UH SECONDARY ADDRESS** 

UT HEALTH

8300 FLOYD CURL DRIVE, 5TH FLOOR SAN ANTONIO, TX 78229

Telephone: (210) 450-9500

Fax Number: (210) 450-6027

Licensure STATE LICENSE Number State **Expires** 

TX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment: Advancement: Last Reappointment:

Department: Division: Section:

OBSTETRICS/GYNECOLOGY OBSTETRICS/GYNECOLOGY

Initial Cert.

Comments/Schedule

ID: 42678

Data Bank: 05/13/2020 Query Results: PDS Status

**Expires** 

Report

Last Cert.

Method

Board	Certifi	cation
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Specialty 1: OBSTETRICS & GYNECOLOGY

Specialty 3:

AMERICAN BOARD OF OBSTETRICS & GYNECOLOGY

Certified Pending

Specialty 2:

**Professional Liability** 

University of Texas System Self-Insurance

Limits: \$500,000.00/\$1,500,000.00 | Terms: Upon Termination

Specialty 4:

From To

To

07/01/2020 08/31/2020

**Medical/Professional Education** FLORIDA STATE UNIVERSITY

From 08/01/2012

To 05/21/2016 Method

Negative

Negative

Training

Method Negative Print

Residency UNIVERSITY OF FLORIDA HEALTH F.K.A UNIVERSITY Subject: Obstetrics and Gynecology

07/01/2016

From

06/30/2020

05/12/2020

Verified

Verified

Verified

N

**Employment** 

UNIVERSITY OF TEXAS HEALH SCIENCE CENTER AT SAN ANTONIO

From 07/01/2020

Verified To Present

05/06/2020

Method Negative Memo to File

SAN ANTONIO, TX **Hospital Affiliations** 

UNIVERSITY HEALTH SYSTEM

From Pending

From

05/22/2016

To Present

06/30/2016

To

Verified

05/06/2020

Verified

05/21/2020

Method Negative

Memo to File Method Negative

N

Subject: Waiting to Start Residency

Memo to File

Other

GAP

BODE OMOLEYE, OLAOLUWA O., MD

Personal Informatior
----------------------

Languages:

**Practice Information** 

CREDENTIALING CONTACT

DANA AUFRANCE 7703 FLOYD CURL DR SAN ANTONIO, TX 78229 Telephone: (210) 567-4003

Fax Number: (210) 567-6729

**UH MAILING ADDRESS** 

1133 SOUTH BOULEVARD, APT 1212

OAK PARK, IL 60302

Telephone: (908) 230-9181

Fax Number:

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM

4502 MEDICAL DR

SAN ANTONIO, TX 78229 Telephone:

Fax Number:

Licensure	Number	State	Expires	Comments/Schedule	
STATE LICENSE		TX			

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment: Advancement:

Last Reappointment: Next Appointment

Department: Division:

Section: Status:

**PATHOLOGY PATHOLOGY** 

PENDING

ID: 31769 Data Bank: 06/04/2020

Query Results: Category: SPECIALIST

**Board Certification** Certified **Initial Cert.** Last Cert. **Expires** AMERICAN BOARD OF PATHOLOGY (HEMATOPATHOLOGY)

American Board of Pathology/Anatomic Clinical

ANATOMICAL/CLINICAL)

(PATHOLOGY

CURRENT CURRENT 09/20/2019 08/07/2017

01/31/2020 01/31/2021

Specialty 1: PATHOLOGY

Specialty 3:

Specialty 2: Specialty 4:

**Professional Liability** From To Verified Method Negative 08/31/2020 UTHSCSA MALPRACTICE 07/01/2020

Limits: \$500,000-\$1,500,000 | Terms: UPON TERMINATION

Verified Method Negative **Medical/Professional Education** From Τо UNIVERSITY OF IBADAN, COLLEGE OF MEDICINE, OYO STATE, 01/05/2005 08/23/2013 VLETR Ν 05/01/1997 Subject: MBBS

EMORY UNIVERSITY ATLANTA, GA

Subject: MASTER OF PUBLIC HEALTH

08/28/2008

05/10/2010

Training	From	То	Verified	Method	Negative
Internship UNIVERSITY OF IBADAN IBADAN, OYO STATE	01/04/2005	03/31/2006	***************************************		
Residency University Of Texas Health Science Center At San Antonio, Subject: Anatomical And Clinical Pathology	07/01/2013	06/30/2017			
Fellowship UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER Subject: SURGICAL PATHOLOGY	07/01/2017	06/30/2018			
Fellowship UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER Subject: HEMATOPATHOLOGY	07/01/2018	06/30/2019	05/20/2020	Print	N
Fellowship LOYOLA UNIVERSITY MEDICAL CENTER Subject: Dermatopathology	07/01/2019	06/30/2020	05/13/2020	Print	N

BODE OMOLEYE, OLAOLUWA O., MD

Employment	From	To	Verified	Method	Negative
UT HEALTH SAN ANTONIO, SAN ANTONIO, TX	07/01/2020	PRESENT			
Hospital Affiliations	From	To	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM SAN ANTONIO, TX	PENDING		05/11/2020	Print	N

### **Provider Profile** BUELL, TAMARA I., MD

**Personal Information** 

Birthdate: 10/30/1969

BirthPlace:

NPI: 1356581094 Languages:

Gender: F

Citizen:

Medicare:

Medicare Sanctions:

UPIN: Medicaid:

**Practice Information** 

CREDENTIALING CONTACT

SYLVIA VILLARREAL 903 W MARTIN ST

SAN ANTONIO, TX 78207 Telephone: (210) 358-3324 Fax Number: (210) 358-5940

Medicare:

**UH MAILING ADDRESS** 

SANDY CASTILLO 903 W MARTIN ST, MS 27-2 SAN ANTONIO, TX 78207 Telephone: (210) 358-3427

Tax ID:

Fax Number: (210) 358-5940

Medicare:

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY MEDICINE ASSOCIATES 302 W RECTOR UNIVERSITY FAMILY HEALTH CENTER NORTH

SAN ANTONIO, TX 78216 Telephone: (210) 358-0800 Fax Number: (210) 358-0850

Medicare:

Licensure

Number

State

Comments/Schedule

STATE LICENSE

ΤX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Department:

**Expires** 

DEPARTMENT OF **FAMILY & COMMUNITY** 

MEDICINE UNIVERSITY MEDICAL

**ASSOCIATES** 

Data Bank: 06/18/2020

ID: 43104

Query Results: PDS Status

Report Category:

Last Reappointment:

**Next Appointment** 

Advancement:

Section: Status:

Division:

**Dues** 

Facility

**Due Date** 

**Payment Date** 

**Amount Due** 

**Payment Method** 

**Board Certification** 

Certified

**Initial Cert.** 

Last Cert.

**Expires** 

BUELL, TAMARA I., MD

AMERICAN BOARD OF FAMILY MEDICINE

(FAMILY MEDICINE)

CURRENT

07/10/1998

11/11/2019

02/15/2021

Specialty 1: FAMILY MEDICINE Specialty 3:

Specialty 2: Specialty 4:

openially of		, ,				
Professional Liability		From	То	Verified	Method	Negative
TEXAS MEDICAL LIABILITY TRUST		06/08/2009	06/08/2021			
1-412218 Limits: \$200,000-\$600,000   Terms:		•				
		07/01/2020	08/31/2020			
UNIVERSITY OF TEXAS SYSTEM		07/01/2020	00/31/2020			
Limits: \$500,000-\$1,500,000   Terms:						
Undergraduate Education		From	То	Verified	Method	Negative
Medical/Professional Education		From	То	Verified	Method	Negative
THE OHIO STATE UNIVERSITY		08/01/1991	06/30/1995			
COLUMBUS, OH Subject: DOCTOR OF MEDICINE						
-		_	_			**
Training	COLLINDUC	From	To	Verified	Method	Negative
Internship GRANT MEDICAL CENTER OH	, COLUMBUS,	07/01/1995	06/30/1996			
Subject: FAMILY MEDICINE Residency GRANT MEDICAL CENTER OH	, COLUMBUS,	07/01/1996	06/30/1998			
Subject: FAMILY MEDICINE						
Employment		From	То	Verified	Method	Negative
COMMUNITY MEDICINE ASSOCIATES , SAN ANTONIO, TX		07/01/2020				
Saenz Medical Center, La Joya, TX		06/01/2009		06/08/2020	Verbal	N
Saenz Medical Center, La Joya, TX		07/01/1998	07/31/2001			
CHURCH OF THE NAZARENE , LENEXA, KS		08/01/2001	05/31/2009			
Hospital Affiliations		From	To	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM Subject:	, SAN ANTONIO, TX		Present	05/29/2020	Print	N
DOCTORS HOSPITAL AT RENAISSANCE Subject:	, EDINBURG, TX	05/20/2013	Present	06/08/2020	Print	N
Peer References		From	То	Verified	Method	Negative
DIANA CORTINAS, MD				06/11/2020	Eval	N
JAVIER SAENZ, MD PAUL KINDE, MD				06/03/2020 06/01/2020	Eval Print	N N
Other		From	То	Verified	Method	Negative
eaching		From	To	Verified	Method	Negative

# **Provider Profile** BUELL, TAMARA I., MD

**Associates** 

Bui, Diep H., MD

### **Personal Information**

Languages:

### **Practice Information**

**UH MAILING ADDRESS** 

**DEPT OF NEUROLOGY** 7703 FLOYD CURL DRIVE, MC 7883 SAN ANTONIO, TX 78229

Telephone: (210) 450-9700

Fax Number: (210) 450-6041

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229

Telephone: (210) 358-2000

Fax Number:

Number **Expires** Comments/Schedule Licensure State STATE LICENSE ΤX **Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment: Advancement: Last Reappointment: Department: Division: Section:

NEUROLOGY

ID: 42737

Data Bank: 04/07/2020 Query Results: PDS Status

Report Category:

Next Appointment **Board Certification**  Status:

PENDING

**Initial Cert.** Last Cert. **Expires** 03/01/2021

AMERICAN BOARD OF PSYCH-NEUROLOGY/EPILEPSY

(NEUROLOGY) (EPILEPSY)

Certified CURRENT CURRENT

09/11/2017 10/22/2018

03/01/2021

Specialty 1: Specialty 3:

American Board of Psychiatry & Neurology

Specialty 2: Specialty 4:

**Professional Liability** 

University of Texas System, Office of General Council Limits: \$500,000-\$1,500,000 | Terms: UPON TERMINATION

From 07/01/2020 Verified

Method

Negative

Method Verified **Medical/Professional Education** From To Negative

Pham Ngoc Thach Medical School, Ho Chi Minh City, Subject: DOCTOR OF MEDICINE

07/01/1998

06/30/2004

08/30/2050

To

Verified Method Negative **Training** From To Internship Heart Institute of Ho Chi Minh City, Ho Chi Minh City, 05/15/2006 09/02/2004 Subject: Cardiology Residency Saint Vincent Hospital, Worcester, MA 07/01/2009 06/30/2011 Subject: Internal Medicine Residency University Hospitals Case Medical Center ( Cleveland Medical 07/01/2012 06/30/2015 Center), Cleveland, OH Subject: Neurology Fellowship University Hospitals Case Medical Center ( Cleveland Medical Print 07/01/2015 06/30/2016 04/16/2020 Ν

Center), Cleveland, OH Subject: Epilepsy

Employment	From	To	Verified	Method	Negative
Mid-Atlantic Epilepsy and Sleep Center, Bethesda, MD	07/01/2016	PRESENT	04/02/2020	Memo to File	N
UTHSA, San Antonio, TX	07/01/2020	PRESENT	04/02/2020	Memo to File	N
্ৰীam Duc Heart Hospital, Ho Chi Minh City,	09/01/2011	05/31/2012	04/06/2020	Print	N
Hospital Affiliations	From	To	Verified	Method	Negative

### BEXAR COUNTY HOSPITAL DISTRICT

## **Provider Profile**

Bui, Diep H., MD

University Health System, San Antonio, TX	PENDING		04/01/2020	Memo to File	N
White Oak Medical Center, Silver Spring, MD Adventist Healthcare Rehabilitation At Rockville, Rockville, MD	07/11/2016 07/19/2016	03/31/2020 03/31/2022	04/02/2020 04/02/2020	Print Email	N N
Adventist Healthcare Rehabilitation At Takoma Park,	04/01/2020	03/31/2022	04/02/2020	Email	N
Shady Grove Adventist Hospital, Rockville, MD	06/28/2016	03/31/2022	04/02/2020	Email	N

Casares-Baker, Sara J., RN

Personal Info	ormation						
Languages: ENGL	ISH						
Practice Info	ormation						
CREDENTIALING JANIE KELLY 7703 FLOYD CURI SAN ANTONIO, TX Telephone: (210) NPI: Tax ID:	DR, MC 7812 78229	Fax Nu Medica	ımber: (210) ıre:	450-2436	Me	edicaid:	
UH PRIMARY OF UNIVERSITY HEAL 4502 MEDICAL DE SAN ANTONIO, TX Telephone: (210) NPI: Tax ID:	TH SYSTEM R - NICU 5TH FLOOR K 78229	Fax Nu Medica	ımber: (210) ıre:	358-4726	Me	edicald:	
Pediatrics DEPARTMENT OF 7703 FLOYD CURI SAN ANTONIO, TX Telephone: (210) NPI: Tax ID:	PEDIATRICS L DRIVE ( 78229	Fax Nu Medica	ımber: (210) ıre:	450-2436	Ma	edicaid:	
Licensure		Number	State	Expires	Comm	ents/Schedule	
Appointment			ΤX				
	·, · · · · · · · · · · · · · · · · · ·						
Initial Appointmen	HOSPITAL DISTRICT nt:		Dep	partment:		ARTMENT OF	ID: 42752
Advancement: Last Reappointme			Sec	ision: tion:		DNATOLOGY	Data Bank: 06/23/2020 Query Results: PDS Status Report
Next Appointment			Sta	tus:			Category: RESEARCH ASSOCIATE
Dues	Facility	Due Da	te	Payment D:	ate Am	ount Due	Payment Method

**Board Certification** Certified Initial Cert. Last Cert. **Expires** OT BOARD CERTIFIED (NEONATAL INTENSIVE CARE

Specialty 1: REGISTERED NURSE

Specialty 2:

Casares-Baker, Sara J., RN

Specialty 3:

Specialty 4:

Professional Liability		From	To	Verified	Method	Negative
Chapter 104 of Texas Civil Practice and Remed	lies Code	05/01/2020	12/31/2050			
Limits: \$100,000-\$300,000   Terms:						
Undergraduate Education		From	То	Verified	Method	Negative
Pensacola Christian College, Pensacola, FL Subject: BACHELOR OR SCIENCE II	I NURSING	09/03/2001	05/10/2006	05/22/2020	Print	N
Medical/Professional Education		From	То	Verified	Method	Negative
Training		From	То	Verified	Method	Negative
Employment		From	To	Verified	Method	Negative
UT HEALTH SAN ANTONIO, SAN ANTONIO, TX		03/16/2015		05/27/2020	Internet	N
MEDTRUST , SAN ANTONIO, TX		04/01/2010	10/11/2011	06/19/2020	Print	N
ANGEL STAFFING , SAN ANTONIO, TX		02/01/2009	12/31/2011	06/04/2020	Print	N
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX		09/19/2007	01/29/2018	06/16/2020	Print	N
Hospital Affiliations		From	То	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM Subject:	, SAN ANTONIO, TX		Present	05/27/2020	Print	N
SOUTHWEST GENERAL HOSPITAL Subject:	, SAN ANTONIO, TX	01/10/2007	Present	06/19/2020	Print	N
CHRISTUS SANTA ROSA HEALTH CARE Subject:	, SAN ANTONIO, TX	05/01/2006	11/01/2006			
Peer References		From	То	Verified	Method	Negative
ALICE GONG, MD IRENE SANDATE, NNP RACHEL RIVAS, DIRECTOR, NICU				05/22/2020 05/22/2020 06/08/2020	Eval Eval Eval	N N N
Other		From	То	Verified	Method	Negative
Teaching		From	То	Verified	Method	Negative
Associates						

### **Provider Profile** CHECHANI, RYAN R., MD

**Personal Information** 

Languages:

### **Practice Information**

**UH MAILING ADDRESS** 

UT HEALTH SAN ANTONIO 7703 FLOYD CURL DR MC 7736 DEPT OF EMERGENCY MEDICINE SAN ANTONIO, TX 78229 Telephone: (210) 567-4292

Fax Number: (210) 567-0757

**UH PRIMARY OFFICE ADDRESS** 

UT HEALTH SAN ANTONIO 4502 MEDICAL DRIVE **UHS EMERGENCY DEPARTMENT** SAN ANTONIO, TX 78229 Telephone: (210) 567-1183

Fax Number:

Licensure Number State **Expires** Comments/Schedule STATE LICENSE ΤX Appointment **BEXAR COUNTY HOSPITAL DISTRICT EMERGENCY MEDICINE** ID: 40113 Initial Appointment: Department: Division: Data Bank: 04/23/2020 Advancement: Section: Query Results: PDS Status Last Reappointment: Report Next Appointment Status: Pending Category:

**Board Certification** 

Certified **Initial Cert.** PENDING Intending to sit

Last Cert. **Expires** 

AMERICAN BOARD OF EMERGENCY MEDICINE (EMERGENCY MEDICINE)

for the boards 10/2022

Specialty 1: EMERGENCY MEDICINE

Specialty 2:

Professional Liability	From	То	Verified	Method	Negative
UTHSCSA MALPRACTICE BLANKET Limits: 500,000 1,500,000. UT   Terms: UPON TERMINATION	07/01/2020	08/31/2020			

**Medical/Professional Education** Verified Method Negative From To UNIVERSITY OF NEW MEXICO HEALTH SCIENCE CENTER 07/01/2013 05/12/2017 04/16/2020 **AMA** ALBUQUERQUE, NM Subject: MD

Training	From	То	Verified	Method	Negative
Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: EMERGENCY MEDICINE	07/01/2017	06/30/2020	04/16/2020	Email	N
Fellowship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: WILDERNESS MEDICINE	07/01/2020	06/30/2021	04/16/2020	Memo to	N

Employment	From	To	Verified	Method	Negative
UT HEALTH SAN ANTONIO, SAN ANTONIO, TX	07/01/2020	PRESENT	04/16/2020	Mail Merge	N
Hospital Affiliations	From	То	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM, SAN ANTONIO, TX	Pending		04/14/2020	Memo to File	N
Other	From	То	Verified	Method	Negative
GAP Subject: RELOCATION FROM NEW MEXICO TO TEXAS TO BEGIN RESIDENCY TRAINING	05/14/2017	06/30/2017	04/16/2020	Memo to File	N

# **Provider Profile** CLAPPER, AMBER R., MD

Personal Infor	mation					
Languages:						
<b>Practice Inform</b>	nation					
CREDENTIALING CO SOFIA REYNA 8431 FREDERICKSBU SAN ANTONIO, TX 7 Telephone: (210) 450 NPI: Tax ID:	IRG RD 8229	Fax Nu Medica	mber: (210) re:	450-0571	Medicald:	
UH MAILING ADDR UT HEALTH SAN ANTO 7703 FLOYD CURL DE SAN ANTONIO, TX 7 Telephone: (210) 450 NPI: Tax ID:	ONIO RIVE 8229	Fax Nu Medica	mber: (210) re:	450-6894	Medicaid:	
JH PRIMARY OFFIC UT HEALTH SAN ANTO 8300 FLOYD CURL DE SAN ANTONIO, TX 7 Telephone: (210) 450 NPI: Tax ID:	ONIO RIVE 8229	Fax Nu Medica	mber: (210) re:	450-6894	Medicaid:	
Licensure		Number	State	Expires	Comments/Schedule	
STATE LICENSE			тх			
Appointment						
BEXAR COUNTY HO Initial Appointment:	SPITAL DISTRICT		Dep	partment:	DEPARTMENT OF	ID: 40154
Advancement: Last Reappointment:				sion: tion:	MEDICINE HOSPITAL MEDICINE HOSPITAL MEDICINE	Data Bank: 04/28/2020 Query Results: PDS Status
Next Appointment			Stat	tus:		Report Category:
Dues	Facility	Due Dat	:e	Payment D	ate Amount Due	Payment Method
j						

Certified

**Initial Cert.** 

**Board Certification** 

**Expires** 

Last Cert.

### BEXAR COUNTY HOSPITAL DISTRICT

## **Provider Profile**

CLAPPER, AMBER R., MD

AMERICAN BOARD OF INTERNAL MEDICINE CERTIFIED)

(NOT BOARD

PENDING

Specialty 1: INTERNAL MEDICINE Specialty 3:

Specialty 2: Specialty 4:

Professional Liability	From	То	Verified	Method	Negative
UTHSCSA MALPRACTICE		08/31/2020			
Limits: 500,000 1,500,000.   Terms:					
Undergraduate Education	From	То	Verified	Method	Negative
Medical/Professional Education	From	To	Verified	Method	Negative
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO , SAN ANTONIO, TX Subject: DOCTOR OF MEDICINE	06/17/2013	05/21/2017	04/23/2020	Degree Verify	N
Training	From	То	Verified	Method	Negative
Residency UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER , SAN ANTONIO, TX Subject: Internal Medicine	07/01/2017		04/23/2020	Fax	N
Employment	From	То	Verified	Method	Negative
UT HEALTH SAN ANTONIO , San Antonio, TX	08/03/2020		04/28/2020	Email	N
Hospital Affiliations	From	То	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject:		Present	04/21/2020	Memo to File	N
Peer References	From	То	Verified	Method	Negative
CHRISTOPHER MORELAND, MD			04/21/2020	Eval	N
DAVID DOOLEY, MD DENISE DAHM, MD KRISTY KOSUB, MD			04/27/2020 04/28/2020	Eval Eval	N N
Other	From	То	Verified	Method	Negative
Teaching	From	То	Verified	Method	Negative

**Associates** 

Correia, Greg P., MD

### **Personal Information**

Languages:

**Practice Information** 

**UH MAILING ADDRESS** 

UNIVERSITY MEDICINE ASSOCIATES 903 W MARTIN 2ND FLOOR MS 27-2 SAN ANTONIO, TX 78207

Telephone: (210) 358-3427

Fax Number: (210) 358-5940

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY MEDICINE ASSOCIATES 903 W MARTIN ROBERT B GREEN BEHAVIORAL

HEALTH CLINIC

SAN ANTONIO, TX 78207 Telephone: (210) 358-3108

Fax Number: (210) 358-3067

Comments/Schedule Number **Expires** Licensure State STATE LICENSE TX

**Appointment** 

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment:

Department:

DEPARTMENT OF

ID: 43095

Advancement:

Division:

**PSYCHIATRY** UNIVERSITY MEDICAL ASSOCIATES

Data Bank: 06/03/2020

Section:

PSYCHIATRY

Query Results:

Last Reappointment: **Next Appointment** 

Status:

PENDING

Category: UMA FULL TIME

**Board Certification** 

Certified Initial Cert. Eliaible/Intendina

Last Cert. **Expires** 

AMERICAN BOARD OF PSYCHIATRY

(PSYCHIATRY)

to sit for the

Boards 09/2020

Specialty 1: PSYCHIATRY

Specialty 2:

Verified Method **Professional Liability** From To Negative UTHSCSA MALPRACTICE 08/03/2020 08/31/2020

N/A

Limits: 500,000 TO 1,500,000.00 | Terms: Upon Termination

Verified **Medical/Professional Education** From To Method Negative UNIVERSITY OF MIAMI MILLER SCHOOL OF MEDICINE, MIAMI, FL 05/31/2016

Subject: DOCTOR OF MEDICINE

08/01/2012

**Training** Verified Method From To Negative Residency VIRGINIA COMMONWEALTH UNIVERSITY 07/01/2016 06/30/2020 06/02/2020 Print Ν Subject: PSYCHIATRY **Employment** To Verified Method Negative From

COMMUNITY MEDICINE ASSOCIATE 08/03/2020 05/20/2020 Present Print N SAN ANTONIO, TX VIRGINIA COMMONWEALTH HEALTH SYSTEM 06/22/2016 Present 05/20/2020 Print N RICHMOND, VA

**Hospital Affiliations** From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Present 05/20/2020 Print N SAN ANTONIO, TX

Other From To Verified Method Negative SAP Subject: TOOK TIME OFF TO MOVE 06/01/2016 06/30/2016 05/20/2020 Print Ν GAP Subject: RELOCATING TO TEXAS/APPLYING FOR A 07/01/2020 08/02/2020 06/05/2020 Print Ν POSITION WITH UMA

Cruz, April L., CHW

Personal Information							
Languages:							
Practice Information							
CREDENTIALING CONTACT LESLIE MEADOWS 8431 FREDERICKBURG RD SAN ANTONIO, TX 78229 Telephone: (210) 450-8844 NPI: Tax ID:	Fax Number: Medicare:			Medicaid:			
UH MAILING ADDRESS 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 567-4550 NPI: Tax ID:	Fax Number: Medicare:			Medicald:			
UH PRIMARY OFFICE ADDRESS 903 W Martin, 4TH FLOOR San Antonio, TX 78207 Telephone: NPI: N/A Tax ID: 741586031	Fax Number: Medicare:			Medicaid:			
Licensure	Number Sta	nte Expires	Coi	mments/Sch	edule		
EPLS OIG							
Appointment							
BEXAR COUNTY HOSPITAL DISTRICT Initial Appointment:		Department:		DEPARTMENT OF FAMILY & COMM		ID: 43063	
Advancement: Last Reappointment: Next Appointment		Division: Section: Status:		MEDICINE		Data Bank: Query Results Category:	<b>;</b> :
Dues Facility	Due Date	Payment D	ate	Amount Due	<b>a</b>	Payment	Method
Board Certification		Cautiti	المسا	Tuitial Caul		lant Caut	F
NOT BOARD CERTIFIED	(NOT BOARD CERTII	Certifi FIED)	ea	Initial Cert		Last Cert.	Expires
Specialty 1: Specialty 3:		Specialty Specialty					
Professional Liability CHAPTERS 101, 104, 108 OF TEXAS CIVIL	PRACTICE AND REMED	From IES	<b>To</b>	Veris	fied	Method	Negative

### BEXAR COUNTY HOSPITAL DISTRICT

## **Provider Profile**

Cruz, April L., CHW

CODE

n/a Limits: 100,000 / 300,000 | Terms: n/a

Undergraduate Education	From	То	Verified	Method	Negative
None, , Subject:					
Medical/Professional Education	From	То	Verified	Method	Negative
Training	From	То	Verified	Method	Negative
Employment	From	То	Verified	Method	Negative
University of Texas Health Science Center, San Antonio, TX	06/03/2019		05/18/2020	On Line	N
METHODIST SPECIALITY AND TRANSPLANT , San Antonio, TX	08/25/2008	07/25/2012	05/14/2020	Query On Line Query	N
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX	05/04/2012	07/10/2014	05/14/2020	Fax	N
Frank Ramos Make Ready, San Antono, TX	01/02/2015	01/02/2019	05/29/2020	Memo to File	N
Carenet, San Antono, TX	02/06/2019	05/30/2019	05/14/2020	On Line Query	N
Hospital Affiliations	From	То	Verified	Method	Negative
NO HOSPITAL AFFILIATIONS , , Subject:		Present	05/14/2020	Memo to File	N
Peer References	From	То	Verified	Method	Negative
Ariel Guerrero- Quality Improvement Specialist Maria Rivera- Quality Improvement Specialist Tiffany Shaw- Quality Improvement Specialist			05/29/2020 05/19/2020 05/19/2020	Eval Eval Eval	N N N
Other	From	То	Verified	Method	Negative
GAP  , , Subject: I took time off from working to spend with my children. I have a child with special needs.	08/02/2014	06/04/2019			
Teaching	From	To	Verified	Method	Negative
Associates					

### **Provider Profile** CURRY, REBECCA L., PA

**Personal Information** 

Languages:

**Practice Information** 

**UH MAILING ADDRESS** 903 W MARTIN 2 FLOOR MS-27-2

SAN ANTONIO, TX 78207 Telephone: (210) 358-3427

Fax Number: (210) 358-5940

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229

Telephone: (210) 567-5225

Fax Number: (210) 567-5169

Comments/Schedule Number Licensure State **Expires** STATE LICENSE TX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Department:

**PEDIATRICS** 

ID: 43080

Advancement:

Division:

UNIVERSITY MEDICAL **ASSOCIATES** 

Data Bank: 05/21/2020

Last Reappointment:

Next Appointment

Section:

**NEONATOLOGY** 

10/01/2015

Query Results: PDS Status

Status:

PENDING

Report Category: UMA FULL TIME

Board Certification

Certified

**Initial Cert.** 

Last Cert. **Expires** 

NATIONAL COMMISSION ON CERTIFICATION OF PHYSICIAN ASSISTANTS (NCCPA) (PHYSICIAN ASSISTANT)

CURRENT

12/31/2021

Specialty 1: PHYSICIAN ASSISTANT

Specialty 3:

Specialty 2: Specialty 4:

**Professional Liability** 

Method Negative

UNIVERSITY HEALTH SYSTEM

06/01/2020

From

From

Verified

12/31/2018

Limits: 100,000 TO 300,000 | Terms: UPON TERMINATION

**Undergraduate Education** LIPSCOMB UNIVERSITY, NASHVILLE, TN

Subject: BACHELORS OF SCIENCE

To 08/01/2008 05/05/2012

To

Verified 05/11/2020

Method Negative National N

Student Clearing

House

Medical/Professional Education Verified Method From Τo Negative TREVECCA NAZARENE UNIVERSITY 05/28/2013 12/31/2015 05/11/2020 National

NASHVILLE, TN

Student Clearing

Subject: MASTERS OF SCIENCE IN MEDICINE

House

**Employment** Verified From To Method Negative COMMUNITY MEDICAL ASSOCIATES 06/01/2020 05/11/2020 Print N TRINITY PEDIATRICS 11/01/2015 11/30/2019 05/11/2020 Print Ν

**Hospital Affiliations** From To Verified Method Negative UNIVERSITY HEALTH SYSTEM PENDING 05/08/2020

**9ther** From Verified Method To Negative AΡ Subject: PREVIOUS OFFICE DOWNSIZED AND RELOCATING 11/2016 06/01/2020 05/11/2020 Print

SAN ANTONIO, TX

DAVIS, ANNABELLE S., MD

Э,	ers	O	n	al	In	fo	rı	n	а	ti	O	n	
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Languages:

**Practice Information** 

CREDENTIALING CONTACT

VERONICA RAMIREZ 7703 FLOYD CURL DR MC 7870 SAN ANTONIO, TX 78229 Telephone: (210) 567-4068

NPT: Tax ID: Fax Number: (210) 567-4123

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

UT HEALTH SAN ANTONIO 7703 FLOYD CURL DR MC 7982 SAN ANTONIO, TX 78229 Telephone: (210) 567-0777

NPI: Tax ID: Fax Number: (210) 358-0647

Medicare:

Medicaid:

JH PRIMARY OFFICE ADDRESS

UNIVERSITY HEALTHSYSTEM 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229

Telephone: (210) 743-6000

NPI: Tax ID: Fax Number: (210) 358-0647

Medicare:

Medicaid:

Licensure

Number

State

Comments/Schedule

STATE LICENSE

ΤX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment:

Next Appointment

Department:

Division:

**Expires** 

Section:

Status:

DEPARTMENT OF MEDICINE

HOSPITAL MEDICINE HOSPITAL MEDICINE ID: 40155

Data Bank: 05/13/2020 Query Results: PDS Status

Report Category:

**Dues** 

**Facility** 

**Due Date** 

**Payment Date** 

**Amount Due** 

Payment Method

PIC

BEXAR COUNTY HOSPITAL DISTRICT

DAVIS, ANNABELLE S., MD

AMERICAN BOARD OF INTERNAL MEDICINE MEDICINE)  Specialty 1: INTERNAL MEDICINE Specialty 3:  Professional Liability  UTHSCSA MALPRACTICE N/A Limits: 500,000.00 TO 1,500,000.00   Terms:  Undergraduate Education  Medical/Professional Education  UNIVERSITY OF TEXAS AT HOUSTON , HOUSTON, TX	Specialty 2 Specialty 4  From 07/01/2020  From Prom 08/01/2013		Verified  Verified	Method Method	
Professional Liability  UTHSCSA MALPRACTICE N/A Limits: 500,000.00 TO 1,500,000.00   Terms:  Undergraduate Education  Medical/Professional Education  UNIVERSITY OF TEXAS AT HOUSTON HOUSTON, TX Subject: DOCTOR OF MEDICINE  Training  Internship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Residency UT HEALTH SAN ANTONIO  Employment UT HEALTH SAN ANTONIO	From  From  8/01/2013  From	To 08/31/2020  To To	Verified		
UTHSCSA MALPRACTICE N/A Limits: 500,000.00 TO 1,500,000.00   Terms:  Undergraduate Education  Medical/Professional Education  UNIVERSITY OF TEXAS AT HOUSTON HOUSTON, TX Subject: DOCTOR OF MEDICINE  Training Internship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Employment UT HEALTH SAN ANTONIO	07/01/2020  From  From 08/01/2013	08/31/2020 <b>To</b>	Verified		Negative
N/A Limits: 500,000.00 TO 1,500,000.00   Terms:  Undergraduate Education  Medical/Professional Education  UNIVERSITY OF TEXAS AT HOUSTON , HOUSTON, TX	From 08/01/2013	То		Method	
Undergraduate Education  Medical/Professional Education  UNIVERSITY OF TEXAS AT HOUSTON, HOUSTON, TX Subject: DOCTOR OF MEDICINE  Training  Internship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Employment  UT HEALTH SAN ANTONIO	From 08/01/2013	То		Method	
Medical/Professional Education UNIVERSITY OF TEXAS AT HOUSTON HOUSTON, TX Subject: DOCTOR OF MEDICINE  Training Internship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Employment UT HEALTH SAN ANTONIO	From 08/01/2013	То		Method	
UNIVERSITY OF TEXAS AT HOUSTON , HOUSTON, TX	08/01/2013 From		Varified		Negative
Training Internship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE Employment UT HEALTH SAN ANTONIO	From	05/18/2017	ACIMICA	Method	Negative
Internship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Employment UT HEALTH SAN ANTONIO					
Subject: INTERNAL MEDICINE  Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Employment  UT HEALTH SAN ANTONIO		То	Verified	Method	Negative
Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: INTERNAL MEDICINE  Employment UT HEALTH SAN ANTONIO	07/01/2017	06/30/2018			
UT HEALTH SAN ANTONIO	07/01/2018	06/30/2020	05/06/2020	VLETE	N
UT HEALTH SAN ANTONIO	From	То	Verified	Method	Negative
	07/01/2020		05/06/2020	Print	N
Hospital Affiliations	From	To	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject: PENDING		Present	05/06/2020	Print	N
Peer References	From	То	Verified	Method	Negative
CHRISTOPHER MORELAND, MD JANE O'RORKE, MD NAFEA ALI, MD			05/06/2020 05/06/2020	Eval Eval	N N
PATRICIA WATHEN, MD			05/07/2020	Eval	N
Other	From	To	Verified	Method	Negative
GAP , Subject: Normal period of time between medical school graduation in May 2017 and beginning of residency in Ju	05/19/2017	07/01/2017	05/06/2020	Print	N
Teaching		То	Verified	Method	Negative
Associates	From				

Davis, Jordan N., PMHNP

Personal Information					
Languages					
Practice Information					
CREDENTIALING CONTACT DORIS NEWMAN 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 567-5387 NPI: Tax ID:	Fax Nu Medica	ımber: ıre:		Medicald:	
SECONDARY OFFICE ADDRESS DEPARTMENT OF PSYCHIATRY UTHSCSA - PSYCHIATRY 7703 FLOYD CURL DRIVE, MSC 7792 SAN ANTONIO, TX 78229 Telephone: (210) 450-6440 NPI: Tax ID:	Fax Nu Medica	umber: (210) ire:	450-2104	Medicaid:	
UH MAILING ADDRESS UT HEALTH SAN ANTONIO 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 450-6440 NPI: Tax ID:	Fax Nu Medica	ımber: (210) ıre:	450-2104	Medicaid:	
UH PRIMARY OFFICE ADDRESS CLARITY CHILD GUIDANCE 8535 TOM SLICK DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 616-0300 NPI: Tax ID:	Fax Nu Medica	ımber: (210) ıre:	314-3931	Medicaid:	
Licensure	Number	State	Expires	Comments/Schedule	
STATE LICENSE STATE LICENSE	-	TX TX			

### **Appointment**

# **BEXAR COUNTY HOSPITAL DISTRICT** Initial Appointment:

dvancement: ast Reappointment: Next Appointment Department:

Division: Section:

Status:

DEPARTMENT OF **PSYCHIATRY** 

**PSYCHIATRY** 

Data Bank: 06/04/2020

Query Results: Category:

ID: 43096

Davis, Jordan N., PMHNP

CHAPTERS 101, 104, 108 OF TEXAS CIVIL PRACTICE AND REMEDIES CODE N/A LIMITES: 250,000 TO 500,000   Terms:  Undergraduate Education UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: BACHELOR OF SCIENCE IN NURSING UT Health San Antonio, san antonio, TX Subject: Subject: UT Health San Antonio, san Antonio, TX Subject: Medical/Professional Education UT Health San Antonio, TX Subject: UT HEALTH SCIENCE ENTER AT SAN ANTONIO, TX Subject: UT HEALTH SCIENCE CENTER AT SAN ANTONIO, TX Subject: UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative UT HEALTH SCIENCE CENTER AT SAN ANTONIO, TX OB/01/2020 O6/04/2020 Print N LAUREL RIDGE HOSPITAL O6/24/2019 O6/04/2020 Print N LAUREL RIDGE HOSPITAL O6/24/2019 O6/04/2020 Print N SAN ANTONIO, TX  HOSPITAL OFFICIAL OFFIC	Dues	Facility	Due Date	Payment Da	te An	nount Due	Payment Method		
PRACTITIONER  PRACTITIONER    Y (Archved)   12/03/2019   12/03/2024   PRACTITIONER    Specialty 1: NURSE PRACTITIONER   Specialty 2: Specialty 4:   Specialty 3:   Specialty 4:   Specialty 3:   Specialty 4:   Specia	Board Certi	fication		Certific	ed II	nitial Cert.	Last Cert.	Expires	
12/03/2019   12/03/2019   12/03/2019   12/03/2019   12/03/2014   12/03/2015   12/03/2015   12/03/2015   12/03/2015   12/03/2015   12/03/2015   12/03/2015   12/03/2015   12/03/2015   12/03/2015   12/03/2015   12/03/2015   12/03/2014   12/03/2014   12/03/2014   12/03/2014   12/03/2014   12/03/2014   12/03/2014   12/03/2015   12/03/2015   12/03/2015   12/03/2015   12/03/2014   12/03/2014   12/03/2014   12/03/2014   12/03/2014   12/03/2014   12/03/2014   12/03/2015   12/03/2015   12/03/2015   12/03/2014   12/			R (NURSE	CURRE	NT 12	2/03/2019		12/02/2024	
Professional Liability Professional Liability From To Verified Method Negative CHAPTERS 101, 104, 108 OF TEXAS CIVIL PRACTICE AND REMEDIES OB/01/2020 12/31/2050 CDOE MINA LIMIRS: 250,000 TO 500,000   Terms:  Undergraduate Education UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: BACHELOR OF SCIENCE IN NURSING UT Health San Antonio, san antonio, TX Subject: Subject: Medical Professional Education UT Health San Antonio, San Antonio, TX Subject: UT HEALTH SCIENCE CENTER AT SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE  From To Verified Method Negative UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE  From To Verified Method Negative UT HEALTH SCIENCE CENTER AT SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE  Employment From To Verified Method Negative UT HEALTH SCIENCE CENTER AT SAN ANTONIO, TX 08/21/2010 08/09/2019 08/09/2020 Print N  LAUREL RIDGE HOSPITTAL 06/24/2019 06/09/2020 Print N  NAX SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Present 06/09/2020 Print N  Hospital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Present 06/09/2020 Print N  Hospital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Present 06/09/2020 Print N  Hospital Affiliations Prom To Verified Method Negative UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Present 06/09/2020 Print N  Hospital Affiliations Present 06/09/2020 Print N  Present 06/09/2020 Print N  Present 06/09/2020 Print N  N  N  Present 06/09/2020 Print N  N  N  N  N  N  N  N  N  N  N  N  N	TEXAS BOARD C	OF NURSING - ADVANCED PR	ACTICE-RN (NURSE	Y (Archi	ved) 12	2/03/2019		12/02/2024	
CHAPTERS 101, 104, 108 OF TEXAS CIVIL PRACTICE AND REMEDIES   08/01/2020   12/31/2050   12/31/		. ,	TIONER						
CHAPTERS 101, 104, 108 OF TEXAS CIVIL PRACTICE AND REMEDIES (CODE N/A LIMITS: 250,000 TO 500,000   Terms:  Undergraduate Education UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: BACHELOR OF SCIENCE IN NURSING UT Health San Antonio, san antonio, TX Subject: Subject:  Medical/Professional Education UT Health San Antonio, San Antonio, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative UT HEALTH SCIENCE CENTER AT SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative UT HEALTH SCIENCE CENTER AT SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative UT HEALTH SCIENCE CENTER AT SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative UT HEALTH SAN ANTONIO, SAN ANTONIO, TX O8/01/2020 O6/04/2020 Print N LAUREL RIDGE HOSPITAL SAN ANTONIO, TX O6/01/2015 12/02/2019 O6/04/2020 Print N LAUREL RIDGE HOSPITAL SAN ANTONIO, TX O6/01/2015 12/02/2019 O6/04/2020 Print N  HASPITAL Affiliations UNIVERSITY HEALTH SYSTEM SUBject: PENDING  PRESENT O6/04/2020 Print N  Present O6/04/2020 Print N  Present O6/04/2020 Print N  OF/04/2020 Pr	Professiona	al Liability		From	То	Verified	Method	Negative	
Undergraduate Education Underg	CODE	104, 108 OF TEXAS CIVIL PI	RACTICE AND REMEDIES	08/01/2020	12/31/2	050			
UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: BACHELOR OF SCIENCE IN NURSING UT Health San Antonio, san antonio, TX Subject: BACHELOR OF SCIENCE IN NURSING UT Health San Antonio, san antonio, TX Subject:  Medical/Professional Education UT Health San Antonio, San Antonio, TX Subject: UT Health San Antonio, San Antonio, TX Subject: UT HEALTH SCIENCE CENTER AT SAN ANTONIO, TX Subject: UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: UT HEALTH SCIENCE GENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: UT HEALTH SCIENCE GENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: UT HEALTH SCHORE PRACTITIONER  From To Verified Method Negative UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 08/01/2020 06/04/2020 Print N  LAUREL RIOGE HOSPITAL SAN ANTONIO, TX  06/01/2015 12/02/2019 06/04/2020 Print N  NIX SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING Present 06/04/2020 Print N  Present 06/04/2020 Print N  N  Present 06/04/2020 Print N  Present 06/04/2020 Print N  N  Peer References From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING Peer References From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING Peer References From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING Peer References From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING Peer References From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING Peer References From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING PERSON ORGANIZATION ORGANIZATI	Limits: 250,000	TO 500,000   Terms:							
Subject: BACHELOR OF SCIENCE IN NURSING  UT Health San Antonio, san antonio, TX Subject:  Medical/Professional Education UT Health San Antonio, San Antonio, TX Subject:  Medical/Professional Education UT Health San Antonio, San Antonio, TX Subject: UT HEALTH SCIENCE CENTER AT SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative  Training From To Verified Method Negative  UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative  UT HEALTH SAN ANTONIO, SAN ANTONIO, TX O8/01/2020 O6/04/2020 Print N  LAUREL RIDGE HOSPITAL SAN ANTONIO, TX O6/01/2015 O6/04/2020 Print N  NIX O6/01/2015 O6/04/2020 Print N  N  Hospital Affiliations From To Verified Method Negative  UNIVERSITY HEALTH SYSTEM Subject: PENDING  Present O6/04/2020 Print N  Present O6/04/2020 Print N  Present O6/04/2020 Print N  Present O6/04/2020 Print N  O6/09/2020 Print N	Undergradu	uate Education		From	То	Verified	Method	Negative	
UT Health San Antonio, san antonio, TX Subject:  Medical/Professional Education  UT Health San Antonio, San Antonio, TX Subject:  UT Health San Antonio, San Antonio, TX Subject:  UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject:  UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject:  Method Negative  PRACTITIONER  From To Verified Method Negative  Training  From To Verified Method Negative  UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject:  Mathod Negative  Training  From To Verified Method Negative  UT HEALTH SAN ANTONIO, SAN ANTONIO, TX  08/01/2020 06/04/2020 Print N  LAUREL RIDGE HOSPITAL SAN ANTONIO, TX  NIX SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative  UNIVERSITY HEALTH SYSTEM Subject: PENDING  Present 06/04/2020 Print N  N  O6/09/2020 Print N  O6/09/2020 Print N				08/26/2013	05/13/2	015 06/04/2020	Student Clearing	N	
UT Health San Antonio, San Antonio, TX Subject: UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 08/01/2020 06/04/2020 Print N  LAUREL RIDGE HOSPITAL , SAN ANTONIO, TX 06/01/2015 12/02/2019 06/04/2020 Print N  NX SAN ANTONIO, TX  HOSpital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING  Present 06/04/2020 Print N  O6/09/2020 Print N				08/26/2013	05/15/20	015			
Subject: UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE PRACTITIONER  From To Verified Method Negative	Medical/Pr	ofessional Education	1	From	To	Verified	Method	Negative	
UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN ANTONIO, TX Subject: MASTERS OF SCIENCE IN SURSING NURSE  PRACTITIONER  From To Verified Method Negative  Training From To Verified Method Negative  UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 08/01/2020 06/04/2020 Print N  LAUREL RIDGE HOSPITAL SAN ANTONIO, TX 06/01/2015 12/02/2019 06/04/2020 Print N  NIX SAN ANTONIO, TX  HOSPITAL O6/01/2015 12/02/2019 06/04/2020 Print N  WATCH SAN ANTONIO, TX  HOSPITAL O6/01/2015 12/02/2019 06/04/2020 Print N  WATCH SAN ANTONIO, TX  Present 06/04/2020 Print N  Print N  Print N  Present 06/04/2020 Print N  O6/01/2015 12/02/2019 06/04/2020 Print N  O6/0				08/22/2016	08/09/2	019			
Employment From To Verified Method Negative UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 08/01/2020 06/04/2020 Print N  LAUREL RIDGE HOSPITAL 06/24/2019 06/04/2020 Print N  , SAN ANTONIO, TX  NIX , 06/01/2015 12/02/2019 06/04/2020 Print N  SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX  Subject: PENDING  Peer References From To Verified Method Negative Christic Tunney CHRISTIE TUNNEY Mark SOUCY, APRN Foni Brent  O6/09/2020 Eval N  INCOMPRESSION OF TO VERIFIED METHOD  O6/09/2020 Eval Y	UT HEALTH SČII Subje	ENCE CENTER AT SAN ANTON		08/22/2016	08/13/2	019 06/04/2020	Student Clearing	N	
UT HEALTH SAN ANTONIO, SAN ANTONIO, TX  LAUREL RIDGE HOSPITAL , SAN ANTONIO, TX  NIX SAN ANTONIO, TX  NIX SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING  Peer References From To Verified Method Negative Christie Tunney CHRISTIE TUNNEY Mark Soucy JARK SOUCY, APRN Foni Brent  O6/09/2020 Frint  N  06/09/2020 Print N	Training			From	То	Verified	Method	Negative	
UT HEALTH SAN ANTONIO, SAN ANTONIO, TX  LAUREL RIDGE HOSPITAL , SAN ANTONIO, TX  NIX SAN ANTONIO, TX  NIX SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING  Peer References From To Verified Method Negative Christie Tunney CHRISTIE TUNNEY Mark Soucy JARK SOUCY, APRN Foni Brent  O6/09/2020 Frint  N  06/09/2020 Print N	Employmen	.+		Erom	To	Varified	Method	Negative	
LAUREL RIDGE HOSPITAL , SAN ANTONIO, TX  NIX SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM Subject: PENDING  Peer References From To Verified Method Negative  Christie Tunney CHRISTIE TUNNEY Mark Soucy JARK SOUCY, APRN To JOHOP/2020 Eval N  Mark Soucy JARK SOUCY, APRN To JOHOP/2020 Eval Y			X		10				
NIX SAN ANTONIO, TX  Hospital Affiliations  WINVERSITY HEALTH SYSTEM Subject: PENDING  Peer References  From To Verified Method Negative Of Odd Print N  Present Of Odd Print N  Print N  Present Of Odd Print N  Present O	LAUREL RIDGE I	HOSPITAL						N	
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Present 06/04/2020 Print N Subject: PENDING  Peer References From To Verified Method Negative Christie Tunney CHRISTIE TUNNEY 06/09/2020 Eval N Mark Soucy APRN 06/09/2020 Eval Y Toni Brent		тх		, 06/01/2015	12/02/20	019 06/04/2020	Print	N	
Peer References From To Verified Method Negative Christie Tunney CHRISTIE TUNNEY 06/09/2020 Eval N Mark Soucy IARK SOUCY, APRN 06/09/2020 Eval Y	Hospital Af	filiations		From	То	Verified	Method	Negative	
Christie Tunney CHRISTIE TUNNEY 06/09/2020 Eval N Mark Soucy ARK SOUCY, APRN 06/09/2020 Eval Y Toni Brent			, SAN ANTONIO, TX		Present	06/04/2020	Print	N	
CHRISTIE TUNNEY 06/09/2020 Eval N Mark Soucy ARK SOUCY, APRN 06/09/2020 Eval Y Toni Brent		ences		From	То	Verified	Method	Negative	
TARK SOÚCY, APRN 06/09/2020 Eval Y	CHRISTIE TUNN	EY				06/09/2020	Eval	N	
	IARK SOUCY, A	PRN				06/09/2020	Eval	Υ	
		,				06/09/2020	Eval	N	

## **Provider Profile**

Davis, Jordan N., PMHNP

Other	From	To	Verified	Method	Negative
Laurel Ridge Treatment Center, San Antonio, TX Subject: RN	06/25/2019				-
Nix Healthcare, san antonio, TX  Subject: RN	05/27/2015	01/14/2019			
GAP , , Subject: previous work schedule with nix healthcare interfered with my clinical schedule for graduate school	01/14/2019	06/25/2019	06/04/2020	Print	N
my previous work schedule with Nix Healthcare interfered with my clinical schedule for graduate scho, , Subject:	01/14/2019	06/25/2020			
Teaching	From	То	Verified	Method	Negative
Associates					

DIETRICH, LESLIE-ANNE J., MD

Personal	Inform	ation
----------	--------	-------

Languages: ENGLISH

**Practice Information** 

CREDENTIALING CONTACT

SAN JUANITA KELLY- DEPT OF PEDIATRICS 7703 FLOYD CURL DDRIVE, MC 7812

SAN ANTONIO, TX 78229

Telephone: (210) 567-5225

NPI: Tax ID: Fax Number: (210) 450-2436

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

UT HEALTH SAN ANTONIO 7703 FLOYD CURL DRIVE, MS 7812

SAN ANTONIO, TX 78229 Telephone: (210) 567-5225

NPI: Tax ID: Fax Number: (210) 450-2436

Medicare:

Medicald:

JH PRIMARY OFFICE ADDRESS

UT HEALTH SAN ANTONIO 4502 MEDICAL DRIVE - 5TH FLOOR NICU

SAN ANTONIO, TX 78229 Telephone: (210) 358-1445

NPI: Tax ID: Fax Number: (210) 450-2436

Medicare:

Medicaid:

Licensure

Number

State

**Expires** 

Comments/Schedule

STATE LICENSE

TX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment: Next Appointment Department:

Division: Section: Status: DEPARTMENT OF PEDIATRICS NEONATOLOGY

NEONATOLOGY

ID: 39972

Data Bank: 06/05/2020 Query Results:

Category:

**Dues** 

**Facility** 

**Due Date** 

(PEDIATRICS)

**Payment Date** 

**Amount Due** 

**Payment Method** 

**Board Certification** 

AMERICAN BOARD OF PEDIATRICS

Certified CURRENT Initial Cert. 10/09/2015 Last Cert.

02/15/2021

**Expires** 

Page 1

DIETRICH, LESLIE-ANNE J., MD

AMERICAN BOARD OF PEDIATRICS/NEO-PERINATAL

(NEONATOLOGY)

PENDING

Specialty 1: NEONATOLOGY

Specialty 3:

Specialty 2: PEDIATRICS Specialty 4:

Professional Liability	From	То	Verified	Method	Negative
UTHSCSA MALPRACTICE	08/01/2020	08/31/2020			
Limits: 500,000 1,500,000.   Terms:					
ACORD Healthcare Liability Solutions #5-10055 Limits:   Terms:	05/01/2016	05/01/2018			
ACORD 5-10055 Limits: 1,000,000 3,000,000.   Terms:	05/01/2016	05/01/2018			
Undergraduate Education	From	То	Verified	Method	Negative
Medical/Professional Education	From	То	Verified	Method	Negative
UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL SCHOOL , DALLAS, TX Subject: DOCTOR OF MEDICINE	08/01/2008	06/01/2012			
Training	From	To	Verified	Method	Negative
Fellowship UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER ,	07/01/2017		05/11/2020	Fax	N
SAN ANTONIO, TX  Subject: NEONATAL - PERINATAL MEDICINE  Residency PHOENIX CHILDREN'S HOSPITAL , PHOENIX,  AZ  Subject: PEDIATRICS	07/01/2012	06/30/2015			
Employment	From	То	Verified	Method	Negative
UT HEALTH SAN ANTONIO	08/10/2020		06/05/2020	Memo to File	N
UT HEALTH SAN ANTONIO , SAN ANTONIO, TX COMMUITY MEDICINE ASSOCIATES			06/05/2020 06/05/2020		N N
UT HEALTH SAN ANTONIO , SAN ANTONIO, TX COMMUITY MEDICINE ASSOCIATES , SAN ANTONIO, TX	08/10/2020	06/08/2017		File Memo to File On Line	
UT HEALTH SAN ANTONIO , SAN ANTONIO, TX  COMMUITY MEDICINE ASSOCIATES , SAN ANTONIO, TX  OBSTRETIX MEDICAL GROUP OF PHOENIX - DBA: NAL, PHOENIX, AZ  SAINT JOSEPH'S HOSPITAL & MEDICAL CENTER , Phoenix, AZ	08/10/2020 08/01/2020	06/08/2017 06/30/2017	06/05/2020	File Memo to File	N
UT HEALTH SAN ANTONIO , SAN ANTONIO, TX  COMMUITY MEDICINE ASSOCIATES , SAN ANTONIO, TX  OBSTRETIX MEDICAL GROUP OF PHOENIX - DBA: NAL, PHOENIX, AZ  SAINT JOSEPH'S HOSPITAL & MEDICAL CENTER , Phoenix, AZ	08/10/2020 08/01/2020 02/05/2016	, ,	06/05/2020 05/14/2020	File Memo to File On Line Query Memo to	N N
UT HEALTH SAN ANTONIO , SAN ANTONIO, TX  COMMUITY MEDICINE ASSOCIATES , SAN ANTONIO, TX  OBSTRETIX MEDICAL GROUP OF PHOENIX - DBA: NAL, PHOENIX, AZ  SAINT JOSEPH'S HOSPITAL & MEDICAL CENTER , Phoenix, AZ  HOSPITAL Affiliations	08/10/2020 08/01/2020 02/05/2016 02/03/2016	06/30/2017	06/05/2020 05/14/2020 06/05/2020	File  Memo to File  On Line Query Memo to File	N N
JT HEALTH SAN ANTONIO SAN ANTONIO, TX  COMMUITY MEDICINE ASSOCIATES SAN ANTONIO, TX  DBSTRETIX MEDICAL GROUP OF PHOENIX - DBA: NAL, PHOENIX, AZ  GAINT JOSEPH'S HOSPITAL & MEDICAL CENTER , Phoenix, AZ  Hospital Affiliations  JNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX  Subject:	08/10/2020 08/01/2020 02/05/2016 02/03/2016	06/30/2017 <b>To</b>	06/05/2020 05/14/2020 06/05/2020 <b>Verified</b>	Memo to File  On Line Query Memo to File  Method	N N N <b>OR</b>
UT HEALTH SAN ANTONIO , SAN ANTONIO, TX  COMMUITY MEDICINE ASSOCIATES , SAN ANTONIO, TX  OBSTRETIX MEDICAL GROUP OF PHOENIX - DBA: NAL, PHOENIX, AZ  SAINT JOSEPH'S HOSPITAL & MEDICAL CENTER , Phoenix, AZ  HOSPITAL Affiliations  UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX  Subject:  ST. JOSEPH HOSPITAL, PHOENIX, AZ	08/10/2020 08/01/2020 02/05/2016 02/03/2016 From	06/30/2017 <b>To</b> Present	06/05/2020 05/14/2020 06/05/2020 <b>Verified</b> 05/11/2020	File  Memo to File  On Line Query Memo to File  Method  Memo to File  On Line	N N Negative

## **Provider Profile**

DIETRICH, LESLIE-ANNE J., MD

KARLI L. MCCOY, MD MARGARITA VASQUEZ, MD SHANNON KEARL, MD ZOYA CHEEMA, MD 05/18/2020 06/05/2020

Eval Fax N N

05/21/2020

Eval

N

Other		From	To	Verified	Method	Negative
GAP		04/16/2015	06/15/2015			
* *	Subject: MATERNITY LEAVE					
GAP		01/03/2018	02/03/2018			
	Subject: MATERNITY LEAVE					
GAP		06/01/2017	07/31/2020	05/11/2020	Memo to File	N
,,	Subject: COMPLETING FELLOWSHIP IN NEONATOLOGY				i lie	

Teaching From To Verified Method Negative
Associates

Dodd, Katherine S., DO

Persona	al Info	rmation
---------	---------	---------

Languages: ENGLISH

**Practice Information** 

CREDENTIALING CONTACT

VERONICA RAMIREZ 7703 FLOYD CURL DRIVE, MC 7872 SAN ANTONIO, TX 78229

Telephone: (210) 567-4068 NPT:

Tax ID:

Fax Number: (210) 567-4123

Medicare:

Medicaid:

Office

220 East Illinois St #3307 Chicago, IL 60611 Telephone:

NPI: Tax ID: Fax Number:

Medicare:

Medicaid:

UH MAILING ADDRESS

7703 FLOYD CURL DRIVE, MC 7872 DEPT OF MEDICINE/CARDILOGY SAN ANTONIO, TX 78229 Telephone: (210) 567-4601

NPI: Tax ID: Fax Number: (210) 567-6960

Medicare:

Medicald:

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DR SAN ANTONIO, TX 78229 Telephone: (210) 358-4000

NPI: Tax ID: Fax Number: (210) 567-6960

Medicare:

Medicaid:

**UH SECONDARY ADDRESS** 

UTHSCSA UT HEALTH HILL COUNTRY 25723 OLD FREDERICKSBURG RD SAN ANTONIO, TX 78229 Telephone: (210) 450-6800

NPI: Tax ID: Fax Number: (210) 450-6801

Medicare:

Medicald:

**UH SECONDARY ADDRESS** 

MARC CARDIOLOGY 8300 FLOYD CURL DR 3RD FLOOR 3B SAN ANTONIO, TX 78229 Telephone: (210) 450-4888 NPI:

Tax ID:

Fax Number: (210) 450-6018

Medicare:

Medicaid:

JH SECONDARY ADDRESS

RBG CARDIOLOGY 903 W MARTIN

## **Provider Profile**

Dodd, Katherine S., DO

SAN ANTONIO, TX 78207 Telephone: (210) 358-3555

Tax ID:

Fax Number: (210) 358-5945

Medicare:

Medicaid:

Number **Expires** Comments/Schedule Licensure State STATE LICENSE ΤX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment: Next Appointment

Department:

Division: Section: Status:

DEPARTMENT OF

MEDICINE CARDIOLOGY CARDIOLOGY

ID: 42924

Data Bank: 05/29/2020 Query Results: Category:

Dues	Facility	Due Date	Payment Date	Amount Due	Payment	Method
Board Cert	ification		Certified	Initial Cert.	Last Cert.	Expires
AMERICAN BOA	RD INTERNAL MED/CARDIOV	ASCULAR DISEASE	CURRENT	10/29/2019		04/01/2021
(CARDIOVASCU AMERICAN BOA	JLAR DISEASE) ARD OF INTERNAL MEDICINE	(INTERNAL	CURRENT	08/07/2015		04/01/2021

Specialty 1: CARDIOLOGY

Specialty 3:

Specialty 2: ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

Verified

Specialty 4:

Verified **Professional Liability** From Τo Method Negative UTHSCSA MALPRACTICE 07/01/2020 08/31/2020

Limits: 500,000 - 1,500,000 | Terms:

**Undergraduate Education** From Verified Τo Method Negative **CREIGHTON UNIVERSITY** 07/30/2001 05/30/2005

OMAHA, NE Subject: Biology

**Medical/Professional Education** UNIVERSITY OF MASSACHUSETTS - AMHERST

, AMHERST, MA Subject: Epidemiology UNIVERSITY OF NEW ENGLAND

BIDDEFORD, ME

From To 01/01/2006 05/30/2008

07/30/2008 05/30/2012

Subject: Medical School

raining Verified From To Method Negative Residency UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE 06/01/2012 06/30/2015

, ROCHESTER, NY

Method

Negative

Subject: Internal Medicine Residency

## **Provider Profile**

Dodd, Katherine S., DO

			From	To	Verified	Method	Negative
Other			From	То	Verified	Method	Negative
Elisa Bradley, MD Sakima Smith, MD William Abraham, MD					06/02/2020 06/03/2020 06/16/2020	Eval Eval Eval	N N N
Peer References			From	То	Verified	Method	Negative
STRONG MEMORIAL HOSPITAL C ROCHESTER, NY Subject:	OF THE UNIV (	OF ROCHESTER ,	06/27/2015	06/23/2016	06/01/2020	Print	N
HIGHLAND HOSPITAL Subject:	,	ROCHESTER, NY	06/27/2015	06/23/2016	06/09/2020	On Line	N
MCGAW MEDICAL CENTER OF NO CHICAGO, IL Subject:	ORTHWESTER	N UNIVERSITY ,	07/01/2019	Present	06/16/2020	Memo to File	N
OHIO STATE UNIVERSITY HOSPI COLUMBUS, OH Subject:	TAL EAST / PA	ARK MED CTR,		Present	06/03/2020	Fax	N
DHIO STATE UNIVERSITY MEDIC Subject:	AL CENTER	, COLUMBUS, OH		Present	06/03/2020	Fax	N
UNIVERSITY HEALTH SYSTEM Subject:		, SAN ANTONIO, TX		Present	05/29/2020	Memo to File	N
NORTHWESTERN MEMORIAL HO Subject:	SPITAL	, CHICAGO, IL		Present	06/16/2020	Print	N
Hospital Affiliations			From	То	Verified	Method	Negative
The Ohio State University , COLUMBUS, OH			07/01/2016	07/01/2019	06/02/2020	Online	N
STRONG MEM HOSP UNIV OF RO	CHESTER	, ROCHESTER, NY	06/13/2012	06/23/2016	06/02/2020	Online	N
UT HEALTH SAN ANTONIO , SAN ANTONIO, TX			07/01/2020		05/29/2020	Memo to File	N
Employment			From	То	Verified	Method	Negative
, CHICAGO, IL Subject: Advanced He	eart Failure ai	nd Transplant Fellowship					
, COLUMBUS, OH Subject: CARDIOVAS Fellowship NORTHWESTERN UNI			07/01/2019	06/30/2020	06/02/2020	Fax	N
Subject: Chief Reside	SIER, NI  Subject: Chief Resident/Hospitalist Year  IP OHIO STATE UNIVERSITY COLLEGE OF MEDICINE		07/01/2016	06/30/2019			
Residency UNIVERSITY OF ROCH , ROCHESTER, NY						File	

Dursun, Furkan, MD, RA

Persona	l Int	form	ation
---------	-------	------	-------

Languages: ENGLISH

**Practice Information** 

CREDENTIALING CONTACT

CARMEN MONCADO 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 567-5942

NPI: Tax ID: Fax Number: (210) 567-6868

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

UT HEALTH SAN ANTONIO 7703 FLOYD CURL DR DEPARTMENT OF UROLOGY SAN ANTONIO, TX 78229 Telephone: (210) 567-5942 NPI:

Tax ID:

Fax Number: (210) 567-6868

Medicare:

Medicald:

**UH PRIMARY OFFICE ADDRESS** 

Urology 7703 FLOYD CURL DRIVE DEPARTMENT OF UROLOGY SAN ANTONIO, TX 78229 Telephone: (210) 567-5942

NPI: Tax ID: Fax Number: (210) 567-6868

Medicare:

Medicaid:

Licensure

Number

State

**Expires** 

Comments/Schedule

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment: Next Appointment

Department:

Division:

Section:

Status:

DEPARTMENT OF

**Initial Cert.** 

UROLOGY UROLOGY

ID: 43079

Last Cert.

Data Bank: 05/28/2020

Query Results: Category:

**Dues** 

**Facility** 

**Due Date** 

**Payment Date Amount Due**  **Payment Method** 

**Expires** 

**Board Certification** NOT BOARD CERTIFIED

(NOT BOARD CERTIFIED)

Specialty 1: RESEARCH ASSOCIATE

Specialty 3:

Specialty 2:

Specialty 4:

Certified

Dursun, Furkan, MD, RA

Professional Liability	From	То	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM SELF INSURANCE		12/31/2050			
Limits: 100,000 300,000.   Terms:					
Undergraduate Education	From	To	Verified	Method	Negative
Medical/Professional Education	From	То	Verified	Method	Negative
Gulhane Military Medical Faculty, Ankara, Subject: DOCTOR OF MEDICINE	10/01/1999	08/29/2005			
Training	From	То	Verified	Method	Negative
Residency Gulhane Military Medical Academy, Haydarpasa Teaching Hospital, Istanbul, Subject:	07/17/2008	09/19/2013			
Employment	From	То	Verified	Method	Negative
UNIVERSITY OF TEXAS HALTH SCIENCE CENTER , SAN ANTONIO, TX	07/01/2020		05/28/2020	Email	N
Turkish Armed Forces, Diyarbakir,	05/30/2006	07/14/2008			
Gumussuyu Military Hospital, Istanbul,	09/20/2013	07/29/2016	06/05/2020	Fax	N
Beytepe Murat Erdi Eker State Hospital, Ankara,	08/28/2016	09/16/2017	06/04/2020	Fax	N
Hospital Affiliations	From	То	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject:		Present	05/26/2020	Memo to File	N
UNIVERSITY OF TEXAS HEALTH SIENCE CENTER - SA , SAN ANTONIO, TX Subject: N/A - NOT A HOSP FACILITY	07/01/2020	Present			
Gumussuyu Military Hospital, Istanbul, Subject: MEMO ON FILE	09/01/2013	08/31/2016	06/08/2020	Memo to File	N
Beytepe Murat Erdi Eker State Hospital, Ankara, Subject: MEMO ON FILE	11/01/2016	09/30/2017	06/08/2020	Memo to File	N
UNIV OF TEXAS MD ANDERSON CANCER CENTER , HOUSTON, TX	09/01/2017	12/01/2017	05/26/2020	Email	N
Subject: NO RECORD FOUND  UNIVERSITY OF TEXAS AT GALVESTON , GALVESTON, TX Subject: NO RECORD FOUND	01/22/2018	09/01/2019	05/28/2020	On Line Query	N
HOUSTON METHODIST, HOUSTON , TX Subject: NO RECORD	10/14/2019	06/30/2020	05/28/2020	On Line Query	N
Peer References	From	То	Verified	Method	Negative
Gokhan Sami Kilic, MD Kenan Karademir, MD Raj Satkunasivam, MD ROSE KHAVARI, MD			05/26/2020 05/27/2020 05/26/2020 06/05/2020	Eval Eval Eval Eval	N N N N
Other	From	To	Verified	Method	Negative
After graduation from the military medical academy, as a trainee officer	09/01/2005	05/15/2006			

## **Provider Profile**

Dursun, Furkan, MD, RA

in the Turkish Armed Forces, , Subject:

Teaching	 From	То	Verified	Method	Negative
Associates					

# **Provider Profile** Esteve, Lucy M., MD

EVERITT, BRYAN A., MD

Personal	Informa	ition

Languages:

**Practice Information** 

**UH MAILING ADDRESS** 

UT HEALTH SAN ANTONIO DEPT OF EMERGENCY MEDICINE 7703 FLOYD CURL DR, MD 7736 SAN ANTONIO, TX 78229 Telephone: (210) 567-4292

Fax Number: (210) 567-0757

**UH PRIMARY OFFICE ADDRESS** 

UHS EMERGENCY DEPARTMENT 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 743-0024

Fax Number:

Comments/Schedule Number State **Expires** Licensure ΤX

STATE LICENSE

**Appointment** BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment: Advancement:

Last Reappointment: Next Appointment

Department: Division:

Section: Status:

**EMERGENCY MEDICINE** 

Pending

ID: 40115

Data Bank: 06/02/2020

Query Results: Category:

Certified **Initial Cert.** Last Cert. **Expires Board Certification** 

American Board of Emergency Medicine/Emergency Medical Services

(EMERGENCY MEDICINE)

PENDING/Intending to sit for the Boards 10/2021

Specialty 1: Specialty 3: Specialty 2: Specialty 4:

**Professional Liability** From To Verified Method Negative UNIVERSITY OF TEXAS SYSTEM 07/01/2020 08/31/2020

BLANKET

Limits: 500,000.00 1,500,000.00 | Terms: Upon Termination

**Medical/Professional Education** From To Verified Method Negative UNIVERSITY OF SOUTH CAROLINA SCHOOL OF MEDICINE 07/01/2013 05/05/2017

Subject: DOCTOR OF MEDICINE

Method Training From To Verified Negative Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 06/30/2020 04/15/2020 07/01/2017 Print

Subject: EMERGENCY MEDICINE

**Employment** From To Verified Method Negative

UT HEALTH SAN ANTONIO Pending SAN ANTONIO, TX

**Hospital Affiliations** Verified Method From To Negative UNIVERSITY HEALTH SYSTEM 04/07/2020

Pending

SAN ANTONIO, TX Subject: PENDING

Ωther. From Verified To Method Negative SAP Subject: RELOCATING FROM SC TO TX TO BEGIN RESIDENCY 05/31/2017 04/15/2020 06/30/2017 Print

PROGRAM.

Print

N

FAZELI, CAMERON A., DO

#### **Personal Information**

Languages:

#### **Practice Information**

**UH MAILING ADDRESS** 

7703 FLOYD CURL DRIVE, MC 7982 MEDICINE/GENERAL & HOSPITAL MEDICINE

San Antonio, TX 78229 Telephone: (210) 567-0777

Fax Number: (210) 358-0647

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 743-6000

Fax Number: (210) 358-0647

Comments/Schedule Number Licensure State **Expires** STATE LICENSE ΤX

**Appointment** 

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment: Advancement: Last Reappointment: **Next Appointment** 

Department: Division: Section: Status:

MEDICINE

**Initial Cert.** 

HOSPITAL MEDICINE

ID: 40163 Data Bank: 06/03/2020 Query Results:

**Expires** 

Category: HOSPITALIST Pending

Last Cert.

**Board Certification** 

AMERICAN BOARD OF INTERNAL MEDICINE (INTERNAL

MEDICINE)

Certified PENDING/INTENDING

TO SIT FOR THE BOARDS 08/2020

Specialty 1: INTERNAL MEDICINE

Specialty 2:

Verified Method Negative **Professional Liability** From To University of Texas Systems 08/01/2020 08/31/2020 Limits: 500,000 - 1,500,000 | Terms: UPON TERMINATION

Verified Method Negative To **Medical/Professional Education** From UNIVERSITY OF NORTH TEXAS F.K.A. NORTH TEXAS STATE 05/20/2017 08/01/2013 Subject: DOCTOR OF OSTEOPATHIC MEDICINE

**Training** Verified Method Negative From To Internship UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER 07/01/2017 06/30/2018 Subject: INTERNAL MEDICINE Residency UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER 07/01/2018 06/30/2020 06/04/2020 Memo to Ν Subject: INTERNAL MEDICINE

Verified Method **Employment** From To Negative UT HEALTH SAN ANTONIO 06/03/2020 08/01/2020 PRESENT Memo to File **Hospital Affiliations** Verified Method From Τo Negative UNIVERSITY HEALTH SYSTEM PENDING 06/02/2020 Memo to N File Other From To Verified Method Negative GAP Subject: Took time off/Applying for position at UT Health 07/01/2020 07/31/2020 06/12/2020 Memo to GAP Subject: Waiting to start Residency 06/30/2017 05/21/2017 06/12/2020 Memo to N File

Fields, Taylor S., MD

Personal Information		 
Languages:		

#### **Practice Information**

CREDENTIALING CONTACT SHARON BURTON

7703 FLOYD CURL DR, MC 6230 SAN ANTONIO, TX 78229 Telephone: (210) 567-8403

NPI: Tax ID: Fax Number: (210) 567-8413

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

7703 FLOYD CURL DR, MS 6230 SAN ANTONIO, TX 78229 Telephone: (210) 567-8403

NPI: Tax ID: Fax Number: (210) 567-8413

Medicare:

Medicaid:

**UH PRIMARY OFFICE ADDRESS** 

MARC-OPHTHALMOLOGY 8300 FLOYD CURL DRIVE, 6TH FLOOR - 6A SAN ANTONIO, TX 78229 Telephone: (210) 567-9400

NPI: Tax ID: Fax Number: (210) 450-6024

Medicare:

Medicaid:

**UH SECONDARY ADDRESS** 

TDI-OPHTHALMOLOGY 701 S. ZARZAMORA SAN ANTONIO, TX 78207 Telephone: (210) 358-7600

NPI: Tax ID: Fax Number: (210) 358-7623

Medicare:

Medicaid:

Licensure	Number	State	Expires	Comments/Schedule	
STATE LICENSE		TX			

#### **Appointment**

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment:

Next Appointment

Department:

Division:

Section: Status: DEPARTMENT OF

OPHTHALMOLOGY

ID: 42872

Data Bank: 05/19/2020 Query Results: PDS Enrollment Complete

Category:

Fields, Taylor S., MD

Dues Facility	Due Date	Payment Da	te Amou	int Due	Payment l	Method
Board Certification		Certific	ed Initi	al Cert.	Last Cert.	Expires
AMERICAN BOARD OF OPHTHALMOL	OGY ()	PENDI	NG			
Specialty 1: OPHTH Specialty 3:	ALMOLOGY	Specialty 2 Specialty 4				
Professional Liability		From	То	Verified	Method	Negative
UTHSCSA MALPRACTICE N/A Limits: 500,000.00 / 1,500,000.00	Terms:	07/01/2020	08/31/2020			
Undergraduate Education		From	То	Verified	Method	Negative
Medical/Professional Edu	cation	From	To	Verified	Method	Negative
MEDICAL COLLEGE OF GEORGIA SCI , AUGUSTA, GA Subject: DOCTOR OF MED	HOOL OF MEDICINE	07/01/2012	05/13/2016			
Training		From	То	Verified	Method	Negative
Residency Henry Ford Health System	ı, Detroit, MI	07/01/2017		05/13/2020	Print	N
Subject: Ophthalmology Internship Henry Ford Health Systen Subject: Transitional Year		07/01/2016	06/30/2017			
Employment		From	То	Verified	Method	Negative
UT Health San Antonio - SOM, SAN A	ANTONIO, TX	07/01/2020		05/13/2020	Email	N
Hospital Affiliations		From	To	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM-SAN A TX Subject:	NTONIO , SAN ANTONIO	),	Present	05/01/2020	Print	N
UHS SURGERY CENTER - MEDICAL C TX Subject:	ENTER , SAN ANTONIO	,	Present	05/01/2020	Print	N
Peer References		From	То	Verified	Method	Negative
Candice Nofar Yousif, MD Daniel Brill, MD DAVID GOLDMAN, MD				05/04/2020 05/11/2020 05/18/2020	Eval Eval Eval	N N N
Other		From	То	Verified	Method	Negative
Teaching		From	То	Verified	Method	Negative
Associates						

FIDELLOW, REBECCA E., MD

Personal	l Informatior	1
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Languages:

**Practice Information** 

CREDENTIALING CONTACT

SANDY RIZA 7703 FLOYD CURL DRIVE MC 7794 SAN ANTONIO, TX 78229

Telephone: (210) 567-4550

NPI: Tax ID: Fax Number: (210) 567-4579

Medicare:

Medicaid:

**PRIMARY OFFICE ADDRESS** 

UT HEALTH 2833 BABCOCK RD CSR TOWER 2 SUITE 302 MC 8331

SAN ANTONIO, TX 78229

Telephone: (210) 450-9890 NPI:

Tax ID:

Fax Number: (210) 450-4985

Medicare:

Medicald:

UH MAILING ADDRESS

**UT HEALTH SAN ANTONIO** 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229

Telephone: (210) 450-9890

NPI: Tax ID: Fax Number: (210) 450-4985

Medicare:

Medicaid:

Licensure STATE LICENSE Number

State **Expires**  Comments/Schedule

ТХ

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Last Reappointment:

Next Appointment

Advancement:

Department:

DEPARTMENT OF

**FAMILY & COMMUNITY** MEDICINE

**GERIATRICS** 

Division: Section: Status:

ID: 15591

Data Bank: 06/04/2020 Query Results:

Category:

Dues

**Facility** 

**Due Date** 

**Payment Date Amount Due**  Payment Method

**Initial Cert.** 

**Board Certification** AMERICAN BOARD FAMILY MEDICINE/HOSPICE-PALLIATIVE (HOSPICE Certified CURRENT

11/16/2010

Last Cert.

Expires 12/31/2020

FIDELLOW, REBECCA E., MD

PALLIATIVE MEDICINE)

AMERICAN BOARD OF FAMILY MEDICINE

(FAMILY MEDICINE)

CURRENT

07/13/2001

02/15/2021

Specialty 1: HOSPICE PALLIATIVE MEDICINE

Specialty 3:

Specialty 2: FAMILY MEDICINE Specialty 4:

Verified Method Negative **Professional Liability** From UNIVERSITY OF TEXAS SYSTEM 09/01/2020 08/31/2021

Limits: \$500,000 / \$1,500,000   Terms:					
Undergraduate Education	From	То	Verified	Method	Negative
Medical/Professional Education	From	То	Verified	Method	Negative
UNIVERSITY OF TX HSC SCHOOL OF MEDICINE, SAN ANTONIO, TX Subject: Medicine	07/01/1993	05/24/1997			
Training	From	То	Verified	Method	Negative
Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX  Subject: FAMILY MEDICINE	07/01/1997	06/30/2000			
Fellowship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: GERIATRIC MEDICINE INTERNAL MEDICINE	08/01/2000	07/31/2001			
Employment	From	То	Verified	Method	Negative
UNIVERSITY OF TEXAS HEALTH SIENCE CENTER - SA , SAN ANTONIO, TX	09/01/2020		06/03/2020	Print	N

1	Employment	rrom	10	verilled	Mediod	Negative
4	UNIVERSITY OF TEXAS HEALTH SIENCE CENTER - SA , SAN ANTONIO, TX	09/01/2020		06/03/2020	Print	N
	NURSES Etc STAFFING, SAN ANTONIO, TX	01/02/2019		06/03/2020	Print	N
	AUDIE L. MURPHY VA MEDICAL CENTER - STVHCS, SAN ANTONIO, TX	01/01/2008	01/01/2011	06/15/2020	VERBL	N
	BE WELL 365 (WEIGHT LOSS CLINIC), SAN ANTONIO, TX	03/01/2011	05/01/2014	06/15/2020	Print	N
	TeamHealth Post-Acute/Nursing Home Team,KNOXVILLE, TN	07/07/2014	11/30/2014	06/04/2020	Print	N
	VITAS Hospice & Palliative Care Office, SAN ANTONIO, TX	01/24/2011	05/16/2015	06/04/2020	Print	N
	AUDIE L. MURPHY MEMORIAL VA HOSPITAL, SAN ANTONIO, TX	12/14/2014	05/05/2017	06/04/2020	Internet	N
	COMPASSUS, SAN ANTONIO, TX	06/12/2017	06/15/2018	06/04/2020	Print	N
	HUMANA, INC., LOUISVILLE, KY	10/11/2018	12/31/2018	06/15/2020	VLETR	N

Hospital Affiliations		From	To	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM  Subject: pending	, SAN ANTONIO, TX		Present	06/03/2020	Print	N
SAN ANTONIO MILITARY MEDICAL CENTER HOUSTON, TX Subject:	, FORT SAM	08/31/2018	Present	06/08/2020	Print	N
AUDIE L. MURPHY MEMORIAL VA HOSPITAL, Subject:	SAN ANTONIO, TX	01/18/2008	01/24/2011	06/10/2020	Print	N
AUDIE L. MURPHY MEMORIAL VA HOSPITAL, Subject:	SAN ANTONIO, TX	12/15/2014	05/05/2017			
NORTHEAST BAPTIST HOSPITAL - PRIOR/AH	, SAN ANTONIO,	08/22/2017	07/02/2018	06/03/2020	Internet	N

Subject:

## **Provider Profile**

FIDELLOW, REBECCA E., MD

Peer References	From	To	Verified	Method	Negative
Brenda Sears, MD Family Medicine, MD			06/07/2020	Eval	N
Charmine See, MD Family Medicine, MD Rosemary Chacko, MD and Palliative Care Medical Director, MD			06/08/2020 06/04/2020	Eval Eval	N Y
Other	From	То	Verified	Method	Negative
GAP	01/01/2011	03/01/2011	06/04/2020	Print	N
Subject: STAYED HOME WITH FAMILY					
GAP	06/01/2018	09/01/2018	06/04/2020	Print	N
, , Subject: AWAITING CREDENTIALING THROUGH MIL	.ITARY				
Teaching	From	То	Verified	Method	Negative
Associates					

## **Provider Profile** FRASER, JENNA C., MD

Persona	l Inform	nation
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Languages:

#### **Practice Information**

CREDENTIALING CONTACT

NELDA POTTER 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 567-4890

NPI: Tax ID: Fax Number: (210) 567-4123

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

7703 FLOYD CURL DRIVE DEPT OF MEDICINE/DIVISION OF GENERAL & HOSPITAL MEDICINE SAN ANTONIO, TX 78229 Telephone: (210) 567-0777

NPI: Tax ID: Fax Number: (210) 358-0647

Medicare:

Medicaid:

**UH PRIMARY OFFICE ADDRESS** 

4502 MEDICAL DRIVE UNIVERSITY HEALTH SYSTEM SAN ANTONIO, TX 78229 Telephone: (210) 743-6000

NPI: Tax ID: Fax Number: (210) 358-0647

Medicare:

Medicaid:

Licensure

Number

State

**Expires** 

Comments/Schedule

STATE LICENSE

TX

#### **Appointment**

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment:

Next Appointment

Department:

Division: Section:

Status:

DEPARTMENT OF

MEDICINE

HOSPITAL MEDICINE HOSPITAL MEDICINE

ID: 33568

Data Bank: 05/21/2020 Query Results: PDS Status

Report Category:

Dues Facility Due Date Payment Date Amount Due Payment Method

EPIC BEXAR COUNTY

EPIC

BEXAR COUNTY HOSPITAL DISTRICT BEXAR COUNTY

# **Provider Profile** FRASER, JENNA C., MD

#### HOSPITAL DISTRICT

Board Certification	Certifi	ed Initi	ial Cert.	Last Cert.	Expires
AMERICAN BOARD OF IM/HOSPICE & PALLIATIVE MEDICINE (HOSPI	CE Eligit	ole			
PALLIATIVE MEDICINE) AMERICAN BOARD OF INTERNAL MEDICINE (INTERNAL MEDICINE)	CURRI	ENT 08/28	/2018		04/01/2021
Specialty 1: INTERNAL MEDICINE Specialty 3:	Specialty Specialty	2: HOSPICE PA 4:	LLIATIVE MEDI	CINE	
Professional Liability	From	То	Verified	Method	Negative
UTHSCSA MALPRACTICE	08/01/2020	08/31/2020			
N/A Limits: 500,000-1,500,000   Terms:					
Undergraduate Education	From	То	Verified	Method	Negative
Medical/Professional Education	From	То	Verified	Method	Negative
UNIVERSITY OF GLASGOW , GLASGOW CITY,	09/01/2003	07/01/2009			
Subject: DOCTOR OF MEDICINE					
Training	From	То	Verified	Method	Negative
ANTONIO, TX	SAN 07/01/2015	06/30/2017	05/22/2020	VLETE	N
Subject: INTERNAL MEDICINE Fellowship UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER , SAN ANTONIO, TX	07/01/2018	06/30/2019	05/22/2020	VLETE	N
Subject: GERIATRICS Fellowship UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER , SAN ANTONIO, TX Subject: HOSPICE & PALLIATIVE MEDICINE	07/01/2019	07/14/2020	05/22/2020	VLETE	N
Employment	From	То	Verified	Method	Negative
UT HEALTH SAN ANTONIO, SAN ANTONIO, TX	08/01/2020		05/29/2020	VERBL	N
ENVISION PHYSICIAN TEXS IPS MEDICAL SERVICES PA , SAN ANTONIO, TX	08/08/2017	02/01/2018	05/28/2020	Print	N
UT HEALTH SAN ANTONIO , SAN ANTONIO, TX	12/15/2017	01/21/2020	05/29/2020	Internet	N
Hospital Affiliations	From	To	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject: pending		Present	05/21/2020	Internet	N
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject:	01/23/2018	01/21/2020	05/21/2020	Internet	N
Peer References	From	То	Verified	Method	Negative
GREGORY BOWLING, MD JANE O'RORKE, MD			05/21/2020 05/21/2020	Eval	N
TEMPLE RATCLIFFE, MD			05/21/2020	Eval Eval	N N
Other	From	То	Verified	Method	Negative
GAP	09/01/2013	06/30/2015	05/21/2020	Print	N

# **Provider Profile** FRASER, JENNA C., MD

Subject: moved from scotland to usa completed ecfmg

GAP 07/01/2017 08/07/2017 05/21/2020 Print N

Subject: studying for boards and seeking employment

GAP 02/01/2020 07/31/2020 05/21/2020 Print N

Subject: enrolled in palliative care fellowship

Teaching From To Verified Method Negative

Associates

Fulton, Zachary D., MD

Personal	Information

Languages:

**Practice Information** 

Office

7703 Floyd Curl Drive, MC 7800 San Antonio, TX 78229 Telephone: (210) 567-3448

Fax Number:

**UH PRIMARY OFFICE ADDRESS** 

UT HEALTH SAN ANTONIO 4502 MEDICAL DR SAN ANTONIO, TX 78229 Telephone: (210) 358-4000

Fax Number:

**UH SECONDARY ADDRESS** 

UT HEALTH SAN ANTONIO 8300 FLOYD CURL DR SAN ANTONIO, TX 78229 Telephone: (210) 450-6000

Fax Number: (210) 450-6075

**UH MAILING ADDRESS** 

7703 FLOYD CURL DR, MC 7800 SAN ANTONIO, TX 78229 Telephone: (210) 567-3448

Fax Number: (210) 567-5556

Licensure Number State Expires Comments/Schedule

TX

**Appointment** 

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment: Advancement: Last Reappointment: Next Appointment Department: Division: Section: Status:

RADIOLOGY RADIOLOGY

**Initial Cert.** 

PENDING

ID: 32616 Data Bank: 06/02/2020

**Expires** 

Query Results: Category:

Last Cert.

Board Certification

American Board of Radiology

(RADIOLOGY)

Certified PENDING

Specialty 1:

Detar Healthcare System A.K.A Detar North

Specialty 2:

Professional LiabilityFromToVerifiedMethodNegativeUTHSCSA MALPRACTICE07/01/202008/31/2020

Limits: \$500,000/\$1,500,000 | Terms: UPON TERMINATION

Medical/Professional EducationFromToVerifiedMethodNegativeUNIVERSITY OF NEW MEXICO HEALTH SCIENCE CENTER<br/>Subject: Medical09/03/201005/09/2014

**Training** From Verified Method Negative Tο Fellowship DUKE UNIVERSITY 07/01/2019 06/30/2020 05/18/2020 Print Subject: RADIOLOGY/NEURORADIOLOGY Internship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 07/01/2014 06/30/2015 Subject: Internal Medicine Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 07/01/2015 06/30/2019 Subject: Diagnostic Radiology

**Employment** From To Verified Method Negative Ut Health San Antonio, San Antonio, TX 07/13/2020 PRESENT 06/01/2020 Email Detar Healthcare System, Victoria, TX 06/26/2018 06/02/2020 09/24/2019 Print Ν Hospital Affiliations From Verified Method To Negative University Health System Pending 05/15/2020 Print N

06/26/2018

09/24/2019

05/21/2020

N

Print

## **Provider Profile**

Fulton, Zachary D., MD

Verified Method Negative From To Other 05/10/2014

GAP Subject: Waiting to Start Internship/Residency 06/30/2014

Gao, Han T., MD

**Personal Information** 

Languages:

**Practice Information** 

**UH MAILING ADDRESS** UT HEALTH SAN ANTONIO - DEPT OF

**EMERGENCY MEDICINE** 7703 FLOYD CURL DR SAN ANTONIO, TX 78229

Telephone: (210) 567-4292

Fax Number: (210) 567-0757

**UH PRIMARY OFFICE ADDRESS** 

**UHS EMERGENCY DEPARTMENT** 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229

Telephone: (210) 743-0024

Fax Number:

Comments/Schedule Licensure Number State **Expires** STATE LICENSE ΤX **Appointment** 

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment:

Advancement: Last Reappointment:

Next Appointment

Department: Division: Section:

Status:

PENDING

ID: 42746 Data Bank: 04/30/2020

Query Results: PDS Status

Report Category:

**Board Certification** 

AMERICAN BOARD OF EMERGENCY MEDICINE (EMERGENCY MEDICINE)

Certified CURRENT **Initial Cert.** 

**EMERGENCY MEDICINE** 

**EMERGENCY MEDICINE** 

Last Cert. **Expires** 

10/31/2019

12/31/2029

Specialty 1: EMERGENCY MEDICINE

Specialty 3:

Specialty 2: Specialty 4:

Verified Method Negative **Professional Liability** From To UTHSCSA MALPRACTICE 07/01/2020 08/31/2020

Limits: 500,000 - 1,000,000 | Terms:

**Medical/Professional Education** 

From 07/01/2011 Verified

Method Negative

SUNY UPSTATE MEDICAL UNIVERSITY COLLEGE OF MEDICINE, 06/30/2015

SYRACUSE, NY

Subject: DOCTOR OF MEDICINE

To Verified Method Negative Training From Fellowship UNIVERSITY OF CALIFORNIA MEDICAL CENTER SAN DIEGO, N 07/01/2018 Print

SAN DIEGO, CA Subject: EMERGENCY MEDICINE/MEDICAL TOXICOLOGY

04/09/2020

Residency STATEN ISLAND UNIVERSITY HOSPITAL, STATEN ISLAND, NY

Subject: EMERGENCY MEDICINE

06/30/2018 06/22/2015

To

Employment	From	То	Verified	Method	Negative
UT Health San Antonio San Antonio, TX	07/01/2020		04/03/2020	Print	N
Pacific Emergency Providers, San Diego, CA	06/01/2019		04/23/2020	Print	N
Hospital Affiliations	From	To	Verified	Method	Negative
University Health System San Antonio, TX	PENDING		03/31/2020	Print	N
Scripps Mercy Hospital San Diego	04/08/2019	03/31/2021	04/06/2020	Print	N

## **Provider Profile**

Gao, Han T., MD

San Diego, CA:

Gutierrez Naranjo, Jose M., RA

Personal	Inform	ation
----------	--------	-------

Languages:

#### **Practice Information**

**UH MAILING ADDRESS** DEPARTMENT OF ORTHOPAEDICS UT HEALTH SAN ANTONIO 7703 FLOYD CURL DRIVE, MC 7774

SAN ANTONIO, TX 78229 Telephone: (210) 567-5125

Fax Number:

**UH PRIMARY OFFICE ADDRESS** 

DEPARTMENT OF ORTHOPAEDICS 7703 FLOYD CURL DRIVE UT HEALTH SAN ANTONIO SAN ANTONIO, TX 78229 Telephone: (210) 567-5125

Fax Number:

Number **Expires** Comments/Schedule State Licensure 10403993 NO EXPIRATON DATE MEXICO OTHER STATE MEDICAL LIC NO PATIENT CONTACT/RESEARCH ONLY

Appointment

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment: Advancement: Last Reappointment: Next Appointment

Department: Division: Section: Status:

ORTHOPAEDICS **ORTHOPAEDICS** 

**Initial Cert.** 

PENDING

Data Bank: 06/08/2020

Query Results: Category: RESEARCH ASSOCIATE

Expires

ID: 43105

Last Cert.

**Board Certification** 

NOT BOARD CERTIFIED

(NOT BOARD CERTIFIED)

Specialty 1: RESEARCH ASSOCIATE

Specialty 3:

Specialty 2: Specialty 4:

02/01/2020

Certified

Verified Method Negative **Professional Liability** From Tο 12/31/2050

Chapter 104 of Texas Civil Practice and Remedies Code

Limits: \$100,000 / \$300,000 | Terms: UPON TERMINATION

Medical/Professional Education From To Verified Method Negative Universidad de Monterrey Medical School, Monterrey, NL, 01/01/2010 02/28/2017 06/18/2020 Degree Ν Verify

Subject: DOCTOR OF MEDICINE

Verified Method **Employment** From Tο Negative 06/08/2020 UT Health San Antonio - Dept. of Orthopaedics, San Antonio, TX 02/01/2020 PRESENT Email: Ν

Inmedik Primary Care, Monterrey, NL, 08/01/2018 08/31/2019 06/09/2020 Fax Ν Trauma Care Group at Christus Muguerza, Monterrey, NL, 09/01/2017 09/01/2019 06/08/2020 Fax Ν

**Hospital Affiliations** From To Verified Method Negative UNIVERSITY HEALTH SYSTEM PENDING 06/05/2020 Memo to N SAN ANTONIO, TX File

Other From Verified Method Negative Τo GAP 03/01/2017 06/30/2017

Subject: Had to return to Mexico after U.S. clinical elective

## **Provider Profile**

Gutierrez Naranjo, Jose M., RA

completed in NY; obtained license; get permit t

GAP 07/01/2017 08/31/2017 Subject: Observership/training in Waco

09/01/2019 12/15/2019

GAP Subject: Research Observer/volunteer with Baylor College of

Medicine

GAP Subject: Vacation with family in San Antonio; back to Mexico 12/16/2019 01/31/2020

to get work visa

Haley, Kristen M., PA

**Personal Information** 

NPI: 1710506944 Languages: ENGLISH Medicare Sanctions:

Medicaid: Pending

**Practice Information** 

**UH MAILING ADDRESS** 

MEDICINE/GENERAL & HOSPITAL MEDICINE 7703 FLOYD CURL DR, MC 7982

SAN ANTONIO, TX 78229 Telephone: (210) 567-0777

Fax Number: (210) 358-0647

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 743-6000

Fax Number: (210) 358-0647

Licensure

Number

State Expires Comments/Schedule

STATE LICENSE

TX

Appointment

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment: Advancement: Last Reappointment: Next Appointment

Department: Division: Section: Status:

MEDICINE HOSPITAL MEDICINE HOSPITAL MEDICINE PENDING

ID: 43051 Data Bank: 05/27/2020

Query Results: Category:

**Board Certification** 

NATIONAL COMMISSION ON CERTIFICATION OF PHYSICIAN ASSISTANTS

Certified CURRENT

Last Cert. **Initial Cert.** 12/31/2021

**Expires** 12/31/2021

(NCCPA) (PHYSICIAN ASSISTANT)

Specialty 1: PHYSICIAN ASSISTANT

Specialty 3:

Specialty 2: Specialty 4:

**Professional Liability** 

Chapter 104 of Texas Civil Practice and Remedies Code

See attachment

Limits: 100,000/300,000 | Terms: Upon Termination

From

Verified Method Negative

07/01/2040 07/01/2020

To

**Medical/Professional Education** UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER

05/22/2017

From

To 12/13/2019

To

To

Present

06/30/2020

Verified 05/21/2020

Method Internet

Negative

SAN ANTONIO, TX

Subject: MASTER OF PHYSICIANS ASSISTANT STUDIES

**Employment** UT HEALTH SAN ANTONIO, SAN ANTONIO, TX From 07/01/2020

From

To Present

Verified 05/21/2020

Verified

05/20/2020

Method Negative Email

Ν

**Hospital Affiliations** UNIVERSITY HEALTH SYSTEM

SAN ANTONIO, TX

From 12/14/2019 Verified

Method

Method

Print

Negative

Negative

Other Gap

Studying for Boards/seeking employment

## Provider Profile HARFOUCH, BADR, MD

**Personal Information** 

Languages: ARABIC

**Practice Information** 

UH MAILING ADDRESS
MEDICINE/GENERAL & HOSPITAL MEDICINE

7703 FLOYD CURL DR, MC 7982 SAN ANTONIO, TX 78229

Telephone: (210) 567-0777

Fax Number: (210) 358-0647

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229

SAN ANTONIO, TX 78229 Telephone: (210) 743-6000 Fax Number: (210) 358-0647 Comments/Schedule Licensure Number State **Expires** STATE LICENSE TX **Appointment BEXAR COUNTY HOSPITAL DISTRICT** ID: 41050 Department: MEDICINE Initial Appointment: Data Bank: 05/14/2020 HOSPITAL MEDICINE Division: Advancement: HOSPITAL MEDICINE Query Results: PDS Status Section: Last Reappointment: Report PENDING Category: Next Appointment Status: Certified **Initial Cert.** Last Cert. **Expires Board Certification** 04/01/2021 CURRENT 08/20/2018 AMERICAN BOARD OF INTERNAL MEDICINE (INTERNAL MEDICINE) Specialty 2: Specialty 1: INTERNAL MEDICINE Specialty 3: Specialty 4: **Professional Liability** From To Verified Method Negative UTHSCSA MALPRACTICE 07/01/2020 08/31/2020 Limits: \$500,000 - \$1,500,000 | Terms: UPON TERMINATION From To Verified Method Negative Medical/Professional Education DAMASCUS UNIVERSITY- SYRIA 06/15/2006 01/13/2013 DAMASCUS, SYRIA Subject: DOCTOR OF MEDICINE

Verified Method **Training** Negative From Tο Fellowship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 05/01/2020 Print N 07/01/2018 PRESENT Subject: CARDIOLOGY Internship EMORY UNIVERSITY SCHOOL OF MEDICINE 06/01/2014 06/03/2015 05/14/2020 Print Ν Subject: SOM/CARDIOLOGY RESEARCH ONLY 07/01/2015 06/30/2018

Residency UNIVERSITY OF TEXAS RIO GRANDE VALLEY

Subject: INTERNAL MEDICINE

**Employment** From To Verified Method Negative UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 07/01/2020 PRESENT 04/28/2020 Email N **Hospital Affiliations** From To Verified Method Negative UNIVERSITY HEALTH SYSTEM PENDING 04/28/2020 Present Print Other From Τo Verified Method Negative Subject: RELOCATED TO U.S. AND CLINICAL GAP 11/19/2013 05/31/2014 05/07/2020 Print Ν **OBSERVERSHIPS** 

Hewitt, Michael K., RN, RA

. C. CCIICI. ZIII CI III GCICI.	Personal	Informati	on
---------------------------------	----------	-----------	----

Languages: ENGLISH

#### **Practice Information**

**UH MAILING ADDRESS** 

7703 FLOYD CURL DRIVE, MC 7886 DEPT OF MEDICINE/DIABETES SAN ANTONIO, TX 78229 Telephone: (210) 617-5300

Fax Number:

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 358-4000

Fax Number: (210) 358-4775

Comments/Schedule Licensure Number State **Expires** STATE LICENSE TX **Appointment** BEXAR COUNTY HOSPITAL DISTRICT MEDICINE ID: 43052 Department: Initial Appointment: Data Bank: 05/20/2020 Division: DIABETES Advancement: Query Results: PDS Status Last Reappointment: Section: DIABETES Report PENDING Category: RESEARCH Status: **Next Appointment ASSOCIATE Board Certification** Certified **Initial Cert.** Last Cert. **Expires** NOT BOARD CERTIFIED

Specialty 2:

Specialty 1: RESEARCH ASSOCIATE Specialty 4:

Verified Method Negative **Professional Liability** From Tο 04/13/2020 12/31/2050 Chapter 104 of Texas Civil Practice and Remedies Code

Limits: 100,000 - 300,000 | Terms: upon termination

Specialty 3:

Method **Undergraduate Education** From Tο Verified Negative National University of Texas at Arlington, Arlington, TX 12/18/2017 05/11/2019 05/20/2020 Subject: BACHELOR OF SCIENCE IN NURSING Student Clearinghou se SAN ANTONIO COLLEGE 06/06/2015 12/14/2019 05/20/2020 National Ν Subject: ASSOCIATE OF SCIENCE Student Clearinghou **Employment** From To Verified Method Negative UT HEALTH SAN ANTONIO, San Antonio, TX 04/13/2020 Present 05/20/2020 On Line **Hospital Affiliations** Verified Method From To Negative UNIVERSITY HEALTH SYSTEM Pending 05/20/2020 Print SAN ANTONIO, TX Other Verified Method From To Negative GAP 05/12/2019 04/12/2020 05/20/2020 Print

Subject: Assisting in care for grandmother/looking for work.

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_	c	13	u	11	a			u	3 13	10	L	UI:	

Languages:

#### **Practice Information**

CREDENTIALING CONTACT

RACHEL MEDINA 7703 FLOYD CURL DRIVE, MC 7836 SAN ANTONIO, TX 78229 Telephone: (210) 567-4960

NPI: Tax ID: Fax Number: (210) 567-3406

Medicare:

Medicaid:

**GME PRIMARY OFFICE ADDRESS** 

Obstetrics/Gynecology DEPARTMENT OF OBSTETRICS/GYNECOLOGY 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 567-4953 NPI:

Tax ID:

Fax Number: (210) 567-3485

Medicare:

Medicaid:

Office

903 W. Martin Street San Antonio, TX 78229 Telephone: (210) 358-3582 NPI:

Tax ID: 74-1586031

Fax Number: (210) 358-3252

Medicare:

Medicaid:

Office

8300 Floyd Curl Drive, 5th Floor San Antonio, TX 78229 Telephone: (210) 450-9500 NPI:

Tax ID: 74-1586031

Fax Number: (210) 450-6027

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

7703 FLOYD CURL DRIVE, MC 7836 SAN ANTONIO, TX 78229 Telephone: (210) 567-5035 NPI:

Tax ID:

Fax Number: (210) 567-3013

Medicare:

Medicaid:

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM ROBERT B. **GREEN CAMPUS** 903 W. MARTIN ST SAN ANTONIO, TX 78207 Telephone: (210) 358-3582 NPI:

Tax ID:

Fax Number: (210) 358-3252

Medicare:

Medicaid:

**UH SECONDARY ADDRESS** 

UT HEALTH 8300 FLOYD CURL DRIVE 5 TH FLOOR

HUGHES, JESSICA H., MD

SAN ANTONIO, TX 78229 Telephone: (210) 450-9500

NPI: Tax ID: Fax Number: (210) 450-6027

Medicare:

Medicaid:

Tax ID:							
Licensure	Number	State	Expires	Con	ıments/Schedule	2	
STATE LICENSE		TX					
• • • • • • • • • • • • • • • • • •							
Appointment							
BEXAR COUNTY HOSPITAL DISTRICT Initial Appointment:		Dep	artment:		DEPARTMENT OF OBSTETRICS/GYNECOL OGY	ID: 34646	
Advancement:		Divi	sion:		OBSTETRICS &	Data Bank: 0	5/20/2020
Last Reappointment:		Sect	tion:		GYNECOLOGY	Query Results	s: PDS Status
lext Appointment		Stat	us:			Report Category:	
<i>"</i>							
Dues Facility	Due Date	<b>:</b>	Payment Da	te	Amount Due	Payment	Method
EPIC BEXAR COUNTY HOSPITAL DISTRI	ст						
Board Certification			Certifie	ed	Initial Cert.	Last Cert.	Expires
AMERICAN BOARD OF OBSTETRICS & GYN GYNECOLOGY)	ECOLOGY (C	DBSTETRIC	S &				
Specialty 1: OBSTETRICS Specialty 3:	& GYNECOLOGY		Specialty 2 Specialty 4				
Professional Liability			From	To	Verified	Method	Negative
The University of Texas System Certificate Liabiliity Benefit Plan blanket	of Professional Me	dicia <b>!</b>	08/01/2020	08/3	1/2020		
Limits: \$500,000.00/\$1,500,000.00   Tern	ns: 1 mo						
Undergraduate Education			From	To	Verified	Method	Negative

From

From

From

07/20/2012

07/02/2016

To

Τo

To

05/22/2016

06/30/2020

Verified

Verified

05/13/2020

Verified

Training

**Employment** 

**Medical/Professional Education** 

UT HEALTH SAN ANTONIO, SAN ANTONIO, TX

Subject: DOCTOR OF MEDICINE

Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX

Subject: OBSTETRICS & GYNECOLOGY

Method

Method

Method

Memo to

File

Negative

Negative

Negative

## **Provider Profile**

HUGHES, JESSICA H., MD

COMMUNITY MEDICINE ASSOCIATES , SAN ANTONIO, TX

07/01/2020

UT HEALTH SCIENCE CENTER AT SAN ANTONIO , San Antonio, TX

07/01/2020

05/13/2020

Memo to File

N

Hospital Affiliations		From	To	Verified	Method	Negative
UHS SURGERY CENTER - RBG CAMPUS Subject:	, SAN ANTONIO, TX		Present	06/11/2020	Print	N
UNIVERSITY HEALTH SYSTEM Subject:	, SAN ANTONIO, TX		Present	05/13/2020	Memo to File	N
UHS SURGERY CENTER - MEDICAL CENTER TX	, SAN ANTONIO,		Present	06/11/2020	Print	N

Subject:

Peer References	From	To	Verified	Method	Negative
Amanda Murray, DO			05/13/2020	Eval	N
Elly Xenakis, MD			05/13/2020	Eval	N
Erin Mankus, MD			05/13/2020	Eval	N

Other	From	To	Verified	Method	Negative
GAP	05/23/2016	06/30/2016	05/13/2020	Memo to	N
No.				File	

Subject: WAITING TO START RESIDENCY

**Teaching** To Verified Method Negative From **Associates** 

#### **Provider Profile**

Joseph, Shanty S., FNP-BC

**Personal Information** 

Languages: ENGLISH

**Practice Information** 

SECONDARY OFFICE ADDRESS

**UHS MARC** 

8300 FLOYD CURL DR

SAN ANTONIO, TX 78229 Telephone: (210) 450-6349

Fax Number: (210) 450-6092

**SECONDARY OFFICE ADDRESS** 

UHS ROBERT B GREEN SURGICAL CENTER

903 W MARTIN

SAN ANTONIO, TX 78207

Telephone: (210) 358-6700

Fax Number:

**UH MAILING ADDRESS** 

UT HEALTH SAN ANTONIO 7703 FLOYD CURL DRIVE

SAN ANTONIO, TX 78229

Telephone: (210) 567-4601

Fax Number: (210) 567-6960

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM

4502 MEDICAL DR

SAN ANTONIO, TX 78229

Telephone: (210) 358-4000

Fax Number: (210) 567-6960

Number State **Expires** Comments/Schedule Licensure STATE LICENSE

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment:

Next Appointment

Department:

Division:

Section: Status:

MEDICINE

CARDIOLOGY CARDIOLOGY PENDING

ID: 43050 Data Bank: 05/28/2020

Query Results:

Category:

Certified Initial Cert. Last Cert. Expires **Board Certification** (FAMILY NURSE 03/12/2024 AMERICAN ACADEMY OF NURSE PRACTITIONERS CURRENT 03/13/2019 PRACTITIONER) AMERICAN ASSOCIATION OF CRITICAL-CARE NURSES CURRENT 10/01/2009 09/30/2021 AMERICAN BOARD OF CARDIOVASCULAR MEDICINE CURRENT 07/27/2014 07/26/2020

Specialty 1: FAMILY NURSE PRACTITIONER

Specialty 2:

Professional Liability	From	To	Verified	Method	Negative
CHAPTERS 101, 104, 108 OF TEXAS CIVIL PRACTICE AND REMEDIES Limits: 100,000 TO 300,000   Terms: UPON TERMINATION	07/01/2020	12/31/2050			
Undergraduate Education	From	То	Verified	Method	Negative
RAK , NEW DELHI 110024, Subject: BACHELOR OF SCIENCE IN NURSING	07/01/1988	06/30/1992	06/15/2020	Print	N
Medical/Professional Education	From	То	Verified	Method	Negative
UTBM Galveston, Galveston, TX Subject: MASTERS OF SCIENCE IN NURSING FAMILY NURSE PRACTITIONER	08/27/2016	12/14/2018	05/27/2020	National Student Clearing House	N
Employment	From	То	Verified	Method	Negative
Post Acute care Specialist of Texas, Austin, TX Ut Health San Antonio, San Antonio, TX University Hospital, San Antonio, TX	11/01/2019 07/01/2020 11/18/2005	Present Present Present	05/27/2020 05/27/2020 05/27/2020	Print Print Internet	N N N
Hospital Affiliations	From	То	Verified	Method	Negative
University Health System, San Antonio, TX		Present	05/27/2020	Print	N -

## **Provider Profile** JULIA, JONATHAN C., MD

Davida I Information							
Personal Information Languages:			- COMMAN				
Practice Information					*** ***********************************		
UH MAILING ADDRESS UT HEALTH SAN ANTONIO 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 567-4500 NPI: Tax ID:	Fax Ni Medica	umber: (210) are:	) 567-0083	Medic	aid:		
UH PRIMARY OFFICE ADDRESS UT HEALTH SAN ANTONIO 7703 FLOYD CURL DR UNIVERSITY HEALTH SYSTEM SAN ANTONIO, TX 78229 Telephone: (210) 567-4500 NPI: Tax ID:	Fax Ni Medica	umber: (210) are:	) 567-0083	Medic	aid:		
UT PRIMARY OFFICE ADDRESS UT HEALTH SAN ANTONIO UHS - HOSPITAL MEDICINE 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Felephone: (210) 567-4500 NPI: Tax ID:	Fax No Medica	umber: (210) are:	) 567-0083	Medic	aid:		
Licensure	Number	State	Expires	Commen	ts/Schedul	е	
STATE LICENSE		TX					
Appointment							
BEXAR COUNTY HOSPITAL DISTRIC	e <b>r</b>	·					
Initial Appointment: Advancement:			partment: vision:		HESIOLOGY HESIOLOGY	ID: 34579 Data Bank: 05	5/04/2020
<b>Board Certification</b>			Certifi	ed Init	ial Cert.	Last Cert.	Expires
American Board of Anesthesiology	(ANESTHE	SIOLOGY)	PENDI				
Specialty 1: ANESTHE	SIOLOGY		Specialty 2	2;			
Professional Liability			From	To	Verified	Method	Negative
UTHSCSA MALPRACTICE Limits: 500,000 1,500,000.   Terms:			07/01/2020	08/31/2020			
Medical/Professional Educa	ition		From	То	Verified	Method	Negative
GEORGETOWN UNIVERSITY SCHOOL O	F MEDICINE		08/04/2011	05/22/2016			
Training			From	To	Verified	Method	Negative
Residency UNIVERSITY OF TEXAS HEAD Subject: ANESTHESIOLOGY			06/01/2016		05/04/2020	Fax	N
Employment			From	То	Verified	Method	Negative
UT HEALTH SAN ANTONIO			07/01/2020		05/04/2020	Memo to	N

From

, SAN ANTONIO, TX

To

Present

Hospital Affiliations

UNIVERSITY HEALTH SYSTEM

Memo to File

Method

Memo to File

Negative

Verified

05/01/2020

KENDRICK, ZACHARY W., MD

**Personal Information** 

Languages:

**Practice Information** 

**UH MAILING ADDRESS** DEPT OF EMERGENCY MEDICINE 7703 FLOYD CURL DRIVE

SAN ANTONIO, TX 78229 Telephone: (210) 567-4292

Fax Number: (210) 567-0757

**UH PRIMARY OFFICE ADDRESS** 

UHS EMERGENCY DEPARTMENT 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 743-0025

Fax Number:

Comments/Schedule Licensure Number State Expires STATE LICENSE ΤX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

AMERICAN BOARD OF EMERGENCY MEDICINE

Initial Appointment: Advancement: Last Reappointment: Next Appointment

Department: Division:

Section: Status:

**EMERGENCY MEDICINE** 

Pending

ID: 40118

Last Cert.

Data Bank: 03/25/2020

**Expires** 

Ν

Query Results: Category:

**Board Certification** 

(EMERGENCY MEDICINE)

Certified **Initial Cert.** Pending/Intending to

sit for the boards 10/2021

Specialty 1: EMERGENCY MEDICINE

Specialty 3:

Specialty 2: Specialty 4:

To Verified Method Negative **Professional Liability** From

UT Health System Insurance Liability and Health Benefit Plan

Limits: 500,000 - 1,500,000 | Terms: Upon Termination

07/01/2020 08/31/2020

**Medical/Professional Education** From To Verified Method Negative GEORGE WASHINGTON UNIVERSITY SCHOOL OF MEDICINE & HEALTH 03/25/2020 National 08/26/2013 05/21/2017 Student **SCIENCES** WASHINGTON, DC Clearing Subject: DOCTOR OF MEDICINE

House Training From Τo Verified Method Negative Fellowship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 07/01/2020

Subject: ULTRASOUND Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 07/02/2017 06/30/2020 03/25/2020 **VLETR** 

Subject: EMERGENCY MEDICINE

**Employment** From To Verified Method Negative UT HEALTH SAN ANTONIO 07/01/2020 03/25/2020 Print Present SAN ANTONIO, TX

**Hospital Affiliations** Verified From To Method Negative UNIVERSITY HEALTH SYSTEM Pending 03/24/2020 Memo to SAN ANTONIO, TX File

Other Verified Method From Tο Negative GAP Subject: RELOCATED FROM WASHINGTON, DC TO SAN 03/26/2020 05/21/2017 06/30/2017 Print N

ANTONIO, TX TO BEGIN RESIDENCY TRAINING

Kuecker, Kaytlyn N., PA

Personal Information
----------------------

Languages:

**Practice Information** 

Comments/Schedule Number **Expires** Licensure State

ΤX

STATE LICENSE

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment:

**Next Appointment** 

Department:

Division: Section:

Status:

DEPARTMENT OF

06/26/2014

EMERGENCY MEDICINE

Data Bank: 05/22/2020 Query Results: PDS

**Enrollment Complete** Category: PHYSICIAN

12/31/2020

Negative

ASSISTANT

12/31/2018

ID: 40141

**Dues Facility Due Date Payment Date Amount Due Payment Method** 

EPIC BEXAR COUNTY HOSPITAL DISTRICT

**Board Certification** Certified **Initial Cert.** Last Cert. **Expires** 

NATIONAL COMMISSION ON CERTIFICATION OF PHYSICIAN ASSISTANTS

(NCCPA) (PHYSICIAN ASSISTANT)

Specialty 1: PHYSICIAN ASSISTANT

Specialty 3:

Specialty 2:

Y (Archived)

Specialty 4:

**Professional Liability** Verified Method From Negative

CHAPTERS 101, 104, 108 OF TEXAS CIVIL PRACTICE AND REMEDIES 08/01/2020 12/31/2050

CODE TORT POLICY

Limits: 100,000-300,000 UT | Terms:

**Undergraduate Education** From Verified Method Negative

TEXAS STATE UNIVERSITY - SAN MARCOS 08/01/2007 12/18/2010

, SAN MARCOS, TX Subject:

**Medical/Professional Education** Verified From Method

ROSALIND FRANKLIN UNIVERSITY OF MEDICINE & SCIENCE COLLEGE 05/29/2012 06/06/2014 05/22/2020 Degree Verify

OF HEALTH PROFESSIONALS, NORTH CHICAGO, IL

Subject: PHYSICIAN ASSISTANT

Kuecker, Kaytlyn N., PA

Training		From	То	Verified	Method	Negative
Employment		From	То	Verified	Method	Negative
MY URGENT CARE CLINIC, BOERNE, TX		01/06/2020		05/28/2020	Fax	N
UT HEALTH SAN ANTONIO, SAN ANTONIO, TX		08/01/2020		05/26/2020	Email	N
METHODIST HEALTCARE SYSTEM , SAN ANTONIO, TX		05/17/2010	12/17/2011	05/22/2020	On Line Query	N
SAN ANTONIO MILITARY MEDICAL CENTER HOUSTON, TX	, FORT SAM	12/01/2015	05/31/2017			
EMCARE / ENVISION PHYSICIAN SERVICES, CLEA	RWATER, FL	10/27/2014	10/24/2018	05/22/2020	On Line	N
UT HEALTH SAN ANTONIO, SAN ANTONIO, TX		06/01/2017	01/31/2020	05/22/2020	Query On Line Query	N
Hospital Affiliations		From	To	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM-SAN ANTONIO TX Subject:	, SAN ANTONIO,		Present	05/22/2020	Memo to File	N
METHODIST HEALTHCARE SYSTEM HOSPITALS SA ANTONIO, TX Subject:	AN ANTONIO , SAN	10/23/2014	07/21/2016	05/22/2020	On Line Query	N
SAN ANTONIO MILITARY MEDICAL CENTER HOUSTON, TX Subject:	, FORT SAM	09/17/2016	05/31/2017	05/22/2020	Fax	N
UNIVERSITY HEALTH SYSTEM-SAN ANTONIO TX Subject:	, SAN ANTONIO,	06/27/2017	01/31/2020	05/22/2020	Memo to File	N
Peer References		From	To	Verified	Method	Negative
KELLY SPONHALTZ, PA MELISSA BOONE, PA-C TATIANA EMANUEL, PA-C TIM METCALF, PA-C				06/02/2020 05/28/2020 05/29/2020 05/23/2020	Eval Eval Eval Eval	N N N Y
Other		From	To	Verified	Method	Negative
GAP , , Subject: RELOCATED TO SAN ANTONI EMPLOYMENT	O AND SEEKING	07/01/2014	09/30/2014	05/22/2020	Memo to File	N
Teaching		From	То	Verified	Method	Negative
Associates						

Lam, Christopher K., MD

Personal Information			
Languages:			
Practice Information			
CREDENTIALING CONTACT NELDA POTTER 7703 FLOYD CURL DRIVE, MC 7870 SAN ANTONIO, TX 78229 Telephone: (210) 567-4890 NPI: Tax ID:	Fax Number: (210) 567-4123 Medicare:	Medicaid:	
Office 4502 Medical Drive San Antonio, TX 78229 Telephone: (210) 743-6000 NPI: 1013443282 Tax ID: 74-1586031	Fax Number: (210) 358-0647 Medicare:	Medicaid:	
UH MAILING ADDRESS 7703 FLOYD CURL DRIVE, MC 7982 DEPT OF MEDICINE/GENERAL & HOSPITAL MEDICINE SAN ANTONIO, TX 78229 Telephone: (210) 567-0777 NPI: Tax ID:	Fax Number: (210) 358-0647 Medicare:	Medicald:	
UH PRIMARY OFFICE ADDRESS UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 743-6000 NPI: Tax ID:	Fax Number: (210) 358-0647 Medicare:	Medicaid:	
UT PRIMARY OFFICE ADDRESS UNIVERSITY HEALTH SYSTEM UHS - HOSPITAL MEDICINE 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 358-4000	Fax Number: (210) 358-0647	Madharida	

Licensure	Number	State	Expires	Comments/Schedule	
STATE LICENSE		TX			

Medicaid:

Medicare:

NPI:

Tax ID:

Lam, Christopher K., MD

**Appointment** 

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment:

Advancement: Last Reappointment:

**Next Appointment** 

Department:

Division:

Section: Status:

DEPARTMENT OF

MEDICINE HOSPITAL MEDICINE

Data Bank: 04/24/2020 Query Results: PDS Status

Report Category:

ID: 42765

**Payment Date Amount Due Payment Method Facility Due Date Dues** 

**Initial Cert.** Last Cert. **Expires** Certified **Board Certification** 

(INTERNAL

AMERICAN BOARD OF INTERNAL MEDICINE

MEDICINE)

Specialty 1: INTERNAL MEDICINE

Specialty 3:

Specialty 2:

Specialty 4:

From To Verified Method Negative **Professional Liability** 07/01/2020 08/31/2020

University of Texas Systems

N/A

Limits: 500,000 - 1,500,000 | Terms:

Verified Method Negative **Undergraduate Education** From To

06/01/2012 UNIVERSITY OF TEXAS AT AUSTIN 07/01/2006

AUSTIN, TX

Subject:

Negative To Verified Method Medical/Professional Education From

UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER , SAN 07/01/2013 06/01/2017

ANTONIO, TX

Subject: DOCTOR OF MEDICINE

Verified Method Negative **Training** From To 06/30/2020 04/22/2020 **VLETR** 

Residency UNIVERSITY OF TEXAS AT AUSTIN DELL MEDICAL SCHOOL 06/26/2017

, AUSTIN, TX

Subject: INTERNAL MEDICINE

**Employment** From To Verified Method Negative

04/17/2020 Memo to UT HEALTH SAN ANTONIO 07/01/2020 , San Antonio, TX File

**Hospital Affiliations** Verified Method From To Negative

UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX 04/17/2020 Memo to Present Ν Subject: File

**Peer References** Verified From To Method Negative Beth Miller 04/17/2020 Eval N

lemali Patel 04/18/2020 Eval Ν Sherine Salib 04/17/2020 Eval Ν

# **Provider Profile**

Lam, Christopher K., MD

Other	From	То	Verified	Method	Negative
Teaching	From	To	Verified	Method	Negative
Associates					

LITTLEJOHN, MARTIN R., MD

Languages:			
Donation Telegraphics			
Practice Information			
CREDENTIALING CONTACT KRISTI MCBREARTY 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229			
Telephone: (210) 567-6133 NPI: Tax ID:	Fax Number: (210) 567-0083 Medicare:	Medicaid:	
<b>Office</b> 7703 Floyd Curl Drive			
San Antonio, TX 78230 Telephone: (210) 567-4500 NPI: Tax ID:	Fax Number: Medicare:	Medicaid:	
PERMANENT MAILING ADDRESS			
8811 RUSTLING BREEZE SAN ANTONIO, TX 78254 Telephone:	Fax Number:		
NPI: Tax ID:	Medicare:	Medicaid:	
PERMANENT MAILING ADDRESS 8811 RUSTLING BREEZE			
SAN ANTONIO, TX 78254 Telephone:	Fax Number:		
NPI: Tax ID:	Medicare:	Medicaid:	
PERMANENT MAILING ADDRESS 8811 RUSTLING BREEZE			
SAN ANTONIO, TX 78254 Telephone:	Fax Number:		
NPI: Tax ID:	Medicare:	Medicaid:	
PERMANENT MAILING ADDRESS 8811 RUSTLING BREEZE			
SAN ANTONIO, TX 78254 Telephone:	Fax Number:		
NPI: Tax ID:	Medicare:	Medicald:	
PERMANENT MAILING ADDRESS			
8811 RUSTLING BREEZE SAN ANTONIO, TX 78254 Telephone:	Fay Number		
PPI: Tax ID:	Fax Number: Medicare:	Medicaid:	

# Provider Profile LITTLEJOHN, MARTIN R., MD

PERMANENT MAILING ADDRESS

8811 RUSTLING BREEZE SAN ANTONIO, TX 78254

Telephone: NPI: Tax ID: Fax Number:

Medicare:

Medicaid:

PERMANENT MAILING ADDRESS

8811 RUSTLING BREEZE SAN ANTONIO, TX 78254

Telephone: NPI: Tax ID: Fax Number:

Medicare:

Medicaid:

PERMANENT MAILING ADDRESS

8811 RUSTLING BREEZE SAN ANTONIO, TX 78254

Telephone: NPI: Tax ID: Fax Number:

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

Anesthesiology DEPT OF ANESTHESIOLOGY 7703 FLOYD CURL DRIVE MCS 7838 SAN ANTONIO, TX 78229 Telephone: (210) 567-4500

Tax ID:

Fax Number: (210) 567-0083

Medicare:

Medicald:

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 358-4000

NPI: Tax ID: Fax Number: (210) 567-0083

Medicare:

Medicaid:

Licensure

Number

State

Comments/Schedule

STATE LICENSE

ΤX

<u>Appointment</u>

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment:

Advancement: Last Reappointment: Next Appointment Department:

Division:

Section:

Status:

**Expires** 

DEPARTMENT OF ANESTHESIOLOGY

ANESTHESIOLOGY

ID: 33615

Data Bank: 06/05/2020 Query Results: Category:

Dues

**Facility** 

**Due Date** 

**Payment Date** 

**Amount Due** 

Payment Method

LITTLEJOHN, MARTIN R., MD

Board Certification	Certified Initial C		al Cert.	Last Cert.	Expires
American Board of Anesthesiology (ANESTHESIOLOGY)					
Specialty 1: ANESTHESIOLOGY Specialty 3:	Specialty 2 Specialty 4				
Professional Liability	From	То	Verified	Method	Negative
UTHSCSA MALPRACTICE	08/01/2020	08/31/2020			
Limits: 500,000 - 1,500,000   Terms:					
Undergraduate Education	From	То	Verified	Method	Negative
Medical/Professional Education	From	То	Verified	Method	Negative
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO , SAN ANTONIO, TX Subject: DOCTOR OF MEDICINE	08/01/2011	05/17/2015			
Training	From	To	Verified	Method	Negative
Residency UT HEALTH SAN ANTONIO, SAN ANTONIO, TX	07/01/2015	06/30/2019			
Subject: Anesthesiology Fellowship UNIVERSITY OF ALABAMA SCHOOL OF MEDICINE BIRMINGHAM, AL Subject: Critical Care Anesthesiology	07/01/2019	06/30/2020	06/09/2020	Memo to File	N
Employment	From	То	Verified	Method	Negative
UT SAN ANTONIO , SAN ANTONIO, TX	08/01/2020		06/05/2020	Email	N
LIFECARE HOSPITALS OF SAN ANTONIO , SAN ANTONIO, TX	08/09/2018	07/01/2019	06/05/2020	Memo to File	N
Hospital Affiliations	From	То	Verified	Method	Negative
UHS SURGERY CENTER - RBG CAMPUS , SAN ANTONIO, TX Subject:		Present	06/05/2020	Memo to File	N
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject:		Present	06/05/2020	Memo to File	N
UHS SURGERY CENTER - MEDICAL CENTER , SAN ANTONIO, TX		Present	06/05/2020	Memo to File	N
Subject:  LIFECARE HOSPITAL OF SAN ANTONIO , SAN ANTONIO, TX Subject:	08/09/2018	07/01/2019	06/05/2020	Fax	N
Peer References	From	То	Verified	Method	Negative
David Liang, DO John Quick, MD Timothy Akin, MD			06/09/2020 06/06/2020 06/05/2020	Eval Eval Eval	N N N
Other	From	То	Verified	Method	Negative
	From	То	Verified	Method	Negative

# **Provider Profile**LITTLEJOHN, MARTIN R., MD

**Associates** 

MANOHAR, CRYSTAL M., MD

**Personal Information** 

Languages:

**Practice Information** 

**UH MAILING ADDRESS** 

UT Health San Antonio DEPARTMENT OF **ANESTHESIOLOGY** SAN ANTONIO, TX 78229 Telephone: (210) 567-4500

Fax Number: (210) 567-0083

**UH PRIMARY OFFICE ADDRESS** 

UT HEALTH SAN ANTONIO 4502 MEDICAL DRIVE UNIVERSITY HEALTH SYSTEM SAN ANTONIO, TX 78229 Telephone: (210) 358-4000

Fax Number:

Comments/Schedule **Expires** Licensure Number State STATE LICENSE TΧ

Appointment

BEXAR COUNTY HOSPITAL DISTRICT

Department: Initial Appointment:

Advancement: Last Reappointment:

Next Appointment

Division:

Status:

Section:

CURRENT

ANESTHESIOLOGY ANESTHESIOLOGY/CRITICAL

Query Results: PDS CARE **Enroliment Complete** Category: SPECIALIST PENDING

ID: 42559

Data Bank: 05/19/2020

**Expires** 

12/31/2024

**Board Certification** Certified **Initial Cert.** Last Cert.

AMERICAN BOARD OF ANESTHESIOLOGY/CRITICAL CARE

Specialty 3:

Specialty 1: ANESTHESIOLOGY

(ANESTHESIOLOGY)

08/31/2020

08/09/2014

DEPARTMENT OF

ANESTHESIOLOGY

Specialty 2: ANESTHESIOLOGY CRITICAL CARE Specialty 4:

07/13/2020

Verified Method Negative **Professional Liability** From To

UTHSCSA MALPRACTICE

NA

Limits: 500,000/1,500,000 | Terms: UPON TERMINATION

Verified Method Negative **Undergraduate Education** From To UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN 08/01/2001 05/01/2005

URBANA, IL

Subject: Specialized Chemistry

Negative Medical/Professional Education From To Verified Method 06/01/2005 06/07/2009

LOYOLA UNIVERSITY Chicago, Stritch School of Medicine, Maywood, IL

Subject: DOCTOR OF MEDICINE

10/25/2016 04/21/2020 Degree N 05/19/2020 Verify

BAYLOR UNIVERSITY-WACO

WACO, TX

Subject: ATTENDANCE - MBA PROGRAM

Training Verified Method From To Negative Residency CLEVELAND CLINIC FOUNDATION 07/01/2009 06/30/2013

Subject: ANESTHESIOLOGY

07/01/2013 06/30/2014

Fellowship CLEVELAND CLINIC FOUNDATION, Anesthesiology Institute,

Subject: CRITICAL CARE MEDICINE

**Employment** From Τo Verified Method Negative

# **Provider Profile**

MANOHAR, CRYSTAL M., MD

UT HEALTH SAN ANTONIO	07/13/2020		05/19/2020	Memo to File	N
Hospital Affiliations	From	То	Verified	Method	Negative
UHS SURGERY CENTER - RBG CAMPUS SAN ANTONIO, TX	PENDING		05/19/2020	Memo to File	N
UNIVERSITY HEALTH SYSTEM SAN ANTONIO, TX	PENDING		05/19/2020	Memo to File	N
SAN ANTONIO MILITARY MEDICAL CENTER FORT SAM HOUSTON, TX	07/15/2014	Present	05/21/2020	VLETF	N
DEACONESS HOSPITAL-EVANSVILLE, IN EVANSVILLE, IN	10/10/2016	Present	05/19/2020	On Line Query	N
UHS SURGERY CENTER - MEDICAL CENTER SAN ANTONIO, TX	PENDING		05/19/2020	AMA	N

MARTIN, ELIZABETH M., MD

### **Personal Information**

Languages:

### **Practice Information**

**UH MAILING ADDRESS** 

7703 FLOYD CURL DRIVE, MC 7836 SAN ANTONIO, TX 78229 Telephone: (210) 567-5034

Fax Number: (210) 567-3013

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM ROBERT B.

GREEN CAMPUS 903 W. MARTIN ST

SAN ANTONIO, TX 78207

Telephone: (210) 358-3582

Fax Number: (210) 358-3252

**UH SECONDARY ADDRESS** 

UT HEALTH MARC OB/GYN

8300 FLOYD CURL DRIVE, 5TH FLOOR							
SAN ANTONIO, TX 78229 Telephone: (210) 450-9500	Fax Nu	mber: (210	) 450-6027				
Licensure	Number	State	Expires	Commen	ts/Schedul	e	
STATE LICENSE	S4654	TX	02/28/2022				
CPR DEA	BLS FM9033286	TX TX	06/30/2020 01/31/2023	2 2N 3 3N 4	5		
Appointment							
BEXAR COUNTY HOSPITAL DISTRICT Initial Appointment:		D	epartment:	OBSTE OGY	TRICS/GYNECO	DL ID: 34647	
Advancement:		D	ivision:	OBSTE OGY	TRICS/GYNECO	Data Bank:	05/19/2020
Last Reappointment:		S	ection:			Query Resul Report	ts: PDS Status
Next Appointment		Si	tatus:	Pendir	ng	Category:	
<b>Board Certification</b>			Certifie	ed Initi	al Cert.	Last Cert.	Expires
AMERICAN BOARD OF OBSTETRICS & GYN (OBSTETRICS & GYNECOLOGY)	IECOLOGY		PEND	ING			
Specialty 1: OBSTETRICS Specialty 3:	& GYNECOLOG	Y	Specialty 2 Specialty 4				
Professional Liability			From	То	Verified	Method	Negative
The University of Texas System Medical Li Limits: \$500,000.00/\$1,500,000.00   Terr			07/01/2020	08/31/2020	)		
Medical/Professional Education	n		From	То	Verified	Method	Negative
UNIVERSITY OF TEXAS SOUTHWESTERN N Subject: DOCTOR OF MEDICIN		)L	08/01/2012	05/27/2010	5		

Training	From	То	Verified	Method	Negative
Residency UT Health Science Center at San Antonio, San Antonio, TX Subject: Obstetrics & gynecology	07/01/2016	06/30/2020	05/12/2020	Memo to File	N
Employment	From	To	Verified	Method	Negative

Linployment	110111	10	vermed	Mechou	Ivegative
UT HEALTH SAN ANTONIO	07/01/2020	Present	05/13/2020	Memo to File	N

Hospital Affiliations Verified From To Method Negative UHS SURGERY CENTER - RBG CAMPUS 05/12/2020 Pending Present Memo to N File

# **Provider Profile**

MARTIN, ELIZABETH M., MD

GAP	Subject: WAITING TO START RESIDENCY	05/28/2016	06/30/2016	05/13/2020	Memo to File	N
Other		From	То	Verified	Method	Negative
	URGERY CENTER - MEDICAL CENTER NTONIO, TX	Pending	Present	05/12/2020	Memo to File	N
UNIVE	RSITY HEALTH SYSTEM	Pending	Present	05/12/2020	Memo to File	N

Mehta, Dhruv S., MD

o	arc	: M M	 Info	rm.	ation

Languages: HINDI

#### **Practice Information**

CREDENTIALING CONTACT

CRYTSAL JEFFERS-CREDENTIALING COORDINATOR 7703 FLOYD CURL DR, MC 7870 SAN ANTONIO, TX 78229 Telephone: (210) 567-1418

NPI:

Tax ID:

Fax Number: (210) 567-4652

Medicare:

Medicald:

Office

UT Health San Antonio 7703 Floyd Curl Drive MC 7878 Gastro San Antonio, TX 78229 Telephone: (914) 548-8835 NPI: 1639572134

Tax ID:

Fax Number: Medicare:

Medicaid:

UH MAILING ADDRESS

UT HEALTH SAN ANTONIO 7703 FLOYD CURL DRIVE, MC 7878 MEDICINE/GASTROENTEROLOGY SAN ANTONIO, TX 78229 Telephone: (210) 567-4880

NPI:

Tax ID:

Fax Number: (210) 567-1976

Medicare:

Medicaid:

**UH SECONDARY ADDRESS** 

MARC
MEDICAL ARTS RESEARCH CENTER
8300 FLOYD CURL DRIVE
SAN ANTONIO, TX 78229
Telephone: (210) 450-9880

NPI: Tax ID: Fax Number: (210) 450-6016

Medicare:

Medicald:

**UT PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM ROBERT B. GREEN CAMPUS 903 W. MARTIN ST DT GI CLINIC SAN ANTONIO, TX 78207 Telephone: (210) 358-5840

NPI: Tax ID: Fax Number:

Medicare:

Medicaid:

Licensure

Number

State Expires

Comments/Schedule

STATE LICENSE

TX

### **Provider Profile**

Mehta, Dhruv S., MD

OTHER STATE MEDICAL LIC

302930 ACLS

12/31/2021

CPR DEA

PENDING

05/31/2022

**ECFMG** 

0-821-335-7

PΑ

12/31/2050

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Department:

DEPARTMENT OF

ID: 43094

Advancement: Last Reappointment: Division: Section:

MEDICINE GASTROENTEROLOGY GASTROENTEROLOGY

Data Bank: 06/08/2020

Next Appointment

Status:

Query Results: PDS **Enrollment Complete** 

Category:

Dues Facility **Due Date** 

**Payment Date** 

**Amount Due** 

**Payment Method** 

**Board Certification** 

AMERICAN BOARD INTERNAL MEDICINE/GASTROENTEROLOGY

Certified PENDING **Initial Cert.** 

Last Cert. Expires

(GASTROENTEROLOGY) AMERICAN BOARD OF INTERNAL MEDICINE

(INTERNAL

CURRENT

08/21/2017

04/01/2021

Specialty 1: INTERNAL MEDICINE

Specialty 3:

Specialty 2: INTERNAL MEDICINE

To

Specialty 4:

**Professional Liability** 

UNIVERSITY OF TEXAS SYSTEM

Blanket

MEDICINE)

Limits: 1,500,000.00 | Terms:

From 07/01/2020

08/31/2020

Method Negative

From To Verified Method Negative **Undergraduate Education** 

Verified Method **Medical/Professional Education** From To TOPIWALA NATIONAL MEDICAL COLLEGE 07/01/2006 10/05/2012

, MUMBAI,

Subject: Medicine & Surgery

Verified Method **Training** From To Negative

Fellowship WESTCHESTER MEDICAL CENTER AKA NEW YORK MEDICAL COLLEGE , VALHALLA, NY

Subject: GASTROENTEROLOGY

07/01/2017

06/08/2020

Verified

N Print

Negative

Residency NEW YORK MEDICAL COLLEGE , BRONX,

NEW YORK, NY

Subject: INTERNAL MEDICINE

07/01/2014 06/30/2017

**Employment** From To Verified Method Negative UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 07/01/2020 06/08/2020 Email N

**Hospital Affiliations** From To Verified Method Negative UHS SURGERY CENTER - RBG CAMPUS , SAN ANTONIO, TX 06/03/2020 Present Print Ν Subject: JNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Present 06/03/2020 Print N Subject:

# **Provider Profile**

Mehta, Dhruv S., MD

UHS SURGERY CENTER - MEDICAL CENTER

, SAN ANTONIO,

Present

06/03/2020

Print

N

Subject:

From	To	Verified	Method	Negative
		06/03/2020	Eval	N
		06/08/2020	Eval	N
		06/04/2020	Eval	N
From	То	Verified	Method	Negative
From	То	Verified	Method	Negative
	From	From To	06/03/2020 06/08/2020 06/04/2020 From To Verified	06/03/2020   Eval   06/08/2020   Eval   06/08/2020   Eval   06/04/2020   Eval   Eval

MEIER, MARSHALL J., DO

Personal	Inform	ation
----------	--------	-------

Languages:

**Practice Information** 

CREDENTIALING CONTACT

DEPT OF MEDICINE/ADMINISTRATION NELDA POTTER-CREDENTIALING SPECIALIST 7703 FLOYD CURL DRIVE, MC-7870 SAN ANTONIO, TX 78229

Telephone: (210) 567-4890

NPI: Tax ID: Fax Number: (210) 567-4123

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

UT HEALTH SAN ANTONIO 7703 FLOYD CURL DRIVE, MC 7806 SAN ANTONIO, TX 78229 Telephone: (210) 567-0777 NPI:

Tax ID:

Fax Number: (210) 358-0647

Medicare:

Medicaid:

**UH PRIMARY OFFICE ADDRESS** 

UHS UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 743-6000

NPI: Tax ID: Fax Number: (210) 358-0647

Medicare:

Medicaid:

Licensure Number State Expires Comments/Schedule

STATE LICENSE

ΤX

<u>Appointment</u>

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment:

Next Appointment

Department:

Division: Section:

Status:

DEPARTMENT OF

MEDICINE

HOSPITAL MEDICINE HOSPITAL MEDICINE

ID: 40173

Data Bank: 03/17/2020 Query Results: PDS Enrollment Complete

Category:

Dues Facility Due Date Payment Date Amount Due Payment Method

Board Certification Certified Initial Cert. Last Cert. Expires

# **Provider Profile**

MEIER, MARSHALL J., DO

AMERICAN BOARD OF INTERNAL MEDICINE

(INTERNAL

PENDING

MEDICINE)

Specialty 2: Specialty 4:

Specialty 1: INTERNAL MEDICINE Specialty 3:

Professional Liability	From	То	Verified	Method	Negative
UNIVERSITY OF TEXAS SELF-INSURANCE	07/01/2020	08/31/2020			
N/A Limits: 500,000.00 TO 1,500,000.00   Terms:					
Undergraduate Education	From	То	Verified	Method	Negative
Medical/Professional Education	From	To	Verified	Method	Negative
MIDWESTERN UNIVERSITY , GLENDALE, AZ Subject: DOCTOR OF MEDICINE	08/01/2013	05/31/2017	03/17/2020	Internet	N
Training	From	То	Verified	Method	Negative
Internship UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER , SAN ANTONIO, TX	07/01/2017	06/30/2018	03/20/2020	VLETR	N
Subject: INTERNAL MEDICINE Residency UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO , SAN ANTONIO, TX Subject: INTERNAL MEDICINE	07/01/2018	06/30/2020	03/20/2020	VLETR	N
Employment	From	То	Verified	Method	Negative
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER - SA, SAN ANTONIO, TX	07/01/2020		03/17/2020	Print	N
Hospital Affiliations	From	То	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject: PENDING		Present	03/17/2020	Print	N
VA MEDICAL CENTER/SOUTH TEXAS VETERANS HEALTH SYS , SAN ANTONIO, TX Subject:	07/01/2017	Present	03/17/2020	VLETR	N
Peer References	From	То	Verified	Method	Negative
DAVID SCHMIT, MD KANAPA KORNSAWAD, MD Temple Ratcliffe, MD			03/17/2020 03/17/2020 03/17/2020	Eval Eval Eval	N N N
Other	From	То	Verified	Method	Negative
Teaching	From	То	Verified	Method	Negative
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER , SAN ANTONIO, TX Subject:	02/01/2019		03/25/2020	Verbal	N

**Associates** 

MYERS, ABIGAIL C., MD

**Personal Information** 

Languages:

**Practice Information** 

**UH MAILING ADDRESS** SANDY CASTILLO

903 W MARTIN, MS 27-2 SAN ANTONIO, TX 80634 Telephone: (210) 358-3427

Fax Number: (210) 358-5940

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY MEDICINE ASSOCIATES 903 W MARTIN

ROBERT B. GREEN, SKIN CLINIC SAN ANTONIO, TX 78207

/210\ 2E0.E044

Telephone: (210) 358-3441 Fax Number: (210) 35		358-5944					
Licensure	Number	State	Expires	Commer	its/Schedul	e	
STATE LICENSE		TX					
Appointment							
BEXAR COUNTY HOSPITAL DISTR Initial Appointment:	ICT	Dep	artment:	FAMIL'	Y & COMMUNITY	ID: 43108	
Advancement:		Divi	sion:		RSITY MEDICAL	Data Bank: 06	5/19/2020
Last Reappointment:		Sec	tion:	A0000	ARTES	Query Results Enrollment Co	
Next Appointment 07/2	8/2020	Stat	us:			Category:	
Board Certification			Certific	ed Init	tial Cert.	Last Cert.	Expires
AMERICAN BOARD OF FAMILY MEDIC	INE (FAM	ILY MEDICIN	E) PENDI	NG			
Specialty 1: FAMILY	MEDICINE		Specialty 2	2:			
Professional Liability			From	То	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM SELF I Limits: \$500,000-\$1,500,000   Term			07/01/2020	08/31/2020	)		
Medical/Professional Educ	cation		From	To	Verified	Method	Negative
UNIVERSITY OF WISCONSIN Subject: DOCTOR OF MED	, MADISON PICINE	I, WI	08/01/2013	06/30/2017	,		<u> </u>
Training			From	То	Verified	Method	Negative
Residency North Colorado Family Med Subject: FAMILY MEDICIN		ram, Greeley	06/01/2017		06/30/2020	Memo to File	N
Employment			From	То	Verified	Method	Negative
COMMUNITY MEDICINE ASSOCIATES			07/01/2020		06/04/2020	Email	N
Hospital Affiliations			From	То	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM	, SAN ANT	ONIO, TX		Present	06/02/2020	Print	N

NEUHOFF, BARBARA K., MD

Personal Information					
Languages:					
Practice Information					
CREDENTIALING CONTACT RACHEL MEDINA 7703 FLOYD CURL DR MC 7836 SAN ANTONIO, TX 78229 Telephone: (210) 567-4960 NPI:	Fax N Medic	lumber: (210) :are:	) 567-3406	Medicaid:	
Tax ID:					
SECONDARY OFFICE ADDRESS MARC					
8300 FLOYD CURL DR 5TH FLOOR SAN ANTONIO, TX 78229 Telephone: (210) 450-9500 NPI: Tax ID:		Fax Number: (210) 450-6027 Medicare:		Medicaid:	
JH MAILING ADDRESS UT HEALTH SAN ANTONIO 7703 FLOYD CURL DR MC 7836 SAN ANTONIO, TX 78229 Telephone: NPI:	Fax N Medic	lumber: are:		Medicaid:	
Tax ID:					
UH PRIMARY OFFICE ADDRESS UHS ROBERT B GREEN SURGICAL CENTER 903 W MARTIN SAN ANTONIO, TX 78207 Telephone: (210) 358-3582 NPI: Tax ID:		lumber: (210) are:	) 358-3252	Medicald:	
Licensure	Number	State	Expires	Comments/Schedule	
STATE LICENSE	Mullipel	TX	Expires	Comments/ Schedule	
Appointment					
BEXAR COUNTY HOSPITAL DISTRICT Initial Appointment:		Dep	partment:	DEPARTMENT OF	ID: 42679
				OBSTETRICS/GYNECOL OGY	

Division:

Section:

kdvancement:

Last Reappointment:

Data Bank: 05/20/2020 Query Results: PDS Status Report

NEUHOFF, BARBARA K., MD

**Next Appointment** 

Status:

Category:

<b>Board Certification</b>	Certifi	ed Initi	al Cert.	Last Cert.	Expires
AMERICAN BOARD OF OBSTETRICS & GYNECOLOGY (OB GYNECOLOGY)	TETRICS & Eligib	ole			
Specialty 1: OBSTETRICS & GYNECOLOGY Specialty 3:	Specialty Specialty				
Professional Liability	From	То	Verified	Method	Negative
The University of Texas System Certificate of Professional Medi- Liability Benefit Plan blanket	al 07/01/2020	08/31/2020			
Limits: \$500,000.00/\$1,500,000.00   Terms:  Undergraduate Education	From	To	Verified	Method	Negative
	****		3	\$4 - \$5J	
Medical/Professional Education UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER , MEMPHIS, TN Subject: DOCTOR OF MEDICINE	<b>From</b> 08/01/2012	<b>To</b> 05/30/2016	Verified	Method	Negative
Training	From	То	Verified	Method	Negative
Residency LOUISIANA STATE UNIVERSITY HEALTH - NEW ORLE , NEW ORLEANS, LA Subject: OB/GYN	NNS 07/01/2016	06/30/2020	05/19/2020	Print	N
Employment	From	To	Verified	Method	Negative
UT HEALTH SCIENCE CENTER AT SAN ANTONIO , San Antonio, TX	07/01/2020		05/13/2020	Print	N
Hospital Affiliations	From	To	Verified	Method	Negative
UHS SURGERY CENTER - RBG CAMPUS , SAN ANTO Subject: PENDING , SAN ANTO	NIO, TX	Present	05/13/2020	Print	N
UNIVERSITY HEALTH SYSTEM , SAN ANTONIC Subject:	TX 07/01/2020	Present	05/13/2020	Print	N
UHS SURGERY CENTER - MEDICAL CENTER , SAN AN	ONIO,	Present	05/13/2020	Print	N
TX Subject: PENDING					
Peer References	From	То	Verified	Method	Negative
Ann Chau, MD Anna Kuan-Celarier, MD			05/13/2020 05/20/2020	Eval Eval	N N
Asha Heard, MD			,,		
			05/22/2020	Eval	N

06/01/2016

06/30/2016

05/13/2020

GAP

Print

N

# **Provider Profile**NEUHOFF, BARBARA K., MD

Subject: WAITING TO START RESIDENCY

Teaching	From	To	Verified	Method	Negative
Associates					

Palacios III, Tomas M., PA-C

Persor	nal	Infor	mation
--------	-----	-------	--------

Languages: ENGLISH

#### **Practice Information**

CREDENTIALING CONTACT DEPARTMENT OF EMERGENCY MEDICINE GAIL SOUTHARD 7703 FLOYD CURL DR, MC 7736

SAN ANTONIO, TX 78229 Telephone: (210) 567-5176

NPI: Tax ID: Fax Number: (210) 567-4793

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

**Emergency Medicine** DEPARTMENT OF EMERGENCY MEDICINE 7703 FLOYD CURL DRIVE, MC 7736 SAN ANTONIO, TX 78229 Telephone: (210) 567-4292 NPI:

Tax ID:

Fax Number: (210) 567-0757

Medicare:

Medicaid:

Licensure

Number

State

**Expires** 

Comments/Schedule

STATE LICENSE

ΤX

### **Appointment**

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment:

Next Appointment

Department:

Division: Section:

Status:

DEPARTMENT OF **EMERGENCY MEDICINE** 

**EMERGENCY MEDICINE** 

ID: 43031

Data Bank: 06/12/2020 Query Results: PDS **Enrollment Complete** 

Category:

Dues

Facility

**Due Date** 

**Payment Date** 

**Amount Due** 

**Payment Method** 

**Board Certification** 

Certified

**Initial Cert.** 

Last Cert.

Expires

NATIONAL COMMISSION ON CERTIFICATION OF PHYSICIAN ASSISTANTS (NCCPA) (PHYSICIAN ASSISTANT)

CURRENT

09/09/2011

12/31/2021

Palacios III, Tomas M., PA-C

Specialty 1: PHYSICIAN ASSISTANT Specialty 3:

Specialty 2: Specialty 4:

Professional Liability	From	To	Verified	Method	Negative
FEDERAL TORT CLAIMS FEDERAL TORT Limits:   Terms:	09/01/2018	12/31/2030			
Undergraduate Education	From	То	Verified	Method	Negative
Medical/Professional Education	From	To	Verified	Method	Negative
NORTHEASTERN UNIVERSITY BOSTON, MA Subject: MASTER OF SCIENCE - PHYSICIANS ASSISTANT	08/01/2009	08/31/2011	05/08/2020	National Student Clearing House	N
Training	From	То	Verified	Method	Negative
Residency UMASS MEDICAL CENTER, WORCESTER, MA Subject: PHYSICIAN ASSISTANT IN CRITICAL CARE	10/01/2011	10/31/2012	06/04/2020	Print	N
Employment	From	То	Verified	Method	Negative
UT HEALTH SAN ANTONIO, SAN ANTONIO, TX	08/01/2020		05/19/2020	Email	N
SAN ANTONIO MILITARY MEDICAL CENTER, SAN ANTONIO, TX	09/24/2018		05/27/2020	Print	N
EAST BOSTON NEIGHBORHOOD ED, EAST BOSTON, MA	08/01/2005	04/30/2010			
MELROSE WAKEFIELD HC (FORMALLY HALLMARK HEALTH), MEDFORD, MA	11/19/2012	05/12/2016	05/12/2020	Internet	N
UMASS MEMORIAL MEDICAL CENTER, WORCESTER, MA	10/24/2011	02/17/2017	05/19/2020	Internet	N
PULSE PAY GROUP, READING, MA	10/01/2014	08/31/2017			
CURAHEALTH HOSPITAL, PEABODY, MA	10/01/2014	08/31/2017	06/12/2020	Print	N
LAHEY HOSPITAL MEDICAL CENTER, BURLINGTON, MA	06/06/2017	07/19/2018	05/12/2020	Internet	N
Hospital Affiliations	From	То	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX  Subject:		Present	05/11/2020	Print	N
SAN ANTONIO MILITARY MEDICAL CENTER, FT. SAM HOUSTON, TX  Subject:	06/07/2017	Present	06/12/2020	Print	N
SAINT LUKES CUSHING HOSPITAL (FORMALLY CUSHING MEMORIAL HOSPITAL), LEAVENWORTH, KS  Subject:	02/01/2002	08/31/2005			
MELROSE WAKEFIELD HOSPITAL, MELROSE, MA Subject:	06/28/2012	05/31/2016	05/19/2020	Print	N
UMASS MEMORIAL MEDICAL CENTER, WORCESTER, MA Subject:	10/28/2011	02/17/2017	05/22/2020	Fax	N
CURAHEALTH BOSTON NORTH SHORE HOSPITAL, PEABODY, MA Subject:	10/01/2014	08/31/2017	06/12/2020	Print	N
ahey Hospital and Medical Center, Burlington, MA  Subject:	06/05/2017	07/20/2018	06/03/2020	Print	N

Palacios III, Tomas M., PA-C

Peer References	From	To	Verified	Method	Negative
LAUREN TORBETT, PA-C			05/19/2020	Eval	N
LORA STUDLEY, PA-C			05/16/2020	Eval	N
SAM WILLIAMS, PA-C					
WYLAN PETERSON, MD					

Other	From	To	Verified	Method	Negative
GAP	07/31/2018	08/31/2018	06/12/2020	Print	N

Subject: RELOCATED FROM MA TO TX

Teaching	From	To	Verified	Method	Negative
Associates					

Patton, Cody D., DO

#### Personal Information

Languages:

**Practice Information** 

**UH MAILING ADDRESS** 8300 FLOYD CURL DR

SAN ANTONIO, TX 78229 Telephone: (210) 450-9100

Fax Number: (210) 450-6009

**UH PRIMARY OFFICE ADDRESS** MARC 8300 FLOYD CURL DRIVE, 1ST FLOOR SAN ANTONIO, TX 78229 Telephone: (210) 450-9100 Fax Number: (210) 450-6009 **Expires** Comments/Schedule Licensure Number State STATE LICENSE TX **Appointment BEXAR COUNTY HOSPITAL DISTRICT** Initial Appointment: Department: **FAMILY & COMMUNITY** ID: 43039 MEDICINE Data Bank: 05/12/2020 FAMILY MEDICINE Division: Advancement: Query Results: PDS Last Reappointment: Section: Enrollment Complete PENDING Next Appointment Status: Category: **Board Certification** Certified **Initial Cert.** Last Cert. **Expires** (FAMILY MEDICINE) CURRENT 07/01/2019 02/15/2021 AMERICAN BOARD OF FAMILY MEDICINE Specialty 1: FAMILY MEDICINE Specialty 2: **Professional Liability** Verified Method Negative From To UTHSCSA MALPRACTICE 07/06/2020 08/31/2020 Limits: \$500,000-\$1,500,000 | Terms: UPON TERMINATION Verified Method Negative **Undergraduate Education** From To Thomas Edison State College, 07/01/2006 07/01/2007 Subject: Bachelor of Science UNIVERSITY OF WASHINGTON, SEATTLE, WA 08/01/2010 12/30/2011 Subject: Biochemistry Medical/Professional Education From To Verified Method Negative

MIDWESTERN UNIVERSITY 07/01/2012 06/01/2016

Subject: DOCTOR OF OSTEOPATHIC MEDICINE

**Training** From To Verified Method Negative Residency Honorhealth Scottsdale, SCOTTSDALE, AZ 05/06/2020 07/01/2016 06/30/2019 Print N Subject: FAMILY MEDICINE

**Employment** From To Verified Method Negative UT HEALTH SAN ANTONIO 07/06/2020 PRESENT 04/30/2020 Email N El Rio Health, TUCSON, AZ 07/22/2019 PRESENT 04/30/2020 Print

**Hospital Affiliations** Verified From To Method Negative UNIVERSITY HEALTH SYSTEM PENDING 04/29/2020 Print Ν

**Other** From To Verified Method **Negative** GAP Subject: RELOCATING TO SAN ANTONIO TO START A NEW 06/01/2020 07/05/2020 05/14/2020 Print Ν

Reddy, Gireesh, DPM

#### **Personal Information**

Languages:

#### **Practice Information**

SECONDARY OFFICE ADDRESS MARC - Orthopaedics & Podiatry

8300 Floyd Curl Drive, 3rd Floor (3C)

San Antonio, TX 78229

Telephone: (210) 450-9300

**UH MAILING ADDRESS** 

UT Health San Antonio - Dept. of Orthopaedics/Podiatry Division 7703 Floyd Curl Drive, MSC-7776

San Antonio, TX 78229 Telephone: (210) 567-5130

Fax Number: (210) 567-4916

Fax Number: (210) 450-6023

Comments/Schedule Number State **Expires** Licensure STATE LICENSE TX

**Appointment** 

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment:

Advancement:

Last Reappointment:

Next Appointment

Department:

Division:

Section: Status:

DEPARTMENT OF ORTHOPAFDICS

**PODIATRY** 

**PODIATRY** PENDING

08/31/2020

Data Bank: 06/15/2020 Query Results: PDS

ID: 43048

Last Cert.

**Enrollment Complete** Category:

**Expires** 

n/a

(RECONSTRUCTIVE

**Board Certification** American Board of Foot and Ankle Surgery (FOOT SURGERY)

American Board of Foot and Ankle Surgery

REARFOOT AND ANKLE SURGERY)

Specialty 1: FOOT SURGERY

Specialty 3:

**Initial Cert.** 

Specialty 2: RECONSTRUCTIVE REARFOOT AND ANKLE SURGERY Specialty 4:

07/01/2020

Certified

Eligible

Eligible

**Professional Liability** From To Verified Method Negative

The University of Texas System Professional Medical Liability Benefit

Limits: \$500,000 / \$1,500,000 | Terms: UPON TERMINATION

Medical/Professional Education From To Verified Method Negative New York College of Podiatric Medicine, New York, NY 01/03/2013 05/25/2017 06/12/2020 Ν Print

Subject: DOCTOR OF PODIATRIC MEDICINE

Verified Method Training From To Negative Residency DETROIT MEDICAL CENTER , DETROIT, MI 07/01/2017 06/30/2020 06/19/2020 Print

Subject: PODIATRIC MEDICINE SURGERY

**Employment** From To Verified Method Negative UT Health San Antonio - Dept. of Orthopaedics/Podiatry Division, San 07/01/2020 PRESENT 06/15/2020 Print Ν Antonio, TX

**Hospital Affiliations** From To Verified Method Negative University Health System-Surgery Center - Medical Center, Present 06/12/2020 Print Ν University Health System-Surgery Center - RBG Campus, Present 06/12/2020 Print Ν University Health System, Present 06/12/2020 Print Other From Verified To Method Negative

Moved to Michigan; waiting for residency to begin. 05/26/2017 06/30/2017 06/12/2020 Print N

### Provider Profile SATSANGI, NANCY, MD

Personal	Inform	ation
----------	--------	-------

Languages: ENGLISH

**Practice Information** 

**CREDENTIALING CONTACT** 

KRISTI MCBREARTY 7703 FLOYD CURL DR SAN ANTONIO, TX 78229 Telephone: (210) 567-6133

NPI: Tax ID: Fax Number: (210) 567-0083

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

UT HEALTH SAN ANTONIO 7703 FLOYD CURL DR SAN ANTONIO, TX 78229 Telephone: (210) 567-4500

NPI: Tax ID: Fax Number: (210) 567-0083

Medicare:

Medicaid:

JH PRIMARY OFFICE ADDRESS

UHS
UNIVERSITY HEALTH SYSTEM
4502 MEDICAL DRIVE
SAN ANTONIO, TX 78229
Telephone: (210) 358-4000

NPI: Tax ID: Fax Number: (210) 358-4742

Medicare:

Medicaid:

Licensure Number State Expires Comments/Schedule

STATE LICENSE

ΤX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Advancement: Last Reappointment:

Next Appointment

Department:

Division: Section:

Status:

DEPARTMENT OF ANESTHESIOLOGY

ANESTHESIOLOGY ANESTHESIOLOGY ID: 42077

Data Bank: 05/14/2020 Query Results: PDS Status

Report Category:

Dues Facility Due Date Payment Date Amount Due Payment Method

Board Certification Certified Initial Cert. Last Cert. Expires

American Board of Anesthesiology

(ANESTHESIOLOGY)

SATSANGI, NANCY, MD

AMERICAN BOARD OF ANESTHESIOLOGY/CRITICAL CARE (CRITICAL CARE MEDICINE)

Specialty 1: ANESTHESIOLOGY Specialty 3:

Specialty 2: CRITICAL CARE MEDICINE Specialty 4:

Professional Liability	From	То	Verified	Method	Negative
UTHSCSA MALPRACTICE N/A	07/15/2019	08/31/2020			
Limits: 500,000 TO 1,500.000   Terms:					
Undergraduate Education	From	То	Verified	Method	Negative
Medical/Professional Education	From	To	Verified	Method	Negative
UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: DOCTOR OF MEDICINE	07/01/2011	05/30/2015			
Training	From	То	Verified	Method	Negative
Fellowship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX Subject: ANESTHESIOLOGY CRITICAL CARE MEDICINE	09/02/2019		05/11/2020	VLETE	N
Residency Baylor College of Medicine, Department of Anesthesiology, Houston, TX	07/01/2015	06/30/2019			
Subject: Anesthesiology					
Employment	From	To	Verified	Method	Negative
UT HEALTH SAN ANTONIO , San Antonio, TX	07/01/2020		05/08/2020	Print	N
Hospital Affiliations	From	То	Verified	Method	Negative
UNIVERSITY HOSPITAL, San Antonio, TX Subject:		Present	05/07/2020	Print	N
Peer References	From	To	Verified	Method	Negative
Caitlin Sutton, MD Mark Harbott, MD			05/13/2020 05/10/2020	Eval Eval	N N
Thomas Shaw, MD			05/15/2020	Eval	N
Other	From	То	Verified	Method	Negative
Teaching	From	То	Verified	Method	Negative
Associates					

# **Provider Profile**

Smith, Natalie D., RA

### **Personal Information**

Languages:

### **Practice Information**

**UH MAILING ADDRESS** UT HEALTH SAN ANTONIO 7703 FLOYD CURL DR MC 7885 SAN ANTONIO, TX 78229

Telephone: (210) 567-5792

Fax Number: (210) 949-3006

### **UH PRIMARY OFFICE ADDRESS**

UHS MARC 8300 FLOYD CURL DR SAN ANTONIO, TX 78229 Telephone: (210) 450-9800

Fax Number: (210) 450-6083

Licensure

Number

**Expires** 

Comments/Schedule

STATE LICENSE

State ΤX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Department:

MEDICINE

ID: 43061

Advancement: Last Reappointment: Division: Section:

PULMONARY DISEASES PULMONARY DISEASES

Data Bank: 05/19/2020 Query Results: PDS **Enrollment Complete** 

Category:

Next Appointment

07/28/2020

Status:

Certified **Initial Cert.**  Last Cert. **Expires** 

**Board Certification** NOT BOARD CERTIFIED

(NOT BOARD CERTIFIED)

Specialty 1: RESEARCH ASSOCIATE

Specialty 2:

Professional Liability	From	То	Verified	Method	Negative
Chapter 104 of Texas Civil Practice and Remedies Code Limits: \$100,000.00-\$300,000.00   Terms:	05/18/2020	08/31/2050			
Undergraduate Education	From	То	Verified	Method	Negative
UNIVERSITY OF TEXAS AT AUSTIN Subject: CERTIFICATE BUSINESS FOUNDATIONS ,	08/24/2011	05/21/2016	06/12/2020	National Student Clearing House	N
Medical/Professional Education	From	To	Verified	Method	Negative
THE UNIVERSITY OF TEXAS AT AUSTIN Subject: Chemistry	08/15/2011	12/19/2015	06/12/2020	National Student Clearing House	N
Employment	From	То	Verified	Method	Negative
UT Health San Antonio, San Antonio,, TX Austin Laser Dentist, Austin, TX Premier Dental Boerne, Boerne, TX	05/18/2020 04/01/2016 11/11/2019	09/01/2019 04/28/2020	05/19/2020 05/18/2020 05/18/2020	VLETE Print Print	N N N
Hospital Affiliations	From	То	Verified	Method	Negative
UHS SURGERY CENTER - RBG CAMPUS , SAN ANTONIO, TX Subject: PENDING		Present	05/18/2020	Print	N
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject: PENDING		Present	05/18/2020	Print	N
Other	From	To	Verified	Method	Negative
GAP Subject: VOLUNTEERING AT SACRED HEART COMMUNITY CLINICL MONTHLY	11/01/2018	08/31/2019	05/18/2020	Print	N
JAP Subject: RELOCATING OUT OF AUSTIN TO SAN ANTONIO EXAS AND SEEKING RESIDENCE	09/01/2019	10/31/2019	05/18/2020	Print	N
GAP Subject: Applying to UT Health and pending credentialing	04/01/2020	05/17/2020	05/18/2020	Print	N

Soekamto, Christa D., MD

**Personal Information** 

Languages:

**Practice Information** 

**UH MAILING ADDRESS** 

LIT HEALTH SAN ANTONIO 7703 FLOYD CURL DR MC 6230 SAN ANTONIO, TX 78229

Telephone: (210) 567-8403

Fax Number: (210) 567-8413

**UH PRIMARY OFFICE ADDRESS** 

MARC OPHTHALMOLOGY 8300 FLOYD CURL DRIVE 6TH FLOOR 6A SAN ANTONIO, TX 78229

Telephone: (210) 450-9400

Fax Number: (210) 450-6024

**UH SECONDARY ADDRESS** 

**UHS-Ophthalmology** 4502 Medical Dr, 2nd Floor San Antonio, TX 78229 Telephone: (210) 567-0407

Fax Number: (210) 567-6584

**UH SECONDARY ADDRESS** 

TDI-Ophthaimology 701 S Zarzamora San Antonio, TX 78207 Telephone: (210) 358-7600

Fax Number: (210) 358-7623

State

Licensure

Number

Expires

Comments/Schedule

Appointment

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment: Advancement: Last Reappointment: Department: Division: Section:

ΤX

**OPHTHALMOLOGY** 

ID: 42648

Data Bank: 05/07/2020 Query Results: PDS Status

Report

Next Appointment

Status:

PENDING

Category:

**Board Certification** 

(OPHTHALMOLOGY)

Initial Cert.

Last Cert. **Expires** 

AMERICAN BOARD OF OPHTHALMOLOGY

Eligible/Intending to sit for the boards

Certified

09/2020

Specialty 1: OPHTHALMOLOGY

Specialty 2:

Professional Liability

Verified Method Negative

UTHSCSA MALPRACTICE

Limits: 500,000.00 / 1,500,000.00 | Terms: UPON TERMINATION

07/01/2020 08/31/2020

Τo

To

To

To

Present

**Medical/Professional Education** 

From

From

Verified

Method

Negative

Texas Tech University Health Sciences Center, EL PASO, TX

Subject: DOCTOR OF MEDICINE

07/01/2012

05/21/2016

**Training** Residency University of Missouri - Kansas City SOM, KANSAS CITY, MO

07/01/2017

Verified 06/30/2020 04/30/2020

Method Print

Negative

Negative

Subject: Ophthalmology Internship UNIVERSITY OF MISSOURI-KANSAS CITY SCHOOL OF

07/01/2016

06/30/2017

N

Subject: Internal Medicine

UT Health San Antonio SOM, SAN ANTONIO, TX

07/01/2020

04/30/2020

Method

Print

**Employment** 

From

From

Verified

Ν

# **Provider Profile**

Soekamto, Christa D., MD

Hospital Affiliations	From	То	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM UHS SURGERY CENTER - MEDICAL CENTER	07/01/2020 07/01/2020	Present Present	04/30/2020 04/30/2020	Print Print	N N
Other	From	То	Verified	Method	Negative
Gap	05/22/2016	06/30/201	16		

Subject: Waiting to Start Internship

# **Provider Profile** SVEC, JEFF H., MD

Personal Information					
Languages:					
Practice Information					
CREDENTIALING CONTACT SOFIA REYNA 8431 FREDERICKSBURG ROAD SAN ANTONIO, TX 78229 Telephone: (210) 450-0890 NPI: Tax ID:	Fax No Medica	umber: (210) are:	450-0571	Medicald:	
UH MAILING ADDRESS UT HEALTH SAN ANTONIO 25723 OLD FREDERICKSBURG ROAD BOERNE, TX 78015 Telephone: (210) 450-6800 NPI: Tax ID:	Fax No Medica	umber: (210) are:	450-6894	Medicald:	
UH PRIMARY OFFICE ADDRESS UT HEALTH SAN ANTONIO 25723 OLD FREDERICKSBURG ROAD BOERNE, TX 78015 Telephone: (210) 450-6800 NPI: Tax ID:	Fax Nu Medica	umber: (210) are:	450-6894	Medicaid:	
Licensure	Number	State	Expires	Comments/Schedule	
STATE LICENSE		TX			
Appointment					
BEXAR COUNTY HOSPITAL DISTRICT Initial Appointment:		Dep	artment:	DEPARTMENT OF FAMILY & COMMUNITY MEDICINE	ID: 34691
Advancement: Last Reappointment: Next Appointment		Divis Sect Stat		PIEDICINE	Data Bank: 05/29/2020 Query Results: Category: PCP

SVEC, JEFF H., MD

<b>Board Certification</b>	Certific	ed Init	tial Cert.	Last Cert.	Expires	
AMERICAN BOARD OF FAMILY MEDICINE (FAMILY MEDICINE)  AMERICAN BOARD OF FAMILY MEDICINE/SPORTS MEDICINE (SPORTS MEDICINE)	CURRENT 02/20/2020 Eligible		0/2020		02/15/2021	
Specialty 1: FAMILY MEDICINE Specialty 3:	Specialty 2: SPORTS MEDICINE Specialty 4:					
Dysfessional Linkility	From	To	Verified	Method	Negative	
Professional Liability UTHSCSA MALPRACTICE	08/24/2020	08/31/2020		Method	Negative	
n/a Limits: 500,000/1,500,000   Terms:	00, 2 1, 2020	10,11,111				
Undergraduate Education	From	То	Verified	Method	Negative	
ST. EDWARDS UNIVERSITY , AUSTIN, TX Subject: Biology	08/28/2006	05/08/2010	)			
Medical/Professional Education	From	To	Verified	Method	Negative	
UNT HEALTH SCIENCE CENTER AT FORT WORTH, FT. WORTH, TX	05/25/2010	05/14/201	<u> </u>			
Subject: Medical Sciences ST. GEORGE'S UNIVERSITY SCHOOL OF MEDICINE	08/20/2012	05/13/2016	5			
Subject: DOCTOR OF MEDICINE						
Training	From	То	Verified	Method	Negative	
Residency UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER , SAN ANTONIO, TX Subject: Family and Community Medicine Fellowship Christus Santa Rosa Primary Care Sports Medicine, SAN ANTONIO, TX Subject: Primary Care Sports Medicine	07/01/2016 07/01/2019	06/30/2019 06/30/2020		Fax	N	
Employment	From	To	Verified	Method	Negative	
UNIVERSITY OF TEXAS HEALTH SIENCE CENTER - SA , SAN ANTONIO, TX	08/24/2020		05/29/2020	Email	N	
Hospital Affiliations	From	To	Verified	Method	Negative	
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject:	A A A A A A A A A A A A A A A A A A A	Present	05/29/2020	Memo to File	N	
Peer References	From	То	Verified	Method	Negative	
Marcy Wiemers, MD MARK NADEAU, MD Rodolfo Navarro, MD			05/29/2020 06/08/2020 06/03/2020	Eval Eval Eval	N N N	
Other	From	То	Verified	Method	Negative	
Teaching	From	To	Verified	Method	Negative	
<b>\ssociates</b>						

**Provider Profile** SVEC, JEFF H., MD

Tiwari, Ruchi, MD

Personal Information					
Languages:					
Practice Information					
CREDENTIALING CONTACT CHRISTINE REED 7703 FLOYD CURL DRIVE DEPT OF RADIOLOGY MC 7800 SAN ANTONIO, TX 78229 Telephone: (210) 567-0512 NPI: Tax ID:	Fax N Medic	lumber: (210) are:	) 567-6469	Medicaid:	
UH MAILING ADDRESS Radiology DEPARTMENT OF RADIOLOGY 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 567-0512 NPI: Tax ID:	Fax N Medic	lumber: are:		Medicald:	
UH PRIMARY OFFICE ADDRESS DEPARTMENT OF RADIOLOGY 7703 FLOYD CURL DRIVE MC 7800 SAN ANTONIO, TX 78229 Telephone: (210) 567-6482 NPI: Tax ID:	Fax N Medic	lumber: are:		Medicaid:	
UT PRIMARY OFFICE ADDRESS DEPARTMENT OF RADIOLOGY UHS - RADIOLOGY 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 358-4000 NPI: Tax ID:		Fax Number: (210) 358-4740 Medicare:		Medicald:	
Licensure	Number	State	Expires	Comments/Schedule	
STATE LICENSE	R4787	тх	11/30/2021		

## Appointment

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment:

Department:

DEPARTMENT OF

ID: 32665

Tiwari, Ruchi, MD

**RADIOLOGY** 

Advancement: Last Reappointment: Division: Section: Data Bank: 05/12/2020 Query Results: PDS Status

Next Appointment

Status:

Report Category:

Dues	Facility	Due Date	Payment Da	te Amou	nt Due	Payment I	Method
Board Cer	tification		Certific	ed Initia	al Cert.	Last Cert.	Expires
American Boa	rd of Radiology	(RADIOLOGY)	Eligib	le			
	Specialty 1: RADIOLOGY Specialty 3:		Specialty 2 Specialty 4				
Professio	nal Liability		From	То	Verified	Method	Negative
	OF TEXAS SYSTEM		07/01/2020	08/31/2020			
N/A Limits: \$500,0	000/ \$1,500,000   Terms:						
Undergra	duate Education		From	То	Verified	Method	Negative
Medical/F	Professional Education		From	То	Verified	Method	Negative
BANGALORE	A INSTITUTE OF MEDICAL SCIE bject: DOCTOR OF MEDICINE	NCES	09/23/2001	03/29/2008			
Training			From	То	Verified	Method	Negative
	Health San Antonio, San Anton piect: BODY IMAGING INTERVE		07/01/2019		05/04/2020	VLETE	N
Internship UT	HEALTH SAN ANTONIO, SAN A		07/01/2014	06/30/2015			
Residency UT	oject: Internal Medicine HEALTH SAN ANTONIO, SAN AN Oject: Diagnostic Radiology	ITONIO, TX	07/01/2015	06/30/2019			
Employme	ent		From	То	Verified	Method	Negative
UT HEALTH SA , San Antonio,			07/01/2020		05/04/2020	Print	N
Hospital A	Affiliations		From	То	Verified	Method	Negative
	Y CENTER - RBG CAMPUS Dject: PENDING	, SAN ANTONIO, T		Present	05/04/2020	Print	N
	HEALTH SYSTEM Dject: PENDING	, SAN ANTONIO, TX		Present	05/04/2020	Print	N
ΓX	Y CENTER - MEDICAL CENTER Dject: PENDING	, SAN ANTONIO,		Present	05/04/2020	Print	N
Peer Refe			From	То	Verified	Method	Negative
Angel Gomez- 3UNDHIT TAN ijayanadh Oj	TIWONGKOSI, MD				05/11/2020 05/04/2020 05/11/2020	Eval Eval Eval	N N N

## BEXAR COUNTY HOSPITAL DISTRICT

# **Provider Profile** Tiwari, Ruchi, MD

Other	From	То	Verified	Method	Negative
Teaching	From	То	Verified	Method	Negative
Associates					

#### BEXAR COUNTY HOSPITAL DISTRICT

# **Provider Profile**

TLASECA, KENNEDY M., MD

Persona	1 1	Info	rma	tion
---------	-----	------	-----	------

Languages:

#### **Practice Information**

CREDENTIALING CONTACT

SYLVIA VILLARREAL 903 W. MARTIN SAN ANTONIO, TX 78207 Telephone: (210) 358-3324

NPI: Tax ID: Fax Number: (210) 358-5940

Medicare:

Medicaid:

**MAILING ADDRESS** 

903 W. MARTIN, MS 27-2 SAN ANTONIO, TX 78207 Telephone: (210) 358-3427

NPI: Tax ID: Fax Number: (210) 358-5940

Medicare:

Medicaid:

**UH PRIMARY OFFICE ADDRESS** 

INIVERSITY MEDICINE ASSOCIATES 1055 ADA UNIVERSITY FAMILY HEALTH CENTER SOUTHEAST

SAN ANTONIO, TX 78223 Telephone: (210) 358-5515

NPI: Tax ID: Fax Number: (210) 358-5530

Medicare:

Medicaid:

Licensure

Number

State

Comments/Schedule

STATE LICENSE

ΤX

#### **Appointment**

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Department:

**Expires** 

FAMILY & COMMUNITY MEDICINE

ID: 40199

Advancement:

Division:

UNIVERSITY MEDICAL ASSOCIATES

Data Bank: 06/05/2020

Last Reappointment: Next Appointment Section:

Status:

Category:

Query Results:

TLASECA, KENNEDY M., MD

			Last Cert.	Expires
From	To	Verified	Method	Negative
08/01/2020	08/31/2020			
From	То	Verified	Method	Negative
From	То	Verified	Method	Negative
07/01/2013	05/15/2017			
From	To	Verified	Method	Negative
07/01/2017	06/30/2020	05/26/2020	Memo to File	N
From	То	Verified	Method	Negative
08/01/2020		05/26/2020	Memo to File	N
From	То	Verified	Method	Negative
	Present	05/26/2020	Memo to File	N
From	То	Verified	Method	Negative
		05/26/2020 05/26/2020 05/27/2020	Eval Eval Eval	N N N
From	To	Verified	Method	Negative
06/01/2017	06/30/2017	05/26/2020	Memo to File	N
From	То	Verified	Method	Negative
			<u> </u>	
	From 08/01/2017  From 07/01/2013  From 07/01/2017  From 08/01/2020  From From 08/01/2020	From   To   From   To     From   To	From   To   Verified	From   To   Verified   Method

TSAU, JOSHUA G., MD

Personal Information	Persor	ıal '	Info	rma	tion
----------------------	--------	-------	------	-----	------

Languages: MANDARIN

#### **Practice Information**

CREDENTIALING CONTACT

GAIL SOUTHARD 7703 FLOYD CURL DRIVE, MC 7736 SAN ANTONIO, TX 78229 Telephone: (210) 567-5176

NPI: Tax ID: Fax Number: (210) 567-4793

Medicare:

Medicaid:

**GME PRIMARY OFFICE ADDRESS** 

Emergency Medicine
DEPARTMENT OF EMERGENCY MEDICINE
7703 FLOYD CURL DRIVE
SAN ANTONIO, TX 78229
Telephone: (210) 450-5378
NPI:

Tax ID:

Fax Number: Medicare:

Medicaid:

GME PRIMARY OFFICE ADDRESS

Emergency Medicine
DEPARTMENT OF EMERGENCY MEDICINE
7703 FLOYD CURL DRIVE
SAN ANTONIO, TX 78229
Telephone: (210) 450-5378
NPI:

NPI: Tax ID: Fax Number:

Medicare:

Medicaid:

**GME PRIMARY OFFICE ADDRESS** 

Emergency Medicine
DEPARTMENT OF EMERGENCY MEDICINE
7703 FLOYD CURL DRIVE
SAN ANTONIO, TX 78229
Telephone: (210) 450-5378

NPI: Tax ID: Fax Number: Medicare:

Medicaid:

**GME PRIMARY OFFICE ADDRESS** 

Emergency Medicine
DEPARTMENT OF EMERGENCY MEDICINE
7703 FLOYD CURL DRIVE, MC 7736
SAN ANTONIO, TX 78229
Telephone: (210) 567-4292
NDT.

NPI: Tax ID: Fax Number: (210) 567-0757

Medicare:

Medicaid:

**UH MAILING ADDRESS** 

DEPT OF EMERGENCY MEDICINE 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229 jelephone: (210) 567-4292

IPI: Tax ID: Fax Number: (210) 567-0757

Medicare:

Medicaid:

TSAU, JOSHUA G., MD

**UH PRIMARY OFFICE ADDRESS** 

**UHS - EMERGENCY CENTER** 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 743-0024

Tax ID:

Fax Number: Medicare:

Medicaid:

Licensure Number State **Expires** Comments/Schedule STATE LICENSE TX

Appointment

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment:

Advancement: ast Reappointment: Next Appointment

Department:

Division: Section: Status:

DEPARTMENT OF

**EMERGENCY MEDICINE EMERGENCY MEDICINE** 

ID: 42759

Data Bank: 05/26/2020 Query Results: Category:

**Payment Method Facility Due Date Payment Date Amount Due** Dues **Initial Cert.** Certified Last Cert. Expires **Board Certification** AMERICAN BOARD OF EMERGENCY MEDICINE (EMERGENCY MEDICINE) AMERICAN BOARD OF EMERGENCY MEDICINE (EMERGENCY Eligible

MEDICINE)

Specialty 1: EMERGENCY MEDICINE

Specialty 3:

Specialty 2: Specialty 4:

Verified Method **Professional Liability** From To Negative **UNIVERSITY OF TEXAS SYSTEM** 

**BLANKET** 

Limits: \$500,000.00 1,500,000.00 | Terms:

07/01/2020 08/31/2020

**Undergraduate Education** To Verified From Method Negative Medical/Professional Education Verified Method From Negative

McGovern Medical School-Univ of TX Health Science Center - Houston, 08/01/2013 05/18/2017 Houston, TX

Subject: DOCTOR OF MEDICINE
McGovern Medical School at the University of Texas Health Science

08/01/2013 05/30/2017

Center Houston, Houston, TX

Subject:

To Verified Method Negative From Residency UCF College of Medicine Emergency Medicine, Kissimmee, FL

07/01/2017 06/30/2020

#### BEXAR COUNTY HOSPITAL DISTRICT

## **Provider Profile**

TSAU, JOSHUA G., MD

Subject: Emergency Medicine
Residency UNIVERSITY OF CENTRAL FLORIDA COLLEGE OF MEDICINE,

ORLANDO, FL

Subject: EMERGENCY MEDICINE
Fellowship UT HEALTH SAN ANTONIO, SAN ANTONIO, TX

Subject: Emergency Medical Services

07/01/2017

06/30/2020

04/24/2020

Print

N

07/01/2020 06/30/2021

Employment	From To	Verified	Method	Negative
UT HEALTH SAN ANTONIO	07/01/2020	04/21/2020	Memo to	N
, SAN ANTONIO, TX			File	

Hospital Affiliations		From	To	Verified	Method	Negative
UNIVERSITY HEALTH SYSTEM	, SAN ANTONIO, TX		Present	04/21/2020	Memo to	N
Subject:					File	

Peer References	From	To	Verified	Method	Negative
AYANNA WALKER, MD			04/22/2020	Evai	N
DAVID LEBOWITZ, MD			04/24/2020	Eval	N
David Lebowitz, MD					
LATHA GANTI, MD			04/28/2020	Eval	N
Latha Ganti, MD					
Nicholas Fusco, MD					

Other	From	To	Verified	Method	Negative
GAP	05/14/2017	06/30/2017	04/21/2020	Memo to	N

Subject: RELOCATED FROM TEXAS TO FLORIDA TO ATTEND

RESIDENCY PROGRAM

Teaching	From	To	Verified	Method	Negative
Associates					

Umapathy, Chandraprakash, MD

Personal Information		
Languages: TAMIL		
Practice Information		
CREDENTIALING CONTACT CRYSTAL JEFFERS-CREDENTIALING COORDINATOR 7703 FLOYD CURL DR., MC 7870 SAN ANTONIO, TX 78229 Telephone: (210) 567-1418 NPI: Tax ID:	Fax Number: (210) 567-4652 Medicare:	Medicaid:
Office UT Health San Antonio MC 7878 7703 Floyd Curl Drive Gastroenterology San Antonio, TX 78229 Telephone: (210) 567-4880 NPI: 1669657581 Tax ID:	Fax Number: (210) 567-1976 Medicare:	Medicald:
UH MAILING ADDRESS UT HEALTH SAN ANTONIO MEDICINE/GASTROENTEROLOGY 7703 FLOYD CURL DR, MC 7878 SAN ANTONIO, TX 78229 Telephone: (210) 567-4880 NPI: Tax ID:	Fax Number: (210) 567-1976 Medicare:	Medicaid:
UH PRIMARY OFFICE ADDRESS UNIVERSITY HEALTH SYSTEM ROBERT B. GREEN CAMPUS 903 W. MARTIN ST SAN ANTONIO, TX 78207 Telephone: (210) 358-5840 NPI: Tax ID:	Fax Number: Medicare:	Medicaid:
Licensure Numi	per State Expires C	omments/Schedule

\ppointment

STATE LICENSE

BEXAR COUNTY HOSPITAL DISTRICT Initial Appointment:

Department:

ΤX

DEPARTMENT OF

ID: 43092

Umapathy, Chandraprakash, MD

Advancement:

Division: Section: MEDICINE GASTROENTEROLOGY GASTROENTEROLOGY

Data Bank: 06/16/2020 Query Results: PDS Status

Report Category:

Last Reappointment: Next Appointment

MEDICINE)

Status:

Dues Facility Due Date Payment Date Amount Due Payment Method

 Board Certification
 Certified
 Initial Cert.
 Last Cert.
 Expires

 AMERICAN BOARD INTERNAL MEDICINE/GASTROENTEROLOGY
 PENDING

(GASTROENTEROLOGY)
AMERICAN BOARD OF INTERNAL MEDICINE (IN

(INTERNAL

CURRENT

08/24/2009

11/27/2018

12/31/2020

Specialty 1: INTERNAL MEDICINE

Specialty 3:

Specialty 2: INTERNAL MEDICINE

Specialty 4:

Professional LiabilityFromToVerifiedMethodNegativeUTHSCSA MALPRACTICE07/01/202008/31/2020

Limits: \$500,000 - \$1,500,000.00 | Terms:

**Undergraduate Education** From To Verified Method Negative Method Medical/Professional Education Verified Negative From To GOVERNMENT KILPAUK MEDICAL COLLEGE 06/22/1995 01/06/2003 , CHENNAI, Subject: Medicine & Surgery

Subject: Medicine & Surgery
UNIVERSITY OF PITTSBURGH , PITTSBURGH, PA 05/06/2013 04/29/2017 05/27/2020 Internet N
Subject: MASTER OF SCIENCE CLINICAL RESEARCH

TrainingFromToVerifiedMethodNegativeFellowship UNIVERSITY OF CALIFORNIA, SAN FRANCISCO07/03/201706/09/2020PrintN

, FRESNO, CA

Subject: GASTROENTEROLOGY (INTERNAL MEDICINE)

Residency UNIVERSITY OF PITTSBURGH MEDICAL CENTER

PITTSBURGH, PA

Subject: INTERNAL MEDICINE

06/01/2006 05/31/2009

EmploymentFromToVerifiedMethodNegativeUT HEALTH SAN ANTONIO, SAN ANTONIO, TX07/01/202006/16/2020EmailN

Verified **Hospital Affiliations** To Method Negative From UHS SURGERY CENTER - RBG CAMPUS , SAN ANTONIO, TX Present 05/26/2020 Print Subject: UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Present 05/26/2020 Print N Subject: COMMUNITY REGIONAL MEDICAL CENTER, FRESNO, CA Present Print Ν 06/16/2020 Subject: **UHS SURGERY CENTER - MEDICAL CENTER** , SAN ANTONIO, Present 05/26/2020 Print Ν Subject: **UPMC - PRESBYTERIAN HOSPITAL** , PITTSBURGH, PA 07/15/2009 06/30/2017 06/16/2020 Print N Subject:

Umapathy, Chandraprakash, MD

Peer	References	From	To	Verified	Method	Negative
Devang Prajapati, MD Jayakrishna Chintanaboina, MD Thimmalah Theethira, MD				05/27/2020 06/02/2020 05/27/2020	Eval Eval Eval	N N N
Othe	r	From	То	Verified	Method	Negative
GAP		01/07/2003	05/31/2006			
,,	Subject: SEE ATTACHED GAP INFO.					
GAP		06/01/2009	07/14/2009	06/16/2020	Print	N
11	Subject: TRAVELED TO INDIA FOR VACATION.					
Teac	hing	From	To	Verified	Method	Negative
	RSITY OF PITTSBURGH SCHOOL OF MEDICINE , BURGH, PA Subject: Clinical Assistant Professor	07/15/2009	06/30/2017	06/11/2020	Internet	N

Associates

Vasquez, Libia M., MD

#### **Personal Information**

Languages:

#### **Practice Information**

**UH MAILING ADDRESS** 

7703 FLOYD CURL DRIVE MEDICINE/GENERAL & HOSPITAL MEDICINE,

MC 7982

SAN ANTONIO, TX 78229

Telephone: (210) 567-0777

Fax Number: (210) 358-0647

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM 4502 MEDICAL DR

SAN ANTONIO, TX 78229

Telephone: (210) 743-6000

Fax Number: (210) 358-0647

Licensure

Number

**State** 

Expires

Department:

Comments/Schedule

STATE LICENSE

ΤX

**Appointment** 

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment:

**Next Appointment** 

Last Reappointment:

Advancement:

Section: Status:

Division:

MEDICINE

HOSPITAL MEDICINE

DEPARTMENT OF

HOSPITAL MEDICINE

Data Bank: 03/04/2020 Query Results: PDS **Enrollment Complete** 

Category:

Method

ID: 40201

**Board Certification** 

Certified

**Initial Cert.** 

Pending

Last Cert.

Expires

Negative

AMERICAN BOARD OF INTERNAL MEDICINE (INTERNAL MEDICINE)

Pending/Intending to sit for the Boards 08/2020

Specialty 1: INTERNAL MEDICINE

Specialty 2:

**Professional Liability** 

University of Texas Systems

N/A

Limits: 500,000.00 - 1,500,000.00 | Terms: Upon Termination

Medical/Professional Education

BAYLOR COLLEGE OF MEDICINE HOUSTON, TX

UNIVERSITY HEALTH SYSTEM

SAN ANTONIO, TX

Subject: DOCTOR OF MEDICINE

From To 07/01/2020 08/31/2020

Verified Method Negative From Τo

07/29/2013 05/31/2017 03/04/2020 AMA N

03/04/2020

Verified

Training Verified Method From To Negative Internship UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN 07/01/2017 06/30/2018 03/04/2020 **AMA** ANTONIO, TX Subject: INTERNAL MEDICINE Residency UT HEALTH SCIENCE CENTER AT SAN ANTONIO, SAN 07/01/2018 06/30/2020 03/05/2020 Memo to N ANTONIO, TX Subject: INTERNAL MEDICINE **Employment** From To Verified Method Negative UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 07/01/2020 03/05/2020 Memo to File lospital Affiliations Verified From To Method Negative

Pending

Memo to

File

N

Vroman, Penny J., MD

### **Personal Information**

Languages:

#### **Practice Information**

**UH MAILING ADDRESS** 

UT HEALTH SAN ANTONIO 7703 FLOYD CURL DR MC 7800 SAN ANTONIO, TX 78229 Telephone: (210) 567-5600

Fax Number: (210) 567-5556

**UH PRIMARY OFFICE ADDRESS** 

UT HEALTH SAN ANTONIO 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229 Telephone: (210) 358-4000

Fax Number: (210) 358-4020

ΤX

Licensure Number State Expires Comments/Schedule

STATE LICENSE

**Appointment** 

BEXAR COUNTY HOSPITAL DISTRICT

Initial Appointment: Advancement:

Department: Division: RADIOLOGY

RADIOLOGY/NUCLEAR MEDICINE

Verified

**Initial Cert.** 

ID: 22817

Method

Data Bank: 05/15/2020

Board Certification Certified

AMERICAN BOARD OF NUCLEAR MEDICINE (NUCLEAR MEDICINE) CURRENT

AMERICAN BOARD OF RADIOLOGY/DIAGNOSTIC (DIAGNOSTIC

RADIOLOGY) CURRENT

CURRENT 10/11/2013 CURRENT 07/01/2012 Last Cert. Expires

12/31/2023
03/15/2021

Negative

Specialty 1: DIAGNOSTIC RADIOLOGY Specialty 3:

Specialty 2: NUCLEAR MEDICINE

Specialty 4:

 Professional Liability
 From
 To

 UTHSCSA MALPRACTICE
 07/01/2020
 08/31/2020

Limits: 500,000 - 1,500,000. | Terms: UPON TERMINATION

Medical/Professional EducationFromToVerifiedMethodNegativeCREIGHTON UNIVERSITY SCHOOL OF MEDICINE07/01/199605/13/2000

Subject: DOCTOR OF MEDICINE

TrainingFromToVerifiedMethodNegativeInternship David Grant Medical Center, Travis AFB, CA<br/>Subject: Family Medicine Residency Internship07/01/200006/30/2001Residency David Grant Family Medicine Residency Program,07/01/200106/30/2003

Subject: Family Medicine Residency Program
Residency SAUSHEC Diagnostic Radiology Residency Program, JBSA, TX 07/01/2008 06/30/2012

Subject: Diagnostic Radiology Residency Program
Fellowship SAUSHEC Nuclear Medicine Fellowship Program, JBSA, TX 07/01/2012 06/30/2013

Subject: Nuclear Medicine Fellowship Program

EmploymentFromToVerifiedMethodNegativeUT HEALTH SAN ANTONIO, San Antonio, TX07/01/2020PRESENT05/08/2020Memo toN

**Hospital Affiliations** From To Verified Method Negative UNIVERSITY HEALTH SYSTEM PENDING Present 05/08/2020 Memo to Ν File BROOKE ARMY MEDICAL CENTER-FORT SAM 06/28/2013 Present 05/14/2020 Fax N VRAD, Eden 03/01/2018 Present **FASTLAND MEMORIAL HOSP DST** 09/20/2018 Present 05/11/2020 Fax Ν VILFORD HALL MEDICAL CENTER 09/13/2017 05/11/2020 Present Fax Ν PECOS COUNTY MEMORIAL HOSPITAL 09/01/2018 06/21/2019 05/11/2020 Fax Ν South Texas Radiology Imaging Center, 04/01/2017 10/01/2019

## **Provider Profile** YU, GREGORY G., MD

Personal Information							
Languages:							
Practice Information							
CREDENTIALING CONTACT					146344		
GAIL SOUTHARD 7703 FLOYD CURL DRIVE, MC 7736 SAN ANTONIO, TX 78229							
Telephone: (210) 567-5176 NPI: Tax ID:	Fax Nu Medicai	mber: (210) re:	567-4793	Medicald:			
UH MAILING ADDRESS DEPT OF EMERGENCY MEDICINE							
7703 FLOYD CURL DRIVE SAN ANTONIO, TX 78229	Env Nu	mber: (210)	E67.0757				
Telephone: (210) 567-4292 NPI: Tax ID:	Medical		367-0737	Medicaid:			
H PRIMARY OFFICE ADDRESS							
-UHS - EMERGENCY CENTER UHS EMERGENCY CENTER 4502 MEDICAL DRIVE							
SAN ANTONIO, TX 78229 Telephone: (210) 743-0024 NPI: Tax ID:	Fax Nu Medical			Medicald:			
TOX ID.							
Licensure	Number	State	Expires	Comments/S	chedule		
STATE LICENSE		TX					
Appointment							
BEXAR COUNTY HOSPITAL DISTRICT					T 0.12	10. 10074	
Initial Appointment:  Advancement:		·	oartment: ision:	DEPARTMENT EMERGENCY		ID: 42974 Data Bank: 0	4/23/2020
Last Reappointment:			tion:			Query Results Report	: PDS Status
Next Appointment		Sta	tus:			Category:	
S B							
ತಿoard Certification			Certifi	ed Initial C	ert.	Last Cert.	Expires

(EMERGENCY

AMERICAN BOARD OF EMERGENCY MEDICINE MEDICINE)

## BEXAR COUNTY HOSPITAL DISTRICT

# **Provider Profile**

YU, GREGORY G., MD

AMERICAN BOARD OF EMERGENCY MEDICINE

()

N (Archived)

Specialty 1: EMERGENCY MEDICINE Specialty 3:

Specialty 2: Specialty 4:

HARVARD SCHOOL OF PUBLIC HEALTH , BOSTON, MA Subject:  TEXAS TECH UNIVERSITY - WASHINGTON HOSPITAL CENTER, LUBBOCK, TX Subject: DOCTOR OF MEDICINE  Training From To Verified Method Negative  Residency GEORGETOWN UNIVERSITY - WASHINGTON HOSPITAL CENTER, WASHINGTON, DC Subject: Emergency Medicine  From To Verified Method Negative  THALTH SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative  Were the third of the t		<b>.</b>	1984 _	Maniel and	العرم ما شعرة	Nogotivo
BLANKET   LIMIS: 500,000.00				vermed	меснов	Negative
MEDSTAR HEALTH, INC. 1-12731-90-19 LIMISE: 1,000,000.00 3,000,000,00   Terms:         07/01/2019         06/30/2020           Undergraduate Education         From         To         Verified         Method         Negative           Medical / Professional Education         From         To         Verified         Method         Negative           HARVARD SCHOOL OF PUBLIC HEALTH SUbject:         09/03/2019         04/17/2020         National Student Clearing House         National Student Clearing House           TEXAS TECH UNIVERSITY - WASHINGTON HOSPITAL CENTER, Subject:         08/01/2013         05/19/2017         Verified         Method         Negative           Training         From         To         Verified         Method         Negative           Residency GEORGETOWN UNIVERSITY - WASHINGTON HOSPITAL Subject:         Prom         To         Verified         Method         Negative           Employment         From         To         Verified         Method         Negative           University - REALTH SYSTEM         SAN ANTONIO, TX         Prom         To         Verified         Method         Negative           Peer References         From         To         Verified         Method         Negative           Peer References         From         To         Verified <t< td=""><td></td><td>07,01,2020</td><td>50,52,2025</td><td></td><td></td><td></td></t<>		07,01,2020	50,52,2025			
Linitis: 1,000,000.00 3,000,000,00   Termis:  Undergraduate Education From To Verified Method Negative  Medical/Professional Education From To Verified Method Negative  Medical/Professional Education From To Verified Method Negative  RANARD SCHOOL OF PUBLIC HEALTH	Limits: 500,000.00 1,500,000.00   Terms:					
Undergraduate Education From To Verified Method Negative  Medical/Professional Education From To Verified Method Negative  Medical/Professional Education From To Verified Method Negative  HARVARD SCHOOL OF PUBLIC HEALTH 09/03/2019 04/17/2020 National Nati		07/01/2019	06/30/2020			
Medical / Professional Education   From To Verified   Method   Negative						
Medical/Professional Education   From   To   Verified   Method   Negative						
HARVARD SCHOOL OF PUBLIC HEALTH , 80 STON, MA Subject:  TEXAS TECH UNIVERSITY - WASHINGTON HOSPITAL CENTER, LUBBOCK, TX Subject: DOCTOR OF MEDICINE  Training From To Verified Method Negative  Residency GEORGETOWN UNIVERSITY - WASHINGTON HOSPITAL CENTER, WASHINGTON, DC Subject: Emergency Medicine  Employment UT HEALTH SAN ANTONIO , SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative  To Verified Method Negative  From To Verified Method Negative	Undergraduate Education	From	То	Verified	Method	Negative
BEMPLOYMENT TO VERIFIED METHOD TO Subject: Borrand Method Negative  TEAD TECH UNIVERSITY - WASHINGTON HOSPITAL CENTER, LUBBOCK, TX Subject: DOCTOR OF MEDICINE  Training Residency GEORGETOWN UNIVERSITY - WASHINGTON HOSPITAL CENTER, WASHINGTON, DC Subject: Emergency Medicine  Employment From To Verified Method Negative  The ALTH SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative  When to N File  Peer References From To Verified Method Negative  Memo to N File  Peer References From To Verified Method Negative  Memo to N File  Peer References From To Verified Method Negative  Memo to N File  Peer References From To Verified Method Negative  Memo to N File  Peer References From To Verified Method Negative  Memo to N File  Peer References From To Verified Method Negative  Memo to N File  Peer References From To Verified Method Negative  Memo to N File  Peer References From To Verified Method Negative  Memo to N File  N Subject: RELOCATING FROM TEXS TO WASHINGTON TO  BEGIN RESIDENCY TRAINING  From To Verified Method Negative  Memo to N File  Prom To Verified Method Negative  Memo to N File  Prom To Verified Method Negative  Memo to N File  Prom To Verified Method Negative  Prom To Verified Method Negative  Memo to N File  Prom To Verified Method Negative	Medical/Professional Education	From	То	Verified	Method	Negative
TEXAS TECH UNIVERSITY - WASHINGTON HOSPITAL CENTER, LUBBOCK, TX Subject: DOCTOR OF MEDICINE    Fraining		09/03/2019		04/17/2020		N
TEXAS TECH UNIVERSITY - WASHINGTON HOSPITAL CENTER, LUBBOCK, TX Subject: DOCTOR OF MEDICINE  Fraining  From To Verified Method Negative  Residency GEORGETOWN UNIVERSITY - WASHINGTON HOSPITAL CENTER, WASHINGTON, DC Subject: Emergency Medicine  Employment  From To Verified Method Negative  THALTH SAN ANTONIO, TX  HOSPITAL SAN ANTONIO, TX  HOSPITAL SAN ANTONIO, TX  HOSPITAL SAN ANTONIO, TX  Present  UNIVERSITY HEALTH SYSTEM  JOELLE BORNART, MD MUNISH GOYAL, MD RAHUL BHAT, MD  Other  From To Verified Method Negative  O4/18/2020  Eval N  Wemo to File  N  O4/18/2020  Eval N  WAY 17/2020  O4/17/2020  Eval N  O4/17/2020  O4/17/2020  Eval N  O4/17/2020  O4/17/2020  O4/17/2020  Eval N  O4/17/2020  O4/17/2020  O4/17/2020  O4/17/2020  Eval N  O4/17/2020  O5/19/2017  O6/30/2017  O6/30/2017  O6/30/2017  O6/30/2017  O4/17/2020  Memo to N  File  From To Verified Method Negative  O6/19/2017  O6/30/2017  O6/30/2017  O6/30/2017  O6/17/2020  OF/17/2020  OF/17/2020  OF/17/2020  OF/17/2020  OF/17/2020  O//17/2020  O//17/						
Training From To Verified Method Negative Residency GEORGETOWN UNIVERSITY - WASHINGTON HOSPITAL CENTER, WASHINGTON, DC Subject: Emergency Medicine    From To Verified Method Negative	•	09/01/2012	05/10/2017		House	
Praining   Prom   To   Verified   Method   Negative		00/01/2013	05/15/2017			
Residency GEORGETOWN UNIVERSITY - WASHINGTON HOSPITAL CENTER, WASHINGTON, DC Subject: Emergency Medicine  Employment  From To Verified  Method Negative  Memo to File  N  Hospital Affiliations From To Verified Method Negative  Memo to File  N  Present  O4/16/2020  Present O4/16/2020  Present O4/16/2020  Present O4/18/2020  Pr	Subject: DOCTOR OF MEDICINE					
Residency GEORGETOWN UNIVERSITY - WASHINGTON HOSPITAL CENTER, WASHINGTON, DC Subject: Emergency Medicine  Employment  From To Verified Method Negative UT HEALTH SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM JOELLE BORHART, MD MUNISH GOYAL, MD RAHUL BHAT, MD  Other From To Verified Method Negative Negat	Training	From	То	Verified	Method	Negative
Employment  From To Verified Method Negative  UT HEALTH SAN ANTONIO , SAN ANTONIO, TX  Hospital Affiliations  From To Verified Method Negative  UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject:  Peer References  From To Verified Method Negative  UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject:  Present 04/16/2020 Memo to N File  Peer References  From To Verified Method Negative  O4/18/2020 Eval N  MUNISH GOYAL, MD RAHUL BHAT, MD  Other  From To Verified Method Negative  O4/17/2020 Eval N  O4/17/2020 Eval N  O4/17/2020 Eval N  O4/17/2020 Eval N  Present 04/17/2020 Eval N  O4/17/2020 Eval N  O4/17/2020 Eval N  O4/17/2020 Eval N  O5/19/2017 06/30/2017 04/17/2020 Memo to N File  Teaching  From To Verified Method Negative	Residency GEORGETOWN UNIVERSITY - WASHINGTON HOSPITAL		06/30/2020			
Employment From To Verified Method Negative UT HEALTH SAN ANTONIO, , SAN ANTONIO, , SAN ANTONIO, TX  Hospital Affiliations From To Verified Method Negative UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject:  Peer References From To Verified Method Negative JOELLE BORHART, MD MUNISH GOYAL, MD RAHUL BHAT, MD  Other From To Verified Method Negative OS/19/2017 O6/30/2017 O4/17/2020 Eval N  OS/19/2017 O6/30/2017 O4/17/2020 Memo to File  Teaching From To Verified Method Negative OS/19/2017 O6/30/2017 O4/17/2020 Memo to File  Teaching From To Verified Method Negative OS/19/2017 O6/30/2017 O4/17/2020 Memo to File						
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX  Peer References Peer References Prom To Verified Method Negative  O4/16/2020 Memo to File N  Present 04/16/2020 Memo to File N  O4/18/2020 Eval N  O4/17/2020 Eval N  O5/19/2017 06/30/2017 04/17/2020 Memo to File  Teaching  From To Verified Method Negative  Teaching  From To Verified Method Negative	Subject. Effergency medicine					
Teaching  Hospital Affiliations  From To Verified Method Negative  Notice Proper References  From To Verified Method Negative  Notice Present	Employment	From	То	Verified	Method	Negative
Hospital Affiliations UNIVERSITY HEALTH SYSTEM Subject:  Peer References From To Verified Method Negative  Od/16/2020 Memo to File  Peer References From To Verified Method Negative  Od/18/2020 Eval N MUNISH GOVAL, MD RAHUL BHAT, MD Other From To Verified Method Negative  Od/17/2020 Eval N  Od/17/2020 Eval N  Od/17/2020 Eval N  Od/17/2020 Eval N  From To Verified Method Negative  Object: Relocating From Texts TO WASHINGTON TO  BEGIN RESIDENCY TRAINING  From To Verified Method Negative		07/01/2020		04/17/2020		N
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject:  Peer References  From To Verified Method Negative  O4/18/2020 Eval N MUNISH GOYAL, MD RAHUL BHAT, MD  Other  From To Verified Method Negative  O4/17/2020 Eval N  O4/17/2020 Eval N  O4/17/2020 Eval N  O5/19/2017 O6/30/2017 O4/17/2020 Memo to File  Teaching  From To Verified Method Negative  Teaching  From To Verified Method Negative	, SAN ANTONIO, TX				FIIE	
UNIVERSITY HEALTH SYSTEM , SAN ANTONIO, TX Subject:  Peer References  From To Verified Method Negative  O4/18/2020 Eval N MUNISH GOYAL, MD RAHUL BHAT, MD  Other  From To Verified Method Negative  O4/17/2020 Eval N  O4/17/2020 Eval N  O4/17/2020 Eval N  O5/19/2017 O6/30/2017 O4/17/2020 Memo to File  Teaching  From To Verified Method Negative  Teaching  From To Verified Method Negative		_				
Peer References  From To Verified Method Negative  JOELLE BORHART, MD MUNISH GOYAL, MD RAHUL BHAT, MD  Other  From To Verified Method Negative  Other  GAP  JOELLE BORHART, MD  O4/18/2020  Eval N  N  N  O4/17/2020  Eval N  O4/17/2020  Eval N  N  N  O4/17/2020  Eval N  N  N  O4/17/2020  Eval N  N  N  O4/17/2020  From To Verified Method Negative  O5/19/2017  O6/30/2017  O6/30/2017  O4/17/2020  Memo to File  Teaching  From To Verified Method Negative		From				
OELLE BORHART, MD	·		Present	04/16/2020		14
OELLE BORHART, MD	•					
OELLE BORHART, MD	Peer References	From	To	Verified	Method	Negative
Cother From To Verified Method Negative  GAP  Subject: RELOCATING FROM TEXS TO WASHINGTON TO  BEGIN RESIDENCY TRAINING  From To Verified Method Negative  N  Teaching From To Verified Method Negative						
Other From To Verified Method Negative  GAP Subject: RELOCATING FROM TEXS TO WASHINGTON TO BEGIN RESIDENCY TRAINING  From To Verified Method Negative  Teaching From To Verified Method Negative						
GAP  Subject: RELOCATING FROM TEXS TO WASHINGTON TO BEGIN RESIDENCY TRAINING  From To Verified Method Negative	RAHUL BIRAT, PIO			04/17/2020	LVAI	N
GAP  Subject: RELOCATING FROM TEXS TO WASHINGTON TO BEGIN RESIDENCY TRAINING  From To Verified Method Negative	Other	From	То	Verified	Method	Negative
Subject: RELOCATING FROM TEXS TO WASHINGTON TO BEGIN RESIDENCY TRAINING  Teaching From To Verified Method Negative	GAP	05/19/2017	06/30/2017	04/17/2020		
Teaching From To Verified Method Negative					File	
	Tazchina	Even	To	Vorificat	Mothod	Magnetica
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	ssociates					

## BEXAR COUNTY HOSPITAL DISTRICT

**Provider Profile** YU, GREGORY G., MD

Zala, Gaurang C., MD

#### **Personal Information**

Languages:

#### **Practice Information**

**UH MAILING ADDRESS** 

903 W MARTIN 2 FLOOR MS-27-2 SAN ANTONIO, TX 78207

Telephone: (210) 358-3427

Fax Number: (210) 358-5940

#### **UH PRIMARY OFFICE ADDRESS**

COMMUNITY MEDICINE ASSOCIATES

NORTH CLINIC 302 W RECTOR

SAN ANTONIO, TX 78216 Telephone: (210) 358-0800

Fax Number: (210) 358-0850

Number Comments/Schedule State **Expires** Licensure STATE LICENSE TX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment:

Department:

**FAMILY & COMMUNITY** 

ID: 43078

Advancement:

Division:

MEDICINE UNIVERSITY MEDICAL

Data Bank: 05/15/2020

ASSOCIATES FAMILY MEDICINE

Last Reappointment:

Section:

Query Results: PDS Status

Report

Next Appointment

Status:

PENDING

Category: UMA FULL TIME

**Board Certification** Certified **Initial Cert.** Last Cert. Expires (FAMILY MEDICINE) CURRENT 12/03/2008 02/15/2021 AMERICAN BOARD OF FAMILY MEDICINE

Specialty 1: FAMILY MEDICINE

Specialty 3:

Specialty 2:

Specialty 4:

Verified Method Negative **Professional Liability** From UTHSCSA MALPRACTICE 06/01/2020 08/31/2020

Limits: 500,000 TO 1,500,000.00 | Terms: UPON TERMINATION

Verified Method Negative Medical/Professional Education From Τo GUJARAT UNIVERSITY NAVRANGPURA, GUJARA, 08/01/1995 03/31/2001

Subject: MBBS

From To Verified Method Negative Training Residency UAB SELMA FAMILY MEDICINE, SELMA, AL 09/01/2005 09/19/2008

Subject: FAMILY MEDICINE Verified Method **Employment** From To Negative

COMMUNITY MEDICINE ASSOCIATES 05/08/2020 06/01/2020 PRESENT Print N BAPTIST HEALTH SYSTEM PHYSICIANS NETWORK INC. 01/02/2020 **PRESENT** 05/08/2020 Internet Ν WELLGROUP HEALTH PARTNERS 10/01/2009 12/31/2011 05/08/2020 Internet N MIDWESTERN UNIVERSITY 12/15/2019 05/20/2020 05/01/2016 Print N SPECIALITY PHYSICIANS ILLINOIS, 10/01/2009 12/16/2019 05/08/2020 Print N

**Hospital Affiliations** From Verified Method Negative UNIVERSITY HEALTH SYSTEM PENDING 05/08/2020 Print N FRANCISCAN ALLIANCE, 01/15/2020 12/09/2009 05/08/2020 N Internet

Elliott, Stephanie M., FNP

#### **Personal Information**

Languages:

#### **Practice Information**

**UH MAILING ADDRESS** 

7703 FLOYD CURL DR, MC 7836 SAN ANTONIO, TX 78229 Telephone: (210) 567-4924

Fax Number: (210) 567-3093

**UH PRIMARY OFFICE ADDRESS** 

UNIVERSITY HEALTH SYSTEM ROBERT B.

**GREEN CAMPUS** 

903 W. MARTIN ST.

SAN ANTONIO, TX 782017 Telephone: (210) 358-3582

Fax Number: (210) 358-3252

**UH SECONDARY ADDRESS** 

MARC

8300 FLOYD CURL DR, 5TH FLOOR SAN ANTONIO, TX 78229

Telephone: (210) 450-9500

Fax Number: (210) 450-6027

Number Comments/Schedule Licensure State **Expires** STATE LICENSE ТX

**Appointment** 

**BEXAR COUNTY HOSPITAL DISTRICT** 

Initial Appointment: Advancement:

Department: Division:

OBSTETRICS/GYNECOLOGY ID: 42721

Data Bank: 05/20/2020

**Board Certification** Certified **Initial Cert.** Last Cert. Expires AMERICAN ACADEMY OF NURSE PRACTITIONERS CURRENT 08/30/2019 08/29/2024

(FAMILY NURSE PRACTITIONER)

Specialty 1: NURSE PRACTITIONER

Specialty 3:

Specialty 2: Specialty 4:

Verified **Professional Liability** From To Method Negative University of Texas System TORT Claims Act 06/01/2020 01/20/2030

Limits: \$250,000.00/\$500,000.00 | Terms: Upon Termination

Undergraduate Education Verified Method From To Negative OUR LADY OF THE LAKE COLLEGE 11/19/2007 12/01/2008 05/04/2020 National Subject: ASSOCIATES OF SCIENCE IN NURSING Student

UNIVERSITY OF TEXAS AT ARLINGTON

Subject: BACHELOR OF SCIENCE IN NURSING

08/27/2015 12/17/2016

05/04/2020

Student Clearing House

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Clearing House

National

Medical/Professional Education From To Verified Method Negative UNIVERSITY OF TEXAS AT ARLINGTON 12/19/2016 08/17/2019 05/04/2020 Internet

Subject: MASTER OF SCIENCE IN NURSING

**Employment** Verified From To Method Negative UT HEALTH SAN ANTONIO, SAN ANTONIO, TX 12/16/2019 05/05/2020 Internet Present N Our Lady of the Lake Regional Hospital, Baton Rouge, LA 03/21/2006 03/02/2013 05/13/2020 Internet N METHODIST HEALTH CARE 06/17/2013 04/09/2016 05/05/2020 Internet Ν Fertility Center of San Antonio, San Antonio, TX 04/18/2016 07/25/2018 05/11/2020 Print Ν UNIVERSITY HEALTH SYSTEM 08/27/2018 12/13/2019 05/07/2020 Print Ν

lospital Affiliations From Verified To Method Negative UNIVERSITY HEALTH SYSTEM Pending 05/04/2020 Print Ν

Weatherford, Shelly A., PA

#### **Personal Information**

Languages:

#### **Practice Information**

**UH MAILING ADDRESS** UTHSCSA DEPT OF SURGERY 7703 FLOYD CURL DR, MC 7740

SAN ANTONIO, TX 78229 Telephone: (210) 743-4130

Fax Number: (210) 702-6292

**UH PRIMARY OFFICE ADDRESS** 

**UHS TRAUMA SURGERY** 4502 MEDICAL DRIVE SAN ANTONIO, TX 78229

Fax Number: (210) 567-1972 Telephone: (210) 358-2078 Comments/Schedule Number State Expires Licensure STATE LICENSE TX **Appointment** BEXAR COUNTY HOSPITAL DISTRICT ID: 42766 Department: SURGERY Initial Appointment: Data Bank: 05/26/2020 TRAUMA & EMERGENCY SURGERY Division: Advancement: TRAUMA & EMERGENCY SURGERY Ouery Results: Last Reappointment: Section: Category: Status: Next Appointment **Initial Cert.** Last Cert. **Expires** Certified **Soard Certification** Y (Archived) 09/08/2011 12/31/2021 NATIONAL COMMISSION ON CERTIFICATION OF PHYSICIAN ASSISTANTS (NCCPA) (NCCPA) Specialty 1: PHYSICIAN ASSISTANT Specialty 2: Specialty 4: Specialty 3: Verified Method Negative **Professional Liability** From To

Chapter 104 of Texas Civil Practice & Remedies Code 06/01/2020 08/31/2020

Limits: \$100,000.00 - \$300,000.00 | Terms:

Verified Method Negative From To Undergraduate Education 08/20/2000 05/14/2005 05/11/2020 Internet TEXAS TECH UNIVERSITY , LUBBOCK, TX Subject: BACHELOR OF BUSINESS ADMINISTRATION

Verified Method Negative Medical/Professional Education From To JTHEASTERN UNIVERSITY , FORT LAUDERDALE, FL Subject: MASTER OF MEDICAL SCIENCE - PHYSICIAN NOVA SOUTHEASTERN UNIVERSITY 05/01/2009 08/28/2011 05/11/2020 Internet ASSISTANT

To Verified Method Negative From **Employment** 06/01/2020 05/13/2020 Email N UT HEALTH SAN ANTONIO, SAN ANTONIO, TX CHRISTUS ST. VINCENT REGIONAL MEDICAL CENTER, SANTA FE, NM 11/08/2011 05/16/2015 05/11/2020 Print N , TEMPLE, TX 07/14/2020 **BAYLOR SCOTT & WHITE** 06/01/2015 05/12/2020 Internet N

To Verified Method Negative **Hospital Affiliations** From 05/11/2020 Print UNIVERSITY HEALTH SYSTEM, SAN ANTONIO, TX N Present Christus St. Vincent Regional Medical Center, Sante Fe, NM 06/20/2011 05/20/2015 05/26/2020 Print N BAYLOR SCOTT AND WHITE HEALTH 05/28/2015 05/13/2020 Internet N , TEMPLE, TX 02/15/2020



## BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Tuesday, July 28, 2020

Consideration and Appropriate Action Regarding Medical-Dental Staff Recommendations for Staff Membership and Delineation of Privileges

## **Background:**

The Board of Managers of University Health System 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 System's Professional Staff Services department (PSS) is responsible for ensuring compliance regarding all applicants for the credentialing and privileging of providers. Operating under the strict standards, Professional Staff Services handles the Health System's credentialing and privileging process from beginning to end as outlined below.

## **Credentialing Process:**

Requests for the credentialing and privileging of clinical providers are collected and reviewed by UHS Medical-Dental Staff Coordinators who ensure that all necessary information is included in the application. A properly completed application is then sent to the Central Verifications Office (CVO) staff, within the UHS Professional Staff Services department, to perform primary source verifications of all professional activities from graduation of medical school to the present.

Once the CVO staff has completed the primary source verifications, the UHS PSS staff assembles a complete file to be reviewed by the appropriate clinical Department Chair at the UT Health School of Medicine. Once approved by the Department Chair, the complete file is presented to the appropriate Medical-Dental Staff Committee – either the UHS Allied Health or UHS Physician Credentials Committee for review and approval.

The Credentials Committee met on June 29, 2020 and reviewed the credential files of the individuals listed on the attached Credentials Report and the Professional Performance Evaluation Report. In its meeting of July 7, 2020, the Executive Committee of the Medical-Dental Staff recommended approval of the following:

- 1) Credentials Committee Report
- 2) Delineation of Privileges
  - a) University Health System
    - i. General Surgery/Critical Care (Revised)
    - ii. Medicine/Cardiology (Revised)
    - iii. Medicine/Gastroenterology (Revised)
    - iv. Neurology (Revised)
    - v. Neurosurgery (Revised)
    - vi. Urology (Revised)
  - b) ASC Medical Center
    - i. Radiation Oncology (Revised)
- 3) Focused/Ongoing Professional Performance Evaluation Report

## Recommendation:

The following list of providers have been reviewed and approved in accordance with the Health System's credentialing and privileging process. We recommend the Board of Mangers approve clinical privileges for the attached list of providers.

Bryan J. Alsip, M.D., M.P.H.

Executive Vice President/

Chief Medical Officer

Rajeev Suri, M.D.

President, Medical-Dental Staff

George B. Hernández, Ja.
President/Chief Executive Officer



NAME:	
Education:	MD or DO
	rmal training: Successful completion of an accredited residency training program in general surgery. The cation by the American Board of General Surgery or equivalent, within 4 years of initial appointment.
per pro	ial Appointment - Required previous experience: The successful applicant must demonstrate formance of at least 100 general surgical procedures representing a cross section of the cedures/medical management being requested during the past 24 months, unless completed residency in past 12 months.
per	<b>appointment - Required previous experience</b> : Demonstrate current competence and evidence of the formance of at least 50 general surgical procedures with acceptable results, reflective of the scope of rileges requested, for the past 24 months.
Core Privil	eges in General Surgery:
pe	equested: Privileges include the assessment, consultation, and preparation of all patients for the rformance of surgical procedures to correct or treat various conditions, illnesses, and injuries. Privileges clude the preoperative, operative, and post-operative care in the following areas of primary responsibility:
	Head and neck
	Endocrine system, including thyroid, parathyroid, adrenal and endocrine pancreas
	Skin, Abdominal Wall and Hernia repair
	Breast and Breast Cancer Care
	Alimentary tract, including: liver, biliary tract, pancreas and spleen
	Anal/Rectal Disease  Comprehensive management of trauma, particularly involving multisystem injuries
	Surgical management of cancer
	Basic Laparoscopic Procedures (exploratory laparoscopy, cholecystectomy, appendectomy or hernia
	repair)
	Basic Endoscopic evaluation of the GI tract
The addition	nal privileges starting on page -2- require the outlined documentation of proficiency.

General Surgery/Surgical Critical Care Delineation of Privileges

Approved: 03/2011



PRIVILEGE	CREDENTIALING CRITERIA	REQUESTED
Fluoroscopy	<ol> <li>8 Hours of Category I CMEU credit on radiation safety awareness training through an accredited program.</li> <li>1 Hour Fluoroscopic machine training demonstrating use of machine &amp; radiation safety practices         <ul> <li>a. Provided by a licensed medical physicist, or</li> <li>b. Physician trained by a radiologist or licensed medical physicist (please note that if this one occurs then there needs to be a specific audit trail back to the trainer physician's training)</li> </ul> </li> <li>Annual Fluoroscopy Radiation Safety training regarding fluoroscopy techniques, Image Gently, and Image Wisely</li> </ol>	
Endoscopic Retrograde Canalization of the Pancreas	For Endoscopic Retrograde Canalization of the Pancreas privileges, an applicant must provide the following:  1. Documentation of at least sixty-five (65) procedures (not including therapeutic ERCP);  AND  2. A statement from an endoscopic training director confirming competence after the minimum number of procedures (each case performed independently under supervision) is reached. If the applicant has received experience outside of an approved training program, "taught" by colleagues, partners, self, then detailed description of this experience must accompany the request for the privilege.  REAPPOINTMENT:  To maintain full endoscopic retrograde canalization of the pancreas privileges, the surgeon must perform a minimum of ten (10) procedures per calendar year. If a practitioner performs less than the minimum required procedures, the practitioner will need to have five (5) proctored case.	
Computerized Da Vinci Surgical Platform	For Computerized Da Vinci Surgical Platform the applicant must provide the following:  1. Certificate of attendance from Intuitive Surgical Inc. hands-on training practicum in the use of the Da Vinci Surgical Platform and proctoring of the first four (4) cases in University Health System; OR  2. Evidence of training on the Da Vinci Surgical Platform in residency or fellowship program with documentation of completion of at least ten (10) cases as Console Surgeon AND at least five (5) cases as a Bedside First Assists; OR  3. Certificate of attendance from Intuitive Surgical Inc. hands-on training practicum in the use of the Da Vinci Surgical Platform, current privileges in the use of the platform in another hospital system, and documentation of successful completion of ten (10) cases in that system within the last 12 months.  REAPPOINTMENT:  To maintain full robotic privileges, the surgeon must perform a minimum of five (5) robotic procedures per calendar year. If a practitioner performs less than the minimum required procedures, the practitioner will need to have two (2) proctored case.	



PRIVILEGE	CREDENTIALING CRITERIA	REQUESTED
Advanced Laparoscopic	For Advanced Laparoscopic Procedures an applicant must provide the following:	-
Procedures (cases other		
than exploratory	1. Have completed a residency program in General Surgery that included training in	
laparoscopy,	advanced laparoscopic procedures, which will be documented with a letter of	
cholecystectomy,	competency from the Program Director, <b>OR</b>	
appendectomy, hernia	2. Documentation of having taken a laparoscopic course at a laboratory using animals;	
repair or open donor	documentation of having assisted on two (2) advanced laparoscopic procedures	
nephrectomies) NOT A	with a surgeon having these privileges; and a letter from the surgeon recommending	
LAPAROSCOPIC	and attesting to the ability of the applicant to perform laparoscopic surgery.	1
PROCEDURE	REAPPOINTMENT:	
	To maintain full advanced laparoscopic privileges, the surgeon must perform a minimum of	
	ten (10) procedures per calendar year. If a practitioner performs less than the minimum	
	required procedures, the practitioner will need to have three (3) proctored case.	
Please check which	For Open Gastric Bypass/Open biopancreatic diversion/duodenal switch privileges the	
bariatric privilege(s) you	applicant must provide the following:	
are requesting:		
' '	1. Completion of a post-graduate approved fellowship training program in bariatric	
☐ Open Gastric	surgery, documentation of at least twenty-five (25) bariatric cases, and a letter of	
Bypass	reference from the director of the bariatric surgery training program; OR	
	2. Successful completion of a mini-Fellowship sanctioned by the American Society of	
□ Open	Bariatric Surgery (ASBS) and twenty-five (25) cases; OR	
biliopancreatic	3. Documentation of successful performance of fifteen (15) procedures as the primary	
diversion/duoden	operating surgeon of each type for which privileges are being sought.	
al switch	REAPPOINTMENT:	
	1. Documentation of completion of at least twenty (20) hours of Category 1 CME that	
	is specific to bariatric surgery during each two (2) year period; AND	
	2. Documentation of successful performance of at least twenty-five (25) bariatric	
	cases as the primary operating surgeon within the preceding two (2) year period.	
PRIVILEGE	CREDENTIALING CRITERIA	REQUESTED
Laparoscopic Gastric Sleeve	For Gastric Sleeve procedures an applicant must provide the following:	
Sieeve	Must be credentialed to perform Advanced Laparoscopic Procedures; AND	
	2. Completion of an approved Minimally Invasive Surgery fellowship with at least ten	
	(10) Laparoscopic Gastric Sleeve procedures, and a statement from a program	
	director confirming competence after the minimum number of procedures (each	
	case performed independently under supervision) is reached; <b>OR</b>	
	3. If the applicant has obtained his/her training in a General Surgery residency	
	program or mini-Fellowship sanctioned by the American Society of Bariatric	
	Surgery (ASBS), the applicant must provide documentation of having performed at	
	least fifteen (15) Laparoscopic Gastric Sleeve procedures; OR	
	4. Documentation of attendance at a approved course AND assists a surgeon with	1
	Laparoscopic Gastric Sleeve privileges on five (5) cases followed by five (5)	
	proctored cases. If a surgeon does not have a regular practice in advanced	
	laparoscopic surgery, the number of cases required would be ten (10) assisting and ten (10) proctored cases; <b>OR</b>	
	5. If performed in another hospital/facility document successful outcomes of ten (10)	
	laparoscopic gastric sleeve procedures performed as the primary surgeon.	
	Documentation will include an evaluation from the department chief/designee who	
	has direct knowledge of the applicant's competence to perform procedure.	

General Surgery/Surgical Critical Care Delineation of Privileges

Approved: 03/2011



	REAPPOINTMENT:  1. Documentation of completion of at least twenty (20) hours of Category 1 CME that is specific to bariatric surgery during each two (2) year period; AND	
	2. Documentation of successful performance of at least twenty—five (25) bariatric cases as the primary operating surgeon of each type for which privileges are being sought within the proceeding two (2) year period.	
Laparoscopic Gastric Bypass	For Laparoscopic Gastric Bypass procedures an applicant must provide the following:	
	<ol> <li>Must be credentialed to perform Advanced Laparoscopic Procedures; AND</li> <li>Completion of an approved Minimally Invasive Surgery fellowship with more than fifteen (15) Laparoscopic gastric Bypass procedures, and a statement from a program director confirming competence after the minimum number of procedures (each case performed independently under supervision) is reached; OR</li> <li>If the applicant has obtained his/her training in a General Surgery residency</li> </ol>	
	program or mini-Fellowship sanctioned by the American Society of Bariatric Surgery (ASBS), the applicant must provide documentation of having performed at least fifteen (15) Laparoscopic Gastric Bypass procedures; <b>OR</b>	
	<ul> <li>4. Documentation of attendance at an approved course AND assists a surgeon with Laparoscopic Gastric Bypass privileges on five (5) cases followed by five (5) proctored cases. If a surgeon does not have a regular practice in advanced laparoscopic surgery, the number of cases required would be ten (10) assisting and ten (10) proctored cases; OR</li> <li>5. If performed in another hospital/facility document successful outcomes of</li> </ul>	
	ten (10) laparoscopic gastric bypass procedures performed as the primary surgeon. Documentation will include an evaluation from the department chief/designee who has direct knowledge of the applicant's competence to perform procedure.	
	REAPPOINTMENT:	
	1. Documentation of completion of at least twenty (20) hours of Category 1 CME that is specific to bariatric surgery during each two (2) year period; AND	
	2. Documentation of successful performance of at least twenty-five (25) bariatric cases as the primary operating surgeon within the proceeding two (2) year period.	
Laparoscopic Gastric Banding for Weight Loss	For Laparoscopic Gastric Banding for Weight Loss procedures an applicant must provide the following:	
	<ol> <li>Must be credentialed to perform Advanced Laparoscopic Procedures; AND</li> <li>Completion of an approved Minimally Invasive Surgery fellowship with performance of more than ten (10) Laparoscopic Gastric Banding procedures and a statement from a program director confirming competence after the minimum number of procedures (each case performed independently under supervision) is reached; OR</li> </ol>	

General Surgery/Surgical Critical Care Delineation of Privileges

Approved: 03/2011



	<ol> <li>If the applicant has obtained his/her training in a General Surgery residency program or mini-Fellowship sanctioned by the American Society of Bariatric Surgery (ASBS), the applicant must provide documentation of having performed at least fifteen (15) Laparoscopic Gastric Banding procedures; OR</li> <li>Documentation of attendance at an approved course AND assists a surgeon with Lap-Band privileges on five (5) cases followed by five (5) proctored cases. If a surgeon does not have a regular practice in advanced foregut laparoscopic surgery, the number of cases required would be ten (10) assisting and ten (10) proctored cases; OR</li> <li>If performed in another hospital/facility document successful outcomes of ten (10) laparoscopic gastric banding procedures performed as the primary surgeon. Documentation will include an evaluation from the department chief/designee who has direct knowledge of the applicant's competence to perform procedure.</li> </ol>
	REAPPOINTMENT:
	1. Documentation of completion of at least twenty (20) hours of Category 1 CME that is specific to bariatric surgery during each two (2) year period; AND 2. Documentation of successful performance of at least twenty—five (25) bariatric cases as the primary operating surgeon within the proceeding two (2) year period.
PRIVILEGE	CREDENTIALING CRITERIA REQUESTED
Laparoscopic biliopancreatic diversion/duodenal switch	For Laparoscopic biliopancreatic diversion/duodenal switch procedures an applicant must provide the following:  1. Must be credentialed to perform Advanced Laparoscopic Procedures; AND 2. Completion of an approved Minimally Invasive Surgery fellowship with performance of more than ten (10) Laparoscopic Gastric Banding procedures, and a statement from a program director confirming competence after the minimum number of procedures (each case performed independently under supervision) is reached; OR 3. If the applicant has obtained his/her training in a General Surgery residency program or mini-Fellowship sanctioned by the American Society of Bariatric Surgery (ASBS), the applicant must provide documentation of having performed at least fifteen (15) Laparoscopic biliopancreatic diversion/duodenal switch procedures; OR 4. Documentation of attendance at an approved course; AND assists a surgeon with Laparoscopic biliopancreatic diversion/duodenal switch privileges on five (5) cases followed by five (5) proctored cases. If a surgeon does not have a regular practice in advanced foregut laparoscopic surgery, the number of cases required would be ten (10) assisting and ten (10) proctored cases; OR 5. If performed in another hospital/facility document successful outcomes of ten (10) Laparoscopic biliopancreatic diversion/duodenal switch procedures performed as the primary surgeon. Documentation will include an evaluation from the department chief/designee who has direct

General Surgery/Surgical Critical Care Delineation of Privileges

Approved: 03/2011



	REAPPOINTMENT:  1. Documentation of completion of at least twenty (20) hours of Category 1 CME that is specific to bariatric surgery during each two (2) year period; AND  2. Documentation of successful performance of at least twenty—five (25) bariatric cases as the primary operating surgeon of each type for which privileges are being sought within the proceeding two (2) year period.	
Anal & Rectal Physiology Procedures	For Anal & Rectal Physiology Procedures, an applicant must provide the following:  1. Evidence of completing a fellowship training program in Colon and Rectal Surgery,  OR  2. Documentation of having completed ten (10) Anal & Rectal Physiology cases proctored by a surgeon with these privileges.	
PRIVILEGE	CREDENTIALING CRITERIA  For use of a radio frequency energy delivery system for the treatment of fecal incontinence,	REQUESTED
Energy Delivery System For The Treatment Of Fecal Incontinence	<ol> <li>an applicant must provide the following:         <ol> <li>Documentation from the Training Director of his/her fellowship/residency program stating that the applicant is competent in Anal Rectal Procedures; AND</li> <li>Documentation of having completed an approved course offered by the radio frequency energy delivery system for the treatment of fecal incontinence manufacturer. OR</li> <li>Documentation of an approved ACGME training program in colon/rectal surgery; AND documentation of having completed an approved course offered by the radio frequency energy delivery system for the treatment of fecal incontinence manufacturer. OR</li> <li>For applicants who have not completed a colon/rectal ACGME approved training program, documentation of the completion of ten (10) anal rectal procedures supervised by a surgeon holding anal rectal privileges; AND documentation of having completed an approved course offered by the radiofrequency energy delivery system for the treatment of fecal incontinence manufacturer.</li> </ol> </li> <li>REAPPOINTMENT:         <ol> <li>To maintain full use of radiofrequency energy delivery system for the treatment of fecal incontinence privileges, the surgeon must perform a minimum of five (5) procedures per calendar year. If a practitioner performs less than the minimum required procedures, the practitioner will need to have three (3) proctored case.</li> </ol> </li> </ol>	
☐ Exploratory Thoracotomy	For Advanced Trauma Procedures an applicant must provide the following:  Have completed a Fellowship program in ACGME approved Surgical Critical Care	
<ul> <li>□ Video Assisted         Evaluation of the         Diaphragm</li> <li>□ Video Assisted         Drainage of Clotted         Hamathoray</li> </ul>	Fellowship, an Acute Care Surgery Fellowship or an approved Fellowship in Trauma Surgery, <b>OR</b> have completed three (3) of these procedures during the preceding two (2) years, with a letter from the Chief of Surgery documenting safe performance of these procedures.	

General Surgery/Surgical Critical Care Delineation of Privileges

Approved: 03/2011



PRIVILEGE	CREDENTIALING CRITERIA	REQUESTED
Laser Privileges	Provide the certificate of training for each laser privileged requested.	
	Laser Privileges O Argon O CO2 O KTP O YAG	
Moderate to Deep Sedation/Analgesia	Initial / Reappointment  For Moderate to Deep Sedation/Analgesia privileges an applicant must provide the following:  ➤ Current Age Appropriate Life Support card of:  • ACLS / ATLS/ PALS /NRP, and  ➤ Successful completion of the UHS Sedation Module	

□ SURGICAL CRITCAL CARE for providers who are not board eligible in general surgery

Formal training: Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association accredited residency in Anesthesiology or Emergency Medicine and a postgraduate subspecialty training in an ACGME accredited surgical critical care training program of at least 12 months' duration. Current subspecialty certification or eligibility to subspecialty certification in Surgical Critical Care by the American Board of Surgery.

□ Critical Care Core Privileges: Critically ill patients have sustained or are at risk of developing life threatening, single or multi organ system failure due to disease or injury. The scope of practice includes the ability to evaluate, diagnose, and provide treatment and/or consultation to critically ill adult patients who are in need of intensive care-related interventions to treat these conditions. These patients are best cared for by specialists in Surgical Critical Care, who provide for the needs of these patients through immediate and continuous observation and intervention so as to restore health and prevent complications. The core privileges in this specialty include the procedures listed below and other procedures that are extensions of the same techniques and skills.

Basic Critical Care Core Procedures: Please check requested procedures

Routine and difficult airway management (including emergency cricothyroidotomy)
Provision of all levels of sedation, anesthesia, and neuromuscular blockade
Invasive and non-invasive ventilator management including the application of various modes
Diagnostic and therapeutic bronchoscopy with bronchoalveolar lavage and use of a protected specimen brush
ACLS protocols including cardioversion and defibrillation
Operation of hemodynamic monitoring systems
Cardiac output determination by thermodilution and other techniques
Insertion and management of thoracostomy tubes

General Surgery/Surgical Critical Care Delineation of Privileges

Approved: 03/2011



Diagnostic lumbar puncture
Diagnostic and therapeutic thoracentesis
Emergency pericardiocentesis
Critical care focused ultrasonography
Insertion of central venous, arterial, and pulmonary arterial balloon flotation catheters including ultrasound
guided techniques
Insertion of intravenous hemodialysis catheters
Management of the patient with intraortic balloon counter pulsation devises (not insertion)
Management of the patient receiving Extracorporeal membrane oxygenation or ECMO (not insertion)
Paracentesis
Special Surgical Critical Care Procedures: The following procedures require special training and are not considered part of basic privileges. If the applicant wishes to have any of the following they must meet established minimum threshold criteria (please mark privileges that you are requesting and providing supporting documentation):

PRIVILEGE	CREDENTIALING CRITERIA	REQUESTED
Percutaneous  Dilatational Tracheostomy	Initial: Specific training during an ACGME accredited critical care fellowship training program; OR a certificate of attendance from a formal procedural training course that covers the technical, cognitive, and mechanical aspects of percutaneous tracheostomy. Demonstrated current competence and evidence of the performance of at least 7 proctored procedures during or after training.	
	Reappointment: Demonstrated current competence and evidence of the performance of at least 5 percutaneous tracheostomy procedures with acceptable outcomes in the past 24 months based on the results of ongoing professional practice evaluation and outcomes.	
Percutaneous endoscopic gastrostomy tube placement	Initial: Specific training during an ACGME accredited critical care fellowship training program; OR a certificate of attendance from a formal procedural training course that covers the technical, cognitive, and mechanical aspects of percutaneous tracheostomy. Demonstrated current competence and evidence of the performance of at least 7 proctored procedures during or after training.	
	Reappointment: Demonstrated current competence and evidence of the performance of at least 5 percutaneous gastrostomy procedures with acceptable outcomes in the past 24 months based on the results of ongoing professional practice evaluation and outcomes.	



PRIVILEGE	CREDENTIALING CRITERIA	REQUESTED
Resuscitative Thoracotomy	Initial: Specific training during an ACGME accredited critical	
	care fellowship training program; OR a certificate of attendance	
	from a formal procedural training course that covers the	
	technical, cognitive, and mechanical aspects of percutaneous	
	tracheostomy. Demonstrated current competence and evidence	
	of the performance of at least 7 proctored procedures during or after training.	
	Reappointment: Demonstrated current competence and	
	evidence of the performance of at least 5 percutaneous	
	gastrostomy procedures with acceptable outcomes in the past 24	
	months based on the results of ongoing professional practice	
	evaluation and outcomes.	

#### **EMERGENCY PRIVILEGES**

In the case of an emergency, any practitioner, to the degree permitted by his/her license and regardless of department, staff status or clinical privileges, shall be permitted to do, and be assisted by hospital personnel in doing everything possible to save the life of a patient or to save a patient from serious harm. An "emergency" is defined as a condition in which serious or permanent harm would result to a patient or in which the life of a patient is in immediate danger and any delay in administering treatment would add to that danger.

## ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at University Health System, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Print Name		
Applicant's Signature	Date	



### DEPARTMENT CHAIR RECOMMENDATION

I have reviewed the requested clinical p	rivileges and supporting documentation for the above-named applicant and:
<ul> <li>□ Recommend all requested privilege</li> <li>□ Recommend privileges with the for</li> <li>□ Do not recommend (Please provide expression)</li> </ul>	lowing conditions/modifications
Privilege	Condition/modification/explanation
Comments:	
Connicitis.	
Division Head	Date
Print Name	
Department Chair	Date
Print Name	



# DELINEATION OF CLINICAL PRIVILEGES INTERNAL MEDICINE / CARDIOLOGY

NAMI	C:	
Educa	tion:	MD or DO
Medicii		nal training: Successful completion of an ACGME or AOA accredited residency in Internal wed by board certification by the American Board of Internal Medicine, or equivalent, within 4 years of ent.
		Initial Appointment - Required previous experience: The successful applicant must provide supporting documentation demonstrating an active practice, reflective of the scope of privileges requested, during the past 12 months or successful completion of an accredited residency in the past 12 months.
		<b>Reappointment - Required previous experience:</b> Demonstrated current competence and evidence of an active practice for the past 24 months.
	patient review	ER & FOLLOW Core Privileges: Perform the preadmission and history and physical, refers to the hospital, order noninvasive outpatient diagnostic tests and services, visit patients in the hospital, medical records, consult with attending physicians, and observe diagnostic or surgical procedures with proval of the attending physician or surgeon.
	to add	ERNAL MEDICINE Core Privileges: Admit, evaluate, diagnose, treat and provide consultation plescent and adult patients with common and complex illnesses, diseases, and functional disorders of circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric and purinary systems.
	proce	c Internal Medicine Core Procedures: This is not intended to be an all-encompassing edures list. If you wish to exclude any procedures, please strike through the procedures that do not wish to request, and then initial and date.
	Arthro Drawi Excisi Incisio Inserti	ninal paracentesis secentesis and joint injection ng of arterial blood on of skin and subcutaneous tumors, nodules, and lesions on and drainage of abscesses on and management of central venous catheters and arterial lines retation of EKGs

Management of burns, superficial and partial thickness



Nasogastric Tube Insertion and Gastric Lavage Parenteral Hyperalimentation Performance of simple skin biopsy Peripheral Nerve Blocks Placement of anterior and posterior nasal hemostatic packing Placement of peripheral venous line Removal of nonpenetrating foreign body from the eye, nose, or ear

Thoracentesis

Minimal Sedation (Anxiolysis) - a drug-induced state during which patients respond normally to verbal commands. Although cognitive function and coordination may be impaired, ventilatory and cardiovascular functions are unaffected.

SPECIAL INTERNAL MEDICINE PROCEDURES: The following procedures require special training and are not considered part of basic privileges, if applicant wishes to have any of the following they must meet established minimal threshold criteria (mark selected privileges and provide supporting documentation as outlined below):

Moderate to Deep Sedation/Analgesia	For Moderate to Deep Sedation/Analgesia privileges an applicant must provide the following:  Current Age Appropriate Life Support card of:  • ACLS / ATLS/ PALS /NRP, AND  Successful completion of the UHS Sedation Module
ŭ	ACLS / ATLS/ PALS /NRP, AND
Ih.	· · · · · · · · · · · · · · · · · · ·
I b D	> Successful completion of the UHS Sedation Module
Ih Dt	
Lumpar runciure	Initial Privileges: Successful completion of an ACGME or AOA accredited postgraduate training program
	which included training in lumbar puncture, or completion of hands-on training in lumbar puncture under the
	supervision of a qualified physician preceptor; AND demonstrate current competence and evidence of the
200	performance of at least five (5) lumbar punctures in the past 12 months or completion of training in the past
	12 months.
	Reappointment: Demonstrate current competence and evidence of at least five (5) lumbar punctures in the
	past 24 months.
Exercise Tolerance Testing	Initial Privileges: Successful completion of an ACGME or AOA accredited residency in internal medicine
	that included a minimum of four (4) weeks or the equivalent of training in the supervision and interpretation
	of exercise testing and evidence that the training included participation in at least fifty (50) exercise
	procedures; AND demonstrated current competence and evidence of the performance of at least twenty-five
	(25) exercise tests in the past 12 months or completion of training in the past 12 months.
	Reappointment: Demonstrated current competence and evidence of the performance of at least fifty (50)
	exercise tests in the past 24 months.
Ventilator Management	Initial Privileges: For ventilator cases not categorized as complex (up to 36 hours), successful completion of
ı j	an ACMGE or AOA accredited post graduate training program that provided the necessary cognitive and
up to 36 hours)	technical skills (basic training) for ventilator management not categorized as complex; AND demonstrated
• ′	current competence and evidence of the management of at least five (5) mechanical ventilator cases (e.g., not
	complex) in the past 12 months or completion of training in the past 12 months.
	Reappointment: Demonstrated current competence and evidence of the management of at least five (5) mechanical ventilator cases (e.g., not complex) in the past 24 months.
- 1	Ventilator Management (not complex including CPAP –



REQUESTED	PRIVILEGE	CREDENTIALING CRITERIA
	Insertion and Management of	Initial Privileges: Successful completion of an ACMGE or AOA accredited post graduate training program
	Pulmonary Artery Catheter	that included training in pulmonary artery catheter placement or completion of a hands-on CME course; AND
	(PAC)	demonstrated current competence and evidence of the performance (as the primary operator) of at least five (5)
		PAC's in the past 12 months or completion of training in the past 12 months.
		Reappointment: Demonstrated current competence and evidence of the performance (as the primary operator)
		of at least five (5) PACs in the past 24 months.

	CARDIOLOGY
ano	inimal formal training: Successful completion of the internal medicine minimal formal training criterial completion of an approved fellowship in cardiology. Demonstrate current competence and evidence the an active practice in cardiology for the past 12 months or completion of training in the last 12 onths.
	<u>CARDIOLOGY MEDICINE Core Privileges:</u> Ability to admit, work-up, diagnose, and provide treatment and consultative services to patients of all ages presenting with conditions, injuries, and diseases of the organs of the heart or cardiovascular system: the heart, coronary arteries, other mediastinal contents, and circulatory system.
	Basic Cardiology Core Procedures: To include the core privileges in Internal Medicine plus the following. This is not intended to be an all-encompassing procedures list. If you wish to exclude any procedures, please strike through the procedures that you do not wish to request, and then initial and date.

#### **ELECTROCARDIOGRAPHY:**

EKG Interpretation
Stress Testing to include
1. Pharmacologic Stimulation
Stress Echo

### **CARDIAC CATHETERIZATION:**

Endomyocardial Biopsies
Aortography
Atrial Injection Angiography
Bypass Graft Angiography
Left Heart Catheterization
Pericardiocentesis
Pulmonary Angiography
Retrieval of Intravascular Foreign Body
Right Heart Catheterization
Selective Coronary Arteriography
Selective Internal Mammary Arteriography
Selective Renal Arteriogram

#### **ECHOCARDIOLOGY:**

Trans Thoracic Echo Interpretation Two Dimensional Interpretation

#### **CLINICAL PROCEDURES:**

Arterial Line Placement
Central Venous Access
Intra-aortic Balloon Insertion & Management
Swan Ganz Catheter Placement
Ventilator Institution and Management

### **PACEMAKERS:**

**Temporary Pacemaker Placement** 



Ventricular Angiography

SPECIAL CARDIOLOGY PROCEDURES: The following procedures require special training and are not considered part of basic privileges, if applicant wishes to have any of the following they must meet established minimal threshold criteria (mark selected privileges and provide supporting documentation as outlined below):

REQUESTED	PRIVILEGE	CREDENTIALING CRITERIA
	Moderate to Deep Sedation/Analgesia	An applicant must provide the following:  a. Current Age Appropriate Life Support card of:  ACLS / ATLS/ PALS /NRP, AND  b. Successful completion of the UHS Sedation Module
	Fluoroscopy	1. 8 Hours of Category I CMEU credit on radiation safety awareness training through an accredited program 2. 1 Hour Fluoroscopic machine training demonstrating use of machine & radiation safety practices a. Provided by a Licensed medical physicist, or b. Physician trained by a radiologist or licensed medical physicist (please note that if this one occurs then there needs to be a specific audit trail back to the trainer physician's training) 3. Annual Fluoroscopy Radiation Safety training regarding fluoroscopy techniques, Image Gently, and Image Wisely
		INTERVENTIONAL CARDIOLOGY
	Coronary Angioplasty	An applicant must provide:  a. Documentation of having completed an approved Fellowship in Interventional Cardiology; OR  b. Documentation of holding the privilege at another facility and successful completion of seventy-five (75 cases documented by that Department Chairman.
	Intra-coronary Thrombolysis	An applicant must provide:  a. Documentation of having successfully completed an approved Fellowship in Interventional Cardiology OR  b. Documentation of holding the privilege at another facility and successful completion of seventy-five (75 cases documented by that facility Department Chairman.
	Rotoblater Atherectomy	An applicant must provide:  a. Documentation of having successfully completed an approved Fellowship in Interventional Cardiolog  OR  b. Documentation of holding privileges in Angioplasty at another facility and successful completion of (2) cases documented by the facility's Chairman.
	Excimer Laser Coronary Angioplasty	An applicant must provide;  a. Documentation of at least ten (10) procedures during his/her training or career; AND  b. Documentation of the successful completion of an accredited training program.
	Directional Coronary Atherectomy	An applicant must provide:  a. Documentation of having successfully completed an approved Fellowship in Interventional Cardiology  OR  b. Documentation of holding privileges in Angioplasty at another facility and successful completion of five (5) cases documented by the Department Chairman.
	Diagnostic Cerebral Arteriography	An applicant must provide:  a. Documentation of having successfully completed an approved Fellowship in Interventional Cardiolog where endovascular procedures are emphasized; OR  b. Documentation of having successfully completed fifty (50) arch procedures (Lima, carotids, subclavian vertebral) where the vessels were successfully injected; AND documentation of the successful completeic of an accredeited course on Neurovascular Anatomy; AND documentation of having ten (10) Cerebrangiogram cases supervised by a physician holding the privilege.
REQUESTED	PRIVILEGE	CREDENTIALING CRITERIA
	Carotid Stenting	In addition to specifying minimal knowledge and clinical skills, we recommend a minimum of 30 diagnostic cervice cerebral angiograms, with half as the primary operator, and a minimum of 25 carotid stent procedures, with half as the primary operator. Successful completion of an industry sponsored course may also be desirable to ensure familiarity.



 	with the nuances of various devices; however, this should not be equated with having achieved competency in the overall procedure.
Trans Septal	An Applicant must provide:  a. Documentation of competency having successfully completed an approved Fellowship in Interventiona Cardiology or Electrophysiology; OR  b. Documentation of holding the privilege at another facility and successful completion of ten (10) cas documented by that facility Department Chairman; OR  c. Letter from the Program Director supporting competency of this privilege.
Balloon Valvuloplasty	An Applicant must provide:  a. Documentation of having successfully completed an approved Fellowship in Interventional Cardiology and twenty-five(25) cases; OR  b. Documentation of holding the privilege at another facility and successful completion of twenty-five(25 case documented by that facility Department Chairman; OR  c. Letter from the Program Director supporting competency of this privilege.
Transcatheter Aortic Valve Replacement (TAVR)	An applicant must provide documentation of attendance at a Federal Drug Administration (FDA) approved course in TAVR. The Cardiothoracic Surgeon must be a member of a team performing TAVR that includes a physician credentialed in TAVR and Peripheral Vascular Angiography/Interventional Privileges AND  a. The first three (3) cases will be proctored in University Health System; OR  b. Documentation of current privileges in the use of the TAVR in another hospital system to include documented successful completion of three (3) cases in that system within the last 12 months.
LARIAT Suture Delivery Devise	An applicant must provide documentation of attendance at a Federal Drug Administration (FDA) approved course in LARIAT Suture Delivery Device. Have pericardiocentesis and trans septal privileges; AND  a. The first four (4) cases will be proctored in University Health System; OR  b. Documentation of current privileges in the use of the LARIAT in another hospital system to include documented successful completion of four (4) cases in that system within the last 12 months.
CPS/Left Heart Assist – Placement/ Management	An applicant must:  a. Have completed the manufacture's certification course AND have been proctored on at least five (5 patients; OR  b. Have a letter from the director of his/her interventional cardiology fellowship training documenting the he/she is proficient in device implantation for occlusion of septal defects (surgical created and native AND have evidence of having done at least five (5) cases in the previous 2 years; AND  c. In addition, as part of the procedure, the Interventional Cardiologist must have current privileges is Intracardiac Echocardiography (ICE) or Transesophageal Echo (TEE); OR the procedure must be don with a Cardiologist who has privileges in ICE or TEE.
Watchman	An applicant must meet the following criteria:  1. Provide documentation of being Board Certified or Board Eligible in Clinical Cardiac Electrophysiology of Interventional Cardiology  2. Have existing clinical privileges to perform transseptal catheterization and pericardiocentesis  3. Complete Phase I and Phase II of the Boston Scientific WATCHMAN implanter requirements  4. Attend and obtain the certificate of participation for the Boston Scientific WATCHMAN implanter training course or  1. Provide documentation of being Board Certified or Board Eligible in Clinical Cardiac Electrophysiology or Interventional Cardiology  2. Provide documentation of current clinical privileges to perform the WATCHMAN procedure in another hospital system  3. Document successful independent completion of at least four WATCHMAN procedures within the last 12 months
	ELECTROPHYSIOLOGY
Biventricular Pacing	An applicant must provide: Documentation of being Board Certified or Board Eligible in Cardiovascular Disease AND documentation of five (5) successful cases.



	Implantation of ICD Leads and/or generator (other than by thoracotomy)	An applicant must be granted privileges for Permanent Pacemakers and provide:  a. Documentation of having been Board Certified or Board Eligible in Clinical Cardiac Electrophysiology AND documentation of successful completion of ten (10) cases within the past 24 months; OR  b. Documentation of having successfully completed a one (1) year Heart Failure/Transplant Fellowship program to include written documentation from the program director supporting his/her clinical competency in the implantation of ICD leads and/or generator (other than by thoracotomy) AND documentation of successful completion of ten (10) cases within the past 24 months; OR  c. Documentation of having successfully implanted ICD system on or before December 31, 1998, the last date for admission to the American Board of Internal Medicine examination for Added Qualifications in Clinical Electrophysiology without having completed a fellowship in Clinical Cardiac Electrophysiology, AND documentation of successful completion of 25 cases over the past 5 years.
REQUESTED	PRIVILEGE	CREDENTIALING CRITERIA
	Invasive Electrophysiology	An applicant must provide: Documentation of having been Board Certified or Board Eligible in Cardiovascular Diseases AND documentation of successful completion of 25 cases.
	Lead Extraction Procedure	An applicant must provide: Documentation of having been Board Certified or Board Eligible in Clinical Cardiac Electrophysiology AND documentation of successful completion of 5 cases.
	Permanent Pacemaker	An applicant must provide;
	Placement	a. Documentation of having been Board Certified or Board Eligible in Clinical Cardiac Electrophysiology     AND documentation of successful completion of 25 cases, OR     b. Documentation of having been Board Certified or Board Eligible Cardiovascular Diseases AND documentation of successful completion of 50 cases
	Arctic Front Cryoablation	An applicant must demonstrate the following:  1. Successful completion of an ACGME approved Fellowship training program in Cardiac Electrophysiology; AND  2. A certificate of attendance of the Medtronic Arctic Front Masters Program; AND  3. Supervision of the first ten (10) procedures by a qualified Medtronic representative.
		ECHOCARDIOLOGY
	Transesophageal Echocardiography (TEE)	An applicant must provide:  1. A letter from the applicants training program director attesting to the successful completion of training in TEE to include the performance of ten (10) TEE cases, OR  2. Documentation of twenty (20) hours of category I CME specific to TEE and ten (10) supervised cases by a proctor currently holding TEE privileges, OR  3. Testamur or certification status with the National Board of Echocardiography and documentation of ten (10) cases in the past two (2) years, OR  4. A letter from the Department Chairman from another facility where the applicant currently holds TEE privileges attesting to his/her current competence in TEE and documentation of ten (10) cases in the past two (2) years.  At reappointment, the applicant must provide documentation of ten (10) TEE cases AND completion of a category I CME course related to TEE within the past two years.
	Intracardiac Echo	An applicant must provide:  Documentation of having completed approved training in Intracardiac Echo and interpretation of images.



		NUCLEAR CARDIOLOGY
	Nuclear Imaging	An applicant must provide:  1. Board certified in Certification Board of Nuclear Cardiology;  2. For recent graduates, they must also have passed the cardiology boards and satisfied all the COCATS level II requirements, as documented by a preceptor letter. The COCATs requirements in essence are 4-6 months of additional training; at least 80 hours didactic classroom training; at least 300 scan interpretations, hands on experience for 35 patients (25 perfusion; 10 MUGAs), work experience, and additional experience. Logbook documentation of cases is required. Training within an ACGME program is highly recommended.  3. If you are not CBNC certified, Texas requires a preceptor letter documenting pretty much the same thing: 620 supervised clinical hours, and 80 didactic hours, 300 cases, including 10 MUGAs.
REQUESTED	PRIVILEGE	CREDENTIALING CRITERIA
For privileges to :	supervise and interpret the	
following exams		The applicant must meet the criteria from one of the three (3) pathways below:
	Carotid Duplex Ultrasound	Formal Training Program Pathway: Completion of a residency or fellowship that includes appropriate didactic and
	Peripheral Arterial Physiologic	clinical vascular laboratory experience as an integral part of the program, AND
	test (e.g. extremity pressures,	For those testing areas in which training is provided, the physician should have experience in interpreting the following
	Doppler waveforms, Exercise	minimum number of diagnostic studies while under supervision. This must be documented by a letter from the directo
	testing, Reactive Hyperemia)	of the training program verifying the areas of testing and the extent of the training and experience:
	Peripheral Arterial Duplex	100 - Carotid Duplex Ultrasound Cases
	Ultrasound Cases	100 - Peripheral Arterial Physiologic tests (e.g. Extremity Pressures, Doppler Waveforms,
	Venous Duplex Ultrasound	Exercise Testing, Reactive Hyperemia),
	Visceral Vascular Duplex	100 - Peripheral Arterial Duplex Ultrasound Cases
	Ultrasound	100 - Venous Duplex Ultrasound Cases
		Informal Training Pathway: Documentation of a minimum of forty (40) hours of relevant Category I CME credit within the past three (3) years. A minimum of twenty (20) hours must be met with courses specifically designed to provide knowledge of the techniques, limitations, accuracies, and methods of interpretation of the non-invasive vascula laboratory test the physician will interpret. The remaining twenty (20) hours may be dedicated to appropriate clinical topics relevant to vascular laboratory testing. At least eight (8) of these hours must be specific to each of the testing areas to be interpreted, AND
		Documentation of eight (8) hours of supervised practical experience observing or participating in testing procedures in an ICVAL accredited laboratory for each area of testing for which the physician will interpret. This experience must be documented with a letter from the Medical Director of the laboratory where the experience was obtained, AND 100 - Carotid Duplex Ultrasound Cases
		100 – Peripheral Arterial Physiologic tests (e.g. extremity pressures, Doppler waveforms, Exercise Testing Reactive Hyperemia),
	4	100 – Peripheral Arterial Duplex Ultrasound Cases
		100 - Venous Duplex Ultrasound Cases 75 - Visceral vascular Duplex Ultrasound Cases
		Established Practice Pathway: Documentation of the physician having worked in a vascular laboratory for at lea
		three (3) years and documentation that he/she has interpreted the following minimum number of diagnostic studies
		the specific areas that will be interpreted:
		300 - Carotid Duplex Ultrasound Cases
		300 - Peripheral Arterial Physiologic tests (e.g. extremity pressures, Doppler waveforms,
		Exercise Testing, Reactive Hyperemia),
		300 - Peripheral Arterial Duplex Ultrasound Cases
		300 - Venous Duplex Ultrasound Cases
	4	225 - Visceral vascular Duplex Ultrasound Cases



	neam System
	At reappointment all applicants must show evidence of maintaining current knowledge by participation in fifteen (15) hours in CME courses every three years which are relevant to vascular testing. Ten (10) of these hours must be Category I CME. This course content must address the principles, instrumentation, techniques, or interpretation of noninvasive vascular testing. If the medical-dental staff member has completed formal training in the past three (3) years, has successfully acquired an appropriate credential in vascular technology in the past three (3) years, has successfully acquired a credential in vascular testing interpretation within the last three (3) years, the CME requirement will be considered fulfilled.
staff status or clinical privileges, possible to save the life of a patient ent from serious harm. An "emerga patient or in which the life of a patient danger.  ACKNOWLEDGEMENT Of I have requested only those priperformance I am qualified to performance I am qualified to performance I am patient applicable generally and applicable generally applicable generally and applicable generally generally generally generally generally generally generall	practitioner, to the degree permitted by his/her license and regardless of department, shall be permitted to do, and be assisted by hospital personnel in doing everything at or to save a pati gency" is defined as a condition in which serious or permanent harm would result to patient is in immediate danger and any delay in administering treatment would add to
Applicant's Signature	Date
applicant and:  ☐ Recommend all requested ☐ Recommend privileges with	ed clinical privileges and supporting documentation for the above-named
Privilege	Condition/modification/explanation
Division Hood Signature	Nate

Date

**Department Chair Signature** 



### FOR MEDICAL STAFF USE ONLY

The clinical privileges were reviewed, approv	ved and documented in the meeting minutes of:
Credential Committee	
Executive Committee	Date
Board of Managers	Date



### **DELINEATION OF CLINICAL PRIVILEGES** INTERNAL MEDICINE - GASTROENTEROLOGY

NAM	E:		
Education:		MD or DO	
n Inte	ernal Me	nal training: Successful completion of an ACGME or AOA accredited residency dicine followed by board certification by the American Board of Internal Medicine, within 4 years of initial appointment.	
		Initial Appointment - Required previous experience: The successful applicant must provide supporting documentation demonstrating an active practice, reflective of the scope of privileges requested, during the past 12 months or successful completion of an accredited residency in the past 12 months.	
		Reappointment - Required previous experience: Demonstrated current competence and evidence of an active practice for the past 24 months.	
	physic servic physic	ER & FOLLOW Core Privileges: Perform the preadmission and history and cal, refers patient to the hospital, order noninvasive outpatient diagnostic tests and es, visit patients in the hospital, review medical records, consult with attending cians, and observe diagnostic or surgical procedures with the approval of the ling physician or surgeon.	
	provi all aş circu	ERNAL MEDICINE Core Privileges: Admit, evaluate, diagnose, treat and de consultation to adolescent and adult patients (Dermatology may treat patients of ges) with common and complex illnesses, diseases, and functional disorders of the latory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, penteric and genitourinary systems.	
	enco	c Internal Medicine Core Procedures: This is not intended to be an all- impassing procedures list. If you wish to exclude any procedures, please strike tigh the procedures that you do not wish to request, and then initial and date.	
	Arthro Drawi Excisi Incisio	ninal paracentesis ocentesis and joint injection ng of arterial blood on of skin and subcutaneous tumors, nodules, and lesions on and drainage of abscesses on and management of central venous catheters and arterial lines	



Interpretation of EKGs
Lumbar Puncture
Management of burns, superficial and partial thickness
Nasogastric Tube Insertion and Gastric Lavage
Parenteral Hyperalimentation
Performance of simple skin biopsy
Peripheral Nerve Blocks
Placement of anterior and posterior nasal hemostatic packing
Placement of peripheral venous line
Removal of nonpenetrating foreign body from the eye, nose, or ear
Thoracentesis

Minimal Sedation (Anxiolysis) – a drug-induced state during which patients respond normally to verbal commands. Although cognitive function and coordination may be impaired, ventilatory and

cardiovascular functions are unaffected.

**SPECIAL INTERNAL MEDICINE PROCEDURES:** The following procedures require special training and are not considered part of basic privileges, if applicant wishes to have any of the following they must meet established minimal threshold criteria (please mark the privileges your are requesting and provide supporting documentation):

REQUESTED	PRIVILEGE	CREDENTIALING CRITERIA
	Moderate to Deep Sedation/Analgesia	For Moderate to Deep Sedation/Analgesia privileges an applicant must provide the following:
		<ul> <li>Current Age Appropriate Life Support card of:</li> <li>ACLS / ATLS/ PALS /NRP, AND</li> <li>Successful completion of the UHS Sedation Module</li> </ul>
	Exercise Tolerance Testing	Initial Privileges: Successful completion of an ACGME or AOA accredited residency in internal medicine that included a minimum of four (4) weeks or the equivalent of training in the supervision and interpretation of exercise testing and evidence that the training included participation in at least fifty (50) exercise procedures; AND demonstrated current competence and evidence of the performance of at least twenty-five (25) exercise tests in the past 12 months or completion of training in the past 12 months.  Reappointment: Demonstrated current competence and evidence of the performance of at least fifty (50) exercise tests in the past 24 months.



University Health System

	Management   Initial Privileges: For ventilator cases not categorized as
(not comple	x including   complex (up to 36 hours), successful completion of an
CPAP – up	to 36 hours) ACMGE or AOA accredited post graduate training program
_	that provided the necessary cognitive and technical skills
	(basic training) for ventilator management not categorized as
	complex; AND demonstrated current competence and
	evidence of the management of at least five (5) mechanical
	ventilator cases (e.g., not complex) in the past 12 months or
	completion of training in the past 12 months.
	Reappointment: Demonstrated current competence and
	evidence of the management of at least five (5) mechanical
	ventilator cases (e.g., not complex) in the past 24 months.
Insertion a	Initial Privileges: Successful completion of an ACGME or
Manageme	nt of AOA accredited post graduate training program that
Pulmonary	Artery included training in pulmonary artery catheter placement or
Catheter (I	(AC) completion of a hands-on CME course; AND demonstrated
	current competence and evidence of the performance (as the
	primary operator) of at least five (5) PAC's in the past 12
	months or completion of training in the past 12 months.
	Reappointment: Demonstrated current competence and
	evidence of the performance (as the primary operator) of at
	least five (5) PACs in the past 24 months.

### ☐ GASTROENTEROLOGY

Minimal formal training: Successful completion of an ACGME or AOA accredited residency in Internal Medicine and completion of an approved fellowship in Gastroenterology. Demonstrate current competence and evidence of an active practice in Gastroenterology for the past 12 months or completion of training in the last 12 months.

GASTROENTEROLOGY Core Procedures: To include the core privileges in Internal Medicine plus the following. This is not intended to be an all-encompassing procedures list. If you wish to exclude any procedures, please strike through the procedures that you do not wish to request, and then initial and date.

Colonoscopy +/- biopsy and/or polypectomy
Flexible sigmoidoscopy +/- biopsy and/or polypectomy
Esophagoscopy +/- biopsy
Upper endoscopy (EGD) +/- biopsy and/or hemostasis therapy
Percutaneous endoscopic gastrostomy
Liver biopsy
Esophageal dilation (via guidewire or balloon)

3 of 6

GASTROENTROLOGY Approved – 3/2011

Revised - 3/2012, 5/2012, 2/2013, 5/2013, 10/2013, 06/2014, 8/2016, 07/2018, DRAFT 06/2020

Reviewed by CC: 11/2019



Endoluminal stent placement Ambulatory pH monitoring Esophageal manometry

**SPECIAL REQUESTS FOR GASTROENTEROLOGY:** The following procedures require special training and are not considered part of the basic privileges. If the applicant wishes to have any of the following they must meet established minimal threshold criteria.

### <PLEASE CHECK APPROPRIATE BOXES FOR PRIVILEGES BEING REQUESTED>

Endoscopic ultrasound +/- fine needle aspiration
ERCP with or without sphincterotomy, biopsy, balloon dilation, and/or stent placement
Capsule endoscopy

PRIVILEGE REQUESTED	PRIVILEGE	CREDENTIALING CRITERIA
	Fluoroscopy	1. 8 Hours of Category I CMEU credit on radiation safety awareness training through an accredited program. 2. 1 Hour Fluoroscopic machine training demonstrating use of machine & radiation safety practices  a. Provided by a Licensed medical physicist, or  b. Physician trained by a radiologist or licensed medical physicist (please note that if this one occurs then there needs to be a specific audit trail back to the trainer physician's training)  3. Annual Fluoroscopy Radiation Safety training regarding fluoroscopy techniques, Image Gently, and Image Wisely
	Moderate to Deep Sedation/Analgesia	An applicant must provide the following:  > Current Age Appropriate Life Support card of:  > ACLS / ATLS / PALS /NRP, and  > Successful completion of the UHS Sedation Module
	Endoscopic Submucosal Dissection (ESD)	An applicant must provide the following:  The American Society for Gastrointestinal Endoscopy (ASGE) course in ESD  Olympus ESD Master Class Part I

### **EMERGENCY PRIVILEGES**

In the case of an emergency, any practitioner, to the degree permitted by his/her license and regardless of department, staff status or clinical privileges, shall be permitted to do, and be assisted by hospital personnel in doing everything possible to save the life of a patient or to save a patient from serious harm. An "emergency" is defined as a condition in which serious or permanent harm would result to a patient or in which the life of a patient is in immediate danger and any delay in administering treatment would add to that danger.



### ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at University Hospital, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Applicant's Signature	Date
Print Name:	<u> </u>
DEPARTMENT CHAIR RECOM	IMENDATION
I have reviewed the requested clin applicant and:	nical privileges and supporting documentation for the above-named
<ul> <li>□ Recommend all requested privile</li> <li>□ Recommend privileges with the</li> <li>□ Do not recommend (Please provide)</li> </ul>	following conditions/modifications
Privilege	Condition/modification/explanation
Comments:	
Division Head Signature	Date
Print Name:	

5 of 6



Department Chair Signature	Date	
Print Name:		
FOR MEDICAL ST	AFF USE ONLY	
The clinical privileges were reviewed, approved an	d documented in the meeting minutes of:	
Credential Committee	Date	
Executive Committee	Date	
Board of Managors	Date	



### DELINEATION OF CLINICAL PRIVILEGES NEUROLOGY

NAME: Education:		
		MD or DO
in N	eurology	nal training: Successful completion of an ACGME or AOA accredited residency followed by board certification by the American Board of Psychiatry and equivalent, within 4 years of initial appointment.
		Initial Appointment - Required previous experience: The successful applicant must provide supporting documentation demonstrating an active practice in Neurology, reflective of the scope of privileges requested, during the past 12 months or successful completion of an accredited residency in the past five years.
		Reappointment - Required previous experience: Demonstrated current competence and evidence of an active practice for the past 24 months.
	non-s	ROLOGY Core Privileges: Ability to admit, work-up, diagnose, and provide surgical treatment or consultative services to adult patients, ages >16 years, with ptions made for individuals who are younger and benefit from care by an adult plogist, presenting with medical conditions, injuries and diseases of any aspect of ervous system.
	proce	Lumbar puncture Transcranial Doppler ultrasound

SPECIAL NEUROLOGY PROCEDURES: The following procedures require special training and are not considered part of basic privileges, if applicant wishes to have any of the following



they must meet established minimal threshold criteria (please mark the privileges you are requesting and provide supporting documentation):

REQUESTED PRIVILEGE (Please check requested privileges)	CREDENTIALING CRITERIA	
Botox Injection  Cerebrovascular Ultrasound & Doppler	Initial Privileges: Successful completion of an ACGME or AOA accredited residency in neurology which included	
studies Cisternal Tap	training in requested procedure(s), or documentation of a special course for procedure(s) requested; AND demonstrate	
Muscle and/or Nerve Biopsy	current competence and evidence of the performance of at least 10 procedures in the past 12 months or completion of training in the past five (5) years.  Reappointment: Demonstrated current competence and evidence of the performance of at least 10 procedures in the	
Sphenoidal Electrode Placement		
Vagal nerve Stimulator Programming		
Occipital Nerve Blocks	past 24 months.	
Moderate to Deep Sedation/Analgesia	Initial/Reappointment: For Moderate to Deep Sedation/Analgesia privileges an applicant must provide the following:	
	<ul> <li>Current Age Appropriate Life Support card of:</li> <li>ACLS / ATLS/ PALS /NRP, AND</li> </ul>	
	<ul> <li>Successful completion of the UHS Sedation Module (Initial Application Only)</li> </ul>	

# ☐ ENDOVASCULAR NEUROLOGY Minimal formal training: Successful completion of an ACGME or AOA accredited fellowship training program in Endovascular Surgery followed by board certification by the American Board of Endovascular Surgery, or equivalent, within 4 years of initial appointment. ☐ Initial Appointment - Required previous experience: The successful applicant must provide supporting documentation demonstrating an active practice, in Endovascular Surgery, reflective of the scope of privileges requested, during the past 12 months or successful completion of an accredited fellowship in the past five years. ☐ Reappointment - Required previous experience: Demonstrated current competence and evidence of an active practice for the past 24 months.



- Basic Endovascular Neurology Core Procedures: This is not intended to be an allencompassing procedures list. If you wish to exclude any procedures, please strike through the procedures that you do not wish to request and then initial and date.
  - Cerebral and spinal angiogram
  - Endovascular obliteration of cerebral aneurysms with coils, stents, balloons or liquid embolic agents
  - Thrombolysis and mechanical clot removal for stroke
  - Intracranial angioplasty and stenting Embolization of brain and head and neck arteriovenoius malformations and AV fistulas
  - Embolization of pediatric vascular lesions involving brain, head and neck and spine
  - Embolication and functional testing of the spinal cord and spine vascular lesions
  - Temporary balloon occlusion
  - Intra-arterial chemotherapy and tumor devascularization for head and neck and brain tumors
  - Percutaneous sclerotherapy and transcatheter embolization for vascular malformations in the head and neck
  - Embolization for treatment of epistaxis
  - Thrombolysis of dural sinus thrombosis
  - Petrosal sinus sampling
  - WADA test
  - All other endovascular procedures involving the treatment of central nervous system conditions and head and neck pathology

### ☐ CLINICAL NEUROPHYSIOLOGY

Minimal formal training: Successful completion of an ACGME or AOA accredited fellowship training program in Clinical Neurophysiology, or equivalent followed by board certification by the American Board of Psychiatry and Neurology and subspecialty certification in Clinical Neurophysiology equivalent, within 4 years of initial appointment.

Initial Appointment - Required previous experience: The successful applicant
must provide supporting documentation demonstrating an active practice,
reflective of the scope of privileges requested, during the past 12 months or
successful completion of an accredited fellowship in the past five years.

Reappointment - Required previous experience: Demonstrated current competence and evidence of an active practice for the past 24 months.



- Basic Clinical Neurophysiology Core Procedures: This is not intended to be an allencompassing procedures list. If you wish to exclude any procedures, please strike through the procedures that you do not wish to request and then initial and date.
  - Autonomic testing
  - Electrocoarticography
  - Epilepsy video (EEG) monitoring study performance and interpretation
  - Evoked potential interpretation and monitoring
  - Functional cortical stimulation
  - Intraoperative Monitoring
  - EMG (performance and interpretation)
  - ENG (performance and interpretation)
  - Sleep Recording

### EMERGENCY PRIVILEGES

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#### ACKNOWLEDGEMENT OF PRACTITIONER

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- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Applicant's Signature	Date	
Print Name		

### DEPARTMENT CHAIR RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:



Privilege	Condition/modification/explanation
mments:	



## DELINEATION OF CLINICAL PRIVILEGES NEUROSURGERY

NAME	<b>:</b>	
Education: MD or DO		
in Neu	rologica	al training: Successful completion of an ACGME or AOA accredited residency of Surgery followed by board certification by the American Board of Neurological divalent, within five (5) years of initial appointment.
		Initial Appointment - Required previous experience: The successful applicant must provide supporting documentation demonstrating an active practice, reflective of the scope of privileges requested, during the past 12 months or successful completion of an accredited residency in the past five (5) years ago.
		Reappointment - Required previous experience: Demonstrated current competence and evidence of an active practice for the past 24 months.
	admiss	<b>COSURGERY Core Privileges:</b> Perform surgical procedures (including related sion, consultation, work-up, pre and post-operative care) to correct or treat various ions, illnesses or injuries.
	proce	Neurosurgery Core Procedures: This is not intended to be an all-encompassing dures list. If you wish to exclude any procedures, please strike through the dures that you do not wish to request, and then initial and date.
•	Disc su	ectomy thetic nerve surgery urgery Cervical Thoracic Lumbar
•	Burr H Hydrod Endarte Ligatio Cranio Scalene	cephalus-Shunt procedure erectomy on of carotid artery
•		sy surgery

CervicalThoracicLumbar



- Spinal arthrodesis / fusions
  - Cervical
  - Thoracic
  - Lumbar
- · Peripheral nerve surgery
  - Decompression
  - Laceration repair
- Transsphenoidal surgery
- Minimal sedation (anxiolysis) a drug induced state during which patients respond normally to verbal commands. Although cognitive function and coordination may be impaired, ventilatory and cardiovascular functions are unaffected.

SPECIAL NEUROSURGERY PROCEDURES: The following procedures require special training and are not considered part of basic privileges, if applicant wishes to have any of the following they must meet established minimal threshold criteria (please mark the privileges you are requesting and provide supporting documentation):

PRIVILEGE	CREDENTIALING CRITERIA	REQUESTED
Fluoroscopy	<ol> <li>8 Hours of Category I CMEU credit on radiation safety awareness training through an accredited program.</li> <li>1 Hour Fluoroscopic machine training demonstrating use of machine &amp; radiation safety practices         <ul> <li>a. Provided by a Licensed medical physicist, or</li> <li>b. Physician trained by a radiologist or licensed medical physicist (please note that if this one occurs then there needs to be a specific audit trail back to the trainer physician's training)</li> </ul> </li> <li>Annual Fluoroscopy Radiation Safety training regarding fluoroscopy techniques, Image Gently, and Image Wisely</li> </ol>	(Please check
Laser Privileges	Provide the certificate of training for each laser privileged requested.	requested laser privileges)  O Argon O CO2 O KTP O YAG
Moderate to Deep Sedation/Analgesia	Initial / Reappointment  For Moderate to Deep Sedation/Analgesia privileges an applicant must provide the following:  ➤ Current Age Appropriate Life Support card of:  • ACLS / ATLS/ PALS /NRP, and  ➤ Successful completion of the UHS Sedation Module (Initial Application Only)	



# University Health System

Percutaneous Vertebroplasty or Balloon Kyphoplasty	Initial Privileges: Successful completion of an ACGME or AOA accredited residency training program in neurological surgery, radiology, orthopedic surgery or pain management. Successful completion of a training course in the use of inflatable bone tamp. Successful completion of radiation safety training. Supporting documentation demonstrating active practice of neurological surgery (if residency training completed more than five years ago).  Reappointment: Demonstrated current competence and	
	evidence of the performance of at least 8 cases in the past 24 months or completed a refresher course.	
Intradiscal Electrothermal Therapy	Initial Privileges: Successful completion of an ACGME or AOA accredited residency or fellowship training program in neurological surgery, interventional radiology, orthopedic surgery, neurology, physical medicine and rehabilitation, or anesthesiology. Applicants must provide evidence that their residency or fellowship included discography. Successful completion of a training course in the IDET procedure or receive training and supervision in initial cases by a physician experienced in performing the IDET procedure. Supporting documentation demonstrating active practice of neurological surgery (if residency training completed more than five years ago).	
	<b>Reappointment:</b> Demonstrated current competence and evidence of the performance of at least 4 cases in the past 24 months.	
Myelomeningocele Closure	Initial Privileges: Successful completion of an ACGME or AOA accredited residency or fellowship training program in neurological surgery. Supporting documentation demonstrating active practice of neurological surgery (if residency training completed more than five years ago).  Reappointment: Demonstrated current competence and evidence of the performance of at least 2 cases in the past 24 months.	
Endovascular Neurosurgery	Initial Privileges: Successful completion of approved residency training program in neurological surgery or radiology. Successful completion of approved fellowship training program in Interventional Neuroradiology or Endovascular Surgical Neuroradiology. Supporting documentation demonstrating active practice of neurological surgery (if residency training completed more than five years ago).	
	Basic Endovascular Neurosurgery Core Procedures: This is not intended to be an all-encompassing procedures list. If you wish to exclude any procedures, please strike through the procedures that you do not wish to request, and then initial and date.	



# University Health System

	Health System	
	<ul> <li>Cerebral and spinal angiogram</li> <li>Endovascular obliteration of cerebral aneurysms with coils, stents, balloons or liquid embolic agents</li> <li>Thrombolysis and mechanical clot removal for stroke</li> <li>Intracranial angioplasty and stenting Embolization of brain and head and neck arteriovenoius malformations and AV fistulas</li> <li>Embolization of pediatric vascular lesions involving brain, head and neck and spine</li> <li>Embolication and functional testing of the spinal cord and spine vascular lesions</li> <li>Temporary balloon occlusion</li> <li>Intra-arterial chemotherapy and tumor devascularization for head and neck and brain tumors</li> <li>Percutaneous sclerotherapy and transcatheter embolization for vascular malformations in the head and neck</li> <li>Embolization for treatment of epistaxis</li> <li>Thrombolysis of dural sinus thrombosis</li> <li>Petrosal sinus sampling</li> <li>WADA test</li> <li>All other endovascular procedures involving the treatment of central nervous</li> <li>Reappointment: Demonstrated current competence and evidence of the performance of at least 100 cases in the past 24 months.</li> </ul>	
Craniofacial Procedures	Initial Privileges: Successful completion of approved residency training program in plastic & reconstructive surgery or neurological surgery. Supporting documentation demonstrating active practice of plastic & reconstructive surgery or neurological surgery (if residency training completed more than five years ago).  Basic Craniofacial Core Procedures: This is not intended to be an all-encompassing procedures list. If you wish to exclude any procedures, please strike through the procedures that you do not wish to request, and then initial and date.  Simple suture synostosis - Endoscopic craniectomies - Calvarial vault reconstruction  Multiple and syndromic synostosis - Endoscopic craniectomies - Calvarial vault reconstruction  Hypertelorism correction Monoblock advancement Simple and complex wound revisions Craniofacial reconstruction	



V	
<ul> <li>Cranioplasties</li> <li>Autologous / split calvarial grafts</li> <li>Prosthetic</li> </ul>	
<b>Reappointment:</b> Demonstrated current competence and evidence of the performance of at least 8 cases in the past 24 months.	

### **EMERGENCY PRIVILEGES**

In the case of an emergency, any practitioner, to the degree permitted by his/her license and regardless of department, staff status or clinical privileges, shall be permitted to do, and be assisted by hospital personnel in doing everything possible to save the life of a patient or to save a patient from serious harm. An "emergency" is defined as a condition in which serious or permanent harm would result to a patient or in which the life of a patient is in immediate danger and any delay in administering treatment would add to that danger.

### ACKNOWLEDGEMENT OF PRACTITIONER

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- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Applicant's Signature	Date
Print Name	_
DEPARTMENT CHAIR RECOMMENDATION	
I have reviewed the requested clinical privileges and named applicant and:	supporting documentation for the above-
<ul> <li>□ Recommend all requested privileges</li> <li>□ Recommend privileges with the following condition</li> </ul>	s/modifications

☐ Do not recommend (Please provide explanation under comments.)



Privilege	Condition/modification/explanation	
Comments:		
Department Chair Signature	Date	
Print Name		
A A ARAD A TWARES		



### DELINEATION OF CLINICAL PRIVILEGES UROLOGY

NAME:	
Minima	l Formal Training Required:
Basic Ec	ducation: MD or DO
	ful completion of approved residency training program in urology and Board certification merican Board of Urology, or equivalent, within 4 years of initial appointment.
p le	nitial Appointment – Required previous experience: The successful applicant must rovide current certification in, fundamentals of laparoscopic surgery and evidence of at east 75 urology procedures, reflective of the scope of privileges requested in the past 12 nonths or completion of training in the last 12 months.
e	Reappointment- Required previous experience: Demonstrated current competence and vidence of the performance of at least 100 urology procedures with acceptable results, effective of the scope of privileges requested, for the past 24 months.
Core Pr	ivileges in Urology
	<b>REQUESTED</b> : Ability to admit, work-up consult with, and treat either surgical or medical patients presenting with illnesses or injuries of the genitourinary system.
	<b>∀</b> The procedures listed below are deemed within scope of practice <b>∀</b>
Cor	e Procedures in Urology (select the privileges requested):
	Amputation of penis – partial/complete Aspiration – renal/pelvic cyst, bladder, hydrocele Biopsy – bladder/prostate/testis/epididymis/kidney Change of indwelling tubes or catheters Circumcision Contigen implantation Continent urinary diversion Cystectomy – simple/radical Cystoscopy/Cystourethroscopy with or without Transurethral Surgery Cystostomy – open or trochar Cystourethroscopy – with or without cauterization/biopsy Destruction – vulvar lesion Diverticulectomy

1 of 6

Approved: 3/2011

Revised: 10/2011, 3/2012, 12/2012, 08/2018, 04/2019, DRAFT 06/2020



$\mathcal{J}$
Entercystoplasty
Epididymetomy
Epididymovasotomy/Vasoepididymostomy/Vasovasotomy
Excision – Bartholin's cyst, condylomata, genitalia lesion mullerian duct/cyst, penile
lesion, scrotal lesion, tumor
Extracorporeal shock-waves lithotripsy
Fistula repair – entero-vesical, vesico-vaginal, ureterovaginal
Foreign body removal/excision
Hydrocelectomy – with or without hernia repair
Hypospadias Repair
I&D abscess
Ileal/Colon Conduit
Irrigation of corpus cavernosum
Laparoscropic urological procedures
Lymphadenectomy – pelvic/inguinal/retroperitoneal
Marsupialization bartholin's gland/cyst
Meatomy
Nephrectomy, simple
Orchiectomy (scrotal/inguinal)
Orchiopexy
Pelvic exenteration
Percutaneous nephrostolithotomy
Prostatectomy (subtotal, radical, suprapubic, perineal) with lymph node biopsy or pelvic
lymphadenectomy
Pyeloplasty
Repair of pelvic prolapse
Repair of rupture of bladder
Revision/Removal/Insertion of penile prosthesis (non-inflatable/inflatable)
Scrotal excision
Scrotal exploration
Spermatocelectomy
Suture repair testicular injury
Testicular prosthesis
Transurethral resection of the prostate
Transurethral resection of bladder neck contracture
Ureterectomy
Urethral polypectomy
Urethral dilation or Cauterization
Urethropexy
Urethroplasty
Urethrectomy
Urethrostomy



Use of the surgical laser
□ Diode
☐ Greenlight
☐ Thuliam
☐ Holmium
Vaginal dilatation
Varicocelectomy
Vasectomy
Vesiocostomy
Minimal sedation (anxiolysis) – a drug induced state during which patients respond normally to verbal commands. Although cognitive function and coordination may be impaired, ventilatory and cardiovascular functions are unaffected.

### SPECIAL REQUESTS FOR UROLOGY

The following procedures require special training and are not considered basic privileges. If requested, additional documentation of training and/or experience as defined below is required.

♥ PLEASE INDICATE THE PRIVILEGES REQUESTED BY MARKING THE COLUMN ON THE RIGHT ♥

PRIVILEGE	CREDENTIALING CRITERIA	REQUESTED
Fluoroscopy	<ol> <li>8 Hours of Category I CMEU credit on radiation safety awareness training through an accredited program.</li> <li>1 Hour Fluoroscopic machine training demonstrating use of machine &amp; radiation safety practices         <ol> <li>Provided by a Licensed medical physicist, or</li> <li>Physician trained by a radiologist or licensed medical physicist (please note that if this one occurs then there needs to be a specific audit trail back to the trainer physician's training)</li> </ol> </li> <li>Annual Fluoroscopy Radiation Safety training regarding fluoroscopy techniques, Image Gently, and Image Wisely.</li> </ol>	
Moderate to Deep Sedation/Analgesia	For Moderate to Deep Sedation/Analgesia privileges an applicant must provide the following:  > Current Age Appropriate Life Support card of:  • ACLS / ATLS/ PALS /NRP, and  > Successful completion of the UHS Sedation Module	



# University Health System

PRIVILEGE		CREDENTL	ALING CRITE	RIA	REQUESTED
Computerized Da Vinci	INITIAL:				
	Criteria	Category 1 Independently practicing surgeon with <10 robotic cases in the past year	Category 2 Independently practicing surgeon with 3 robotic cases in the past 24 months AND meets criteria for training in robotic surgery during residency or fellowship (minimum of 30 cases as primary surgeon completed within the past 18months)	Category 3 Independently practicing surgeon with >20 robotic cases in the past 24 months.	
		Ţ	Ţ.	Ţ.	
	Training/Privil Robotic Training Course	Certificate of attendance from Intuitive Surgical Inc. hands-on training practicum in the use of the Da Vinci Surgical Platform	N/A	N/A	
	References	N/A	From Program Director	From Chairman or Division Chief; AND Robotic/MIS Director if Available	
The Artificial Property of the Artificial Proper	Case Experien	ce			
	Minimum # robotic cases	N/A	30 cases as a Resident /Fellow	>20 in the past year as the primary surgeon	
	Proctoring (minimum#)	5 cases	3 cases	None needed	- Assessment
	Monitoring/F ocused review of robotic cases performed independently	First 5 sequential cases	First 5 sequential cases	None needed	
Computerized Da Vinci	minimum of to	full robotic pri three (3) roboti erforms less tha	c procedures per	on must perform a calendar year. If a equired procedures,	



### **EMERGENCY PRIVILEGES**

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Applicant's Signature	Date							
DEPARTMENT CHAIR RECOMMENDATION								
I have reviewed the requested clinical named applicant and:	privileges and supporting documentation for the above-							
<ul> <li>□ Recommend all requested privilege</li> <li>□ Recommend privileges with the fol</li> <li>□ Do not recommend (Please provide)</li> </ul>	llowing conditions/modifications							
Privilege	Condition/modification/explanation							
-								
Comments:								
Department Chairman	Date							



The clinical	neivilanee u	vere reviewed,	annroyed an	d documented	l in tha m	agting minu	itas of
THE CHINE	privileges v	<del>voro roviowou,</del>	<del>approved an</del>	<del>a accumente</del> a	t till citto illi	<del>oomg mma</del>	<del>nos or.</del>

Credential Committee	-Date
Executive Committee	-Date
Board of Managers	-Date

### AMBULATORY SURGICAL CENTER

### DELINEATION OF CLINICAL PRIVILEGES RADIATION ONCOLOGY

NA	IVIE	
Mi	nim	al Formal Training Required:
	1)	MD or DO
	2)	Successful completion of an approved ACGME or AOA residency training program in Radiation Oncology.
	3)	Board certification by the American Board of Radiation Oncology, or equivalent, within 4 years of initial appointment
		<b>Initial Appointment - Required previous experience</b> : The successful applicant must provide documentation demonstrating an active practice, reflective of the scope of privileges requested, during the past 12 months unless residency completed within the last 12 months.
		<b>Reappointment - Required previous experience</b> : Provide supporting documentation demonstrating an active practice, reflective of the scope of privileges requested, for the past 24 months.
		<please appropriate="" being="" boxes="" check="" for="" privileges="" request=""></please>
		Anesthesia, local, exam under anesthesia and placement of interstitial brachytherapy device
		Conscious Sedation (attach ACLS)
		Prostate Brachytherapy-Interstitial Placement of Prostate Seeds with possible Cystoscopy and Syed Brachytherapy for gynecological cancers

\*The University Health System Laser Safety Manual requires all Personnel performing laser protocols using Class 3B and Class 4 lasers receive initial training and refresher training every two years.

### **EMERGENCY PRIVILEGES**

In the case of an emergency, any practitioner, to the degree permitted by his/her license and regardless of department, staff status or clinical privileges, shall be permitted to do, and be assisted by hospital personnel in doing everything possible to save the life of a patient or to save a patient from serious harm. An "emergency" is defined as a condition in which serious or permanent harm would result to a patient or in which the life of a patient is in immediate danger and any delay in administering treatment would add to that danger.



### ACKNOWLEDGEMENT OF PRACTITIONER

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Applicant's Signature	Date
DEPARTMENT CHAIRMAN RECO	MMENDATION
I have reviewed the requested clinical named applicant and:	privileges and supporting documentation for the above-
<ul> <li>□ Recommend all requested privileges</li> <li>□ Recommend privileges with the following</li> <li>□ Do not recommend (Please provide exp</li> </ul>	owing conditions/modifications
Privilege	Condition/modification/explanation
Comments:	
Department Chairman Signature	Date
Department Chairman Signature FOR MEI	Date DICAL STAFF USE ONLY
FOR MEI	
FOR MEI	DICAL STAFF USE ONLY
FOR MEI  The clinical privileges were reviewed, a	PICAL STAFF USE ONLY  pproved and documented in the meeting minutes of:

Approved: 9/2013 Revised: 06/2020

# PROFESSIONAL PERFORMANCE EVALUATION REPORT JUNE 2020



### Recommendations:

- Satisfactory Completion no concerns or trends have been identified that would warrant further action.
- 2. Issues exist that require a focused professional practice evaluation.
- 3. Zero performance of privilege. Focused review when privilege is performed.

	Review Type				Review	RECO	RECOMMENDATIONS		Credentials Committee Review	Executive Review	
Name		Spec	Dept	Status	Period	1	2	3	Y - Yes	Y - Yes	Comments
MEDICAL STAFF								II - 20			
ALI, FOZIA A., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1			Y	Y	
ALI, OLGA, PA	OPPE	PA	FC Medi	AHP	07/19 -03/20	1			Y	Y	
ALVARADO, MAUREEN, DO	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1			Y	Y	
AMAYA-CHAVEZ, NORMA J., FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1			Y	Y	
ANDRY II, NEHMAN M., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		1	Y	Y	
ANIEMEKE, CHIDINMA O., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1			Y	Y	
ANTONY, SHIBY T., FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1			Y	Y	
ANZURES, EDNA Y., MA	OPPE	Clinical Assoc	FC Medi	AHP	07/19 -03/20	V			Y	Y	
AVERY, RICHEL Z., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1			Y	Y	
BECK, TINA C., PHARMD	OPPE	FC Medi	FC Medi	AFFILIATE	07/19 -03/20	1			Y	Y	
BUU, SHERLY, FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	V		Harry.	Y	Y	
BLAND, LETICIA, PA-C	OPPE	PA	FC Medi	AHP	07/19 -03/20	1			Y	Y	
BLOWER, JESSICA A., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1			Y	Y	
BOLFING, BRANDON L., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1			Y	Y	
BUCK, AMY L., FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1			Y	Y	
BURGIN, TIFFANI D., PA	OPPE	PA	FC Medi	AHP	07/19 -03/20	1			Y	Y	
CADENA JR., DAVID C., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	V			Y	Y	
CANCINO, RAMON S., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1			Y	Y	
CARDONA, PRISCILLA A., BS, CHW	OPPE	Clinical Assoc	FC Medi	AHP	07/19 -03/20	V			Υ	Y	
CHAVEZ, CRYSTAL H., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1			Y	Y	
CLAY, JESSICA M., LVN	OPPE	Clinical Assoc	FC Medi	АНР	07/19 -03/20	V			Y	Y	

### PROFESSIONAL PERFORMANCE EVALUATION REPORT

**JUNE 2020** 

					JUIL E	UE				
CORONA, BETTY A., DNP, FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1		Y	Y	
COSSIO, GRISELDA, PA-C	OPPE	PA	FC Medi	AHP	07/19 -03/20	1		Y	Y	
CRUZ, INEZ I., PHD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Y	Y	
DAVIDSON, DEWAYNE A., PHARMD	OPPE	FC Medi	FC Medi	AFFILIATE	07/19 -03/20	1		Y	Y	
DAVILA, ANGELICA E., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Y	Y	7
EDRINGTON-MEDINA, ELISHA J., FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1		Y	γ	
EMKO, NIDA J., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1	1/1	Y	Y	
FERNANDEZ FALCON, CRISTIAN P., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Y	Y	
FINLEY, MARGARET R., MD	OPPE	FC Medi	FC Medi	COURTESY	07/19 -03/20	1		Y	Y	
		Research			Laborate Comme					
FORSTER, JACQUELINE N., LVN, RA	OPPE	Assoc	FC Medi	AHP	07/19 -03/20	V		Y	Y	
GARCIA, GLORIA R., RN	OPPE	Clinical Assoc	FC Medi	AHP	07/19 -03/20	1		Y	Y	
GARZA, DIANA A., FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	V		Y	Y	
		Research			1.50.40.021.7					
GONZALEZ-SCHLENKER, CAROLINA, RA	OPPE	Assoc	FC Medi	AHP	07/19 -03/20	1		Y	Y	
HEPBURN, BYRON C., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Y	Y	
HERNANDEZ, JESSICA, RMA, RA	OPPE	Research Assoc	FC Medi	AHP	07/19 -03/20	1		Y	Y	
HUBER, HOWARD E., PA-C	OPPE	PA	FC Medi	AHP	07/19 -03/20	1		Y	Y	
HUERTA, JOSE O., ACNP	OPPE	APN	FC Medi	AHP	07/19 -03/20	1		Y	Y	
JAEN, CARLOS R., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Y	Y	
KATERNDAHL, DAVID A., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Y	Y	
KAYSER-ERFURTH, JOZETT, FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1		Y	Y	
KING, DEBRA A., FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1		Y	Y	
KUMAR, KAPARABOYNA A., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1	N N	Y	Y	
LANTZ, RONDA L., FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1		Y	Y	
LAWLER, WILLIAM R., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Υ	Y	
LOPEZ, DOMINGO, FNP-C	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1		Υ	Y	
MARTIN, JAMES C., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Y	γ	
MATHEW, RUBY, ACNP	OPPE	APN	FC Medi	AHP	07/19 -03/20	V		Y	Y	
	1	Research								
MEDINA, ANDREA F., RA	OPPE	Assoc	FC Medi	AHP	07/19 -03/20	V		Y	Y	
MONTANEZ VILLACAMPA, MARIA D., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	V		Y	Y	
MOONNUMACKAL, BESSY M., FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	V		Y	Y	
MORENO, ALENA V., PA-C	OPPE	PA	FC Medi	AHP	07/19 -03/20	V		Y	Y	
MOSCRIP, CORDELIA A., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	V		Y	Y	
NADEAU, MARK T., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	V		Y	Y	
OGBEIDE, STACY A., PSYD	OPPE	FC Medi	FC Medi	AFFILIATE	07/19 -03/20	V		Y	Y	
OSCOS-SANCHEZ, MANUEL A., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Y	Y	
PALMER, RAYMOND, RA	OPPE	Research Assoc	FC Medi	АНР	07/19 -03/20	1		Υ	Y	

### PROFESSIONAL PERFORMANCE EVALUATION REPORT

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				0.000	JUINE 2	.02				
PARKER, ROBERT W., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	V		Y	Y	
PATEL, NEELA K., MD	OPPE	FC Medi	FC Medi	COURTESY	07/19 -03/20	1		Y	Y	
Manager Washington		Research	100 m		The second	1				
PERALES, ROGER B., RA	OPPE	Assoc	FC Medi	AHP	07/19 -03/20	N		Y	Y	
POURSANI, RAMIN S., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	٧		Y	Υ	
	ODDE	Research	FC Medi	AHP	07/19 -03/20	1		Y	Y	
RINCON, RODOLFO, RA	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1		Y	Y	
RIVERA, MAIZAL C., FNP	OPPE		FC Medi	ACTIVE	07/19 -03/20	V		Y	Y	
RODRIGUEZ PEREZ, VIRGEN M., MD	OPPE	FC Medi Research	PC IVIEU	ALTIVE	07/13 -03/20	1	-	-	-	
RODRIGUEZ, JASMINE, RA	OPPE	Assoc	FC Medi	AHP	07/19 -03/20	1		Y	Y	
SAM, BINDU, FNP-BC	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1		Y	Y	
SANCHEZ, JEANNETTE, CHW	OPPE	Clinical Assoc	FC Medi	AHP	07/19 -03/20	1		Y	Y	
SHROUF, ELLEN M., PHD	OPPE	FC Medi	FC Medi	AFFILIATE	07/19 -03/20	1		Y	Y	
SIDDIQUI, SAIMA, MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Y	Y	
SIDHU, PRAJNA, MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	V		Y	Y	
STARKWEATHER, HELEN M., FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	1		Y	Y	
						1		-		
TREVINO, ELIZABETH R., RN	OPPE	Clinical Assoc	FC Medi	AHP	07/19 -03/20	V		Y	Y	-
VARMA, ARCHANA, MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	1		Y	Y	
VASQUEZ, DIANA M., FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	V		Y	Y	
WAGLE SHARMA, DEEPA, FNP	OPPE	FNP	FC Medi	AHP	07/19 -03/20	V		Y	Y	
WIEMERS, MARCY R., MD	OPPE	FC Medi	FC Medi	ACTIVE	07/19 -03/20	V		Y	Y	
AGARWAL, ANIMESH, MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	V		Y	Y	
BRADY, CHRISTINA I., MD	OPPE	Ortho	Ortho	PROV	07/19 -03/20	V		Y	Y	
BURAU, PAIGE C., FNP	OPPE	FNP	Ortho	AHP	07/19 -03/20	1		Y	Y	
BUTLER, MARY K., PA	OPPE	PA	Ortho	AHP	07/19 -03/20	1		Y	Υ	
BUTTACAVOLI, FRANK A., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1		Y	Y	
CHAPUT, CHRISTOPHER D., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	<b>√</b>		Y	Y	
CORLEY JR., FRED G., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1		Y	Y	
CROMACK, DOUGLAS T., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1		Y	Y	
DARWIN, JUSTIN R., PA-C	OPPE	PA	Ortho	AHP	07/19 -03/20	1		Y	Y	
DEHART, MARC M., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1		Y	Y	
DEL BOSQUE, BRANDON L., PA-C	OPPE	PA	Ortho	AHP	07/19 -03/20	1		Y	Y	
DELALLO, CHRISTOPHER J., PA-C	OPPE	PA	Ortho	AHP	07/19 -03/20	V		Y	Y	
DUTTA, ANIL K., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1		Y	Y	
EDWARDS JR, WILLIAM H., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1		Y	Y	
GALINDO JR, MAYO J., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1		Y	Y	
GLATT, VAIDA, RA	OPPE	Research Assoc	Ortho	AHP	07/19 -03/20	1		Y	Y	
HALL, BRAD B., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	V		Y	Y	

### PROFESSIONAL PERFORMANCE EVALUATION REPORT

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					3014E E				
JACOBS, PHILIP M., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
KARIA, RAVI A., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
KODOSKY, JOHN T., PA-C	OPPE	PA	Ortho	AHP	07/19 -03/20	1	Y	Y	
LOPEZ, MELISSA, RN	OPPE	Clinical Assoc	Ortho	AHP	07/19 -03/20	V	Y	Y	
MCCORMICK, SEKINAT K., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
MONTALVO, ADA M., PA-C	OPPE	PA	Ortho	AHP	07/19 -03/20	1	Y	Y	
MORREY, BERNARD F., MD	OPPE	Ortho	Ortho	COURTESY	07/19 -03/20	V	Y	Y	
NORTON, DENISE L., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
PALLADINO, MICHAEL G., DPM	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
PESEK, RACHEL D., RN	OPPE	Research Assoc	Ortho	АНР	07/19 -03/20	V	Y	Y	
QUINN JR., ROBERT H., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	V	Y	Y	
RAJANI, RAJIV, MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
RAMANUJAM, CRYSTAL L., DPM	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
RAMOS, PRISCILLA, PA-C	OPPE	PA	Ortho	AHP	07/19 -03/20	1	Y	Y	
RHAME, BENJAMIN W., PA-C	OPPE	PA	Ortho	AHP	07/19 -03/20	1	Y	Y	
ROSE, RYAN A., MD	OPPE	Ortho	Ortho	PROV	07/19 -03/20	V	Y	Y	
SIMMONS III, JAMES W., DO	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
SOBOLEVSKY, MICHAEL A., DPM	OPPE	Ortho	Ortho	PROV	07/19 -03/20	1	Y	Y	
TOOHEY, JOHN S., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
VESELY-GARZA, LAUREN A., PA-C	OPPE	PA	Ortho	AHP	07/19 -03/20	1	Y	Y	
ZELLE, BORIS A., MD	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
ZGONIS, THOMAS, DPM	OPPE	Ortho	Ortho	ACTIVE	07/19 -03/20	1	Y	Y	
CHEN, PHILIP G., MD	OPPE	ОТО	ото	Active	07/19 -03/20	1	Y	Y	
DOMINGUEZ, LAURA M., MD	OPPE	ото	ОТО	Active	07/19 -03/20	1	Y	Y	
EARLEY, MARISA A., MD	OPPE	ото	ото	Active	07/19 -03/20	1	Y	Y	
FERRELL, JAY K., MD	OPPE	ото	ОТО	Active	07/19 -03/20	1	Y	Y	
HOLT, G. R., MD	OPPE	ото	ото	Active	07/19 -03/20	V	Y	Y	
MCEVOY, TIMOTHY P., MD	OPPE	ОТО	ото	Active	07/19 -03/20	1	Y	Y	
MILLER, FRANK R., MD	OPPE	ото	ОТО	Active	07/19 -03/20	1	Y	Y	
MOE JR., RODERICK D., MD	OPPE	ото	ото	Courtesy	07/19 -03/20	1	Y	Y	
OTTO, RANDAL A., MD	OPPE	ото	ото	Active	07/19 -03/20	1	Y	Y	
STALLWORTH, CHRISTIAN L., MD	OPPE	ОТО	ото	Active	07/19 -03/20	V	Y	Y	
TAYLOR, CHRISTINE B., MD	OPPE	ото	ото	Active	07/19 -03/20	V	Y	Ÿ	
VILLARREAL JR., ALFREDO D., PA-C	OPPE	PA	ОТО	AHP	07/19 -03/20	V	Y	Y	

# PROFESSIONAL PERFORMANCE EVALUATION REPORT JUNE 2020

The above listed Professional Practice Evaluations have been review	wed by the members of the Credentials Committee and approved as submitted.
Mark T. Nadeau, MD Chairman, Credentials Committee	6/29/2020 Date
Christopher Copeland Executive Director, Professional Staff Services	<u>⟨</u>

### FOCUSED PROFESSIONAL PERFORMANCE EVALUATION REPORT



**JUNE 2020** 

#### **EVALUATION QUESTIONIER**

- 1. Did the practitioner demonstrate professional ethics and clinical competence?
- 2. Was this practitioners operating technique adequate and was competence evident?
- 3. Did this practitioner cooperate with colleagues, nurses and other hopsital staff?
- 4. Did this practitioner provide care for patients at a professional level of quality and efficiency?
- 5. Did this practitioner abide by the Medical-Dental Staff Bylaws and by all other standards, policies, rules and regulations of the University Health System?
- 6. Are you aware of any health problems that could interfere with patient care?
- 7. Are you aware of any pateint/staff complaints?
- 8. Are you aware of any peer review(s) conducted within the last 12 months?

						d. Me you sware of any peer review(s) conducted within the last 12 months:											
				Review	Review			EVA	LU.	ATIO	ONS	3		Credentials Committee Review	Executive Review	Initial Appointment/ Additional Privilege	
Name	Spec	Dept	Status	Period	Type	1	2	3	4	5	6	7	8	Y - Yes	Y - Yes		
MEDICAL STAFF	100				. 15.7						E						
Jones, Kelly A., ANP	APN	Medicine	AHP	8/30/19 - 2/29/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Barton, Kimberly T., MD	Pedi	Pedi	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Bonnen, Mark D., MD	Rad Onc	Radiation Onc	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Cortes, Tiffany M., MD	Endo	Medi	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Costilla, Elizabeth A.	Emerg Medi	Emerg Medi	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Dalton, Scott R., DO	Path	Path	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Desai, Anmol H., RA	RA	Medi	АНР	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Faz, Monica, MA	Clinical Assoc	FC Medi	AHP	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Foster, Mark T., MD	Emerg Medi	Emerg Medi	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Garcia, Jose A., MD	Anes	Anes	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Gibbons, Steven D., MD	Ortho	Ortho	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Haggerty, Bridget S., FNP	FNP	FC Medi	AHP	9/30/19 - 3/31/20	FPPE	Y	Y	Υ	Y	Y	N	N	N	Y	Y	Initial Appointment	
Horn, Sarah K., MD	Neuro	Neuro	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment	
Horsting, Julie M., MS	Assoc	Ob/Gyn	AHP	9/30/19 - 3/31/20	FPPE	Y	Y	Υ	Y	Y	N	N	N	Y	Y	Initial Appointment	

### FOCUSED PROFESSIONAL PERFORMANCE EVALUATION REPORT

						,					_					
Hughes, Kenneth T., MD	Path	Path	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment
Hughston, Haley K., MD	Hosp	Medi	PROV	9/30/19 - 3/31/20	FPPE	Y	Υ	Y	Y	Υ	N	N	N	¥	Y	Initial Appointment
Kester, Amy T., PA-C	PA	Medi	АНР	9/30/19 - 3/31/20	FPPE	*	γ	Y	Y	Y	N	N	N	Y	Υ	Initial Appointment
Kluger, Courtney G., MD	Hosp	Medi	PROV	9/30/19 - 3/31/20	FPPE	Y	Υ	Υ	Υ	Y	N	N	N	Υ	Y	Initial Appointment
Kudur, Nidhì P., DO	FC Medi	FC Medi	PROV	9/30/19 - 3/31/20	FPPE	γ	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment
Kunz, Brian T., CRNA	CRNA	Anes	АНР	9/30/19 - 3/31/20	FPPE	Υ	Υ	Υ	Y	Y	N	N	Z.	Y	Y	Initial Appointment
Maddry, Joseph K., MD	Emerg Medi	Emerg Medi	PROV	9/30/19 - 3/31/20	FPPE	Υ	Υ	Y	Y	Υ	N	N	N	Y	Y	Initial Appointment
Messerly, Johanna M., PsyD	Neuro	Neuro	PROV	9/30/19 - 3/31/20	FPPE	γ	Υ	Υ	Y	Υ	N	N	N	Y	Y	Initial Appointment
Nguyen, Anhtuan H., MD	Ophthal	Ophthal	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment
Nguyen, Lilian, MD	Ophthal	Ophthal	PROV	9/30/19 - 3/31/20	FPPE	Υ	Υ	Υ	Y	Υ	N	N	N	Y	Y	Initial Appointment
Patel, Harsh D., MD	Hosp	Medicine	PROV	9/30/19 - 3/31/20	FPPE	Υ	Y	Υ	Y	Y	N	N	N	y	Y	Initial Appointment
Pearson, Rachel M., MD, PhD	Inpt. Pedi	Pedi	PROV	9/30/19 ~ 3/31/20	FPPE	Υ	γ	Y	Y	γ	N	N	N	Y	Y	Initial Appointment
Ramirez, Carina B., MD	Neona	Pedi	PROV	9/30/19 - 3/31/20	FPPE	Y	Υ	Υ	Y	Y	N	N	N	Y	Y	Initial Appointment
Rocha, Selena B., MA	Clinical Assoc	FC Medi	AHP	9/30/19 - 3/31/20	FPPE	Y	Y	γ	Y	Υ	N	N	N	Y	Y	Initial Appointment
Rodriguez, Ruben J., MD	Hosp	Medi	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	γ	N	N	N	Y	Y	Initial Appointment
Saca, James C., MD	Hosp	Medi	PROV	9/30/19 -	FPPE	γ	γ	Y	V	V	N	N	N	Y	Y	Initial Appointment
Shahan, Charles P., MD	Surgery	Surgery	PROV	9/30/19 - 3/31/20	FPPE	Y	γ	Y	Y	Υ	N	N	N	Y	Y	Initial Appointment
Stachniak, David R., MD	Pedi	Pedi	PROV	9/30/19 - 3/31/20	FPPE	Y	Υ	γ	Y	¥	N	N	N	Y	Y	Initial Appointment
Te, Tri, DO	Cardio	Medicine	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment
Watson, Amanda L, PhD, RA	RA	Urology	AHP	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment
Winter, Caitlyn A., RA	RA	Pedi	AHP	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	У	Y	Initial Appointment
Winter, Lauryn A., RA	RA	Pedi	АНР	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment
Carver, Deborah L., MD	Neuro	Neuro	Active	9/30/19 - 3/31/20	FPPÉ	Y	Υ	Y	Y	Y	N	N	N	Y	Υ	Botox Injection
Del Rio, Christina, LPC		Psych		9/30/19 - 3/31/20												Psychological Assessment; Substance Abuse Assessment; Adult Assessment; Adult Therapy; Group Therapy
	₽C		AHP		FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	

## FOCUSED PROFESSIONAL PERFORMANCE EVALUATION REPORT

Katerndahl, David A., MD				9/30/19 -				1								Pediatric and Newborn Core Privileges
naterious, overers, mo	FC Medi	FC Medi	Active	3/31/20	FPPE	γ	Υ	Y	Y	γ	N	N	N	γ	Y	
Quinn Jr., Robert H., MD	Ortho	Ortho	Active	9/30/19 - 3/31/20	FPPE	Υ	Y	γ	Y	γ	N	N	Z	Y	Y	Fluoroscopy
Pokorny, Douglas M., DO		Surgery		9/30/19 · 3/31/20												Exploratory Thoracotomy; Video Assisted Evaluation of the Diaphragm; Video Assisted Drainage of Clotted Hemothorax Decortication
	Trauma		Active		FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	
Roache, John D., PhD	Psych	Psych	M-10-	9/30/19 - 3/31/20												Provides participant education and instruction on use of study medication, including administration, storage, side effects and how to notify researcher of adverse drug reactions
**************************************			Active		FPPE	γ	Y	Y	Y	Y	N	N	N	Y	Y	
Sako, Edward Y., MD		Cardiothor acic Surgery		9/30/19 - 3/31/20				Average in the second s						Y	¥	Heart transplantation; Heart-lung transplantation; Endovascular procedures involving the aorta, great vessels and vena cavae
Vinas, Ariel, MD	Cardio	Medicine	Active		FPPE	Y	Y	T	Y	Y	N	N	N	T T	*	Nasogastric Tube Insertion and Gastric
				9/30/19 - 3/31/20				THE PROPERTY OF THE PROPERTY O								Lavage; Exercise Tolerance Testing; Insertion and Management of Pulmonary Artery Catheter (PAC); Nuclear Imaging
	Cardio		PROV		FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	

## FOCUSED PROFESSIONAL PERFORMANCE EVALUATION REPORT

The above listed Focused Professional Practice Evaluations hav	e been reviewed by the members of the Credentials Committee and approved as submitted.
Mark T. Nadeau, MD	6/29/2020 Date
Chairman, Credentials Committee	
2 -	
Christopher Copeland Executive Director, Professional Staff Services	

## FOCUSED PROFESSIONAL PERFORMANCE EVALUATION REPORT SURGERY CENTER MARC



#### **EVALUATION QUESTIONIER**

- 1. Did the practitioner demonstrate professional ethics and clinical competence?
- 2. Was this practitioners operating technique adequate and was competence evident?
- 3. Did this practitioner cooperate with colleagues, nurses and other hopsital staff?
- 4. Did this practitioner provide care for patients at a professional level of quality and efficiency?
- 5. Did this practitioner abide by the Medical-Dental Staff Bylaws and by all other standards, policies, rules and regulations of the University Health System?
- 6. Are you aware of any health problems that could interfere with patient care?
- 7. Are you aware of any pateint/staff complaints?

8. Are you aware of any peer review(s) conducted within the last 12 months?

## JUNE 2020

				Review	w Review			EVA	LU	ATIO	ONS			Credentials Committee Review	Executive Review	Initial Appointment/Additional
Name S	Spec	Dept	Status	Period	Туре	1	2	3	4	5	6	7	8	Y - Yes	Y - Yes	Privileges
Gibbons, Steven D., MD	ORTHO	ORTHO	PROV	9/30/19 - 3/31/20	FPPE	Υ	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment
Kunz, Brian T., CRNA	CRNA	ANES	AHP	9/30/19 - 3/31/20	FPPE	Υ	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment
Nguyen, Anhtuan H., MD	OPHTHAL	OPHTHAL	PROV	9/30/19 - 3/31/20	FPPE	Y	Y	Y	Y	Y	N	N	N	Y	Y	Initial Appointment
Nguyen, Lilian, MD	OPHTHAL	OPHTHAL	PROV	9/30/19 - 3/31/20	FPPE	Υ	Υ	Υ	Υ	Y	N	N	N	Y	Y	Initial Appointment

The above listed Focused Professional Practice Evaluations have been reviewed by the members of the Credentials Committee and approved as submitted.

Lee Carlisle, MD

Date

for Dr Carlole

**Christopher Copeland** 

Date

Medical Director, UHS Surgery Centers

**Executive Director, Professional Staff Services** 

# PROFESSIONAL PERFORMANCE EVALUATION REPORT JUNE 2020

University Health System
Surgery Center – Medical Center

#### Recommendations:

- Satisfactory Completion no concerns or trends have been identified that would warrant further action.
- Issues exist that require a focused professional practice evaluation.
- 3. Zero performance of privilege. Focused review when privilege is performed.

	Review Type				Review	RECO	OMME	ENDATIONS	Credentials Committee Review	Executive Review	
Name		Spec	Dept	Status	Period	1	2	3	Y - Yes	Y - Yes	Comments
MEDICAL STAFF											
AGARWAL, ANIMESH, MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	1			Y	Y	
BUTTACAVOLI, FRANK A., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	1			Y	Y	
CHAPUT, CHRISTOPHER D., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	V			Y	Y	
DEHART, MARC M., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	V			Y	Y	
EDWARDS JR, WILLIAM H., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	V			Y	Y	
GALINDO JR, MAYO J., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	1			Y	Y	
JACOBS, PHILIP M., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	V			Y	Y	
KARIA, RAVI A., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	V			Y	Y	
MCCORMICK, SEKINAT K., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	V			Y	Y	
MORREY, BERNARD F., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	1		- 1	Y	Y	
QUINN JR., ROBERT H., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	V			Y	Y	
RAJANI, RAJIV, MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	1			Y	Y	
RAMANUJAM, CRYSTAL L., DPM	OPPE	Ortho	Ortho	Active	07/19 - 03/20	1			Y	Y	
ROSE, RYAN A., MD	OPPE	Ortho	Ortho	Prov	07/19 - 03/20	1			Y	Y	
SOBOLEVSKY, MICHAEL A., DPM	OPPE	Ortho	Ortho	Prov	07/19 - 03/20	1			Y	Y	7000
ZELLE, BORIS A., MD	OPPE	Ortho	Ortho	Active	07/19 - 03/20	1			Y	Y	
ZGONIS, THOMAS, DPM	OPPE	Ortho	Ortho	Active	07/19 - 03/20	V			Y	Y	
DOMINGUEZ, LAURA M., MD	OPPE	ото	ото	Active	07/19 - 03/20	V			Y	Y	
EARLEY, MARISA A., MD	OPPE	ото	ото	Active	07/19 - 03/20	V			Y	Y	
FERRELL, JAY K., MD	OPPE	ото	ото	Active	07/19 - 03/20	V			Y	Y	
HOLT, G. R., MD	OPPE	ото	ото	Active	07/19 - 03/20	V			Y	Y	
MILLER, FRANK R., MD	OPPE	ото	ото	Active	07/19 - 03/20	V			Y	Y	

### PROFESSIONAL PERFORMANCE EVALUATION REPORT

**JUNE 2020** 

OTTO, RANDAL A., MD	OPPE	ОТО	ОТО	Active	07/19 - 03/20	<b>√</b>	Y	Y	- Carthille
STALLWORTH, CHRISTIAN L., MD	OPPE	ОТО	ОТО	Active	07/19 - 03/20	V	Y	Y	
TAYLOR, CHRISTINE B., MD	OPPE	ото	ОТО	Active	07/19 - 03/20	<b>V</b>	Y	Υ	

The above listed Professional Practice Evaluations have been reviewed by the members of the Credentials Committee and approved as submitted.

1	P61	Da	Carlisle	7/3/2020
Lee Carlisle, MD				Date

Medical Director, UHS Surgery Centers

Christopher Copeland Date

Executive Director, Professional Staff Services

## FOCUSED PROFESSIONAL PERFORMANCE EVALUATION REPORT SURGERY CENTER ROBERT B. GREEN

P	University Health System Surgery Center – Robert B. Green Campus
	Surgery Center – Robert B. Green Campus

CRNA

#### **EVALUATION QUESTIONIER**

- 1. Did the practitioner demonstrate professional ethics and clinical competence?
- 2. Was this practitioners operating technique adequate and was competence evident?
- 3. Did this practitioner cooperate with colleagues, nurses and other hopsital staff?
- 4. Did this practitioner provide care for patients at a professional level of quality and efficiency?
- 5. Did this practitioner abide by the Medical-Dental Staff Bylaws and by all other standards, policies, rules and regulations of the University Health System?
- 6. Are you aware of any health problems that could interfere with patient care?
- 7. Are you aware of any pateint/staff complaints?

8. Are you aware of any peer review(s) conducted within the last 12 months?

				Review	Review			EVA	LU	ATIO	ONS			Credentials Committee Review	Executive Review	Initial Appointment/ Additional
Name	Spec	Dept	Status	Period	Type	1	2	3	4	5	6	7	8	Y - Yes	Y - Yes	Privileges
Gibbons, Steven D., MD	Ortho	Ortho	PROV	9/30/19 - 3/31/20	FPPE	Υ	Υ	Υ	Υ	Υ	N	N	N	Y	Y	Initial Appointment
Klinger, Jonathan E., MD	Anes	Anes	PROV	9/30/19 - 3/31/20	FPPE	Υ	Y	Y	Y	Υ	N	N	N	Y	Y	Initial Appointment
Rodriguez, Pavel, MD	Rad	Rad	PROV	9/30/19 - 3/31/20	FPPE	Υ	Y	Υ	Y	Y	N	N	N	Y	Y	Initial Appointment

The above listed Focused Professional Practice Evaluations have been reviewed by the members of the Credentials Committee and approved as submitted.

Lee Carlisle, MD

Kunz, Brian T., CRNA

**JUNE 2020** 

Date

9/30/19 -

3/31/20

AHP

For Dr. Carlisle 7/13/2000

**Christopher Copeland** 

Tate

Initial Appointment

Medical Director, UHS Surgery Centers

**Executive Director, Professional Staff Services** 

# PROFESSIONAL PERFORMANCE EVALUATION REPORT JUNE 2020



#### Recommendations:

- Satisfactory Completion no concerns or trends have been identified that would warrant further action.
- 2. Issues exist that require a focused professional practice evaluation.
- 3. Zero performance of privilege. Focused review when privilege is performed.

	Review Type			Review	RECO	OMME	NDATIONS	Credentials Committee Review	Executive Review		
Name		Spec	Dept	Status	Period	1	2	3	Y - Yes	Y - Yes	Comments
MEDICAL STAFF											
MCCORMICK, SEKINAT K., MD	OPPE	Ortho	Ortho	Active	7/19 - 03/20	1			Y	Y	
RAMANUJAM, CRYSTAL L., DPM	OPPE	Ortho	Ortho	Active	7/19 - 03/20	1			Y	Y	
ROSE, RYAN A., MD	OPPE	Ortho	Ortho	Prov	7/19 - 03/20	1			Y	Y	
SOBOLEVSKY, MICHAEL A., DPM	OPPE	Ortho	Ortho	Prov	7/19 - 03/20	1			Y	Y	
CHEN, PHILIP G., MD	OPPE	ото	ОТО	Active	7/19 - 03/20	1			Y	Y	
DOMINGUEZ, LAURA M., MD	OPPE	ото	ото	Active	7/19 - 03/20	1			Y	Y	
EARLEY, MARISA A., MD	OPPE	ОТО	ОТО	Active	7/19 - 03/20	V			Y	Y	
FERRELL, JAY K., MD	OPPE	ото	ото	Active	7/19 - 03/20	1			Y	Y	
HOLT, G. R., MD	OPPE	ото	ОТО	Active	7/19 - 03/20	V			Y	Y	
MCEVOY, TIMOTHY P., MD	OPPE	ото	ото	Active	7/19 - 03/20	1			Y	Y	
MILLER, FRANK R., MD	OPPE	ОТО	ОТО	Active	7/19 - 03/20	V			Y	Y	
OTTO, RANDAL A., MD	OPPE	ото	ОТО	Active	7/19 - 03/20	1			Y	Y	
STALLWORTH, CHRISTIAN L., MD	OPPE	ОТО	ОТО	Active	7/19 - 03/20	V	ارجا		Y	Y	
TAYLOR, CHRISTINE B., MD	OPPE	ОТО	ото	Active	7/19 - 03/20	V			Y	Y	
VILLARREAL JR., ALFREDO D., PA-C	OPPE	PA	ото	AHP	7/19 - 03/20	1			Y	Y	

## PROFESSIONAL PERFORMANCE EVALUATION REPORT

JUNE 2020

The above listed Professional Practice Evaluations have been review	ved by the members of the Credentials Committee and approved as submitted.
Lee Carlisle, MD	7/15/200° Date
Medical Director, UHS Surgery Centers  Christopher Copeland Executive Director, Professional Staff Services	7/13/200 Date



## BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

Consideration and Appropriate Action Regarding Policy No. 4.06.01, Controlled Substance Diversion Prevention, Detection, Reporting, and Response Program

## **Background:**

Controlled substance diversion by healthcare personnel is a known problem and creates a significant risk to patients and staff. Recently improved processes for controlled substance monitoring and dispensing identified the opportunity to implement a formal controlled substance diversion prevention (CSDP) program. This is a new policy.

## **Analysis:**

A formal CSDP program will promote a safe and healthy environment for employees, patients, and visitors, minimizing controlled substance diversion and/or misuse. This policy formalizes a systematic, coordinated, and continuous approach to preventing, detecting, and addressing suspected or verified diversion-related activities.

## **Fiscal Impact:**

This new policy does not have a fiscal impact to the University Health System.

## **Strategic Note:**

This policy conveys the University Health System's commitment to improving the quality, safety, and outcomes of patient care, along with the overall patient experience.

BCHD Board of Managers - Policy No. 4.06.01, Controlled Substance Diversion Prevention, Detection, Reporting, and Response Program Tuesday, July 28, 2020
Page 2 of 2

## **Recommendation:**

Staff recommends approval of the new Policy No. 4.06.01, Controlled Substance Diversion Prevention, Detection, Reporting, and Response Program.

Elliott R. Mandell Senior Vice President/ Chief Pharmacy Officer

Bryan J. Alsip, MD, MPH Executive Vice President/ Chief Medical Officer George B. Hernández, Jr. President/Chief Executive Officer

Policy Number: 4.06.01 Page No: 1 of 5 Effective Date: 07/28/20

TITLE: CONTROLLED SUBSTANCE DIVERSION

PREVENTION, DETECTION, REPORTING, AND

**RESPONSE PROGRAM** 

**PURPOSE:** The Controlled Substance Diversion Prevention, Detection,

Reporting, and Response Program provides a systematic,

coordinated, and continuous approach to preventing, detecting, and addressing suspected or verified diversion-related activities,

in order to ensure safe medication practices and employee behavior and to prevent patient harm. This is a new policy. [Key Words: Controlled Substance, Chain of Custody, Diversion, Narcotic, Prescription, Prevention, Theft]

#### POLICY STATEMENT

University Health System (Health System) is committed to establishing and maintaining a safe and healthy environment for employees, patients, and visitors, free of controlled substance diversion and/or misuse.

#### POLICY ELABORATION

Controlled substance diversion by healthcare personnel creates a significant risk to patients and staff. The prevention, detection, and reporting of controlled substance diversion is the responsibility of all Health System personnel.

**All suspected incidents** of controlled substance diversion will be thoroughly investigated.

#### I. **DEFINITIONS**

- A. Controlled substance (CS) Medication classified as Schedule II through V by the Federal Drug Enforcement Agency (DEA), and/or the Texas Controlled Substances Act.
- **B. Chain of custody** Processes to assure that the Health System

Policy Number: 4.06.01 Page No: 2 of 5 Effective Date: 07/28/20

maintains custody, security, and documentation of any controlled substances under its control throughout all stages, including: procurement, storage, delivery, dispensing, return, administration, and wasting.

- C. Controlled substance diversion Intentionally and without proper authorization, using or taking possession of CS medications from the Health System through the use of prescription, ordering or dispensing systems. Examples of CS diversion include, but are not limited to:
  - 1. CS medication theft;
  - 2. Using or taking possession of a CS medication without a valid order or prescription; and/or
  - 3. Forging or inappropriately modifying a CS prescription.
- **D.** Employee Any healthcare provider, consulting staff, administrative staff, allied health staff, faculty, house staff (including a fellow, resident, or intern), student, volunteer, contract worker, or any other individual who has received appointment at the Health System.
- **E. Healthcare Provider** Any licensed or registered healthcare provider or contract staff, whose credentials allow him/her to provide care and services within the scope of their respective practice, and as authorized from respective regulatory agencies and the Health System department policies.

## II. PROGRAM ELABORATION

**A.** All Health System staff including UT Health partners and/or contract personnel are required to comply with the state and federal laws and regulations regarding CS handling, security, and reporting.

Policy Number: 4.06.01 Page No: 3 of 5 Effective Date: 07/28/20

### **B.** Diversion prevention strategies include:

- 1. Pre-employment/post job offer screening, as described in the Drug Enforcement Agency (DEA) Guidelines (21 CFR 1301.90, 1301.93);
- 2. Education for employees and patients regarding the impact of CS diversion; and,
- 3. CS handling protocols and procedures to ensure physical security and guard against theft and diversion, with maintenance and documentation of chain of custody.
- C. Auditing and Surveillance Program -- The Pharmacotherapy and Pharmacy Services department will maintain a CS diversion auditing and surveillance program to facilitate identification of loss or diversion of CS and to quickly identify the responsible individual(s).
- **D.** "Reasonable suspicion" of CS diversion and/or impairment may arise from a variety of circumstances, including but not limited to, the following:
  - 1. A witnessed incident of probable activity;
  - 2. Impaired individual behaviors that may evolve over the course of a shift;
  - 3. Suspicious activity identified during routine monitoring and/or proactive surveillance;
  - 4. Self-disclosure of CS diversion; and/or,
  - 5. Notification from an external source such as local law enforcement or a family member of a suspected diverter.

Policy Number: 4.06.01 Page No: 4 of 5 Effective Date: 07/28/20

All information regarding suspected CS diversion will be utilized in a fair and thorough investigation, and addressed with confidentiality and integrity throughout the process.

In the event that a member of the Medical-Dental Staff appears at University Health System facilities with the intention of directly or indirectly participating in patient care, and in the opinion of University Health System personnel or another Medical-Dental member appears impaired, the Chief of Staff will be immediately notified in accordance with the Medical-Dental Staff Bylaws.

The Health System prohibits retaliation against any individual bringing a complaint or participating in an investigation. Should any such action occur, this needs to be reported directly to the Human Resources department.

- E. The Health System Executive Committee for the CS Diversion Prevention (CSDP) Program will manage the investigation and all reports of suspected diversion. The Executive Sponsors of this program are the Senior Vice President/Chief Pharmacy Officer and Senior Vice President/Chief Nurse Executive.
- F. CS diversion by a Health System employee is grounds for disciplinary action, up to and including termination of employment. CS diversion will be reported to the Human Resources department and all appropriate government licensing, regulatory, and law enforcement agencies.

#### REFERENCES

Health and Safety Code, Chapter 481: Texas Controlled Substances Act, as accessed 3/2/2020:

https://statutes.capitol.texas.gov/Docs/HS/htm/HS.481.htm

Policy Number: 4.06.01 Page No: 5 of 5 Effective Date: 07/28/20

Lippincott Procedures: Wasting controlled substances, as accessed 3/2/2020: https://procedures.lww.com/lnp/search.do

New K (2015), Develop a Drug Diversion Prevention Program, as accessed 3/2/2020:

http://www.diversionspecialists.com/wp-content/uploads/Develop-a-Drug-Diversion-Prevention-Program-PRINT-pppmag.com\_.pdf

Texas Peer Assistance Program for Nurses (TPAPN): Welcome to TPAPN - Texas Nurses Foundation, as accessed 3/2/2020: https://www.texasnurses.org/page/TPAPN

University Health System Medical-Dental Staff Bylaws, Section 8.4: Provider Impairment, pp. 74-75, as last revised 3/23/2017.

University Health System Policy No. 2.13: Reporting Errors and Incidents of Misconduct.

University Health System Policy No. 4.06: Drug-Free Workplace.

University Health System Policy No. NS 9.02.08: Discharge Planning, Attachment I, Discharge Process Instructions.

University Health System Policy No. 9.26: Safe Transport of Hospitalized Patients to Other Facilities for Treatment.

US Department of Justice, Drug Enforcement Administration, Diversion Control Division: Theft/Loss Reporting of Controlled Substances, as accessed 3/2/2020:

https://www.deadiversion.usdoj.gov/21cfr\_reports/theft/index.html

#### OFFICE OF PRIMARY RESPONSIBILITY

Senior Vice President/Chief Pharmacy Officer



## BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

Consideration and Appropriate Action Regarding Policy No. 5.12.01, Conflict of Interest in Research

## **Background:**

The new proposed policy, Conflict of Interest in Research 5.12.01, provides requirements for Health System employees to disclose conflicts of interests in regards to research performed at the University Health System, without concern to funding source.

### **Analysis:**

This policy promotes the highest ethical standards in situations where conflicts of interest may occur in the conduct of research. Employees of the Health System shall avoid any conflict between their personal interests and the interests of the Health System. Furthermore, they shall avoid any situation where it would be reasonable for an objective observer to believe that the person's judgment or loyalty might be adversely affected. The proposed new policy provides requirements for the disclosure of financial or other personal interests or commitments in regards to research performed at the University Health System.

## **Fiscal Impact:**

The policy protects any fiscal impact to the Health System as it relates to conflict of interest disclosure and ensures compliance with all applicable laws and regulation to avoid potential monetary violations resulting from bias and unethical conduct in research.

BCHD Board of Managers – Policy No. 5.12.01, Conflict of Interest in Research Tuesday, July 28, 2020 Page 2 of 2

## **Strategic Note:**

The policy applies to all Health System's employees who propose, conduct, or report research, regardless of funding source and conveys the University Health System's dedication in adhering to the most ethical conduct of researchers and employees. This policy also supports the Corporate Institutional Conflict of Interest Policy 2.12.

## **Recommendation:**

This new policy will enhance institutional compliance with federal regulations safeguarding research and highlight the ongoing institutional commitment to ethical principles by University Health System staff and affiliates engaged in research.

This policy is presented for approval by the Board of Managers as a new policy.

Roberto Villarreal, MD, MPH
Senior Vice President
Research & Information Management

George B. Hernández, Jr. President/Chief Executive Officer

Policy No. 5.12.01 Page Number 1 of 11 Effective Date: 07/28/20

#### TITLE: CONFLICT OF INTEREST IN RESEARCH

**PURPOSE:** This policy promotes objectivity and the highest ethical standards in situations where conflicts of interest may occur in the conduct of research and governs the disclosure of individual financial or other personal interests, reporting of an individual's financial or other personal considerations that may compromise, or have the appearance of compromising, an investigator's judgement in conducting or reporting research. This is a new policy. [Key Words: Conflict of Interest, financial interest, research, investigator]

#### **POLICY STATEMENT:**

It is the policy of University Health system that an individual has an obligation to avoid any situation where it would be reasonable for an objective observer to believe that the person's judgment, ethical considerations, or loyalty may be adversely affected.

#### **POLICY SCOPE:**

This policy provides requirements for the disclosure of financial or other personal interests or commitments in regards to research performed at the University Health System. The policy applies to all Health System's employees who propose, conduct, or report research, regardless of funding source that includes but not limited to government and non-government funded projects, foundation sponsors, any gift funded projects, clinical trials and unfunded research projects.

#### **POLICY ELABORATION:**

This policy recognizes general institutional policies, such as the Health Systems' Institutional Conflict of Interest Policy 2.12. The purpose of this policy is to promote the highest ethical standards in situations where conflicts of interest may occur in the conduct of research, and to ensure that there is no reasonable expectation that the design, conduct, or reporting of research will be biased by a significant financial or personal interest of an investigator.

Policy No. 5.12.01 Page Number 2 of 11 Effective Date: 07/28/20

### I. **DEFINITIONS:**

**A. Business Entity** - a business, including but not limited to, a sole proprietorship, trust, or any other entity recognized by law.

- **B.** Conflict of Interest (COI) in research an activity or situation, actual, apparent, or potential, in which financial or other personal considerations may compromise, or have appearance of compromising, an investigator's judgement in conducting or reporting research or lead to a personal advantage. This conflict may result in personal or financial gain or advantage or could cause or appear to cause bias in the design, conduct or reporting of research, or in exercising an institutional duty or responsibility in relation to research.
- C. Conflict of Commitment a situation where the individual undertakes external commitments that burden, interfere, or detract from the member's primary obligations and commitments to the Health System.
- D. Engaged in Research Health System employees or agents intervene or interact with human subjects for purposes of research. Health System employees or agents obtain individually identifiable private information about human subjects for purposes of research; or Health System receives a direct award to conduct human subjects research, even where all activities involving human subjects are carried out by a subcontractor or collaborator.
- **E. Family Member** a parent or child within the first degree of consanguinity (blood) or affinity (marriage). This term is also inclusive of significant other or any first-degree relative of an investigator or research personnel.
- **F. Institutional Review Board (IRB)** any board, or other group formally designated by an institution to review, to approve the initiation of, and to conduct periodic review of biomedical research involving human subjects. The primary purpose of such

Policy No. 5.12.01 Page Number 3 of 11 Effective Date: 07/28/20

review is to assure the protection of the rights and welfare of the human subjects.

- G. Intellectual Property Creative works or ideas embodied in a manner, which is shared, recreated, emulated, or manufactured. State and federal laws protect intellectual property. These laws govern inventions, patents, trademarks, unfair competition, copyrights, trade secrets, data and Technical Data, the right of publicity, and new plant varieties. Examples of intellectual property include inventions; patents; copyrights; designs; knowhow; business, technical, and research methods; and other types of intangible business assets such as goodwill and brand recognition. (NIH Glossary)
- **H. Investigator** the principal investigator and any other person who is responsible for the design, conduct, or reporting of research to develop or contribute to generalizable knowledge. For purposes relating to financial interests, "Investigator" includes the investigator's spouse and dependent children.
- **I. Managing Conflict of Interest** is to take action to address a financial or other conflict of interest, which includes reducing or eliminating the conflict of interest, to ensure that the design, conduct, and reporting of research are free from bias or the appearance of bias.
- J. Personal Interests family or other significant associations and/or obligations that conflict with the best interests of the Health System. Examples of personal interests would include, but are not limited to, gratuities and gifts (such as event tickets), sexual favors, power, status, influence, etc.
- **K. Professional Services** occupations that require specialized training, education, skill, and competence.
- **L. Travel** travel that is reimbursed or sponsored in the preceding twelve months, including the purpose of the trip, the identity of the sponsor/organizer, the destination, the duration, and the value

Policy No. 5.12.01 Page Number 4 of 11 Effective Date: 07/28/20

of the travel.

- **M. Research** a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalized knowledge.
- N. Significant Financial Interest anything of monetary value or potential monetary value held by an investigator (or the investigator's family member), and that reasonably appears to be related to the investigator's institutional responsibilities. A financial interest may consists of one or more of the following financial interests of the investigator (or a family member) that reasonably appears to be relates to the investigator's responsibilities or ethical considerations:
  - 1. Ownership of the voting stock or shares of a business entity or ownership \$5,000 or more of the fair market value of a business entity;
  - 2. Funds received by the person from a business entity exceeds 10 percent of the person's gross income;
  - 3. If the value of any remuneration received from the entity in the twelve months preceding the disclosure and the value of any equity interest in the entity as of the date of disclosure and the value of any equity interest in the entity as of the date of disclosure, when aggregated, exceeds \$5000. Remuneration includes salary and any payment for services not otherwise identified as salary such as consulting fees, honoraria, paid authorship. Equity interest includes any stock, stock option, or ownership interest, as determined through reference to public prices or other reasonable measures of fair market value.
  - 4. Intellectual property rights and interests such as patents, copyright, or trademarks.
  - 5. Any travel reimbursed or sponsored travel in the preceding

Policy No. 5.12.01 Page Number 5 of 11 Effective Date: 07/28/20

twelve months, such as salary, consulting fees, honoraria, or paid authorship and travel.

- 6. Any payment for services other than salary, such as consulting fees, honoraria, or paid authorship.
- 7. A position resulting in a fiduciary duty, such as director, officer, partner, trustee, employee, or any position of management.
- O. Significant Personal Interest is any managerial, professional, or fiduciary position held in any third-party organization (e.g., as an officer, director, trustee, advisory board member, board of directors, or other managerial position), whether or not he or she is compensated
- P. Investigator's Excluded Interests - the term "Significant Financial Interest" does not include the following: salary or other remuneration paid by the Health System to the investigator if the investigator is currently employed or otherwise appointed by the Health System; income from investment vehicles, such as mutual funds and retirement accounts, as long as the investigator does not directly control the investment decisions made in these vehicles; income from seminars, lectures, preceptorship or other teaching engagements; travel reimbursed or sponsored by a federal, state, or local government agency, an institution of higher education, an academic teaching hospital, medical center, or research institute affiliated with an institution of higher education; income from service on advisory committees or review panels for a federal, state or local government agency or institution of higher education.
- **Q. Significant Other** a spouse, or individuals who share a dwelling/cohabitate, file joint tax returns, share a checking account or have other joint financial interests, share child-rearing responsibilities and/or demonstrate some similar evidence of influence over one another's lives.

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## II. INVESTIGATOR'S DUTY TO DISCLOSE CONFLICTS OF INTERESTS

- A. At the initial approval of the research protocol by the Health Science Center's Institutional Review Board, each University Health System Investigator must complete and submit the COI Questionnaire to the Integrity Services Department per the Health Systems' Institutional Conflict of Interest Policy 2.12. The Investigator will disclose any Conflict of Interest and other information that is required.
  - 1. The UHS Clinical Research Department will notify the Integrity Services Department of the Health System Employee engaged in Clinical Research as well as the approved Health Science Center's Institutional Review Board number.
  - 2. The Integrity Services Department will send the COI Questionnaire to the Health System employee engaged in research for completion prior to Health System approval of the research study.
  - 3. Updating the COI disclosure occurs within 30 days of the Investigator's discovering or acquiring a new SFI.

### III. PROCEDURE TO DISCLOSE CONFLICTS:

- A. An investigator is responsible for completing and submitting an annual Conflict of Interest Disclosure Form to the Office of Integrity. The investigator is also required to provide updates to the disclosure within 30 days of discovering or acquiring a new significant financial interest. If there is any doubt about the existence of an actual or apparent conflict of interest, the investigator should err on the side of disclosure.
- **B.** An investigator must notify staff, subordinates, collaborators or students of the presence of a conflict of interest and requirements for disclosure if they are to perform as a research assistant or sub-

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investigator on the research project.

- C. University Health System employees disclosure statement must include the following information regarding a significant financial interest or personal commitment:
  - 1. Significant financial interests or personal commitments as outlined above;
  - 2. Intellectual property rights and interests such as patents, copyright, or trademarks;
  - 3. Other activities or situations that may present an actual, apparent, or potential conflict of interest.
- **D.** Prohibited conflicts are never acceptable and, therefore, should not occur. Immediate action must be undertaken to disclose and eliminate any prohibited conflict. In making disclosures under this section, the employee shall:
  - 1. Disclose dollar amounts in rounded, whole dollars.
  - 2. When describing a source, provide the name and address for the source.
  - 3. Disclose at any point when the Investigator and/or Research Personnel establish a new outside relationship, or change an existing relationship that creates a potential conflict under this policy.
- E. The conflict of interest official may request further information about an employee's travel, including the monetary value of the travel, in order to determine whether the travel constitutes a financial conflict of interest.
- **F.** Investigators are not permitted to begin any research activity when they have reported an actual or apparent conflict of interest before they receive a written determination from the Sr. Vice

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President of Research & Information Management (and IRB as applicable) as to how to manage the conflict.

G. In the event that ethical concerns or conflicts of interest not related to research are identified as a result of this Policy's requirements, the Clinical Research Department may refer the issue and relevant information to appropriate Health System's officials.

#### IV. MANAGEMENT OF FINANCIAL CONFLICT OF INTEREST

- A. Conflicts of interest related to purchasing transactions are to be disclosed and managed as set forth in the Conflicts of Interest, University Health System (UHS) Institutional Policy 2.12. Conflicts of interest involving senior-level Health System's employees are subject to the Health System's Institutional Conflict of Interest policy.
- **B.** If it is determined that an actual, perceived, or apparent conflict of interest exists, the investigator may be required to comply with a management plan to ensure the reduction, management or elimination of the conflict. A Management plan may impose any condition and prescribe an action necessary to manage a financial conflict of interest, including an action reducing or eliminating the financial conflict of interest, to ensure that the design, conduct, or reporting of the research is free from bias or the appearance of bias.
  - 1. If the conflict of interest official determines that the employee has a financial conflict of interest, the official and designated individuals, in cooperation with the employee, must develop a management plan to govern the conflict.
  - 2. It is the responsibility of the investigator and/or research personnel to comply with each element of a required management plan.

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- 3. Conditions or restrictions that might be imposed by the Health System to manage, reduce or eliminate actual or potential conflicts of interest include and not limited to:
  - a. public disclosure of relevant significant financial interests (e.g., when presenting or publishing the research);
  - b. for research projects involving human subjects research, disclosure of financial conflicts of interest directly to participants;
  - c. monitoring of research by independent reviewers;
  - d. modification of the research plan;
  - e. disqualification from participation in the portion of the activity that would be affected by the significant financial interests;
  - f. divestiture of significant financial interests; or
  - g. severance of the relationships that create actual or potential conflicts.
- 4. If the conflict of interest official learns of a significant financial interest that was not timely disclosed or was not timely reviewed (by institutional approval date),
  - a. Determine whether the significant financial interest is a financials conflict of interest.
  - b. If a financial conflict of interest exists, implement a management plan or other measures to ensure the objectively of the research going forward.
- **C.** Failure to comply with this policy may subject an employee to sanctions up to and including termination.

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#### V. FEDERAL ENFORCEMENT

A. This policy is intended to be consistent with federal and state law. Where there is a discrepancy, the applicable federal or state law or rule of the funding agency will take precedence, unless the law or rule is less restrictive than the Health System's more stringent standard.

- **B.** Federal Regulations, 42 CFR Part 50, Subpart F, and 45 CFR Part 94, require the institution to notify the Health and Human Services (HHS) Public Health Services (PHS) of instances in which the failure of an employee with this policy or management plan appear to have a biased design, conduct, or reporting of PHS funded research. The Health System must make information available to Health and Human Services (HHS) or the PHS awarding component as required by federal regulation.
- PHS to evaluate the safety or effectiveness of a drug, medical device, or treatment has been designed, conducted, or reported by an employee with a financial conflict of interest was mismanaged or not reported to the Health System as required by federal regulation. The Health System is required to notify the employee involved to disclose the financial conflict of interest in each public presentation of the results of the research and to request an addendum to previously published presentations.

#### **REFERENCES/BIBLIOGRAPHY:**

Code of Federal Regulations: Bayh-Dole Act (37 CFR 401) https://grants.nih.gov/policy/intell-property.htm

Conflicts of Interest, University Health System (UHS) Institutional Policy 2.12

National Institute of Health. https://grants.nih.gov/grants/glossary.htm#I

Protection of Human Subjects in Research and the Conduct of Research within

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the University Health System, Institutional Policy 9.01

Public Health, Policies of General Applicability, 42 CFR 50

Public Welfare, Responsible Prospective Contractors 45 CFR 94

Texas Government Code, Title 5 Open Government; Ethics, Chapter 572 – Personal Financial Disclosure, Standards of Conduct, and Conflict of Interest

## OFFICE OF PRIMARY RESPONSIBILITY:

Senior Vice President, Research & Information Management



## BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

Consideration and Appropriate Action Regarding Policy No. 9.01.02, Expanded Access and Use of an Investigational Device, Drug, or Biologic Research

#### **Background:**

This new policy provides written guidelines to University Health System employees and affiliate staff on the emergency use of an unapproved investigational biologic, device, or drug outside of a clinical trial. When a patient has a serious or life-threatening condition and there is no comparable or satisfactory alternative therapy to diagnose, monitor, or treat the disease, use of an investigational product that has not been approved or cleared by the Federal Food and Drug Administration (FDA) can be authorized to treat the patient.

## **Analysis:**

The policy lists the circumstances under which a health care provider may use an investigational product outside of a clinical study to save the life of a patient and outlines the process for obtaining the authorization, the investigational product, and billing. The use of an investigational product outside of a clinical trial for treatment of a patient is called "expanded access."

## **Fiscal Impact:**

This policy describes the notification process to ensure all Health System departments receive proper notification, authorization and billing to minimize the financial impact on the Health System and ensure appropriate approvals and payment reimbursement.

BCHD Board of Managers – Policy No. 9.01.02, Expanded Access and Use of Investigational Device, Drug, or Biologic Research Tuesday, July 28, 2020 Page 2 of 2

## **Strategic Note:**

This new policy highlights our institutional commitment to improving health and providing high quality compassionate patient care through innovation, education and discovery. This policy also provides a pathway for patients and their physicians to gain access to the newest therapies and diagnostics to treat patients with serious and life threatening diseases outside of clinical trials. The policy support the Corporate Protection of Human Subjects Policy 9.01.

## **Recommendation:**

Policy No. 9.01.02, Expanded Access and Use of an Investigational Device, Drug, or Biologic Research is a new policy that will provide guidance to staff and institutional compliance with the Food and Drug Administration (FDA), 21<sup>st</sup> Century Cures Act, Code of Federal Regulation, Public Health Service Act, as well as the Right to Try Act.

This policy is presented for approval by the Board of Managers

Roberto Villarreal, MD, MPH
Senior Vice President
Research & Information Management

George B. Hernández, Jr. President/Chief Executive Officer

Policy No.: 9.01.02 Page Number: 1 of 14 Effective Date: 07/28/20

# TITLE: EXPANDED ACCESS AND USE OF AN INVESTIGATIONAL DEVICE, DRUG, OR BIOLOGIC RESEARCH

PURPOSE: To provide written guidelines to University Health System (UHS) employees as well as affiliate staff of the Health System to include: business associates (BA), contractors, as well as subcontractors in support of Federal and State Legislative such as the Federal Food and Drug Administration in regards to the emergency use of an unapproved investigational biologic, device, or drug. This is a new policy. [Key Words: Unapproved Investigational Device, Drug, or Biologic, Investigational Device Exemption (IDE), Emergency Use, Food and Drug Administration (FDA), Institutional Review Board (IRB).]

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#### **POLICY STATEMENT:**

When a patient has a serious or life-threatening condition that is not addressed by current approved treatments, an investigational medical device, drug, or biologic that has not been approved or cleared by the Food and Drug Administration (FDA) can be used to treat the patient.

#### **POLICY ELABORATION:**

Investigational product with significant risks may only be used on human subjects through an FDA approved clinical trial for which an investigational device, drug, or biologic is utilized. However, there are circumstances when a health care provider may use an investigational product outside of a clinical study to save the life of a patient or to help a patient suffering from a serious disease or condition for which no other alternative therapy exists. Expanded Access is the use of an investigational device, drug, or biologic outside of a clinical trial for treatment, diagnosis or clinical monitoring of a patient with a serious disease or condition. The FDA allows a physician to use an unapproved investigational article when all appropriate regulatory requirements are met.

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#### I. **DEFINITIONS**

A. Clinical Investigation - an experiment that involves a test article and one or more human subjects and that either is subject to requirements for prior submission to the Food and Drug Administration under section 505(i) or 520(g) of the act, or is not subject to requirements for prior submission to the Food and Drug Administration under these sections of the act, but the results of which are intended to be submitted later to, or held for inspection by, the Food and Drug Administration as part of an application for a research or marketing permit. (21 CFR 50.3(c)).

- **B.** Emergency Use - is defined as the use of an occurrence of an unapproved drug, biologic (i.e., Emergency IND or Emergency Protocol), or device (Emergency Use) to treat a life-threatening condition in which no standard acceptable treatment is available and in which there is not sufficient time to obtain IRB approval. Emergency use is emergency clinical care and does not meet the DHHS definition of research. The holder of the IND (investigational drugs and biologics) or IDE (medical devices) must notify the FDA of the emergency use. For industrysponsored, the physician must notify the manufacturer or sponsor about the emergency use and the sponsor notifies the FDA for IND/IDE approval. For a physician-sponsored IND/IDE, or if no IND/IDE exists, the physician must notify the FDA (usually by phone). For Devices, the sponsor must notify the FDA of the emergency use within 5 days through a submission of an IDE Report describing the details of the case and the patient protection measures that were followed.
- C. Expanded Access is a potential pathway for a patient with a serious or life-threatening disease or condition to gain access to an investigational medical product (drug, biologic, or medical device) for treatment outside of clinical trials when no comparable or satisfactory alternative therapy options are available through Emergency Use pathway, Compassionate Use or Treatment IND/IDE.

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**D. Human Subject** - is an individual who is or becomes a participant in research, either as a recipient of a test article or as a control. A subject may be either a healthy individual or a patient. Therefore, treatment with an investigational agent in a protocol designed to treat a single individual is sufficient for that individual to be considered a human subject even though generalizable knowledge will not result.

- **E. Humanitarian Use Device (HUD)** a medical device intended to benefit patients in the treatment or diagnosis of a disease or condition that affects or is manifested in not more than 8,000 individuals in the United States per year (Section 3052 of the 21st Century Cures Act (Pub. L. No. 114-255).
- F. Humanitarian Device Exemption (HDE) is an application to the FDA that is similar to a premarket approval application, but is exempt from the effectiveness requirements of sections 514 and 515 of the Food, Drug, and Cosmetic Act. FDA approval of an HDE authorizes an applicant to market a Humanitarian Use Device Humanitarian Use Device, subject to certain profit and use restrictions set forth in section 520(m) of the Act. An HDE approval is based on safety and probable benefit. HDEs are exempt from the requirement to provide a reasonable assurance of effectiveness as required in Investigational Device Exemption (IDE) applications. The person who obtains the Humanitarian Device Exemption from FDA is the HDE holder.
- **G. Institutional Review Board** any board, committee, or other group formally designated by an institution to review biomedical research involving humans as subjects, to approve the initiation of and conduct periodic review of such research. (21 CFR 50.3(i)).
- **H. Institutional Review Board Approval** the determination of the IRB that the clinical investigation has been reviewed and may be conducted at an institution with the constraints set forth by the

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IRB and by other institutional and federal requirements.

I. Investigational Device Exemption (IDE) - the allowance of an unapproved medical device to be shipped for use for Investigation / Investigational purposes. It is also required when an FDA approved or FDA cleared device is used in a Clinical Investigation for the purposes of testing safety or effectiveness (unless exempt from prior submission for the IDE or where abbreviated requirements may be allowed) where the intent is for the data to be included in a submission to the FDA or may later be held for inspection by the FDA. FDA has 30 days to review the IDE request and notify the sponsor if approval is withheld.

- **J. Investigational New Drug (IND)** a new drug or biological drug that is used in a clinical investigation. The term also includes a biological product that is used in vitro for diagnostic purposes.
- K. Life Threatening diseases or conditions where the likelihood of death is high unless the course of the disease is interrupted and diseases or conditions with potentially fatal outcomes, where the end point of clinical trial analysis is survival. The criteria for lifethreatening do not require the condition to be immediately lifethreatening or to immediately result in death. Rather, the recipients must be in a life threatening situation requiring intervention before review at a convened meeting of the IRB if feasible.
- **L. Research** a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalized knowledge.
- M. Severely debilitating diseases or conditions that cause major irreversible morbidity. Examples of severely debilitating conditions include blindness, loss of arm, leg, hand or foot, loss of hearing, paralysis or stroke.

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**N. Sponsor** - an individual who both initiates and actually conducts, alone or with others, a clinical investigation, i.e., under whose immediate direction the test article is administered or dispensed to, or used involving, a subject. The term does not include any person other than an individual, e.g., corporation or agency. (21 CFR 50.3(e)).

- O. Sponsor-investigator an individual who both initiates and actually conducts, alone or with others, a clinical investigation, i.e., under whose immediate direction the test article is administered or dispensed to, or used involving, a subject. The term does not include any person other than an individual, e.g., corporation or agency. (21 CFR 50.3(f)).
- P. The Right to Try Act a law in which another way for patients who have been diagnosed with life-threatening diseases or conditions who have tried all approved treatment options and who are unable to participate in a clinical trial to access certain unapproved treatments. Right to Try Act 2018 (Pub. L. No. 115-176).
- Q. Test Article means any drug (including a biological product for human use), medical device for human use, human food additive, color additive, electronic product, or any other article subject to regulation under the act or under sections 351 and 354-360F of the Public Health Service Act (42 U.S.C. 262 and 263b-263n). (21 CFR 50.3(j)).

#### II. EXPANDED ACCESS CATEGORIES

- **A.** Expanded Access is prior to FDA approval and outside of a clinical trial.
  - 1. The emergency use for life-threatening diseases or conditions.

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2. Expanded Access for patient(s) who do not meet the criteria for inclusion in a trial, but may benefit from the use of a test article.

- 3. Treatment use, to expand the number of subjects who may be permitted to participate in a trial that shows promise.
  - (i) Single patient Investigational New Drug (IND), Small group Treatment IND or a full protocol Treatment IND. (other mechanisms include: Open Label Protocol or Open Protocol IND, Group C Treatment IND, or under the FDA's Parallel Track policy).
- 4. Continued access to investigational devices for subjects participating in a trial after the trial is complete, but prior to FDA approval.

#### III. USE OF AN INVESTIGATIONAL DEVICE

- **A.** Emergency Use of an FDA Investigational Device requires:
  - 1. In the event an investigational device is used in an emergency under this exception, the device developer must notify the FDA immediately after shipment. In addition, the physician employing the device will make every effort to protect subjects including, as applicable:
    - a. Obtaining an independent assessment by an uninvolved physician;
    - b. Obtaining informed consent from the patient or legally authorized representative;
    - c. Notify IRB of record as soon as practicable; and

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- d. Obtaining authorization from the Investigational Device Exemption (IDE) holder, if an approved IDE for the device exists.
- 2. If UT IRB is the IRB of record, the treating physician must Report to the IRB within five working days and otherwise comply with IRB requirements, which include submitting the following documents to the IRB of record:
  - a. IRB Notification Form
  - b. Informed Consent or Independent Physician Certification
  - c. Device Emergency Use Checklist
  - d. Evaluate the likelihood of a similar need occurring again and, if future use is likely, immediately initiate efforts to obtain IRB approval and an approved IDE for subsequent use; and
  - e. If an IDE for the use already exists, notify the sponsor of the emergency use, or if an IDE does not exist, notify the FDA of the emergency use, and provide the FDA with a written summary of the conditions constituting the emergency, subject protection measures, and results.
- 3. For all other IRB of record follow the guidelines per the IRB.
- **B.** Expanded Access of an FDA Investigational Device:
  - 1. Expanded Access:
    - a. Prior FDA approval is needed before compassionate use occurs. In order to obtain FDA approval, the

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sponsor should submit an IDE supplement requesting approval. After receiving FDA and IRB of record approval the physician is able to treat the patient identified in the supplement.

#### 2. Treatment Use of an FDA Investigational Device:

- a. Approved IDEs specify the maximum number of clinical sites and the maximum number of human subjects that may be enrolled in a study. During the course of a clinical trial, if the data suggests that the device is effective, then the trial may be expanded to include additional patients with life threatening or serious diseases. Treatment use may begin 30 days after FDA receives the treatment IDE submission, unless FDA notifies the sponsor otherwise. To qualify for a treatment use IDE:
  - i. If the disease is life-threatening, a device may be eligible for a treatment use IDE prior to completion of all clinical trials.
  - ii. The subjects(s) must also have no comparable or satisfactory alternatives to the investigational device.

#### 3. Continued Access to an Investigational Device:

a. The FDA may allow continued enrollment of subject(s) after an IDE controlled clinical trial is complete, while a marketing application is being prepared by the sponsor or reviewed by the FDA, and to facilitate the collection of additional safety and effectiveness data to support the marketing application or to address new questions regarding the investigational device. This is referred to as an "extended investigation."

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#### **C.** Humanitarian Use Device

A. All uses of a HUD require IRB approval as well as the Health System Clinical Research Department who will then notify Health System officials.

- 1. A HUD is deemed a clinical investigation if it includes:
  - a. When a HUD is used according to its approved labeling and indication(s) and involves the collection of safety and effectiveness data. The device is therefore legally marketed and an IDE is not required.
  - b. When a HUD is used for an indication not approved under the HDE and the plan is to safety and effectiveness data to support PMA. In this situation, prior submission to the FDA for an IDE would need to occur.
  - c. When the use meets the regulatory definition of a clinical investigation per 21 CFR Parts 50 and 56 and is not approved under this policy.
- 2. HUDs that do not fall under clinical investigations include:
  - a. When a HUD is used according to its approved label and indications, and does not collect safety or effectiveness data.
  - b. When a HUD is used for an indication not approved under the existing Humanitarian Device Exemption and the IRB determined there is no intention or plan to collect safety/effectiveness data to support a Pre-Market Approval for that indication.

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c. When the use does not meet the regulatory definition of a clinical investigation per 21 CFR Parts 50 and 56.

- 3. All uses of a HUD require IRB approval, unless the HUD is used in an emergent situation deemed by the physician and IRB approval cannot be obtained in time to prevent serious harm or death to a patient.
- 4. The reporting of a HUD utilized in an emergency, must be reported to the IRB within five days.

#### IV. USE OF AN INVESTIGATIONAL NEW DRUG OR BIOLOGIC

- **A.** Emergency Use of an FDA New Drug or Biologic
  - 1. INDs for Emergency Use also known as compassionate use is the use of a drug or biologic with a human subject in life threatening (or severely debilitating) situation in which there is not sufficient time to obtain IRB approval. This exemption from prior IRB review and approval is limited to a single use. FDA regulations require that any subsequent use of the investigational product at the institution have prospective IRB review and approval. When emergency use of an investigational drug is being decided, the physician must:
    - a. Notify the Health System Clinical Research Department as well as IRB of record. Notification does not substitute for approval, but rather is used solely to initiate tracking to ensure the investigator files a report within five days.
    - b. If the intended subject does not meet the criteria of an existing study protocol, or if an approved protocol does not exist, the usual procedure is to

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contact the manufacturer and determine if the drug or biologic can be made available for the emergency use under the company's IND. However, the need for an investigational drug or biologic may arise in an emergency situation that does not allow time for submission of an IND or required amendment. In this case, the FDA may authorize shipment of the drug or biologic in advance of the IND submission.

- i. Report to the IRB within five working days and otherwise comply with IRB requirements which include; Submitting the following documents to the IRB via IRBMail@uthscsa.edu:
  - a) IRB Notification Form
  - b) Informed Consent OR Independent Physician Certification
  - c) FDA IND Letter
  - d) Drug Emergency Use Checklist
- **B.** Expanded Access of an New Drug or Biologic
  - 1. Expanded Access prior to FDA approval is needed before compassionate use occurs. In order to obtain FDA approval, the sponsor should submit an IND supplement requesting approval. After receiving FDA and IRB of record approval the physician is able to treat the patient identified in the supplement.
  - 2. Treatment Use of an FDA Investigational Drug or Biologic

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- a. A treatment IND may be granted only after sufficient data have been collected to show that the drug in question "may be effective" and does not pose unreasonable risks. In addition, the following criteria must be met:
- b. The drug or biologic must be intended to treat a serious or immediately life-threatening disease;
- c. There is no satisfactory alternative treatment available;
- d. The drug or biologic is already under investigation, or trials have been completed; and
- e. The trial sponsor is actively pursuing marketing approval
- 3. Continued Access to an Investigational Drug or Biologic
  - a. The FDA may allow continued enrollment of subject(s) after a controlled clinical trial under an IND has been completed to allow access to the investigational drug or biologic, while a marketing application is being prepared by the sponsor or reviewed by the FDA, and to facilitate the collection of additional safety and effectiveness data to support the marketing application or to address new questions regarding the investigational device. This is referred to as an extended investigation.

#### V. Notification To FDA, IRB of Record, and the Health System Clinical Research Department

A. The FDA expects the physician to make the determination that the patient's circumstances meet the above criteria, to assess the potential for benefit from the use of the unapproved device, drug,

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or biologic and to have substantial reason to believe that the benefit will exist.

- **B.** The Physician or the IRB of Record will provide all documentation to Health System Clinical Research Department.
- C. Notification to the Health System Clinical Research Department (Research@uhs-sa.com or (210) 743-6450) must occur as soon as possible. Health System Officials that will be notified include:
  - a. Senior Vice President of Research and Information Management;
  - b. Chief Operating Officer (COO);
  - c. Chief Medical Officer (CMO);
  - d. Chief Nursing Executive;
  - e. Associate Chief Nursing Officers;
  - f. Senior Vice President of Clinical Services:
  - g. Hospital Administrator;
  - h. Chief Legal Officer;
  - i. Any departmental director that will be impacted by the use of the test article. This may include notification to all members of the Product Evaluation Committee.

#### VI. PURCHASING OF DEVICE, DRUGS, OR BIOLOGICS

A. If purchasing a test article occurs, notification to Health System Clinical Research Department is required to ensure all Health System officials receive proper notification.

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1. If the sponsor or sponsor investigator provides the test article, then the intake of the investigational product will follow the Health System policy and procedure per impacted department.

2. If the test article is not paid for or provided by the sponsor, sponsor investigator, and is the responsibility of the patient/ third party payer, the test article approval and purchasing will follow the Health System policy and procedure per impacted department. The treating physician maybe responsible for obtaining a prior authorization to treat the patient.

#### **REFERENCES/BIBLIOGRAPHY:**

- 21st Century Cures Act (Pub. L. No. 114-255)
- 21 CFR Parts 50 and 56
- 21 CFR 50.3, Definitions
- 21 CFR 312, Investigational New Drug Application
- 21 CFR 812, Investigational Device Exemptions

Public Health Service Act (42 U.S.C. 262 and 263b-263n)

Right to Try Act 2018 (Pub. L. No. 115-176).

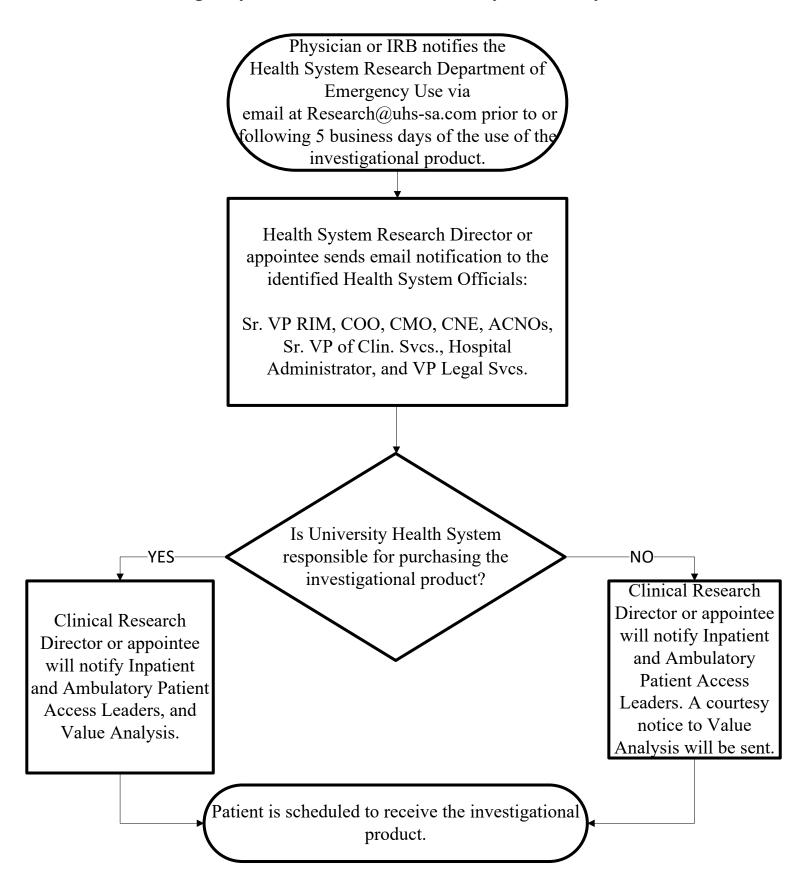
#### **OFFICE OF PRIMARY RESPONSIBILITY:**

Senior Vice President, Research and Information Management

Policy No. 9.01.02 Effective Date: 7/28/2020

ATTACHMENT I

## Emergency Use Process at University Health System





#### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

# Consideration and Appropriate Action Regarding Policy No. 10.12, Peer Review Process

#### **Background:**

The University Health System Board of Managers in Collaboration with the Medical and Dental Staff uses a standard peer review process to promote safe and high quality patient care.

#### **Analysis:**

Through the systematic performance of this peer and quality review, the Health System evaluates the quality of medical and health care services and the competence and performance of providers in order to improve the quality of care and treatment being provided; to monitor the ongoing performance of physicians and non-physician providers; to identify opportunities for improvement; to monitor trends by analyzing aggregate data; and to assure that the peer review process is clearly defined, fair, timely and useful.

This process is intended to be protected from disclosure, and all records and proceedings of this Committee are kept confidential.

#### **Fiscal Impact:**

This new policy does have potential for fines for noncompliance from The Joint Commission.

BCHD Board of Managers - Policy No. 10.12, Peer Review Process Tuesday, July 28, 2020 Page 2 of 2

#### **Strategic Note:**

The new policy conveys the Health System's obligation to quality and patient safety throughout the Health System by improving practices in regards to Medical and Dental Staff peer review and reappointment.

#### **Recommendation:**

Staff recommends approval of the new Policy No. 10.12, Peer Review Process

Bryan J. Alsip, MD, MPH Executive Vice President Chief Medical Officer George B. Hernández, Jr. President/Chief Executive Officer

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#### TITLE: PEER REVIEW PROCESS

PURPOSE: To provide guidelines for the performance of Quality and Peer Review activities for members of the medical-dental staff and advanced practice professionals at University Health System. This is a new policy. [Key Words: Focused Professional Practice Evaluation, Ongoing Professional Practice Evaluation, Peer Review, Quality, Triggers, Criteria, Medical Staff]

#### **POLICY STATEMENT:**

The University Health System Board of Managers, in collaboration with the Medical and Dental Staff, uses a standard peer review process to promote safe and high quality patient care.

#### **POLICY ELABORATION:**

The purpose of the peer review process and policy is to develop and maintain the highest quality provider staff through initial appointment, continuous monitoring, and reappointment. Through the systematic performance of this peer and quality review, the Health System evaluates the quality of medical and health care services and the competence and performance of providers in order to improve the quality of care and treatment being provided; to monitor the ongoing performance of practitioners; to identify opportunities for improvement; to monitor trends by analyzing aggregate data; and to assure that the peer review process is clearly defined, fair, timely and useful. This process is intended to be protected from disclosure, and all records and proceedings of this Committee are kept confidential.

As established by the Medical-Dental Staff Bylaws, these peer and quality review activities are carried out through the Quality Risk Management Committee and its related subcommittees. These activities provide the Health System with a process focused on the patient's care encounters over time through the evaluation of the quality of care as provided by individual practitioners.

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#### I. Definitions:

A. Peer Review means the evaluation of an individual practitioner's professional performance and competency at initial appointment as well as ongoing professional performance, to include the identification of opportunities to improve the quality of care provided. It includes the process of ongoing professional practice evaluation and focused professional practice evaluation both of which are critical components of the credentialing and privileging process. It also includes case reviews of specific outcomes or events meeting certain criteria or indicators, as well as evaluation of the:

- 1. Merits of a complaint relating to a health care practitioner and a determination or recommendation regarding the validity of the complaint;
- 2. Accuracy of a diagnosis;
- 3. Quality of the care provided by a health care provider.

As used in this policy, peer review and its related component processes do not constitute an investigation.

- **B. Peer** means a practitioner who meets the requirements for medical-dental staff membership.
- C. Peer review committee means the Quality Risk Management Committee, which operates under written bylaws approved by Board of Managers and is authorized to evaluate the competence of physicians.
- **D. Track and Trend** means a process defined by the Quality and Clinical Outcomes Management Department which provides a brief report of information obtained in a review process so that the Department can track events and can compile and aggregate data so as to identify any trends which may require further review and/or action.
- **E. Departmental Reviewer** means the Quality Reviewer designated by the Clinical Chair of the Department in the relevant specialty to

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participate in the review of Quality of Care.

- **F. Voluntary Performance Plan** means a plan agreed to by the Involved Provider which may include additional training, monitored practice, chart review or other steps which will enhance quality of care.
- G. Disposition Letter means a written communication from the QRM Committee informing the Involved Provider of the Committee's determination of the matter under review. This includes, but not limited to, the following: Information Letter, Education Letter, Collegial Intervention, and Voluntary Performance Improvement Plan.

The Peer Review Process incorporates the following component processes:

#### II. THE CREDENTIALING PROCESS

As provided in the Medical-Dental Staff Bylaws, the Credentialing Committee is charged with reviewing the credentials and qualifications of all applicants for medical-dental staff membership; reviewing pertinent information on current competence and clinical abilities of each individual recommended for appointment/reappointment; and making recommendations to the Executive Committee for membership and delineation of clinical privileges for practitioners in furtherance of the Health System's goal to improve patient care and treatment

#### III. PROFESSIONAL PRACTICE EVALUATION PROCESS

As provided in Policy No. 10.02.05, Professional Practice Evaluation, the ongoing professional practice evaluation (OPPE) process identifies professional practice trends that impact quality of care. The goal is to monitor current providers to identify trends that require further review in accordance with the Health System's goal to improve patient care and treatment. This is a process that is applied to all providers, and is based on predetermined criteria and thresholds as approved by the Executive Committee.

As further provided in Policy No. 10.02.05, Focused Professional Practice Evaluation (FPPE) is a time-limited period of focused evaluation implemented for all privileges for new applicants and all new privileges for

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existing practitioners in furtherance of the Health System's goal to improve patient care and treatment. FPPE may also be utilized when a question arises regarding a currently privileged practitioner's ability to provide quality patient care. For purposes of this policy, an FPPE shall not be considered placement on a performance or quality improvement plan of any type; a formal or informal warning; censure or reprimand; a limitation or requirement placed on a practice; or an investigation.

In the event that a Department Clinical Chair is the subject of a FPPE or an OPPE review, the Quality and Clinical Outcomes Department and the Chair of the Quality Risk Management Committee will designate the reviewer to be assigned to the matter.

Please see Policy No. 10.02.05 for further information on this process.

#### IV. QUALITY REVIEW PROCESS

The purpose of conducting quality review of specific cases or events is to evaluate the quality of medical services and the competence and performance of providers through the review of outcomes and clinical care events, in order to improve the quality of care in furtherance of the Health System's goal to improve patient care and treatment. Any Health System issues that include nursing and hospital operations that surface through the following process will be forwarded to the appropriate Health System leader. System issues that are known to have a potential impact on the ability of providers to deliver quality care will be tracked by the QRM at the discretion of the committee.

In the event that a Department Clinical Chair is the subject of a Quality Review, the Quality and Clinical Outcomes Department and the Chair of the Quality Risk Management Committee will designate the reviewer to be assigned to the matter.

The Quality Review Process has levels one through three described below.

#### A. Quality Review

Quality Review may be initiated as a result of an outcome or event that meets

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certain indicators or criteria. These indicators or criteria may include but are not limited to:

- 1. Focused Professional Practice Evaluation (FPPE) findings;
- 2. Electronic Risk Assessment Forms (eRAF);
- 3. Complaints (patient, provider, staff, other);
- 4. Surveys;
- 5. Sentinel Events;
- 6. Mortality Reviews;
- 7. Autopsy Disparate Diagnosis (i.e., autopsy identifies relevant diagnosis not made premortem);
- 8. Pathology (i.e. pathology diagnosis found to be incorrect);
- 9. Any method that will identify a potential concern regarding care or outcome;
- 10. Track and Trend Report.

#### **B.** Guidelines for the Review Process

1. **LEVEL ONE:** Staff in the Risk Management section of the Quality and Clinical Outcomes Department will perform an initial medical quality screening review in consultation with the Chair of the Quality Risk Management Committee, or the Chair's Designee, as necessary.

Following this review, if a question is identified during the medical quality screening review, further steps will be taken as appropriate for the particular issue(s) identified. Depending on the issue(s) identified, options include, but are not limited to:

- a. Disruptive or unprofessional behavior will be handled consistent with Policy No. 10.11, Disruptive or Unprofessional Behavior by Members of the Medical-Dental Staff, and Article VII, §8.4a of the Medical-Dental Staff Bylaws.
- b. Conflict issues are forwarded to the appropriate leadership over each party for resolution and the

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complaint resolution is documented for tracking and trending by the Quality/Risk Management Department.

- c. Corrective Action, including summary suspension, immediate suspension, and issues related to provider impairment will be addressed as set out in Article VIII of the Medical-Dental Staff Bylaws.
- d. Referral for Departmental Quality of Care (Level Two) Review; Referral for QRM Case (Level Three) Review; or referral to Quality Response Team.
- 2. LEVEL TWO: Departmental Quality of Care Review is performed by the Department Clinical Chair of the relevant specialty, or their Designee, in the relevant specialty. These individuals are deemed to be agents of the Quality Risk Management Committee and are acting on behalf of the Committee in carrying out its quality and case review functions. This is not an investigation. A standardized form is used which may contain generic questions and a rating system (Level Two Review Form). Reviews are to be submitted within a reasonable time defined as 21 days after the receipt of the review unless an extension is requested and approved by the QRM chair or designee. Completed reviews are submitted to the Quality Risk Management Committee for further review, and disposition.
  - a. Options for resolution at this level, subject to Quality Risk Management Committee review and approval, would include the following:
    - i. Recommend that no further review required;
    - ii. Refer for Track and Trend;
    - iii. Refer for Level Three Review;
    - iv. Refer to Quality Response Team as set out below.

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3. LEVEL THREE: Departmental Clinical Specialty Review includes the Involved Provider. It is performed by the Department Clinical Chair and/or Designated Departmental Reviewer and the Involved Provider. These individuals are deemed to be agents of the Quality Risk Management Committee and are acting on behalf of the Committee in carrying out its quality and case review functions. This is not an investigation. A standardized form is used which may contain generic questions and a rating system. Completed reviews are submitted to the Quality Risk Management Committee for further review and disposition.

- a. When a Level Three Review is initiated, the Department Clinical Chair and the Involved Provider will be notified in writing that a case is being reviewed.
- b. The Department Clinical Chair or Designated Departmental Reviewer and the Involved Provider will be provided a Confidential Case Review Packet (Level Three Review Form) which may include the following:
  - i. A brief case summary;
  - ii. Focus of the review;
  - iii. Issues to be addressed.
- c. The Department Clinical Chair or Designated Departmental Reviewer and the provider will be given an opportunity to respond to the inquiry and to provide specific answers to the questions or issues to be addressed. Reviews are to be submitted within a reasonable time defined as 21 days after the receipt of the review unless an extension is requested and approved by the QRM chair or designee If no response is provided by the Department Clinical Chair or Designated Departmental Reviewer in a timely fashion, the Department Clinical Chair will be advised

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and a replacement reviewer will be appointed by the Quality and Clinical Outcomes Department and the Chair of the Quality Risk Management Committee. If the Involved Provider does not respond in a timely fashion, the Level Three Review will proceed.

d. Responses, if any, from the Department Clinical Chair or Designated Departmental Reviewer, and the Involved Provider are submitted to Risk Management Staff and the Level Three Review Forms for the case are processed, and submitted to the Quality Risk Management Committee for review and disposition.

#### C. Quality Risk Management Committee Review

Quality Risk Management Committee Review is a multi-specialty quality review done by designees from multiple departments. These individuals are deemed to be agents of the Quality Risk Management Committee and are acting on behalf of the Committee in carrying out its quality and case review functions. The purpose of this Committee is to review, and to track and trend, if appropriate, the resolutions suggested by Level One (Risk Management Staff and Quality Risk Management Committee Chair or designee), Level Two (Departmental Quality of Care Review) or Level Three (Departmental Clinical Specialty Review) and to make the decision of final disposition of the matter. Options for disposition include:

- 1. Acceptance or modification of recommendations from the Level One Review;
- 2. Acceptance or modification of recommendations from the Level Two Departmental Quality of Care Review;
- 3. Acceptance or modification of recommendations from Level Three Review (Departmental Clinical Specialty Review).
- 4. The Level Two and Level Three Reviews may have one of three dispositions: *Expected Outcome with No Opportunities for*

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Improvement, Expected Outcome with Opportunities for Improvement, Unexpected Outcome with No Opportunities for Improvement, and Unexpected Outcome with Opportunities for Improvement.

- A. If the Quality Risk Management committee review results in selection of *Expected Outcome with No Opportunities for Improvement* as the disposition, then an informational letter will be sent to the provider notifying them that no further review is required, or the concern was unsubstantiated and will not be tracked.
- B. If the Quality Risk Management committee review results in the disposition of *Expected Outcome with Opportunities for Improvement* one of the following options may be considered for provider follow-up:
- 1. An *Informational Letter* to be sent to the provider in the event that no provider-level opportunity for improvement was identified and no further review is required, and the issue will not be tracked in regards to the provider, however, systems issues may be tracked.
- 2. An *Informational Letter* to be sent to the provider in the event that no provider-level opportunity for improvement was identified and no further review is required; however, the issue will be tracked in regards to the provider by the Quality Risk Management committee for periodic review for a specified time period for identification of potential trend or unforeseen provider or systems issue.
- 3. An *Educational Letter* to be sent to the Involved Provider notifying them of potential provider-level opportunities for improvement such as alternative actions or steps for optimal quality of care that might have been considered; and, that the incident will be tracked on Ongoing Professional Practice Evaluation (OPPE). This is intended to enhance the Involved Provider's ability to deliver

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excellent and quality care. This is not a reportable action.

C. If the Quality Risk Management committee review results in the disposition of *Unexpected Outcome with No Opportunities for Improvement* one of the following two options may be considered for provider follow-up:

- 1. An *Informational Letter* to be sent to the provider in the event that no provider-level opportunity for improvement was identified and no further review is required, and the issue will not be tracked in regards to the provider, however, systems issues may be tracked.
- 2. An *Informational Letter* to be sent to the provider in the event that no provider-level opportunity for improvement was identified and no further review is required; however, the issue will be tracked in regards to the provider by the Quality Risk Management committee for periodic review for a specified time period for identification of potential trend or unforeseen provider or systems issue.
- D. If the Quality Risk Management committee review results in the disposition of *Unexpected Outcome with Opportunities for Improvement* one of the following options may be considered for provider follow-up:
  - 1. An *Informational Letter* to be sent to the provider in the event that no provider-level opportunity for improvement was identified and no further review is required, and the issue will not be tracked in regards to the provider, however, systems issues may be tracked.
  - 2. An *Informational Letter* to be sent to the provider in the event that no provider-level opportunity for improvement was identified and no further review is

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required; however, the issue will be tracked in regards to the provider by the Quality Risk Management committee for periodic review for a specified time period for identification of potential trend or unforeseen provider or systems issue.

- 3. An *Educational Letter* to be sent to the Involved Provider notifying them of potential provider-level opportunities for improvement such as alternative actions or steps for optimal quality of care that might have been considered; and, that the incident will be tracked on Ongoing Professional Practice Evaluation (OPPE). This is intended to enhance the Involved Provider's ability to deliver excellent and quality care. This is not a reportable action.
- 4. A *Collegial Intervention*, defined as a face to face discussion between the Department Chair or designee and the Involved Provider. Notification of the need to perform collegial intervention will be communicated by the Chair of QRM to the Clinical Chair or designee with a copy to the involved provider. This will also include notification that the incident will be tracked on OPPE. This is not a reportable action. The chair or designee will provide a closure letter to the QRM committee documenting that a discussion occurred.
- 5. The implementation of a *Voluntary Performance Improvement Plan*, which may include additional education, proctored practice, or other agreed upon steps to further enhance the quality of care. This will be tracked for OPPE, however is not considered an investigation, a FPPE or an involuntary Performance Improvement Plan (PIP).
- 6. Recommendation for Referral to the Credentials Committee and/or Medical Executive Committee that

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a formal evaluation be conducted.

- 6. In the event that any combination of three or more of the following recommendations occur within a 12 month period for an involved provider, the events associated with the provider will be reconsidered as a whole by the Quality Risk Management Committee for consideration for possible FPPE recommendation to the credentials committee (refer to Policy 10.02.05): Educational Letter, Collegial Intervention, Voluntary Performance Improvement Plan or Referral to the Credentials Committee and/or Medical Executive Committee.
- 7. Providers may contact the Director of the Health System Risk Management Department or designee within 30 days after receipt of the disposition letter to discuss and/or arrange a written or in-person appeal meeting with the QRM committee.
- 8. An external specialty review could be requested from outside the UT Health/UHS for in-specialty/same specialty review of a case and returned to the Committee for final disposition with the approval of the Quality and Risk Management Committee.

#### **D.** Quality Response Team:

This team consists of the Chair of the Quality Risk Management Committee, Secretary of the Medical Dental Staff, President of the Medical Dental Staff, Health System Chief Medical Officer (or designee), with or without invited ad hoc members such as Department Chairs. These individuals are deemed to be agents of the Quality/Risk Management Committee and are acting on behalf of the Committee in carrying out its quality and case review functions and they report directly to the Medical Executive Committee. A Quality Response Team Review is triggered by an event, incident or complaint which has the potential to cause imminent harm to a patient, staff or others. This process may be used to escalate any review, as appropriate. Options for

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disposition by the Quality Response Team may include:

1. No action taken;

- 2. Escalation to the Medical Executive Committee;
- 3. Recommend Summary (temporary) Suspension pending final disposition. This activity may require self-reporting to the Texas Medical Board;
- 4. Recommend *ad hoc* review committee with report back to Quality Response Team.
- **E.** Medical Executive Committee (MEC): As set out in the Medical Dental Staff Bylaws.

#### V. CONFIDENTIALITY

- A. All records relating to quality and peer review shall be confidential and maintained by the Risk Management Department. All records and proceedings under this policy are confidential quality assurance and peer review activities. All proceedings and records of, communications to, persons acting under this policy are confidential and privileged in accordance with Tex. Occ. Code §160.001 et seq. and Tex. Health & Safety Code §161.031 et seq.
- **B.** This policy is based on the statutory authority of the Health Care Quality Improvement Act of 1986, 42 U.S.C. 11101, et seq and Tex. Occ. Code \$160.001 et seq. and Tex. Health & Safety Code \$161.031 et seq. All recommendations, communications and actions made or taken pursuant to this policy are deemed to be covered by such provisions of federal and state law providing protection to peer review related activities.

#### **REFERENCES/BIBLIOGRAPHY:**

The Joint Commission standards

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Bylaws of the Medical-Dental Staff

### OFFICE OF PRIMARY RESPONSIBILITY:

**Executive Vice President/Chief Medical Officer** 



#### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

July 28, 2020

# Consideration and Appropriate Action Regarding the Second Quarter 2020 Investment Report

Attached for your approval are the Investment Portfolio Summaries for the Health System and CFHP invested funds for the second quarter of 2020. In total, the value of all invested funds as of June 30, 2020 was \$1,620,751,150 consisting of Health System, Project, Certificate and CFHP Funds. The reports include all information required by the Texas Public Funds Investment Act. In addition, the Health System and CFHP portfolio reports have been provided separately. The portfolios earned \$4,122,229 in interest income in the second quarter, a 50% decline from \$8,172,042 in the same period a year ago, reflecting the decline in market rates in the last six months. The portfolio's unrealized gain grew to \$6,586,332.

As of June 30, 2020, the Health System portfolio for operations (excluding CFHP and the debt related funds) was valued at \$982,502,338. The portfolio, consisting of the Operating, Contingency, Capital and Tax Funds, had a weighted average yield-to-maturity of 0.92% and a weighted average maturity of 313 days. The portfolio's yield is well ahead of the 6-month Constant Maturity Treasury (CMT) benchmark, which yielded 0.64%, but modestly trails the longer 1-year CMT benchmark's 1.17% yield. With interest rates falling sharply over the quarter, this portfolio's yield should exceed like maturity benchmarks in the coming months.

In April of 2018 the Health System received bond proceeds of \$308,000,000 from the issuance of the Certificates of Obligation Series 2018. As of June 30, 2020 the Project Fund was valued at \$264,535,949 had a weighted average yield-to-maturity of 1.13% and a weighted average maturity of 278 days. The Project Fund is held in assets meeting the PFIA requirements, with \$135,630,887 in money markets or maturing in less than 180 days to meet any liquidity needs. This portfolio's yield exceeds the 6-month CMT's 0.64% and roughly matches the 1-year CMT's 1.17%.

In late-February of 2020 the Health System received bond proceeds of \$170,000,000 from the issuance of the Certificates of Obligation Series 2020. As of June 30, 2020 this Project

Fund was valued at \$170,332,603 had a weighted average yield-to-maturity of 0.28% and a weighted average maturity of 324 days. The timing of receipt of these funds coincided with significant market turmoil surrounding the coronavirus, which has impacted the investment strategy and results. This portfolio's yield was below the 6-month CMT's 0.64%, which is a trailing average, due largely to the timing of those investments.

The Health System also collects property taxes for debt service which are segregated into the Certificate Fund. The amount held in this account as of June 30, 2020 was \$17,952,941 and had a weighted average yield-to-maturity of 0.11%. The Certificate Fund monies are held in highly liquid short-term investments in order to make a debt service payment on August 15, 2020.

University Health System began operating a Local Provider Participation Fund (LPPF) which is financed by mandatory payments assessed on private hospitals. As of 6/30/20, the balance in this account is \$24,784,487. The funds are held in highly liquid short term investments in order to process intergovernmental transfers when required. The weighted average yield to maturity for these funds is 0.11%.

The Community First Health Plans, Inc. portfolio (including the Community First Group Hospital Service Corporation PPO) was valued at \$160,642,832 as of June 30, 2020. The CFHP portfolio had a weighted average yield-to-maturity of 0.48% and a weighted average maturity of 171 days. The portfolio's yield fell below both the 6-month and 1-year CMT benchmarks, which yielded 0.64% and 1.17% respectively. The portfolio's yield lags due to CFHP's liquidity requirements which detract from investment performance and dictate an average maturity shorter than these benchmarks.

The second quarter began with much of the nation sheltering in place to weather what many expected to be a very intense, but short economic storm. The initial sign of serious economic damage emerged in filings for first-time unemployment benefits. The first negative employment report arrived in early April as nonfarm payrolls shed -701k jobs in March and the unemployment rate climbed from 3.5% to 4.4%. Company payrolls fell 20.5 million during April with the unemployment rate rising to 14.7%. The BLS also indicated the rate was actually understated by nearly five percentage points due to classification errors, so the true unemployment rate was nearly 20%. Over a 15-week period ending in late June, the total number of filings topped 48 million. Employment conditions improved from there with payrolls (re)adding 2.5 million jobs in May and 4.8 million in June as the economy gradually reopened. While encouraging, at this point businesses have essentially returned a third of the workers they laid-off in the spring, but even that doesn't tell the whole story.

According to the Department of Labor, for the week ending June 13 the total number of Americans receiving either state or federal unemployment benefits stood at \$31.5 million.

With stores closed, consumer spending declined as retail sales dropped -8.2% in March and -14.7% in April before rising +17.7% in May, leaving retail sales just 8% below the previrus period from a year ago.

The U.S. officially entered recession as the longest economic expansion on record came to a close in February. The final first quarter GDP report showed the U.S. economy contracted by an annualized -5.0. Second quarter GDP won't be released until late-July but is certain to be the weakest single quarter on record with the Atlanta Fed's GDPNow model predicting a -36.8% plunge. A drop of this magnitude leaves behind a lot of damage, but all indications point to both the deepest and shortest recession on record as sales and employment rose sharply in May from still undetermined depths.

While GDP was tumbling, stocks were already in recovery mode with the March sell off fading. The NASDAQ index reached a fresh historical high to end the quarter, while the S&P 500 crept within 1% of its 2020 opening level. Bond yields fell across much of the curve with the two-, three-, five-, and seven-year Treasury notes all trading to record lows. The Fed, not expected to raise rates until late 2022 at the earliest, has flattened out and anchored the short end of the yield curve, while QE, low inflation expectations and negative global yields have capped the intermediate to long end.

The quarter began and ended at a crossroad. The virus threat intensified, diminished and then reemerged. Amid so much uncertainty, concern is warranted. Fed Chairman Jay Powell acknowledged the recovery had begun sooner than expected, but noted the outlook is "extraordinarily uncertain and will depend in large part on our success in containing the virus." Powell also said "a full recovery is unlikely until people are confident that it is safe to reengage in a broad range of activities." Social distancing is incompatible with economic growth.

This information is presented for approval by the Board of Managers.

Reed Hurley

Executive Vice President /

Chief Financial Officer

George B. Hernández, Jr.

President/Chief Executive Officer



## **Investment Portfolio Summary**

# **University Health System**



For the Quarter Ended June 30, 2020

Prepared by HilltopSecurities Asset Management



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#### **MARKET RECAP - JUNE 2020:**

Last month in our summary for May we wrote, "Phrases such as the "steepest decline ever" and the "worst in history" will apply to almost every piece of April economic data." The opposite will be true for June as the economic reopening that started in May resulted in significant rebounds that in many cases were the "biggest gain in history." We would, however, caution readers not to put too much stock into the big jumps in the monthly data as things had gotten so bad in April and May they just had to get better. And, despite the improvement evident in much of the economic data, we are nowhere near the levels that prevailed prior to the COVID-19 mandated shutdowns. The employment data is the most obvious place to start as non-farm payrolls grew by a stunning 2.5 million in May. The largest monthly gain in the history of this series going back to 1939 wildly surpassed the consensus forecast for a loss of 7.5 million jobs, and yet was only a tenth of the 22 million jobs lost in March and April. The unemployment rate, expected to climb to 19%, actually declined to 13.3%. The ISM surveys perked up as well with the manufacturing index climbing from 41.5 to 43.1 and the non-manufacturing index from 41.8 to 45.4. While both readings still indicated contraction, the improvement was viewed as a signal that the worst was behind us. Auto sales also topped expectations, rebounding from April's pitiful 8.6 million unit annual pace to 12.2 million. Consumer spending came roaring back in May, too, no doubt reflecting some pent up demand as consumers emerged en masse from the nationwide lockout and began spending at a furious pace. Sales surged +17.7% during May after a revised -14.7% April decline. Spending was brisk across all categories as it appears the government's response to the crisis has helped support consumer spending. Housing data for May was mixed as existing homes sales fell -9.7% to the lowest level since October 2010. However, since existing sales are measured at closing this data is more reflective of activity during March and April, when many buyers and sellers were in lockdown. By contrast, new home sales are measured when the contracts are signed and they climbed 16.6% during May.

The improving trend in economic data was countered in the later part of June by worrisome trends in COVID-19 data as states that had reopened to great fanfare around Memorial Day saw a dramatic surge in cases. Texas, Florida, and Arizona were hard hit, forcing renewed restrictions and closures as the Fourth of July holiday approached.

Equity markets focused on the positives and extended their rally, with the Dow Jones Industrial Average climbing +1.7% and the S&P 500 gaining +1.8% in June. The Nasdaq composite rose a remarkable +6%, hit a new record high, and is up +12.1% year-to-date as technology stocks have been a beneficiary of the stay at home economy. Bond markets were stable with slight declines of 1-2 basis points in yield across most tenors. The two-year T-note yield closed June at 0.15%, while both the three-year and five-year T-notes set record lows at 0.17% and 0.27% respectively on June 29th. The short end of the yield curve is likely to be anchored by Fed policy for years to come. All in all, it appears the recovery has begun in earnest, but it also appears likely that the path won't be smooth and the outlook is still very much dependent on the path of the virus.





## For the Quarter Ended June 30, 2020

This report is prepared for the University Health System (the "Entity") in accordance with Chapter 2256 of the Texas Public Funds Investment Act ("PFIA"). Section 2256.023(a) of the PFIA states that: "Not less than quarterly, the investment officer shall prepare and submit to the governing body of the entity a written report of the investment transactions for all funds covered by this chapter for the preceding reporting period." This report is signed by the Entity's investment officers and includes the disclosures required in the PFIA. To the extent possible, market prices have been obtained from independent pricing sources.

The investment portfolio complied with the PFIA and the Entity's approved Investment Policy and Strategy throughout the period. All investment transactions made in the portfolio during this period were made on behalf of the Entity and were made in full compliance with the PFIA and the approved Investment Policy.

Name: Bill Bedwell

Name: Cory Cofield

Title: Executive Vice President / CFO

Title: Executive Vice President / Controller

Title: Executive Vice President / Controller

Title: Executive Director Reimb / Treas Mgmt



# University Health System Executive Summary As of 06/30/20

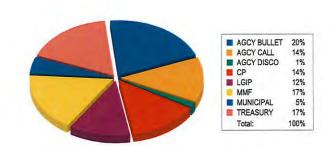
#### **Account Summary**

#### Allocation by Security Type

#### Beginning Values as of 03/31/20

#### 1,443,408,210.58 1,450,566,039.46 Par Value Market Value 1,460,108,318.33 1,450,230,247.19 1,453,799,146.27 Book Value 1,443,962,671.99 6,309,172.06 Unrealized Gain /(Loss) 6,267,575.20 100.43% Market Value % 100.43% Weighted Avg. YTW 1.453% 0.859%

1.453%



#### Allocation by Issuer

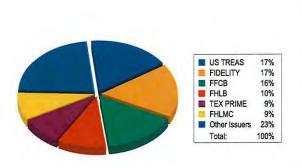
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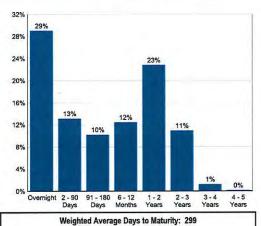
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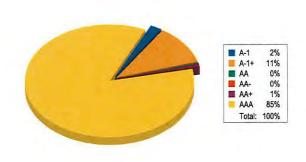
0.859%

Ending Values as of 06/30/20

#### **Credit Quality**







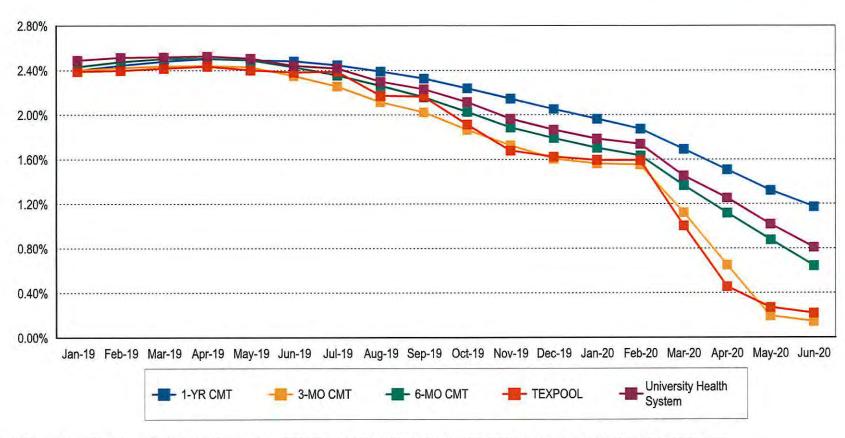
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# University Health System Benchmark Comparison As of 06/30/2020



Note 1: CMT stands for Constant Maturity Treasury. This data is published in Federal Reserve Statistical Release H.15 and represents an average of all actively traded Treasury securities having that time remaining until maturity. This is a standard industry benchmark for Treasury securities. The CMT benchmarks are moving averages. The 3-month CMT is the daily average for the previous 3 months, the 6-month CMT is the daily average for the previous 6 months, and the 1-year and 2-year CMT's are the daily averages for the previous 12-months.

Note 2: Benchmark data for TexPool is the monthly average yield.

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# **University Health System** Detail of Security Holdings As of 06/30/2020

CUSIP	Settle Date	Sec. Type	Sec. Description	CPN	Mty Date	Next Call	Call Type	Par Value	Purch Price	Orig Cost	Book Value	Mkt Price	Market Value	Days to Mty	Days to Call	YTM	YTW
01-Operating F	und																
RGXX-UHS		MMF	Fidelity Gov Inst'l MM					38,964,457.39	100.000	38,964,457.39	38,964,457.39	100.000	38,964,457.39	1		0.110	0.11
Total for 01-O	perating Fu	ind						38,964,457.39	100.000	38,964,457.39	38,964,457.39	100.000	38,964,457.39	1		0.110	0.11
2-Contingenc	y Fund																
FRGXX-UHS		MMF	Fidelity Gov Inst'l MM					9,706,433.07	100.000	9,706,433.07	9,706,433.07	100.000	9,706,433.07	1		0.110	0.11
TEXPOOL		LGIP	TexPool					8,446,346.03	100.000	8,446,346.03	8,446,346.03	100.000	8,446,346.03	1		0.216	0.21
3821175X8	12/17/19	MUNICIPAL	TX A&M Univ	1.600	07/01/20			2,320,000.00	100.000	2,320,000.00	2,320,000.00	100.000	2,320,000.00	1		1.600	1.60
1514BHB2		CP - INT	Univ of TX	1.750	10/06/20			15,000,000.00	100.000	15,000,000.00	15,000,000.00	100.199	15,029,850.00	98		1.750	1.7
133EKL61	09/12/19	AGCY BULET	FFCB	1.550	03/04/21			10,000,000.00	99.654	9,965,400.00	9,984,101.50	101.016	10,101,610.00	247		1.788	1.7
128284B3	01/07/20	TREAS NOTE	U.S. Treasury	2.375	03/15/21			10,000,000.00	100.918	10,091,796.88	10,054,884.00	101.551	10,155,078.00	258		1.590	1.5
130ACHJ6	01/27/20	AGCY BULET	FHLB	1.800	03/24/21			5,000,000.00	100.273	5,013,650.00	5,008,655.85	101.100	5,054,987.50	267		1.561	1.5
8213APC3	08/14/19	MUNICIPAL	TX A&M Univ	1.964	05/15/21			1,885,000.00	100.000	1,885,000.00	1,885,000.00	101.394	1,911,276.90	319		1.965	1.9
370962U2	12/19/19	MUNICIPAL	Little Elm ISD		08/15/21			1,010,000.00	96.994	979,639.40	989,319.01	98.751	997,385.10	411		1.852	1.8
128284W7	11/18/19	TREAS NOTE	U.S. Treasury	2.750	08/15/21			15,000,000.00	101.891	15,283,593.75	15,183,939.30	102.871	15,430,663.50	411		1.644	1.6
133EKP67	09/17/19	AGCY BULET	FFCB	1.625	09/17/21			15,000,000.00	99.625	14,943,750.00	14,965,710.30	101.738	15,260,682.00	444		1.817	1.8
130AJGL7	04/02/20	AGCY BULET	FHLB	0.320	10/01/21			8,000,000.00	100.000	8,000,000.00	8,000,000.00	100.100	8,007,968.00	458		0.320	0.3
82723VK2	04/30/20	MUNICIPAL	State of TX	5.000	10/01/21			5,950,000.00	105.871	6,299,324.50	6,257,808.79	105.950	6,304,025.00	458		0.830	0.8
128285L0	11/18/19	TREAS NOTE	U.S. Treasury	2.875	11/15/21			15,000,000.00	102.430	15,364,453.13	15,252,300.75	103.699	15,554,883.00	503		1.630	1.6
133ELA95	05/26/20	AGCY CALL	FFCB	0.190	11/26/21	8/26/2020	CONT	10,000,000.00	99.950	9,995,000.00	9,995,323.70	99.978	9,997,773.00	514	57	0.223	0.2
3137EADB2	03/27/20	AGCY BULET	FHLMC	2.375	01/13/22			15,000,000.00	103.345	15,501,750.00	15,429,053.10	103.323	15,498,412.50	562		0.500	0.5
559155HN8	04/21/20	MUNICIPAL	North East ISD, TX	5.000	02/01/22			6,985,000.00	107.397	7,501,680.45	7,445,557.51	107.488	7,508,036.80	581		0.800	0.8
882806EP3	11/21/19	MUNICIPAL	TX Tech Univ	2.620	02/15/22			950,000.00	101.763	966,748.50	962,239.47	102,335	972,182.50	595		1.810	1.8
889855K50	05/19/20	MUNICIPAL	Tomball ISD, TX	5.000	02/15/22			1,250,000.00	106.966	1,337,075.00	1,331,266.65	107.672	1,345,900.00	595		0.952	0.9
3133ELUQ5	03/27/20	AGCY BULET	FFCB	0.700	03/25/22			10,535,000.00	100.319	10,568,606.65	10,564,224.83	100.825	10,621,949.57	633		0.539	0,5
133ELUX0	03/30/20	AGCY CALL	FFCB	1.000	03/30/22	3/30/2021	CONT	25,000,000.00	100,000	25,000,000.00	25,000,000.00	100.070	25,017,557.50	638	273	1.000	1.0
134GVJB5	04/06/20	AGCY CALL	FHLMC	1.200	04/06/22	7/6/2020	ONE TIME	20,000,000.00	100.000	20,000,000.00	20,000,000.00	100.016	20,003,164.00	645	6	1.200	1.2
8213AHJ7	01/23/19	MUNICIPAL	TX A&M Univ	2.479	05/15/22			5,000,000.00	98.961	4,948,050,00	4,970,106.25	103.901	5,195,050.00	684		2.809	2.8
130AJHV4	04/27/20	AGCY CALL	FHLB	0.600	07/27/22	4/27/2021	CONT	10,000,000.00	100.000	10,000,000.00	10,000,000.00	100.015	10,001,504.00	757	301	0.600	0.6
370962V0	12/19/19	MUNICIPAL	Little Elm ISD		08/15/22			1,010,000.00	95.004	959,540.40	969,468.07	97.482	984,568.20	776		1.939	1.9
313380GJ0	09/16/19	AGCY BULET	FHLB	2.000	09/09/22			15,000,000.00	100.531	15,079,650.00	15,058,915.65	103.882	15,582,226.50	801		1.816	1.8
882806EQ1	03/01/19	MUNICIPAL	TX Tech Univ	2.761	02/15/23			9,340,000.00	100.249	9,363,256,60	9,355,734.16	103.990	9,712,666.00	960		2.694	2.6

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# **University Health System** Detail of Security Holdings As of 06/30/2020

CUSIP	Settle Date Sec. Type	Sec. Description	CPN	Mty Date	Next Call	Call Type	Par Value	Purch Price	Orig Cost	Book Value	Mkt Price	Market Value	Days to Mty	Days to Call	YTM	YTW
02-Contingenc	y Fund															
889855K68	05/19/20 MUNICIPAL	Tomball ISD, TX	5.000	02/15/23			2,925,000.00	110.836	3,241,953.00	3,228,596.66	111.783	3,269,652.75	960		0.981	0.981
3133ELUJ1	03/24/20 AGCY CALL	FFCB	1.000	03/24/23	3/24/2021	CONT	10,000,000.00	100.000	10,000,000.00	10,000,000.00	100.393	10,039,294.00	997	267	1.000	1.000
3136G4VM2	05/11/20 AGCY CALL	FNMA	0.400	05/05/23	5/5/2021	ONE TIME	10,000,000.00	99.975	9,997,500.00	9,997,615.80	100.004	10,000,425.00	1,039	309	0.408	0.408
88213APE9	08/14/19 MUNICIPAL	TX A&M Univ	2.070	05/15/23			7,545,000.00	100.000	7,545,000.00	7,545,000.00	104.538	7,887,392.10	1,049		2.070	2.070
3134GVN79	06/30/20 AGCY CALL	FHLMC	0.500	06/30/23	3/30/2021	QRTLY	10,000,000.00	100.000	10,000,000.00	10,000,000.00	100.017	10,001,699.00	1,095	273	0.500	0.500
8821173A0	07/20/18 MUNICIPAL	TX A&M Univ	2.500	07/01/23			7,260,000.00	97.554	7,082,420.40	7,149,214.72	106.004	7,695,890.40	1,096		3.036	3.036
8821176A7	12/17/19 MUNICIPAL	TX A&M Univ	1.790	07/01/23			1,000,000.00	100.000	1,000,000.00	1,000,000.00	103.894	1,038,940.00	1,096		1.790	1.790
5370962W8	12/19/19 MUNICIPAL	Little Elm ISD		08/15/23			1,515,000.00	92.463	1,400,814.45	1,416,921.43	95.997	1,454,354.55	1,141		2.155	2.155
597495BL3	12/11/19 MUNICIPAL	Midland Cty Fresh Wtr Dist	1.982	09/15/23			1,000,000.00	100.000	1,000,000.00	1,000,000.00	101.605	1,016,050.00	1,172		1.982	1.982
486063ZS2	11/20/19 MUNICIPAL	Katy ISD	2.017	02/15/24			1,645,000.00	100.000	1,645,000.00	1,645,000.00	102.442	1,685,170.90	1,325		2.017	2.017
8821176B5	12/17/19 MUNICIPAL	TX A&M Univ	1.850	07/01/24			1,000,000.00	100.000	1,000,000.00	1,000,000.00	104.924	1,049,240.00	1,462		1.850	1.850
5370962X6	12/19/19 MUNICIPAL	Little Elm ISD		08/15/24			1,000,000.00	89.879	898,790.00	909,844.29	94.460	944,600.00	1,507		2.305	2.305
Total for 02-C	ontingency Fund						307,277,779.10	100.710	309,332,222.21	309,028,580.89	101.831	312,804,887.37	592		1.251	1.251



# **University Health System** Detail of Security Holdings As of 06/30/2020

CUSIP	Settle Date	Sec. Type	Sec. Description	CPN	Mty Date	Next Call	Call Type	Par Value	Purch Price	Orig Cost	Book Value	Mkt Price	Market Value	Days to Mty	Days to Call	YTM	YTV
3-Plant Fund																	
RGXX-UHS		MMF	Fidelity Gov Inst'l MM					50,620,795.87	100.000	50,620,795.87	50,620,795.87	100.000	50,620,795.87	1		0.110	0.1
EXPOOL		LGIP	TexPool					28,788,695.52	100.000	28,788,695.52	28,788,695.52	100.000	28,788,695.52	1		0.216	0.2
EXPRIME		LGIP	TexPool Prime					67,619,057.39	100.000	67,619,057.39	67,619,057.39	100.000	67,619,057.39	1		0.524	0.
1514BGW7	11/05/19	CP - INT	Univ of TX	1.860	07/31/20			5,000,000.00	100.000	5,000,000.00	5,000,000.00	100.079	5,003,950.00	31		1.860	1.
13384B24	02/12/20	AGCY DISCO	FHLB		08/07/20			20,000,000.00	99.238	19,847,583.33	19,968,138.80	99.985	19,996,916.00	38		1.562	1.3
8068CEN1	06/04/20	CP - INT	State of CA	0.240	09/02/20			10,000,000.00	100.000	10,000,000.00	10,000,000.00	99.997	9,999,700.00	64		0.240	0.
5248NLQ1	06/04/20	CP - INT	City of Austin, TX	0.200	09/03/20			4,600,000.00	100.000	4,600,000.00	4,600,000.00	99.993	4,599,678.00	65		0.200	0.
128282V1	11/27/19	TREAS NOTE	U.S. Treasury	1.375	09/15/20			10,000,000.00	99.809	9,980,859.38	9,995,060.70	100.247	10,024,655.00	77		1.616	1.
B306AK22	06/04/20	CP - DISC	Kaiser Foundation Hospital		10/02/20			18,596,000.00	99.913	18,579,883.40	18,583,509.62	99.892	18,575,849.37	94		0.260	0.
12828272	12/18/19	TREAS NOTE	U.S. Treasury	1.625	10/15/20			10,000,000.00	100.004	10,000,390.63	10,000,163.70	100.415	10,041,519.00	107		1.619	1
6640PLA9	02/19/20	CP-DISC	J.P.Morgan Sec		11/10/20			25,000,000.00	98.830	24,707,395.83	24,854,250.00	99.961	24,990,210.00	133		1.609	1
12828PC8	11/27/19	TREAS NOTE	U.S. Treasury	2.625	11/15/20			10,000,000.00	100.930	10,092,968.75	10,035,940.90	100.910	10,091,016.00	138		1.652	1
128285\$5	12/18/19	TREAS NOTE	U.S. Treasury	2.500	12/31/20			10,000,000.00	100.875	10,087,500.00	10,042,228.00	101.164	10,116,406.00	184		1.644	1
130AJ4A4	02/12/20	AGCY BULET	FHLB	1.500	02/10/21			10,000,000.00	99.971	9,997,145.60	9,998,250.90	100.804	10,080,361.00	225		1.529	1.
130AJRS0	06/23/20	AGCY BULET	FHLB	0.190	03/29/21			10,000,000.00	100.000	10,000,000.00	10,000,000.00	99.956	9,995,581.00	272		0.190	0
128284G2	09/19/19	TREAS NOTE	U.S. Treasury	2.375	04/15/21			8,000,000.00	100.832	8,066,562.50	8,033,696.80	101.742	8,139,375.20	289		1.835	1
133ELZH0	05/20/20	AGCY BULET	FFCB	0.125	05/14/21			10,000,000.00	99.954	9,995,400.00	9,995,932.60	99.979	9,997,932.00	318		0.172	0.
130AJQ69	06/25/20	AGCY BULET	FHLB	0.125	06/15/21			10,000,000.00	99.937	9,993,680.00	9,993,788.30	99.897	9,989,703.00	350		0.190	0.
130AGLD5	06/25/20	AGCY BULET	FHLB	1.875	07/07/21			8,250,000.00	101.736	8,393,220.00	8,390,913.38	101.698	8,390,052.00	372		0.192	0.
79240JW1	04/21/20	MUNICIPAL	Round Rock ISD, TX	5.000	08/01/21			3,095,000.00	105.459	3,263,956.05	3,238,353.44	105.134	3,253,897.30	397		0.700	0.
128285F3	01/07/20	TREAS NOTE	U.S. Treasury	2.875	10/15/21			10,000,000.00	102.250	10,225,000.00	10,164,550.00	103.477	10,347,656.00	472		1.580	1.
134GVUK2	05/18/20	AGCY CALL	FHLMC	0.300	05/13/22	5/13/2021	ONE TIME	20,000,000.00	99.975	19,995,000.00	19,995,300.20	99.929	19,985,810.00	682	317	0.313	0.
133ELN26	06/22/20	AGCY BULET	FFCB	0.260	06/22/22			25,000,000.00	99.970	24,992,500.00	24,992,593.50	100.039	25,009,650.00	722		0.275	0.
133ELN26	06/22/20	AGCY BULET	FFCB	0.260	06/22/22			10,000,000.00	99.948	9,994,800.00	9,994,864.90	100.039	10,003,860.00	722		0.286	0
134GVJP4	04/08/20	AGCY CALL	FHLMC	1.125	10/07/22	7/7/2020	ONE TIME	15,000,000.00	100.000	15,000,000.00	15,000,000.00	100.016	15,002,436.00	829	7	1.125	1
134GV4C9	06/30/20	AGCY CALL	FHLMC	0.400	12/29/22	12/29/2020	QRTLY	15,000,000.00	99.995	14,999,250.00	14,999,250.90	99.950	14,992,563.00	912	182	0.402	0.
133ELJN5		AGCY CALL	FFCB	1.640	01/24/23	1/24/2022	CONT	10,000,000.00	100.000	10,000,000.00	10,000,000.00	101.762	10,176,241.00	938	573	1.640	1.
otal for 03-Pla	ant Front	_						434,569,548.78	100.066	434,841,644.25	434,905,335,42	100,295	435.833.565.65	252		0.718	0.

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# University Health System Detail of Security Holdings As of 06/30/2020

CUSIP	Settle Date	Sec. Type	Sec. Description	CPN	Mty Date	Next Call	Call Type	Par Value	Purch Price	Orig Cost	Book Value	Mkt Price	Market Value	Days to Mty	Days to Call	YTM	YTW
4-Tax Fund																	
RGXX-UHS		MMF	Fidelity Gov Inst'l MM					57,206,112.38	100.000	57,206,112.38	57,206,112.38	100.000	57,206,112.38	1		0.110	0.110
TEXPRIME		LGIP	TexPool Prime					29,950,580.38	100.000	29,950,580.38	29,950,580.38	100.000	29,950,580.38	1		0.524	0.524
98459RG87	02/26/20	CP - DISC	Yale Univ		07/08/20			7,000,000.00	99.390	6,957,329.17	6,997,754.19	99.998	6,999,889.40	8		1.660	1.660
128282J8	09/16/19	TREAS NOTE	U.S. Treasury	1.500	07/15/20			8,000,000.00	99.688	7,975,000.00	7,998,839.20	100.051	8,004,088.00	15		1.881	1.881
128282J8	09/19/19	TREAS NOTE	U.S. Treasury	1.500	07/15/20			6,000,000.00	99.660	5,979,609.38	5,999,043.78	100.051	6,003,066.00	15		1.918	1.918
23505BAA5	11/06/19	CP - INT	DFW Intl Airport	1.850	07/23/20			5,500,000.00	100.000	5,500,000.00	5,500,000.00	100.061	5,503,355.00	23		1.850	1.850
23506FAA5	11/06/19	CP - INT	DFW Intl Airport	1.850	07/23/20			5,000,000.00	100.000	5,000,000.00	5,000,000.00	100.061	5,003,050.00	23		1.850	1.850
13068BFR3	05/22/20	CP - INT	State of CA	0.240	08/20/20			4,160,000.00	100.000	4,160,000.00	4,160,000.00	100.011	4,160,457.60	51		0.240	0.240
9583RJA8	02/13/20	CP - DISC	Salvation Army		09/10/20			13,000,000.00	99.067	12,878,666.67	12,958,977.72	99.956	12,994,280.00	72		1.615	1.615
3130AH2Z5	09/24/19	AGCY BULET	FHLB	1.750	09/16/20			8,500,000.00	99.881	8,489,885.00	8,497,838.37	100.331	8,528,167.30	78		1.873	1.873
9128282Z2	12/18/19	TREAS NOTE	U.S. Treasury	1.625	10/15/20			10,000,000.00	100.004	10,000,390.63	10,000,163.70	100.415	10,041,519.00	107		1.619	1.619
12828PC8	01/07/20	TREAS NOTE	U.S. Treasury	2.625	11/15/20			10,000,000.00	100.863	10,086,328.13	10,037,769.00	100.910	10,091,016.00	138		1.602	1.602
3130AJ4A4	02/12/20	AGCY BULET	FHLB	1.500	02/10/21			20,000,000.00	99.971	19,994,291.20	19,996,501.80	100.804	20,160,722.00	225		1.529	1.529
912828Y20	01/07/20	TREAS NOTE	U.S. Treasury	2.625	07/15/21			10,000,000.00	101.551	10,155,078.13	10,106,232.90	102.531	10,253,125.00	380		1.589	1.589
Total for 04-Ta	ex Fund							194,316,692.76	100.010	194,333,271.07	194,409,813.42	100.301	194,899,428.06	68		1.010	1.010
06-Certificate F	Fund																
RGXX-UHS		MMF	Fidelity Gov Inst'l MM					17,952,940.52	100.000	17,952,940.52	17,952,940.52	100.000	17,952,940.52	1		0.110	0.110
Total for 06-Ce	ertificate Fi	und						17,952,940.52	100.000	17,952,940.52	17,952,940.52	100,000	17,952,940.52	1		0.110	0,110



## **University Health System** Detail of Security Holdings As of 06/30/2020

CUSIP	Settle Date	Sec. Type	Sec. Description	CPN	Mty Date	Next Call	Call Type	Par Value	Purch Price	Orig Cost	Book Value	Mkt Price	Market Value	Days to Mty	Days to Call	YTM	YTV
1-Project Fun	d Series 20	018							~								
RGXX-UHS		MMF	Fidelity Gov Inst'l MM					16,076,824.98	100.000	16,076,824.98	16,076,824.98	100.000	16,076,824.98	1		0.110	0.11
TEXPOOL		LGIP	TexPool					9,408,857.19	100.000	9,408,857.19	9,408,857.19	100.000	9,408,857.19	1		0.216	0.2
EXPRIME		LGIP	TexPool Prime					29,890,714.77	100.000	29,890,714,77	29,890,714.77	100.000	29,890,714.77	1		0.524	0.5
1779YAE5	01/16/20	CP-INT	City of Philadelphia, PA	1.750	07/14/20			20,000,000.00	100.000	20,000,000.00	20,000,000.00	100.034	20,006,800.00	14		1.750	1.7
9584RHB7	04/13/20	CP - DISC	Salvation Army		08/11/20			10,000,000.00	99.633	9,963,333.33	9,987,472.20	99.983	9,998,250.00	42		1.104	1.1
12828L65	09/16/19	TREAS NOTE	U.S. Treasury	1.375	09/30/20			10,000,000.00	99.488	9,948,828.13	9,987,689.60	100.297	10,029,683.00	92		1.875	1.8
12828272	09/19/19	TREAS NOTE	U.S. Treasury	1.625	10/15/20			10,000,000.00	99.727	9,972,656.25	9,992,579.10	100.415	10,041,519.00	107		1.884	1.8
128282Z2	01/07/20	TREAS NOTE	U.S. Treasury	1.625	10/15/20			10,000,000.00	100.016	10,001,562.50	10,000,618.90	100.415	10,041,519.00	107		1.603	1.
1128283G3	12/03/19	TREAS NOTE	U.S. Treasury	1.750	11/15/20			10,000,000.00	100.066	10,006,640.63	10,002,623.40	100.578	10,057,813.00	138		1.679	1.
128283L2	09/19/19	TREAS NOTE	U.S. Treasury	1.875	12/15/20			10,000,000.00	99.969	9,996,875.00	9,998,880.90	100.789	10,078,906.00	168		1.900	1.
128283Q1	06/21/18	TREAS NOTE	U.S. Treasury	2.000	01/15/21			4,000,000.00	98.406	3,936,250.00	3,986,277.52	100.988	4,039,531.20	199		2.646	2.
128283Q1	12/06/19	TREAS NOTE	U.S. Treasury	2.000	01/15/21			6,000,000.00	100.391	6,023,437.50	6,011,453.34	100.988	6,059,296.80	199		1.642	1.
133EJCE7	06/21/18	AGCY BULET	FFCB	2.350	02/12/21			2,800,000.00	99.089	2,774,492.00	2,793,926.07	101.308	2,836,634.08	227		2.709	2.
128283X6	06/07/19	TREAS NOTE	U.S. Treasury	2.250	02/15/21			9,000,000.00	100.555	9,049,921.88	9,018,631.71	101.313	9,118,125.00	230		1.914	1.5
137EAEL9	02/11/20	AGCY BULET	FHLMC	2.375	02/16/21			10,000,000.00	100.838	10,083,800.00	10,051,789.40	101.346	10,134,606.00	231		1.539	1.
313382K69	06/13/18	AGCY BULET	FHLB	1.750	03/12/21			1,700,000.00	97.510	1,657,670.00	1,688,979.38	101.051	1,717,872.44	255		2.696	2.
128284B3	12/06/19	TREAS NOTE	U.S. Treasury	2.375	03/15/21			7,000,000.00	100.914	7,063,984.38	7,035,650.79	101.551	7,108,554.60	258		1.646	1.9
9128284G2	02/18/20	TREAS NOTE	U.S. Treasury	2.375	04/15/21			15,000,000.00	101.004	15,150,585.94	15,103,201.35	101.742	15,261,328.50	289		1.495	1.
3133ELN83	06/25/20	AGCY BULET	FFCB	0.180	06/23/21			10,000,000.00	99.990	9,999,000.00	9,999,016.80	99.993	9,999,280.00	358		0.190	0.
3130AGLD5	06/23/20	AGCY BULET	FHLB	1.875	07/07/21			10,000,000.00	101.745	10,174,500.00	10,170,772.80	101.698	10,169,760.00	372		0.193	0.
3133ELKN3	06/25/20	AGCY BULET	FFCB	1.550	01/28/22			10,000,000.00	102.099	10,209,900.00	10,207,707.00	102.082	10,208,243.00	577		0.228	0.
3133ELN26	06/22/20	AGCY BULET	FFCB	0.260	06/22/22			15,000,000.00	99.974	14,996,100.00	14,996,148.60	100.039	15,005,790.00	722		0.273	0.
3133ELJN5	01/24/20	AGCY CALL	FFCB	1.640	01/24/23	1/24/2022	CONT	7,000,000.00	100.000	7,000,000.00	7,000,000.00	101.762	7,123,368.70	938	573	1.640	1.
3133ELWZ3	04/21/20	AGCY CALL	FFCB	0.840	04/21/23	7/21/2020	CONT	15,000,000.00	100.000	15,000,000.00	15,000,000.00	100.003	15,000,522.00	1,025	21	0.840	0.
423315T7		MUNICIPAL	City of Houston, TX	1.950	03/01/24			5,000,000.00	100.560	5,028,000.00	5,023,097.10	102,443	5,122,150.00	1,340		1.819	1.
otal for 11-P	roject Fund	d Series 2018						262,876,396,94	100.208	263,413,934,48	263,432,912.90	100.634	264,535,949.26	278		1.130	1.

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## **University Health System** Detail of Security Holdings As of 06/30/2020

CUSIP	Settle Date	Sec. Type	Sec. Description	CPN	Mty Date	Next Call	Call Type	Par Value	Purch Price	Orig Cost	Book Value	Mkt Price	Market Value	Days to Mty	Days to Call	YTM	YTW
2-Project Fun	d Series 20	20															
RGXX-UHS		MMF	Fidelity Gov Inst'l MM					32,323,736.66	100.000	32,323,736.66	32,323,736.66	100.000	32,323,736.66	1		0.110	0.11
30229AGE3	03/12/20	CP - DISC	Exxon Mobil		07/14/20			10,000,000.00	99.638	9,963,833.33	9,996,208.30	99.995	9,999,475.00	14		1.054	1.05
7287CGU0	05/21/20	CP - DISC	Baylor Scott & White		07/28/20			35,000,000.00	99.962	34,986,777.78	34,994,750.00	99.989	34,995,999.50	28		0.200	0.20
13068BFR3	05/22/20	CP - INT	State of CA	0.240	08/20/20			10,000,000.00	100.000	10,000,000.00	10,000,000.00	100.011	10,001,100.00	51		0.240	0.24
3133ELN83	06/25/20	AGCY BULET	FFCB	0.180	06/23/21			10,000,000.00	99.990	9,999,000.00	9,999,016.80	99.993	9,999,280.00	358		0.190	0.19
3130AGLD5	06/23/20	AGCY BULET	FHLB	1.875	07/07/21			10,000,000.00	101.745	10,174,500.00	10,170,772.80	101.698	10,169,760.00	372		0.193	0.19
912828YJ3	06/16/20	TREAS NOTE	U.S. Treasury	1.500	09/30/21			16,800,000.00	101.688	17,083,500.00	17,074,500.58	101.652	17,077,593.12	457		0.189	0.18
3135G0Q89	06/16/20	AGCY BULET	FNMA	1.375	10/07/21			5,700,000.00	101.515	5,786,355.00	5,783,608.28	101.501	5,785,532.49	464		0.215	0.21
3134GVJ66	06/15/20	AGCY BULET	FHLMC	0.250	06/08/22			20,000,000.00	99.938	19,987,600.00	19,987,877.80	99.901	19,980,134.00	708		0.281	0.28
3133ELJ21	06/15/20	AGCY CALL	FFCB	0.480	06/15/23	12/15/2020	CONT	20,000,000.00	99.950	19,990,000.00	19,990,147.20	100.000	19,999,992.00	1,080	168	0.497	0.49
Total for 12-Pr	roject Fund	Series 2020						169,823,736.66	100.282	170,295,302.77	170,320,618.42	100.304	170,332,602.77	324		0.278	0.27
20-Bexar Cty H	losp Dist - I	LPPF															
FRGXX-UHS		MMF	Fidelity Gov Inst'l MM					24,784,487.31	100.000	24,784,487.31	24,784,487.31	100.000	24,784,487.31	1		0.110	0.11
Total for 20-Be	exar Cty Ho	osp Dist - LPPF						24,784,487.31	100.000	24,784,487.31	24,784,487.31	100.000	24,784,487.31	1		0.110	0.11
Total for Unive	ersity Healt	h System						1,450,566,039,46	100.243	1,453,918,260,00	1,453,799,146.27	100.668	1,460,108,318.33	299		0.859	0.85

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CUSIP	Security Type	Security Description	03/31/20 Book Value	Cost of Purchases	Maturities / Calls / Sales	Amortization / Accretion	Realized Gain/(Loss)	06/30/20 Book Value	03/31/20 Market Value	06/30/20 Market Value	Change in Mkt Value
11-Operating F	und										
ED-PRIME	MMF	Federated Prime Oblig	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IPXX	MMF	Fidelity Prime MMF	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RGXX-UHS	MMF	Fidelity Gov Inst'l MM	968,796.16	51,096,490.34	(13,100,829.11)	0.00	0.00	38,964,457.39	968,796.16	38,964,457.39	37,995,661.23
Total for 01-Op	perating Fund		968,796.16	51,096,490.34	(13,100,829.11)	0,00	0.00	38,964,457.39	968,796.16	38,964,457.39	37,995,661.23
12-Contingency	y Fund										
ED-PRIME	MMF	Federated Prime Oblig	0,00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FIPXX	MMF	Fidelity Prime MMF	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RGXX-UHS	MMF	Fidelity Gov Inst'i MM	47,589,370.98	4,908,058.64	(42,790,996.55)	0.00	0.00	9,706,433.07	47,589,370.98	9,706,433.07	(37,882,937.91
TEXPOOL	LGIP	TexPool	8,439,761.01	6,585.02	0.00	0.00	0.00	8,446,346.03	8,439,761.01	8,446,346.03	6,585.02
3137EAEF2	AGCY BULET	FHLMC 1.375 04/20/20	7,994,853.36	0.00	(8,000,000.00)	5,146.64	0.00	0.00	8,003,729.60	0.00	(8,003,729.60
71779RCY4	CP - INT	City of Philadelphia, PA 1.780 05/04/20	15,000,000.00	0.00	(15,000,000.00)	0.00	0.00	0.00	14,989,650.00	0.00	(14,989,650.00
78009AFB5	CP - DISC	Royal Bank of Canada 0.000 06/11/20	9,963,908.30	0.00	(10,000,000.00)	36,091.70	0.00	0.00	9,973,800.00	0.00	(9,973,800.00)
8821175X8	MUNICIPAL	TX A&M Univ 1.600 07/01/20	2,320,000.00	0.00	0.00	0.00	0.00	2,320,000.00	2,322,088.00	2,320,000.00	(2,088.00)
91514BHB2	CP - INT	Univ of TX 1.750 10/06/20	15,000,000.00	0.00	0.00	0.00	0.00	15,000,000.00	14,944,950.00	15,029,850.00	84,900.00
3133EKL61	AGCY BULET	FFCB 1.550 03/04/21	9,978,251.90	0.00	0.00	5,849.60	0.00	9,984,101.50	10,132,326.00	10,101,610.00	(30,716.00
9128284B3	TREAS NOTE	U.S. Treasury 2.375 03/15/21	10,073,986.00	0.00	0.00	(19,102.00)	0.00	10,054,884.00	10,214,844.00	10,155,078.00	(59,766.00
3130ACHJ6	AGCY BULET	FHLB 1.800 03/24/21	5,011,602.20	0.00	0.00	(2,946.35)	0.00	5,008,655.85	5,073,278.00	5,054,987.50	(18,290.50)
88213APC3	MUNICIPAL	TX A&M Univ 1.964 05/15/21	1,885,000.00	0.00	0.00	0.00	0.00	1,885,000.00	1,903,812.30	1,911,276.90	7,464.60
5370962U2	MUNICIPAL	Little Eim ISD 0.000 08/15/21	984,769.84	0.00	0.00	4,549.17	0.00	989,319.01	993,183.50	997,385.10	4,201.60
9128284W7	TREAS NOTE	U.S. Treasury 2.750 08/15/21	15,224,419.20	0.00	0.00	(40,479.90)	0.00	15,183,939.30	15,522,070.50	15,430,663.50	(91,407.00)
3133EKP67	AGCY BULET	FFCB 1.625 09/17/21	14,958,711.15	0.00	0.00	6,999.15	0.00	14,965,710.30	15,266,725.50	15,260,682.00	(6,043.50
3130AJGL7	AGCY BULET	FHLB 0.320 10/01/21	0.00	8,000,000.00	0.00	0.00	0.00	8,000,000.00	0.00	8,007,968.00	8,007,968.00
882723VK2	MUNICIPAL	State of TX 5.000 10/01/21	0.00	6,299,324.50	0.00	(41,515.71)	0.00	6,257,808.79	0.00	6,304,025.00	6,304,025.00
9128285L0	TREAS NOTE	U.S. Treasury 2.875 11/15/21	15,297,421.65	0.00	0.00	(45,120.90)	0.00	15,252,300.75	15,645,703.50	15,554,883.00	(90,820.50)
3133ELA95	AGCY CALL	FFCB 0.190 11/26/21	0.00	9,995,000.00	0.00	323.70	0.00	9,995,323.70	0.00	9,997,773.00	9,997,773.00
3137EADB2	AGCY BULET	FHLMC 2.375 01/13/22	15,498,656.55	0.00	0.00	(69,603.45)	0.00	15,429,053.10	15,522,780.00	15,498,412.50	(24,367.50
559155HN8	MUNICIPAL	North East ISD, TX 5.000 02/01/22	0.00	7,501,680.45	0.00	(56,122.94)	0.00	7,445,557.51	0.00	7,508,036.80	7,508,036.80
882806EP3	MUNICIPAL	TX Tech Univ 2.620 02/15/22	964,094.45	0.00	0.00	(1,854.98)	0.00	962,239.47	973,541.00	972,182.50	(1,358.50
889855K50	MUNICIPAL	Tomball ISD, TX 5.000 02/15/22	0.00	1,337,075.00	0.00	(5,808.35)	0.00	1,331,266.65	0.00	1,345,900.00	1,345,900.00
3133ELUQ5	AGCY BULET	FFCB 0.700 03/25/22	10,568,420.18	0.00	0.00	(4,195.35)	0.00	10,564,224.83	10,574,882.35	10,621,949.57	47,067.22
3133ELUX0	AGCY CALL	FFCB 1.000 03/30/22	25,000,000.00	0.00	0.00	0.00	0.00	25,000,000.00	25,003,045.00	25,017,557.50	14,512.50
3134GVJB5	AGCY CALL	FHLMC 1,200 04/06/22	0.00	20,000,000.00	0.00	0.00	0.00	20,000,000.00	0.00	20,003,164.00	20,003,164.00

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CUSIP	Security Type	Security Description	03/31/20	Cost of	Maturities /	Amortization /	Realized	06/30/20	03/31/20	06/30/20	Change in
			Book Value	Purchases	Calls / Sales	Accretion	Gain/(Loss)	Book Value	Market Value	Market Value	Mkt Value
2-Contingenc	y Fund										
8213AHJ7	MUNICIPAL	TX A&M Univ 2.479 05/15/22	4,966,229.60	0.00	0.00	3,876.65	0.00	4,970,106.25	5,143,050.00	5,195,050.00	52,000.0
130AJHV4	AGCY CALL	FHLB 0.600 07/27/22	0.00	10,000,000.00	0.00	0.00	0.00	10,000,000.00	0.00	10,001,504.00	10,001,504.0
370962V0	MUNICIPAL	Little Elm ISD 0.000 08/15/22	964,801.75	0.00	0.00	4,666.32	0.00	969,468.07	978,477.90	984,568.20	6,090.3
13380GJ0	AGCY BULET	FHLB 2.000 09/09/22	15,065,506.65	0.00	0.00	(6,591.00)	0.00	15,058,915.65	15,536,287.50	15,582,226.50	45,939.0
130AHE58	AGCY CALL	FHLB 1.950 10/21/22	10,000,000.00	0.00	(10,000,000.00)	0.00	0.00	0.00	10,007,146.00	0.00	(10,007,146.0)
82806EQ1	MUNICIPAL	TX Tech Univ 2.761 02/15/23	9,357,177.66	0.00	0.00	(1,443.50)	0.00	9,355,734.16	9,708,369.60	9,712,666.00	4,296.4
89855K68	MUNICIPAL	Tomball ISD, TX 5.000 02/15/23	0.00	3,241,953.00	0.00	(13,356.34)	0.00	3,228,596.66	0.00	3,269,652.75	3,269,652.7
133ELUJ1	AGCY CALL	FFCB 1.000 03/24/23	10,000,000.00	0.00	0.00	0.00	0.00	10,000,000.00	10,035,411.00	10,039,294.00	3,883.0
136G4VM2	AGCY CALL	FNMA 0.400 05/05/23	0.00	9,997,500.00	0.00	115.80	0.00	9,997,615.80	0.00	10,000,425.00	10,000,425.0
8213APE9	MUNICIPAL	TX A&M Univ 2.070 05/15/23	7,545,000.00	0.00	0.00	0.00	0.00	7,545,000.00	7,730,531.55	7,887,392.10	156,860.5
134GVN79	AGCY CALL	FHLMC 0.500 06/30/23	0.00	10,000,000.00	0.00	0.00	0.00	10,000,000.00	0.00	10,001,699.00	10,001,699.0
821173A0	MUNICIPAL	TX A&M Univ 2.500 07/01/23	7,140,459.74	0.00	0.00	8,754.98	0.00	7,149,214.72	7,562,524.20	7,695,890.40	133,366.2
821176A7	MUNICIPAL	TX A&M Univ 1.790 07/01/23	1,000,000.00	0.00	0.00	0.00	0.00	1,000,000.00	1,019,120.00	1,038,940.00	19,820.0
370962W8	MUNICIPAL	Little Elm ISD 0.000 08/15/23	1,409,348.35	0.00	0.00	7,573.08	0.00	1,416,921.43	1,442,916.30	1,454,354.55	11,438.2
97495BL3	MUNICIPAL	Midland Cty Fresh Wtr Dist 1.982 09/15/23	1,000,000.00	0.00	0.00	0.00	0.00	1,000,000.00	1,014,650.00	1,016,050.00	1,400.0
86063ZS2	MUNICIPAL	Katy ISD 2.017 02/15/24	1,645,000.00	0.00	0.00	0.00	0.00	1,645,000.00	1,679,413.40	1,685,170.90	5,757.5
821176B5	MUNICIPAL	TX A&M Univ 1.850 07/01/24	1,000,000.00	0.00	0.00	0.00	0.00	1,000,000.00	1,024,620.00	1,049,240.00	24,620.0
370962X6	MUNICIPAL	Little Elm ISD 0.000 08/15/24	904,645.76	0.00	0.00	5,198.53	0.00	909,844.29	935,640.00	944,600.00	8,960.0
otal for 02-Co	ontingency Fund		303,751,396.28	91,287,176.61	(85,790,996.55)	(218,995.45)	0.00	309,028,580.89	306,907,698,69	312,804,887.37	5,897,188.6

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From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	03/31/20 Book Value	Cost of Purchases	Maturities / Calls / Sales	Amortization / Accretion	Realized Gain/(Loss)	06/30/20 Book Value	03/31/20 Market Value	06/30/20 Market Value	Change in Mkt Value
3-Plant Fund											
ED-PRIME	MMF	Federated Prime Oblig	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RGXX-UHS	MMF	Fidelity Gov Inst'l MM	21,648,987.43	47,544,333.39	(18,572,524.95)	0.00	0.00	50,620,795.87	21,648,987.43	50,620,795.87	28,971,808.44
EXPOOL	LGIP	TexPool	53,748,065.26	32,368.82	(24,991,738.56)	0.00	0.00	28,788,695.52	53,748,065.26	28,788,695.52	(24,959,369.74
EXPRIME	LGIP	TexPool Prime	57,509,044.87	10,110,012.52	0.00	0.00	0.00	67,619,057.39	57,509,044.87	67,619,057.39	10,110,012.52
1510PH41	CP - INT	Univ of TX 1.780 04/03/20	7,480,000.00	0.00	(7,480,000.00)	0.00	0.00	0.00	7,480,000.00	0.00	(7,480,000.00
9233GD78	CP - DISC	Toyota Mtr Cr 0.000 04/07/20	14,995,324.95	0.00	(15,000,000.00)	4,675.05	0.00	0.00	14,998,249.50	0.00	(14,998,249.50
1510PH33	CP - INT	Univ of TX 1.780 04/07/20	5,000,000.00	0.00	(5,000,000.00)	0.00	0.00	0.00	4,999,950.00	0.00	(4,999,950.00)
1510PJ23	CP - INT	Univ of TX 1.550 05/11/20	0.00	7,480,000.00	(7,480,000.00)	0.00	0.00	0.00	0.00	0.00	0.00
1510PJ56	CP - INT	Univ of TX 1.600 05/12/20	0.00	5,000,000.00	(5,000,000.00)	0.00	0.00	0.00	0.00	0.00	0.00
7286MF97	CP - DISC	Baylor Univ 0.000 06/09/20	12,452,083.38	0.00	(12,500,000.00)	47,916.62	0.00	0.00	12,449,687.50	0.00	(12,449,687.50)
1510PJ72	CP - INT	Univ of TX 0.300 06/12/20	0.00	8,000,000.00	(00.000,000,8)	0.00	0.00	0.00	0.00	0.00	0.00
12828XU9	TREAS NOTE	U.S. Treasury 1.500 06/15/20	9,991,742.00	0.00	(10,000,000.00)	8,258.00	0.00	0.00	10,028,880.00	0.00	(10,028,880.00)
1514BGW7	CP - INT	Univ of TX 1.860 07/31/20	5,000,000.00	0.00	0.00	0.00	0.00	5,000,000.00	4,990,650.00	5,003,950.00	13,300.00
13384B24	AGCY DISCO	FHLB 0.000 08/07/20	0.00	19,994,416.00	0.00	861.00	0.00	19,968,138.80	0.00	19,996,916.00	19,996,916.00
3068CEN1	CP - INT	State of CA 0.240 09/02/20	0.00	10,000,000.00	0.00	0.00	0.00	10,000,000.00	0.00	9,999,700.00	9,999,700.00
5248NLQ1	CP - INT	City of Austin, TX 0.200 09/03/20	0.00	4,600,000.00	0.00	0.00	0.00	4,600,000.00	0.00	4,599,678.00	4,599,678.00
128282V1	TREAS NOTE	U.S. Treasury 1.375 09/15/20	9,989,146.50	0.00	0.00	5,914.20	0.00	9,995,060.70	10,057,031.00	10,024,655.00	(32,376.00)
8306AK22	CP - DISC	Kaiser Foundation Hospital 0.000 10/02/20	0.00	18,579,883.40	0.00	3,626.22	0.00	18,583,509.62	0.00	18,575,849.37	18,575,849.37
12828272	TREAS NOTE	U.S. Treasury 1.625 10/15/20	10,000,295.30	0.00	0.00	(131.60)	0.00	10,000,163.70	10,080,078.00	10,041,519.00	(38,559.00)
16640PLA9	CP - DISC	J.P.Morgan Sec 0.000 11/10/20	0.00	24,972,500.00	0.00	1,104.25	0.00	24,854,250.00	0.00	24,990,210.00	24,990,210.00
12828PC8	TREAS NOTE	U.S. Treasury 2.625 11/15/20	10,059,839.80	0.00	0.00	(23,898.90)	0.00	10,035,940.90	10,154,297.00	10,091,016.00	(63,281.00)
128285S5	TREAS NOTE	U.S. Treasury 2.500 12/31/20	10,063,283.60	0.00	0.00	(21,055.60)	0.00	10,042,228.00	10,176,953.00	10,116,406.00	(60,547.00)
3130AJ4A4	AGCY BULET	FHLB 1.500 02/10/21	9,997,535.20	0.00	0.00	715.70	0.00	9,998,250.90	10,103,572.00	10,080,361.00	(23,211.00
130AJRS0	AGCY BULET	FHLB 0.190 03/29/21	0.00	10,000,000.00	0.00	0.00	0.00	10,000,000.00	0.00	9,995,581.00	9,995,581.00
128284G2	TREAS NOTE	U.S. Treasury 2.375 04/15/21	8,044,231.20	0.00	0.00	(10,534.40)	0.00	8,033,696.80	8,185,624.80	8,139,375.20	(46,249.60
3133ELZH0	AGCY BULET	FFCB 0.125 05/14/21	0.00	9,995,400.00	0.00	532.60	0.00	9,995,932.60	0.00	9,997,932.00	9,997,932.00
3130AJQ69	AGCY BULET	FHLB 0.125 06/15/21	0.00	9,993,680.00	0.00	108.30	0.00	9,993,788.30	0.00	9,989,703.00	9,989,703.00
3130AGLD5	AGCY BULET	FHLB 1.875 07/07/21	0.00	8,393,220.00	0.00	(2,306.62)	0.00	8,390,913.38	0.00	8,390,052.00	8,390,052.00
79240JW1	MUNICIPAL	Round Rock ISD, TX 5.000 08/01/21	0.00	3,263,956.05	0.00	(25,602.61)	0.00	3,238,353.44	0.00	3,253,897.30	3,253,897.30
128285F3	TREAS NOTE	U.S. Treasury 2.875 10/15/21	0.00	10,369,141.00	0.00	(345.40)	0.00	10,164,550.00	0.00	10,347,656.00	10,347,656.00
3130AJ6U8	AGCY CALL	FHLB 1.650 02/18/22	19,998,112.80	0.00	(20,000,000.00)	129.40	1,757.80	0.00	20,010,822.00	0.00	(20,010,822.00
3134GVUK2	AGCY CALL	FHLMC 0.300 05/13/22	0.00	19,995,000.00	0.00	300.20	0.00	19,995,300.20	0.00	19,985,810.00	19,985,810.00
3133ELN26	AGCY BULET	FFCB 0.260 06/22/22	0.00	34,987,300.00	0.00	158.40	0.00	34,987,458.40	0.00	35,013,510.00	35,013,510.00
3134GVJP4	AGCY CALL	FHLMC 1.125 10/07/22	0.00	15,000,000.00	0.00	0.00	0.00	15,000,000.00	0.00	15,002,436.00	15,002,436.00

Print Date: 7/15/2020



CUSIP	Security Type	Security Description	03/31/20 Book Value	Cost of Purchases	Maturities / Calls / Sales	Amortization / Accretion	Realized Gain/(Loss)	06/30/20 Book Value	03/31/20 Market Value	06/30/20 Market Value	Change in Mkt Value
03-Plant Fund											
oo i lant i ano											
	AGCY CALL	FHLMC 0.400 12/29/22	0.00	14,999,250.00	0.00	0.90	0.00	14,999,250.90	0.00	14,992,563.00	14,992,563.00
3134GV4C9 3133ELJN5		FHLMC 0.400 12/29/22 FFCB 1.640 01/24/23	0.00 10,000,000.00	14,999,250.00 0.00	0.00 0.00	0.90 0.00	0.00	14,999,250.90 10,000,000.00	0.00 10,176,620.00	14,992,563.00 10,176,241.00	14,992,563.00 (379.00



From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	03/31/20 Book Value	Cost of Purchases	Maturities / Calls / Sales	Amortization / Accretion	Realized Gain/(Loss)	06/30/20 Book Value	03/31/20 Market Value	06/30/20 Market Value	Change in Mkt Value
4-Tax Fund											
ED-PRIME	MMF	Federated Prime Oblig	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IPXX	MMF	Fidelity Prime MMF	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RGXX-UHS	MMF	Fidelity Gov Inst'l MM	59,166,829.33	34,269,217.90	(36,229,934.85)	0.00	0.00	57,206,112.38	59,166,829.33	57,206,112.38	(1,960,716.95
EXPRIME	LGIP	TexPool Prime	54,874,247.23	55,332.13	(24,978,998.98)	0.00	0.00	29,950,580.38	54,874,247.23	29,950,580.38	(24,923,666.8
8459RD15	CP - DISC	Yale Univ 0.000 04/01/20	5,000,000.00	0.00	(5,000,000.00)	0.00	0.00	0.00	4,999,952.50	0.00	(4,999,952.5)
6844CD84	CP - DISC	Northwestern Univ 0.000 04/08/20	4,998,444.45	0.00	(5,000,000.00)	1,555.55	0.00	0.00	4,997,700.00	0.00	(4,997,700.00
6640PDG5	CP - DISC	J.P.Morgan Sec 0.000 04/16/20	5,994,975.00	0.00	(6,000,000.00)	5,025.00	0.00	0.00	5,996,925.60	0.00	(5,996,925.6)
8459RE48	CP - DISC	Yale Univ 0.000 05/04/20	0.00	9,989,916,67	(10,000,000.00)	10,083.33	0.00	0.00	0.00	0.00	0.0
9157P6E9	CP - INT	Emory Univ 1.600 05/05/20	10,000,000.00	0.00	(10,000,000.00)	0.00	0.00	0.00	9,992,900.00	0.00	(9,992,900.0
8306AE78	CP - DISC	Kaiser Foundation Hospital 0.000 05/07/20	9,983,000.00	0.00	(10,000,000.00)	17,000.00	0.00	0.00	9,985,375.00	0.00	(9,985,375.0
9837TEH7	CP - INT	Princeton Univ 1,590 05/08/20	8,000,000.00	0.00	(8,000,000.00)	0.00	0.00	0.00	8,003,206.40	0.00	(8,003,206.40
837TEG9	CP - INT	Princeton Univ 1.600 05/19/20	10,000,000.00	0.00	(10,000,000.00)	0.00	0.00	0.00	10,004,813.00	0.00	(10,004,813.0)
3068BEX1	CP - INT	State of CA 1.600 05/22/20	4,160,000.00	0.00	(4,160,000.00)	0.00	0.00	0.00	4,158,460.80	0.00	(4,158,460.86
6844CF25	CP - DISC	Northwestern Univ 0.000 06/02/20	10,972,530.58	0.00	(11,000,000.00)	27,469.42	0.00	0.00	10,960,152.50	0.00	(10,960,152.50
3068CEE1	CP - INT	State of CA 0.930 06/04/20	10,000,000.00	0.00	(10,000,000.00)	0.00	0.00	0.00	9,992,700.00	0.00	(9,992,700.00
306AF44	CP - DISC	Kaiser Foundation Hospital 0.000 06/04/20	18,541,782.25	0.00	(18,596,000.00)	54,217.75	0.00	0.00	18,545,366.81	0.00	(18,545,366.8
0229AF53	CP - DISC	Exxon Mobil 0.000 06/05/20	23,665,583.39	0.00	(23,732,000.00)	66,416.61	0.00	0.00	23,640,197.50	0.00	(23,640,197.50
8459RG87	CP - DISC	Yale Univ 0.000 07/08/20	6,968,558.31	0.00	0.00	29,195.88	0.00	6,997,754.19	6,975,745.00	6,999,889.40	24,144.4
128282J8	TREAS NOTE	U.S. Treasury 1.500 07/15/20	13,984,122.30	0.00	0.00	13,760.68	0.00	13,997,882.98	14,054,688.20	14,007,154.00	(47,534.20
3505BAA5	CP - INT	DFW Intl Airport 1.850 07/23/20	5,500,000.00	0.00	0.00	0.00	0.00	5,500,000.00	5,490,265.00	5,503,355.00	13,090.00
3506FAA5	CP - INT	DFW Intl Airport 1.850 07/23/20	5,000,000.00	0.00	0.00	0.00	0.00	5,000,000.00	4,991,150.00	5,003,050.00	11,900.00
13384B24	AGCY DISCO	FHLB 0.000 08/07/20	19,889,777.80	0.00	(19,994,416.00)	77,500.00	0.00	0.00	19,992,178.00	0.00	(19,992,178.0)
3068BFR3	CP - INT	State of CA 0.240 08/20/20	0.00	4,160,000.00	0.00	0.00	0.00	4,160,000.00	0.00	4,160,457.60	4,160,457.60
9583RJA8	CP - DISC	Salvation Army 0.000 09/10/20	12,906,400.00	0.00	0.00	52,577.72	0.00	12,958,977.72	12,872,271.10	12,994,280.00	122,008.90
130AH2Z5	AGCY BULET	FHLB 1.750 09/16/20	8,495,244.42	0.00	0.00	2,593.95	0.00	8,497,838.37	8,556,941.50	8,528,167.30	(28,774.2)
128282Z2	TREAS NOTE	U.S. Treasury 1.625 10/15/20	10,000,295.30	0.00	0.00	(131.60)	0.00	10,000,163.70	10,080,078.00	10,041,519.00	(38,559.0
6640PLA9	CP - DISC	J.P.Morgan Sec 0.000 11/10/20	24,753,770.75	0.00	(24,972,500.00)	99,375.00	0.00	0.00	24,774,445.00	0.00	(24,774,445.0)
12828PC8	TREAS NOTE	U.S. Treasury 2.625 11/15/20	10,062,869.50	0.00	0.00	(25,100.50)	0.00	10,037,769.00	10,154,297.00	10,091,016.00	(63,281.0
130AJ4A4	AGCY BULET	FHLB 1.500 02/10/21	19,995,070.40	0.00	0.00	1,431.40	0.00	19,996,501.80	20,207,144.00	20,160,722.00	(46,422.0
12828Y20	TREAS NOTE	U.S. Treasury 2.625 07/15/21	10,131,516.40	0.00	0.00	(25,283.50)	0.00	10,106,232.90	10,315,625.00	10,253,125.00	(62,500.0
128285F3	TREAS NOTE	U.S. Treasury 2.875 10/15/21	10,195,935.90	0.00	(10,369,141.00)	(31,040.50)	0.00	0.00	10,407,422.00	0.00	(10,407,422.00
otal for 04-Ta	av Fund		393,240,953,31	48,474,466,70	(248,032,990.83)	376,646.19	0.00	194,409,813,42	394,191,076,47	194.899.428.06	(199,291,648.41

Print Date: 7/15/2020



# University Health System Change in Value From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	03/31/20 Book Value	Cost of Purchases	Maturities / Calls / Sales	Amortization / Accretion	Realized Gain/(Loss)	06/30/20 Book Value	03/31/20 Market Value	06/30/20 Market Value	Change in Mkt Value
06-Certificate	und										
FED-PRIME	MMF	Federated Prime Oblig	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FRGXX-UHS	MMF	Fidelity Gov Inst'l MM	14,098,193.39	3,854,747.13	0.00	0.00	0.00	17,952,940.52	14,098,193.39	17,952,940.52	3,854,747.13
NOAX-0115		2000 18 CO. 10 C									



From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	03/31/20 Book Value	Cost of Purchases	Maturities / Calls / Sales	Amortization / Accretion	Realized Gain/(Loss)	06/30/20 Book Value	03/31/20 Market Value	06/30/20 Market Value	Change in Mkt Value
1-Project Fund	d Series 2018										
RGXX-UHS	MMF	Fidelity Gov Inst'l MM	18,480,141.87	59,474,223.40	(61,877,540.29)	0.00	0.00	16,076,824.98	18,480,141.87	16,076,824.98	(2,403,316.89
TEXPOOL	LGIP	TexPool	9,401,521.67	7,335.52	0.00	0.00	0.00	9,408,857.19	9,401,521.67	9,408,857.19	7,335.52
TEXPRIME	LGIP	TexPool Prime	9,870,108.33	20,020,606.44	0.00	0.00	0.00	29,890,714.77	9,870,108.33	29,890,714.77	20,020,606.44
9584RDD7	CP - DISC	Salvation Army 0.000 04/13/20	4,996,800.00	0.00	(5,000,000.00)	3,200.00	0.00	0.00	4,996,262.50	0.00	(4,996,262.50
3137EAEM7	AGCY BULET	FHLMC 2.500 04/23/20	11,599,341.47	0.00	(11,600,000.00)	658.53	0.00	0.00	11,614,988.36	0.00	(11,614,988.36
9584RED6	CP - DISC	Salvation Army 0.000 05/13/20	14,966,749.95	0.00	(15,000,000.00)	33,250.05	0.00	0.00	14,962,912.50	0.00	(14,962,912.50
3133EJNW5	AGCY BULET	FFCB 2.550 05/15/20	10,999,705.42	0.00	(11,000,000.00)	294.58	0.00	0.00	11,025,688.30	0.00	(11,025,688.30)
7287CEM0	CP - DISC	Baylor Scott & White 0.000 05/21/20	34,951,388.85	0.00	(35,000,000.00)	48,611.15	0.00	0.00	34,934,945.50	0.00	(34,934,945.50)
3133EJRL5	AGCY BULET	FFCB 2.550 06/11/20	10,399,824.86	0.00	(10,400,000.00)	175.14	0.00	0.00	10,444,000.32	0.00	(10,444,000.32)
71779YAE5	CP - INT	City of Philadelphia, PA 1.750 07/14/20	20,000,000.00	0.00	0.00	0.00	0.00	20,000,000.00	19,958,200.00	20,006,800.00	48,600.00
79584RHB7	CP - DISC	Salvation Army 0.000 08/11/20	0.00	9,963,333.33	0.00	24,138.87	0.00	9,987,472.20	0.00	9,998,250.00	9,998,250.00
12828L65	TREAS NOTE	U.S. Treasury 1.375 09/30/20	9,975,379.20	0.00	0.00	12,310.40	0.00	9,987,689.60	10,062,500.00	10,029,683.00	(32,817.00
12828272	TREAS NOTE	U.S. Treasury 1.625 10/15/20	19,987,355.80	0.00	0.00	5,842.20	0.00	19,993,198.00	20,160,156.00	20,083,038.00	(77,118.00)
9128283G3	TREAS NOTE	U.S. Treasury 1.750 11/15/20	10,004,359.70	0.00	0.00	(1,736.30)	0.00	10,002,623.40	10,102,344.00	10,057,813.00	(44,531.00)
128283L2	TREAS NOTE	U.S. Treasury 1.875 12/15/20	9,998,275.90	0.00	0.00	605.00	0.00	9,998,880.90	10,123,438.00	10,078,906.00	(44,532.00
9128283Q1	TREAS NOTE	U.S. Treasury 2.000 01/15/21	9,996,714.42	0.00	0.00	1,016.44	0.00	9,997,730.86	10,150,000.00	10,098,828.00	(51,172.00)
3133EJCE7	AGCY BULET	FFCB 2.350 02/12/21	2,791,479.52	0.00	0.00	2,446.55	0.00	2,793,926.07	2,847,064.36	2,836,634.08	(10,430.28
9128283X6	TREAS NOTE	U.S. Treasury 2.250 02/15/21	9,026,043.93	0.00	0.00	(7,412.22)	0.00	9,018,631.71	9,168,047.10	9,118,125.00	(49,922.10)
3137EAEL9	AGCY BULET	FHLMC 2.375 02/16/21	10,072,378.50	0.00	0.00	(20,589.10)	0.00	10,051,789.40	10,165,419.00	10,134,606.00	(30,813.00)
313382K69	AGCY BULET	FHLB 1.750 03/12/21	1,685,065.60	0.00	0.00	3,913.78	0.00	1,688,979.38	1,722,947.96	1,717,872.44	(5,075.52)
9128284B3	TREAS NOTE	U.S. Treasury 2.375 03/15/21	7,048,056.26	0.00	0.00	(12,405.47)	0.00	7,035,650.79	7,150,390.80	7,108,554.60	(41,836.20)
9128284G2	TREAS NOTE	U.S. Treasury 2.375 04/15/21	15,135,484.95	0.00	0.00	(32,283.60)	0.00	15,103,201.35	15,348,046.50	15,261,328.50	(86,718.00
3133ELN83	AGCY BULET	FFCB 0.180 06/23/21	0.00	9,999,000.00	0.00	16.80	0.00	9,999,016.80	0.00	9,999,280.00	9,999,280.00
3130AGLD5	AGCY BULET	FHLB 1.875 07/07/21	0.00	10,174,500.00	0.00	(3,727.20)	0.00	10,170,772.80	0.00	10,169,760.00	10,169,760.00
3133ELKN3	AGCY BULET	FFCB 1.550 01/28/22	0.00	10,209,900.00	0.00	(2,193.00)	0.00	10,207,707.00	0.00	10,208,243.00	10,208,243.00
3133ELN26	AGCY BULET	FFCB 0.260 06/22/22	0.00	14,996,100.00	0.00	48.60	0.00	14,996,148.60	0.00	15,005,790.00	15,005,790.00
3134GU3G3	AGCY CALL	FHLMC 1.850 01/17/23	15,000,000.00	0.00	(15,000,000.00)	0.00	0.00	0.00	15,008,829.00	0.00	(15,008,829.00
3133ELJN5	AGCY CALL	FFCB 1.640 01/24/23	7,000,000.00	0.00	0.00	0.00	0.00	7,000,000.00	7,123,634.00	7,123,368.70	(265.30
3133ELWZ3	AGCY CALL	FFCB 0.840 04/21/23	0.00	15,000,000.00	0.00	0.00	0.00	15,000,000.00	0.00	15,000,522.00	15,000,522.00
4423315T7	MUNICIPAL	City of Houston, TX 1.950 03/01/24	5,024,618.10	0.00	0.00	(1,521.00)	0.00	5,023,097.10	5,039,500.00	5,122,150.00	82,650.00
Total for 44 No.	oject Fund Series	2042	278,410,794.30	149,844,998.69	(164,877,540,29)	54,660.20	0.00	263,432,912.90	279,861,086.07	264,535,949.26	(15,325,136.81)

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From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	03/31/20 Book Value	Cost of Purchases	Maturities / Calls / Sales	Amortization / Accretion	Realized Gain/(Loss)	06/30/20 Book Value	03/31/20 Market Value	06/30/20 Market Value	Change in Mkt Value
12-Project Fund	d Series 2020										
RGXX-UHS	MMF	Fidelity Gov Inst'l MM	82,836,963.68	18,095,057.53	(68,608,284.55)	0.00	0.00	32,323,736.66	82,836,963.68	32,323,736.66	(50,513,227.02
91411SD23	CP - DISC	Univ of CA 0.000 04/02/20	7,999,617.76	0.00	(8,000,000.00)	382.24	0.00	0.00	7,999,080.00	0.00	(7,999,080.00
29157P6E9	CP - INT	Emory Univ 1.600 05/05/20	6,000,000.00	0.00	(6,000,000.00)	0.00	0.00	0.00	5,995,740.00	0.00	(5,995,740.00
13068BEX1	CP - INT	State of CA 1.600 05/22/20	10,000,000.00	0.00	(10,000,000.00)	0.00	0.00	0.00	9,996,300.00	0.00	(9,996,300.00
29157P6F6	CP - INT	Emory Univ 1.450 05/28/20	10,900,000.00	0.00	(10,900,000.00)	0.00	0.00	0.00	10,889,754.00	0.00	(10,889,754.00
39837TEK0	CP - INT	Princeton Univ 0.930 06/03/20	10,000,000.00	0.00	(10,000,000.00)	0.00	0.00	0.00	9,993,200.00	0.00	(9,993,200.00
30229AFB0	CP - DISC	Exxon Mobil 0.000 06/11/20	9,978,700.00	0.00	(10,000,000.00)	21,300.00	0.00	0.00	9,958,200.00	0.00	(9,958,200.00
66844CFF6	CP - DISC	Northwestern Univ 0.000 06/15/20	22,436,718.75	0.00	(22,500,000.00)	63,281.25	0.00	0.00	22,401,675.00	0.00	(22,401,675.00
30229AGE3	CP - DISC	Exxon Mobil 0.000 07/14/20	9,969,666.70	0.00	0.00	26,541.60	0.00	9,996,208.30	9,940,792.00	9,999,475.00	58,683.00
7287CGU0	CP - DISC	Baylor Scott & White 0.000 07/28/20	0.00	34,986,777.78	0.00	7,972.22	0.00	34,994,750.00	0.00	34,995,999.50	34,995,999.50
13068BFR3	CP - INT	State of CA 0.240 08/20/20	0.00	10,000,000.00	0.00	0.00	0.00	10,000,000.00	0.00	10,001,100.00	10,001,100.00
3133ELN83	AGCY BULET	FFCB 0.180 06/23/21	0.00	9,999,000.00	0.00	16.80	0.00	9,999,016.80	0.00	9,999,280.00	9,999,280.00
3130AGLD5	AGCY BULET	FHLB 1.875 07/07/21	0.00	10,174,500.00	0.00	(3,727.20)	0.00	10,170,772.80	0.00	10,169,760.00	10,169,760.00
912828YJ3	TREAS NOTE	U.S. Treasury 1.500 09/30/21	0.00	17,083,500.00	0.00	(8,999.42)	0.00	17,074,500.58	0.00	17,077,593.12	17,077,593.12
3135G0Q89	AGCY BULET	FNMA 1.375 10/07/21	0.00	5,786,355.00	0.00	(2,746.72)	0.00	5,783,608.28	0.00	5,785,532.49	5,785,532.49
3134GVJ66	AGCY BULET	FHLMC 0.250 06/08/22	0.00	19,987,600.00	0.00	277.80	0.00	19,987,877.80	0.00	19,980,134.00	19,980,134.00
3133ELJ21	AGCY CALL	FFCB 0.480 06/15/23	0.00	19,990,000.00	0.00	147.20	0.00	19,990,147.20	0.00	19,999,992.00	19,999,992.00
Total for 12-Pr	oject Fund Series 2	2020	170,121,666.89	146,102,790.31	(146,008,284.55)	104,445.77	0.00	170,320,618.42	170,011,704.68	170,332,602.77	320,898.09
20-Bexar Cty H	osp Dist - LPPF										
FRGXX-UHS	MMF	Fidelity Gov Inst'l MM	7,393,179.37	30,655,709.11	(13,264,401.17)	0.00	0.00	24,784,487.31	7,393,179.37	24,784,487.31	17,391,307.94
Total for 20-Be	exar Cty Hosp Dist	LPPF	7,393,179.37	30,655,709.11	(13,264,401.17)	0.00	0.00	24,784,487.31	7,393,179.37	24,784,487.31	17,391,307.94
	ersity Health Syster		1,443,962,671.99	814.626.840.07	(805.099,306.01)	307,182.42	1,757.80	1,453,799,146.27	1,450,230,247.19	1,460,108,318.33	9,878,071.14

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## University Health System Earned Income

From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	Beg. Accrued	Interest Earned	Interest Rec'd / Sold / Matured	Interest Purchased	Ending Accrued	Disc Accr / Prem Amort	Net income
1-Operating F	Fund								
RGXX-UHS	MMF	Fidelity Gov Inst'l MM	6,357.82	8,367.04	11,926.68	0.00	2,798.18	0.00	8,367.0
Total for 01-0	perating Fund		6,357.82	8,367.04	11,926.68	0.00	2,798.18	0.00	8,367.0
2-Contingenc	y Fund								
RGXX-UHS	MMF	Fidelity Gov Inst'l MM	26,699.40	8,765.41	34,362.90	0.00	1,101.91	0.00	8,765.4
TEXPOOL	LGIP	TexPool	0.00	6,585.02	6,585.02	0.00	0.00	0.00	6,585.0
3137EAEF2	AGCY BULET	FHLMC 1.375 04/20/20	49,194.44	5,805.56	55,000.00	0.00	0.00	5,146.64	10,952.2
71779RCY4	CP - INT	City of Philadelphia, PA 1.780 05/04/20	109,025.00	24,475.00	133,500.00	0.00	0.00	0.00	24,475.0
78009AFB5	CP - DISC	Royal Bank of Canada 0.000 06/11/20	0.00	0.00	0.00	0.00	0.00	36,091.70	36,091.7
8821175X8	MUNICIPAL	TX A&M Univ 1.600 07/01/20	9,280.00	9,280.00	0.00	0.00	18,560.00	0.00	9,280.0
91514BHB2	CP - INT	Univ of TX 1.750 10/06/20	59,791.67	66,354.16	0.00	0.00	126,145.83	0.00	66,354.1
3133EKL61	AGCY BULET	FFCB 1.550 03/04/21	11,625.00	38,750.00	0.00	0.00	50,375.00	5,849.60	44,599.6
9128284B3	TREAS NOTE	U.S. Treasury 2.375 03/15/21	10,971.47	58,729.62	0.00	0.00	69,701.09	(19,102.00)	39,627.6
3130ACHJ6	AGCY BULET	FHLB 1.800 03/24/21	1,750.00	22,500.00	0.00	0.00	24,250.00	(2,946.35)	19,553.6
88213APC3	MUNICIPAL	TX A&M Univ 1.964 05/15/21	13,985.86	9,255.35	18,510.70	0.00	4,730.51	0.00	9,255.3
5370962U2	MUNICIPAL	Little Elm ISD 0.000 08/15/21	0.00	0.00	0.00	0.00	0.00	4,549.17	4,549.1
9128284W7	TREAS NOTE	U.S. Treasury 2.750 08/15/21	52,129.12	103,125.00	0.00	0.00	155,254.12	(40,479.90)	62,645.1
3133EKP67	AGCY BULET	FFCB 1.625 09/17/21	9,479.17	60,937.50	0.00	0.00	70,416.67	6,999.15	67,936.6
3130AJGL7	AGCY BULET	FHLB 0.320 10/01/21	0.00	6,328.89	0.00	0.00	6,328.89	0.00	6,328.8
382723VK2	MUNICIPAL	State of TX 5.000 10/01/21	0.00	50,409.72	0.00	(23,965.28)	74,375.00	(41,515.71)	8,894.0
9128285L0	TREAS NOTE	U.S. Treasury 2.875 11/15/21	163,495.88	107,207.25	215,625.00	0.00	55,078.13	(45,120.90)	62,086.3
3133ELA95	AGCY CALL	FFCB 0.190 11/26/21	0.00	1,847.22	0.00	0.00	1,847.22	323.70	2,170.9
3137EADB2	AGCY BULET	FHLMC 2.375 01/13/22	77,187.50	89,062.50	0.00	0.00	166,250.00	(69,603.45)	19,459.0
659155HN8	MUNICIPAL	North East ISD, TX 5.000 02/01/22	0.00	67,909.72	0.00	(77,611.11)	145,520.83	(56,122.94)	11,786.7
882806EP3	MUNICIPAL	TX Tech Univ 2.620 02/15/22	3,180.39	6,222.50	0.00	0.00	9,402.89	(1,854.98)	4,367.5
889855K50	MUNICIPAL	Tomball ISD, TX 5.000 02/15/22	0.00	7,291.67	0.00	0.00	7,291.67	(5,808.35)	1,483.3
3133ELUQ5	AGCY BULET	FFCB 0.700 03/25/22	1,229.08	18,436.25	0.00	0.00	19,665.33	(4,195.35)	14,240.9
3133ELUX0	AGCY CALL	FFCB 1.000 03/30/22	694.44	62,500.00	0.00	0.00	63,194.44	0.00	62,500.0
3134GVJB5	AGCY CALL	FHLMC 1.200 04/06/22	0.00	56,666.67	0.00	0.00	56,666.67	0.00	56,666.6
88213AHJ7	MUNICIPAL	TX A&M Univ 2.479 05/15/22	46,825.56	30,987.50	61,975.00	0.00	15,838.06	3,876.65	34,864.1
3130AJHV4	AGCY CALL	FHLB 0.600 07/27/22	0.00	10,666.67	0.00	0.00	10,666.67	0.00	10,666.6
5370962V0	MUNICIPAL	Little Elm ISD 0.000 08/15/22	0.00	0.00	0.00	0.00	0.00	4,666.32	4,666.3
313380GJ0	AGCY BULET	FHLB 2.000 09/09/22	18,333.33	75,000.00	0.00	0.00	93,333.33	(6,591.00)	68,409.0

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#### **Earned Income**

CUSIP	Security Type	Security Description	Beg. Accrued	Interest Earned	Interest Rec'd / Sold / Matured	Interest Purchased	Ending Accrued	Disc Accr / Prem Amort	Net Income
02-Contingenc	y Fund								
3130AHE58	AGCY CALL	FHLB 1.950 10/21/22	86,666.67	10,833.33	97,500.00	0.00	0.00	0.00	10,833.33
882806EQ1	MUNICIPAL	TX Tech Univ 2,761 02/15/23	32,951.00	64,469.35	0.00	0.00	97,420.35	(1,443.50)	63,025.85
889855K68	MUNICIPAL	Tomball ISD, TX 5.000 02/15/23	0.00	17,062.50	0.00	0.00	17,062.50	(13,356.34)	3,706.16
3133ELUJ1	AGCY CALL	FFCB 1.000 03/24/23	1,944.44	25,000.00	0.00	0.00	26,944.44	0.00	25,000.00
3136G4VM2	AGCY CALL	FNMA 0.400 05/05/23	0.00	5,555.56	0.00	(444.44)	6,000.00	115.80	5,671.36
88213APE9	MUNICIPAL	TX A&M Univ 2.070 05/15/23	59,001.90	39,045.38	78,090.75	0.00	19,956.53	0.00	39,045.38
3134GVN79	AGCY CALL	FHLMC 0.500 06/30/23	0.00	138.89	0.00	0.00	138.89	0.00	138.89
8821173A0	MUNICIPAL	TX A&M Univ 2.500 07/01/23	45,375.00	45,375.00	0.00	0.00	90,750.00	8,754.98	54,129.98
8821176A7	MUNICIPAL	TX A&M Univ 1.790 07/01/23	4,475.00	4,475.00	0.00	0.00	8,950.00	0.00	4,475.00
5370962W8	MUNICIPAL	Little Elm ISD 0.000 08/15/23	0.00	0.00	0.00	0.00	0.00	7,573.08	7,573.08
597495BL3	MUNICIPAL	Midland Cty Fresh Wtr Dist 1.982 09/15/23	880.89	4,955.00	0.00	0.00	5,835.89	0.00	4,955.00
486063ZS2	MUNICIPAL	Katy ISD 2.017 02/15/24	4,239.62	8,294.91	0.00	0.00	12,534.53	0.00	8,294.9
8821176B5	MUNICIPAL	TX A&M Univ 1.850 07/01/24	4,625.00	4,625.00	0.00	0.00	9,250.00	0.00	4,625.00
5370962X6	MUNICIPAL	Little Elm ISD 0.000 08/15/24	0.00	0.00	0.00	0.00	0.00	5,198.53	5,198.53
Total for 02-C	ontingency Fund		905,036.83	1,234,929.10	701,149.37	(102,020.83)	1,540,837.39	(218,995.45)	1,015,933.6



#### **Earned Income**

From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	Beg. Accrued	Interest Earned	Interest Rec'd / Sold / Matured	Interest Purchased	Ending Accrued	Disc Accr / Prem Amort	Net Income
3-Plant Fund									
RGXX-UHS	MMF	Fidelity Gov Inst'l MM	11,711.79	8,556.35	18,262.92	0.00	2,005.22	0.00	8,556.35
EXPOOL	LGIP	TexPool	0.00	40,630.26	40,630.26	0.00	0.00	0.00	40,630.26
EXPRIME	LGIP	TexPool Prime	0.00	110,012.52	110,012.52	0.00	0.00	0.00	110,012.52
1510PH41	CP - INT	Univ of TX 1.780 04/03/20	40,682.89	739.69	41,422.58	0.00	0.00	0.00	739.69
9233GD78	CP - DISC	Toyota Mtr Cr 0.000 04/07/20	0.00	0.00	0.00	0.00	0.00	4,675.05	4,675.05
1510PH33	CP - INT	Univ of TX 1.780 04/07/20	27,441.67	1,483.33	28,925.00	0.00	0.00	0.00	1,483.33
1510PJ23	CP - INT	Univ of TX 1.550 05/11/20	0.00	12,238.11	12,238.11	0.00	0.00	0.00	12,238.11
1510PJ56	CP - INT	Univ of TX 1.600 05/12/20	0.00	7,777.78	7,777.78	0.00	0.00	0.00	7,777.78
7286MF97	CP - DISC	Baylor Univ 0,000 06/09/20	0.00	0.00	0.00	0.00	0.00	47,916.62	47,916.62
1510PJ72	CP - INT	Univ of TX 0.300 06/12/20	0.00	2,133.33	2,133.33	0.00	0.00	0.00	2,133.33
12828XU9	TREAS NOTE	U.S. Treasury 1.500 06/15/20	44,262.30	30,737.70	75,000.00	0.00	0.00	8,258.00	38,995.70
1514BGW7	CP - INT	Univ of TX 1.860 07/31/20	38,233.33	23,508.34	0.00	0.00	61,741.67	0.00	23,508.34
13384B24	AGCY DISCO	FHLB 0.000 08/07/20	0.00	0.00	0.00	0.00	0.00	861.00	861.00
3068CEN1	CP - INT	State of CA 0.240 09/02/20	0.00	1,770.49	0.00	0.00	1,770.49	0.00	1,770.49
5248NLQ1	CP - INT	City of Austin, TX 0.200 09/03/20	0.00	680.55	0.00	0.00	680.55	0.00	680.55
128282V1	TREAS NOTE	U.S. Treasury 1.375 09/15/20	6,351.90	34,001.36	0.00	0.00	40,353.26	5,914.20	39,915.56
8306AK22	CP - DISC	Kaiser Foundation Hospital 0.000 10/02/20	0.00	0.00	0.00	0.00	0.00	3,626.22	3,626.22
12828272	TREAS NOTE	U.S. Treasury 1.625 10/15/20	75,034.15	40,403.01	81,250.00	0.00	34,187.16	(131.60)	40,271.41
6640PLA9	CP - DISC	J.P.Morgan Sec 0.000 11/10/20	0.00	0.00	0.00	0.00	0.00	1,104.25	1,104.25
12828PC8	TREAS NOTE	U.S. Treasury 2.625 11/15/20	99,519.23	65,256.59	131,250.00	0.00	33,525.82	(23,898.90)	41,357.69
128285S5	TREAS NOTE	U.S. Treasury 2.500 12/31/20	63,186.81	62,492.54	125,000.00	0.00	679.35	(21,055.60)	41,436.94
130AJ4A4	AGCY BULET	FHLB 1.500 02/10/21	21,250.00	37,500.00	0.00	0.00	58,750.00	715.70	38,215.70
130AJRS0	AGCY BULET	FHLB 0.190 03/29/21	0.00	422.22	0.00	(52.78)	475.00	0.00	422.22
128284G2	TREAS NOTE	U.S. Treasury 2.375 04/15/21	87,732.24	47,240.44	95,000.00	0.00	39,972.68	(10,534.40)	36,706.04
133ELZH0	AGCY BULET	FFCB 0.125 05/14/21	0.00	1,423.61	0.00	(208.33)	1,631.94	532.60	1,956.21
130AJQ69	AGCY BULET	FHLB 0.125 06/15/21	0.00	208.34	0.00	(347.22)	555.56	108.30	316.64
130AGLD5	AGCY BULET	FHLB 1.875 07/07/21	0.00	2,578.13	0.00	(72,187.50)	74,765.63	(2,306.62)	271.51
79240JW1	MUNICIPAL	Round Rock ISD, TX 5.000 08/01/21	0.00	30,090.28	0.00	(34,388.89)	64,479.17	(25,602.61)	4,487.67
128285F3	TREAS NOTE	U.S. Treasury 2.875 10/15/21	0.00	785.52	0.00	(59,699.45)	60,484.97	(345.40)	440.12
130AJ6U8	AGCY CALL	FHLB 1.650 02/18/22	38,500.00	43,083.33	81,583.33	0.00	0,00	129.40	43,212.73
134GVUK2	AGCY CALL	FHLMC 0.300 05/13/22	0.00	7,166.67	0.00	(833.33)	8,000.00	300.20	7,466.87
133ELN26	AGCY BULET	FFCB 0.260 06/22/22	0.00	2,275.00	0.00	0.00	2,275.00	158.40	2,433.40
134GVJP4	AGCY CALL	FHLMC 1.125 10/07/22	0.00	38,906.25	0.00	0.00	38,906.25	0.00	38,906.25
134GV4C9	AGCY CALL	FHLMC 0.400 12/29/22	0.00	166.66	0.00	(166.67)	333.33	0.90	167.56

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#### **Earned Income**

CUSIP	Security Type	Security Description	Beg. Accrued	Interest Earned	Interest Rec'd / Sold / Matured	Interest Purchased	Ending Accrued	Disc Acer / Prem Amort	Net Income
03-Plant Fund									
3133ELJN5	AGCY CALL	FFCB 1.640 01/24/23	30,522.22	41,000.00	0.00	0.00	71,522.22	0.00	41,000.00
Total for 03-F	Plant Fund		584,428.53	695,268.40	850,485.83	(167,884.17)	597,095.27	(9,574.29)	685,694.1



## **Earned Income**

CUSIP	Security Type	Security Description	Beg. Accrued	Interest Earned	Interest Rec'd / Sold / Matured	Interest Purchased	Ending Accrued	Disc Accr / Prem Amort	Net Income
4-Tax Fund									
RGXX-UHS	MMF	Fidelity Gov Inst'l MM	32,591.93	13,903.86	42,068.96	0.00	4,426.83	0.00	13,903.86
EXPRIME	LGIP	TexPool Prime	0.00	76,333.15	76,333.15	0.00	0.00	0.00	76,333.15
6844CD84	CP - DISC	Northwestern Univ 0.000 04/08/20	0.00	0,00	0.00	0.00	0.00	1,555.55	1,555.55
6640PDG5	CP - DISC	J.P.Morgan Sec 0.000 04/16/20	0.00	0.00	0.00	0.00	0.00	5,025.00	5,025.00
8459RE48	CP - DISC	Yale Univ 0.000 05/04/20	0.00	0.00	0.00	0.00	0.00	10,083.33	10,083.33
9157P6E9	CP - INT	Emory Univ 1.600 05/05/20	16,174.86	14,863.39	31,038.25	0.00	0.00	0.00	14,863.39
8306AE78	CP - DISC	Kaiser Foundation Hospital 0.000 05/07/20	0.00	0.00	0.00	0.00	0.00	17,000.00	17,000.00
9837TEH7	CP - INT	Princeton Univ 1.590 05/08/20	19,080.00	13,073.33	32,153.33	0.00	0.00	0.00	13,073.33
9837TEG9	CP - INT	Princeton Univ 1.600 05/19/20	24,000.00	21,333.33	45,333.33	0.00	0.00	0.00	21,333.33
3068BEX1	CP - INT	State of CA 1.600 05/22/20	6,728.74	9,274.76	16,003.50	0,00	0.00	0.00	9,274.76
6844CF25	CP - DISC	Northwestern Univ 0.000 06/02/20	0.00	0.00	0.00	0.00	0.00	27,469.42	27,469.42
3068CEE1	CP - INT	State of CA 0.930 06/04/20	6,606.56	16,262.29	22,868.85	0.00	0.00	0.00	16,262.29
8306AF44	CP - DISC	Kaiser Foundation Hospital 0.000 06/04/20	0.00	0.00	0.00	0.00	0.00	54,217.75	54,217.75
30229AF53	CP - DISC	Exxon Mobil 0.000 06/05/20	0.00	0.00	0.00	0.00	0.00	66,416.61	66,416.61
88459RG87	CP - DISC	Yale Univ 0.000 07/08/20	0.00	0.00	0.00	0.00	0.00	29,195.88	29,195.88
9128282J8	TREAS NOTE	U.S. Treasury 1.500 07/15/20	44,423.08	52,500.00	0.00	0.00	96,923.08	13,760.68	66,260.68
23505BAA5	CP - INT	DFW Intl Airport 1,850 07/23/20	41,547.92	25,720.14	0.00	0.00	67,268.06	0.00	25,720.14
23506FAA5	CP - INT	DFW Intl Airport 1.850 07/23/20	37,770.83	23,381.95	0.00	0.00	61,152.78	0.00	23,381.95
313384B24	AGCY DISCO	FHLB 0.000 08/07/20	0.00	0.00	0.00	0.00	0.00	77,500.00	77,500.00
3068BFR3	CP - INT	State of CA 0.240 08/20/20	0.00	1,091.15	0.00	0.00	1,091.15	0.00	1,091.15
79583RJA8	CP - DISC	Salvation Army 0.000 09/10/20	0.00	0.00	0.00	0.00	0.00	52,577.72	52,577.72
3130AH2Z5	AGCY BULET	FHLB 1.750 09/16/20	6,197.92	37,187.50	0.00	0.00	43,385.42	2,593.95	39,781.45
9128282Z2	TREAS NOTE	U.S. Treasury 1.625 10/15/20	75,034.15	40,403.01	81,250.00	0.00	34,187.16	(131.60)	40,271.41
16640PLA9	CP - DISC	J.P.Morgan Sec 0.000 11/10/20	0.00	0.00	0.00	0.00	0.00	99,375.00	99,375.00
912828PC8	TREAS NOTE	U.S. Treasury 2.625 11/15/20	99,519.23	65,256.59	131,250.00	0.00	33,525.82	(25,100.50)	40,156.09
3130AJ4A4	AGCY BULET	FHLB 1.500 02/10/21	42,500.00	75,000.00	0.00	0.00	117,500.00	1,431.40	76,431.40
12828Y20	TREAS NOTE	U.S. Treasury 2.625 07/15/21	55,528.85	65,625.00	0.00	0.00	121,153.85	(25,283.50)	40,341.50
9128285F3	TREAS NOTE	U.S. Treasury 2.875 10/15/21	132,752.73	70,696.72	203,449.45	0.00	0.00	(31,040.50)	39,656.22
Total for 04-Ta	ax Fund		640,456.80	621,906.17	681,748.82	0.00	580,614.15	376,646.19	998,552.36



#### **Earned Income**

CUSIP Security Typ	pe Security Description	Beg. Accrued	Interest Earned	Interest Rec'd / Sold / Matured	Interest Purchased	Ending Accrued	Disc Accr / Prem Amort	Net Income
06-Certificate Fund								
FRGXX-UHS MMF	Fidelity Gov Inst'l MM	9,879.57	6,293.69	14,665.39	0.00	1,507.87	0.00	6,293.69
Total for 06-Certificate Fund		9,879.57	6,293.69	14,665.39	0.00	1,507.87	0.00	6,293.69



#### **Earned Income**

From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	Beg. Accrued	Interest Earned	Interest Rec'd / Sold / Matured	Interest Purchased	Ending Accrued	Disc Accr / Prem Amort	Net Income
1-Project Fun	d Series 2018								
RGXX-UHS	MMF	Fidelity Gov Inst'l MM	20,441.13	15,565.79	29,781.75	0.00	6,225.17	0.00	15,565.79
EXPOOL	LGIP	TexPool	0.00	7,335.52	7,335.52	0.00	0.00	0.00	7,335.52
EXPRIME	LGIP	TexPool Prime	0.00	20,606.44	20,606.44	0.00	0.00	0.00	20,606.44
9584RDD7	CP - DISC	Salvation Army 0.000 04/13/20	0.00	0.00	0.00	0.00	0.00	3,200.00	3,200.00
3137EAEM7	AGCY BULET	FHLMC 2.500 04/23/20	127,277.78	17,722.22	145,000.00	0.00	0.00	658.53	18,380.75
9584RED6	CP - DISC	Salvation Army 0.000 05/13/20	0.00	0.00	0.00	0.00	0.00	33,250.05	33,250.05
133EJNW5	AGCY BULET	FFCB 2.550 05/15/20	105,966.67	34,283.33	140,250.00	0.00	0.00	294.58	34,577.91
7287CEM0	CP - DISC	Baylor Scott & White 0.000 05/21/20	0.00	0.00	0.00	0.00	0.00	48,611.15	48,611.15
3133EJRL5	AGCY BULET	FFCB 2.550 06/11/20	81,033.33	51,566.67	132,600.00	0.00	0.00	175.14	51,741.81
1779YAE5	CP - INT	City of Philadelphia, PA 1.750 07/14/20	73,888.89	88,472.22	0.00	0.00	162,361.11	0.00	88,472.22
9584RHB7	CP - DISC	Salvation Army 0.000 08/11/20	0.00	0.00	0.00	0.00	0.00	24,138.87	24,138.87
12828L65	TREAS NOTE	U.S. Treasury 1.375 09/30/20	375.68	34,187.16	0.00	0.00	34,562.84	12,310.40	46,497.56
128282Z2	TREAS NOTE	U.S. Treasury 1.625 10/15/20	150,068.30	80,806.02	162,500.00	0.00	68,374.32	5,842.20	86,648.22
128283G3	TREAS NOTE	U.S. Treasury 1.750 11/15/20	66,346.15	43,504.39	87,500.00	0.00	22,350.54	(1,736.30)	41,768.09
128283L2	TREAS NOTE	U.S. Treasury 1.875 12/15/20	55,327.87	46,618.85	93,750.00	0.00	8,196.72	605.00	47,223.85
128283Q1	TREAS NOTE	U.S. Treasury 2.000 01/15/21	42,307.70	50,000.00	0.00	0.00	92,307.70	1,016.44	51,016.44
3133EJCE7	AGCY BULET	FFCB 2.350 02/12/21	8,956.11	16,450.00	0.00	0.00	25,406.11	2,446.55	18,896.55
128283X6	TREAS NOTE	U.S. Treasury 2.250 02/15/21	25,590.66	50,625.00	0.00	0.00	76,215.66	(7,412.22)	43,212.78
3137EAEL9	AGCY BULET	FHLMC 2,375 02/16/21	29,687.50	59,375.00	0.00	0.00	89,062.50	(20,589.10)	38,785.90
313382K69	AGCY BULET	FHLB 1.750 03/12/21	1,570.14	7,437.50	0.00	0.00	9,007.64	3,913.78	11,351.28
128284B3	TREAS NOTE	U.S. Treasury 2.375 03/15/21	7,680.03	41,110.73	0.00	0.00	48,790.76	(12,405.47)	28,705.26
9128284G2	TREAS NOTE	U.S. Treasury 2.375 04/15/21	164,497.95	88,575.82	178,125.00	0.00	74,948.77	(32,283.60)	56,292.22
3133ELN83	AGCY BULET	FFCB 0.180 06/23/21	0.00	300.00	0.00	(100.00)	400.00	16.80	316.80
3130AGLD5	AGCY BULET	FHLB 1.875 07/07/21	0.00	4,166.67	0.00	(86,458.33)	90,625.00	(3,727.20)	439.47
3133ELKN3	AGCY BULET	FFCB 1.550 01/28/22	0.00	2,583.33	0.00	(63,291.67)	65,875.00	(2,193.00)	390.33
3133ELN26	AGCY BULET	FFCB 0.260 06/22/22	0.00	975.00	0.00	0.00	975.00	48.60	1,023.60
3134GU3G3	AGCY CALL	FHLMC 1.850 01/17/23	57,041.67	12,333.33	69,375.00	0.00	0.00	0.00	12,333.33
3133ELJN5	AGCY CALL	FFCB 1.640 01/24/23	21,365.56	28,700.00	0.00	0.00	50,065.56	0.00	28,700.00
3133ELWZ3	AGCY CALL	FFCB 0.840 04/21/23	0.00	24,500.00	0.00	0.00	24,500.00	0.00	24,500.00
1423315T7	MUNICIPAL	City of Houston, TX 1.950 03/01/24	8,125.00	24,375.00	0.00	0.00	32,500.00	(1,521.00)	22,854.00
Total for 11-Pr	roject Fund Series 2	2018	1,047,548.12	852,175.99	1,066,823.71	(149,850.00)	982,750.40	54,660.20	906,836.19

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#### **Earned Income**

From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	Beg. Accrued	Interest Earned	Interest Rec'd / Sold / Matured	Interest Purchased	Ending Accrued	Disc Accr / Prem Amort	Net Income
12-Project Fun	d Series 2020								
FRGXX-UHS	MMF	Fidelity Gov Inst'l MM	105,755.93	35,040.78	135,035.31	0.00	5,761.40	0.00	35,040.78
91411SD23	CP - DISC	Univ of CA 0.000 04/02/20	0.00	0.00	0.00	0.00	0.00	382.24	382.24
29157P6E9	CP - INT	Emory Univ 1.600 05/05/20	9,704.92	8,918.03	18,622.95	0.00	0.00	0.00	8,918.03
13068BEX1	CP - INT	State of CA 1.600 05/22/20	16,174.86	22,295.08	38,469.94	0.00	0.00	0.00	22,295.08
29157P6F6	CP - INT	Emory Univ 1.450 05/28/20	12,523.09	24,614.34	37,137.43	0.00	0.00	0.00	24,614.34
89837TEK0	CP - INT	Princeton Univ 0.930 06/03/20	6,975.00	16,275.00	23,250.00	0.00	0.00	0.00	16,275.00
30229AFB0	CP - DISC	Exxon Mobil 0.000 06/11/20	0.00	0.00	0.00	0.00	0.00	21,300.00	21,300.00
66844CFF6	CP - DISC	Northwestern Univ 0.000 06/15/20	0.00	0.00	0.00	0.00	0.00	63,281.25	63,281.25
30229AGE3	CP - DISC	Exxon Mobil 0.000 07/14/20	0.00	0.00	0.00	0.00	0.00	26,541.60	26,541.60
07287CGU0	CP - DISC	Baylor Scott & White 0.000 07/28/20	0.00	0.00	0.00	0.00	0.00	7,972.22	7,972.22
13068BFR3	CP - INT	State of CA 0.240 08/20/20	0.00	2,622.95	0.00	0.00	2,622.95	0.00	2,622.95
3133ELN83	AGCY BULET	FFCB 0.180 06/23/21	0.00	300.00	0.00	(100.00)	400.00	16.80	316.80
3130AGLD5	AGCY BULET	FHLB 1.875 07/07/21	0.00	4,166.67	0.00	(86,458.33)	90,625.00	(3,727.20)	439.47
912828YJ3	TREAS NOTE	U.S. Treasury 1.500 09/30/21	0.00	10,327.87	0.00	(53,016.39)	63,344.26	(8,999.42)	1,328.45
3135G0Q89	AGCY BULET	FNMA 1.375 10/07/21	0.00	3,265.62	0.00	(15,021.88)	18,287.50	(2,746.72)	518.90
3134GVJ66	AGCY BULET	FHLMC 0.250 06/08/22	0.00	2,222.22	0.00	(972.22)	3,194.44	277.80	2,500.02
3133ELJ21	AGCY CALL	FFCB 0.480 06/15/23	0.00	4,266.67	0.00	0.00	4,266.67	147.20	4,413.87
Total for 12-Pr	roject Fund Series 2	020	151,133.80	134,315.23	252,515.63	(155,568.82)	188,502.22	104,445.77	238,761.00
20-Bexar Cty H	losp Dist - LPPF								
FRGXX-UHS	MMF	Fidelity Gov Inst'l MM	5,194.49	8,021.09	10,545.88	0.00	2,669.70	0.00	8,021.09
Total for 20-Be	exar Cty Hosp Dist	LPPF	5,194.49	8,021.09	10,545.88	0.00	2,669.70	0.00	8,021.09
Total for Unive	ersity Health System		3,350,035.96	3,561,276.71	3,589,861.31	(575,323.82)	3.896.775.18	307.182.42	3,868,459.13

Print Date: 7/15/2020



## **Investment Portfolio Summary**

## **UHS-Community First**



For the Quarter Ended June 30, 2020

Prepared by HilltopSecurities Asset Management



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Projected Fixed Income Cash Flows

#### **MARKET RECAP - JUNE 2020:**

Last month in our summary for May we wrote, "Phrases such as the "steepest decline ever" and the "worst in history" will apply to almost every piece of April economic data." The opposite will be true for June as the economic reopening that started in May resulted in significant rebounds that in many cases were the "biggest gain in history." We would, however, caution readers not to put too much stock into the big jumps in the monthly data as things had gotten so bad in April and May they just had to get better. And, despite the improvement evident in much of the economic data, we are nowhere near the levels that prevailed prior to the COVID-19 mandated shutdowns. The employment data is the most obvious place to start as non-farm payrolls grew by a stunning 2.5 million in May. The largest monthly gain in the history of this series going back to 1939 wildly surpassed the consensus forecast for a loss of 7.5 million jobs, and yet was only a tenth of the 22 million jobs lost in March and April. The unemployment rate, expected to climb to 19%, actually declined to 13.3%. The ISM surveys perked up as well with the manufacturing index climbing from 41.5 to 43.1 and the non-manufacturing index from 41.8 to 45.4. While both readings still indicated contraction, the improvement was viewed as a signal that the worst was behind us. Auto sales also topped expectations, rebounding from April's pitiful 8.6 million unit annual pace to 12.2 million. Consumer spending came roaring back in May, too, no doubt reflecting some pent up demand as consumers emerged en masse from the nationwide lockout and began spending at a furious pace. Sales surged +17.7% during May after a revised -14.7% April decline. Spending was brisk across all categories as it appears the government's response to the crisis has helped support consumer spending. Housing data for May was mixed as existing homes sales fell -9.7% to the lowest level since October 2010. However, since existing sales are measured at closing this data is more reflective of activity during March and April, when many buyers and sellers were in lockdown. By contrast, new home sales are measured when the contracts are signed and they climbed 16.6% during May.

The improving trend in economic data was countered in the later part of June by worrisome trends in COVID-19 data as states that had reopened to great fanfare around Memorial Day saw a dramatic surge in cases. Texas, Florida, and Arizona were hard hit, forcing renewed restrictions and closures as the Fourth of July holiday approached.

Equity markets focused on the positives and extended their rally, with the Dow Jones Industrial Average climbing +1.7% and the S&P 500 gaining +1.8% in June. The Nasdaq composite rose a remarkable +6%, hit a new record high, and is up +12.1% year-to-date as technology stocks have been a beneficiary of the stay at home economy. Bond markets were stable with slight declines of 1-2 basis points in yield across most tenors. The two-year T-note yield closed June at 0.15%, while both the three-year and five-year T-notes set record lows at 0.17% and 0.27% respectively on June 29th. The short end of the yield curve is likely to be anchored by Fed policy for years to come. All in all, it appears the recovery has begun in earnest, but it also appears likely that the path won't be smooth and the outlook is still very much dependent on the path of the virus.



## For the Quarter Ended June 30, 2020

This report is prepared for the UHS-Community First (the "Entity") in accordance with Chapter 2256 of the Texas Public Funds Investment Act ("PFIA"). Section 2256.023(a) of the PFIA states that: "Not less than quarterly, the investment officer shall prepare and submit to the governing body of the entity a written report of the investment transactions for all funds covered by this chapter for the preceding reporting period." This report is signed by the Entity's investment officers and includes the disclosures required in the PFIA. To the extent possible, market prices have been obtained from independent pricing sources.

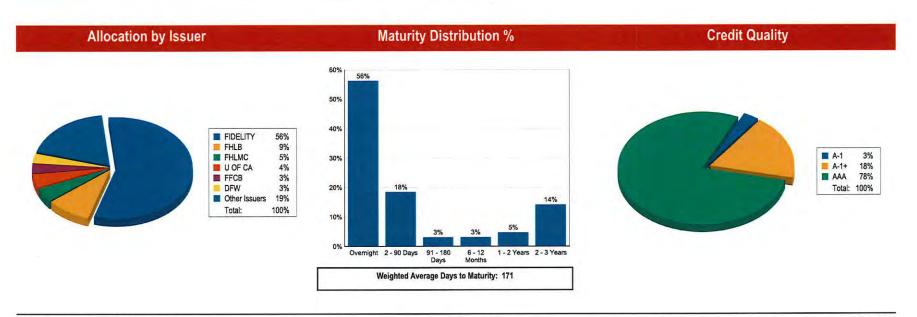
The investment portfolio complied with the PFIA and the Entity's approved Investment Policy and Strategy throughout the period. All investment transactions made in the portfolio during this period were made on behalf of the Entity and were made in full compliance with the PFIA and the approved Investment Policy.

Officer Names and Titles:		
Name: Repd Hurley	Title: Executive Vice President / CFO - UHS	
Name: Roe Garrett	Title: Executive Vice President / Controller	
Name: Bill Bedwell	Title: Executive Director Reimb / Treas Mgmt	
Name: Con Coffeld	Title: Treasury Manager	
Name: Amanda McCoy	Title: Director of Accounting	



## UHS-Community First Executive Summary As of 06/30/20

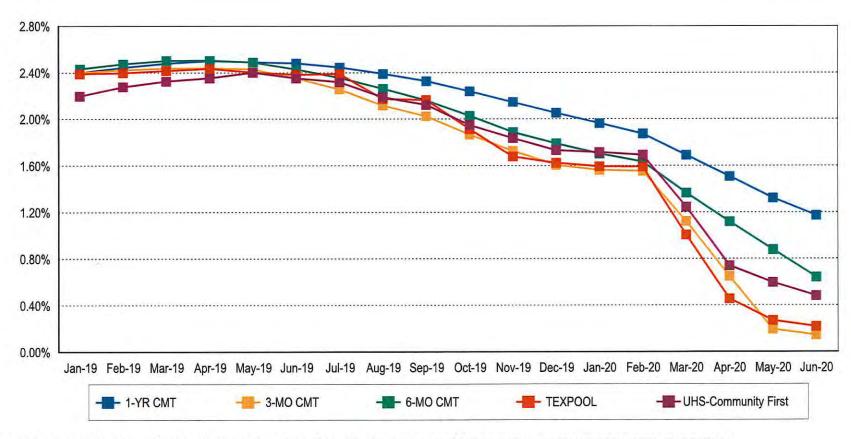
Allocation by Security Type **Account Summary** Beginning Values as of 03/31/20 Ending Values as of 06/30/20 Par Value 137,126,231.57 160,023,198.02 160,642,831.50 Market Value 137,163,858.61 AGCY BULLET 160,365,671.28 Book Value 136,959,426.35 AGCY CALL 11% 277,160.22 Unrealized Gain /(Loss) 204,432.26 ■ CP 22% ■ MMF 56% 100.15% 100.17% Market Value % **MUNICIPAL** 3% TREASURY 2% 100% Total: Weighted Avg. YTW 1.245% 0.481% 0.481% Weighted Avg. YTM 1.245%



Print Date: 7/14/2020 Print Time: 11:07 am



#### UHS-Community First Benchmark Comparison As of 06/30/2020



Note 1: CMT stands for Constant Maturity Treasury. This data is published in Federal Reserve Statistical Release H.15 and represents an average of all actively traded Treasury securities having that time remaining until maturity. This is a standard industry benchmark for Treasury securities. The CMT benchmarks are moving averages, The 3-month CMT is the daily average for the previous 3 months, the 6-month CMT is the daily average for the previous 6 months, and the 1-year and 2-year CMT's are the daily averages for the previous 12-months.

Note 2: Benchmark data for TexPool is the monthly average yield.

Print Date: 7/14/2020

Print Time: 11:08 am



## **UHS-Community First** Detail of Security Holdings As of 06/30/2020

CUSIP	Settle Date	Sec. Type	Sec. Description	CPN	Mty Date	Next Call	Call Type	Par Value	Purch Price	Orig Cost	Book Value	Mkt Price	Market Value	Days to Mty	Days to Call	YTM	YTV
omm First He	ealth Plan																
RGXX-CFP		MMF	Fidelity Gov Inst'l MM					31,046,105.37	100.000	31,046,105.37	31,046,105.37	100.000	31,046,105.37	1		0.110	0.1
RGXXCFP2		MMF	Fidelity Gov Inst'l MM					58,648,183.98	100.000	58,648,183.98	58,648,183.98	100.000	58,648,183.98	1		0.110	0.1
8459RG87	02/26/20	CP - DISC	Yale Univ		07/08/20			5,000,000.00	99.390	4,969,520.83	4,998,395.85	99.998	4,999,921.00	8		1.660	1.
3506FAA5	11/06/19	CP - INT	DFW Intl Airport	1.850	07/23/20			5,000,000.00	100.000	5,000,000.00	5,000,000.00	100.061	5,003,050.00	23		1.850	1.8
1411SGP9	02/13/20	CP - DISC	Univ of CA		07/23/20			7,000,000.00	99.284	6,949,911.11	6,993,155.54	99.990	6,999,329.40	23		1.612	1.6
7286MH46	06/09/20	CP - DISC	Baylor Univ		08/04/20			5,000,000.00	99.969	4,998,444.44	4,999,055.55	99.985	4,999,271.00	35		0.200	0.2
6640PH48	02/04/20	CP - DISC	J.P.Morgan Sec		08/04/20			5,000,000.00	99.171	4,958,544.44	4,992,255.55	99.988	4,999,382.50	35		1.654	1.6
7287CHR6	06/18/20	CP - DISC	Baylor Scott & White		08/25/20			2,680,000.00	99.955	2,678,785.07	2,679,017.32	99.963	2,679,016.17	56		0.240	0.3
1514BHP1	06/24/20	CP - INT	Univ of TX	0.290	12/17/20			5,000,000.00	100.000	5,000,000.00	5,000,000.00	99.991	4,999,550.00	170		0.290	0.3
130A1W95	06/04/20	AGCY BULET	FHLB	2.250	06/11/21			5,000,000.00	102.105	5,105,250.00	5,097,512.05	101.881	5,094,032.00	346		0.182	0.
82724MR5	04/28/20	MUNICIPAL	State of TX	5.000	08/01/21			2,455,000.00	105.246	2,583,789.30	2,565,966.20	105.167	2,581,849.85	397		0.801	0.
12828WZ9	04/26/17	TREAS NOTE	U.S. Treasury	1.750	04/30/22			100,000.00	99.547	99,546.88	99,829.61	102.898	102,898.44	669		1.845	1.
8213AHJ7	01/24/19	MUNICIPAL	TX A&M Univ	2.479	05/15/22			1,790,000.00	99.065	1,773,263.50	1,780,365.68	103.901	1,859,827.90	684		2.776	2.
12828SV3	100000000000000000000000000000000000000	TREAS NOTE	U.S. Treasury	1.750	05/15/22			3,000,000.00	98,469	2,954,062.50	2,971,312.29	102.961	3,088,828.20	684		2.275	2.
130AJHV4		AGCY CALL	FHLB	0.600	07/27/22	4/27/2021	CONT	10,000,000.00	100.000	10,000,000.00	10,000,000.00	100.015	10,001,504.00	757	301	0.600	0.6
133EFUJ4		AGCY BULET	FFCB	2.150	12/29/22	AGNITAC:	25/10	5,000,000.00	104.187	5,209,350.00	5,191,980.40	104.642	5,232,123.50	912		0.597	0.5
134GVSC3	2.0 22.003	AGCY CALL	FHLMC	0.400	02/07/23	5/7/2021	ONE TIME	7,500,000.00	100.000	7,500,000.00	7,500,000.00	100.027	7,502,008.50	952	311	0.400	0.4
otal for Com	m First Hea	alth Plan						159,219,289.35	100.170	159,474,757.42	159,563,135.39	100.397	159,836,881.81	171		0.483	0.4
Comm First Ho	ospital Svc	Plan															
FRGXX-CFP		MMF	Fidelity Gov Inst'l MM					753,908.67	100.000	753,908.67	753,908.67	100.000	753,908.67	1		0.110	0.
912828R28	05/30/18	TREAS NOTE	U.S. Treasury	1.625	04/30/23			50,000.00	95.355	47,677.73	48,627.22	104.082	52,041.02	1,034		2.638	2.6
otal for Com	m First Hos	spital Svc Plan						803,908.67	99.719	801,586.40	802,535.89	100.247	805,949.69	64		0.263	0.
otal for UHS	-Communit	v First						160,023,198.02	100,168	160,276,343.82	160.365.671.28	100,396	160,642,831.50	171		0.481	0.

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## UHS-Community First Change in Value

From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	03/31/20 Book Value	Cost of Purchases	Maturities / Calls / Sales	Amortization / Accretion	Realized Gain/(Loss)	06/30/20 Book Value	03/31/20 Market Value	06/30/20 Market Value	Change in Mkt Value
omm First He	alth Pian										
ED-PRIM2	MMF	Federated Prime Oblig	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ED-PRIME	MMF	Federated Prime Oblig	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
RGXX-CFP	MMF	Fidelity Gov Inst'l MM	31,332,386,20	4,815,106.08	(5,101,386.91)	0.00	0.00	31,046,105.37	31,332,386.20	31,046,105.37	(286,280.83
RGXXCFP2	MMF	Fidelity Gov Inst'l MM	40,600,836.17	21,364,875.91	(3,317,528.10)	0.00	0.00	58,648,183.98	40,600,836.17	58,648,183.98	18,047,347.81
8459RD15	CP - DISC	Yale Univ 0.000 04/01/20	5,000,000.00	0.00	(5,000,000.00)	0.00	0.00	0.00	4,999,952.50	0.00	(4,999,952.50
6844CD84	CP - DISC	Northwestern Univ 0.000 04/08/20	4,998,444.45	0.00	(5,000,000.00)	1,555.55	0.00	0.00	4,997,700.00	0.00	(4,997,700.00
13384WC9	AGCY DISCO	FHLB 0.000 04/27/20	4,994,330.55	0.00	(5,000,000.00)	5,669.45	0.00	0.00	4,999,747.00	0.00	(4,999,747.00
7287CEM0	CP - DISC	Baylor Scott & White 0.000 05/21/20	4,993,055.55	0.00	(5,000,000.00)	6,944.45	0.00	0.00	4,990,706.50	0.00	(4,990,706.50
13384XH7	AGCY DISCO	FHLB 0.000 05/26/20	4,988,006.95	0.00	(5,000,000.00)	11,993.05	0.00	0.00	4,999,465.50	0.00	(4,999,465.50
9157P6J8	CP - INT	Emory Univ 2.300 06/03/20	0.00	5,000,000.00	(5,000,000.00)	0.00	0.00	0.00	0.00	0.00	0.00
7286MF97	CP - DISC	Baylor Univ 0.000 06/09/20	2,490,416.68	0.00	(2,500,000.00)	9,583.32	0.00	0.00	2,489,937.50	0.00	(2,489,937.50
8459RG87	CP - DISC	Yale Univ 0.000 07/08/20	4,977,541.65	0.00	0.00	20,854.20	0.00	4,998,395.85	4,982,675.00	4,999,921.00	17,246.00
3506FAA5	CP - INT	DFW Intl Airport 1.850 07/23/20	5,000,000.00	0.00	0.00	0.00	0.00	5,000,000.00	4,991,150.00	5,003,050.00	11,900.00
1411SGP9	CP - DISC	Univ of CA 0.000 07/23/20	6,964,844.46	0.00	0.00	28,311.08	0.00	6,993,155.54	6,951,898.10	6,999,329.40	47,431.30
7286MH46	CP - DISC	Baylor Univ 0.000 08/04/20	0.00	4,998,444.44	0.00	611.11	0.00	4,999,055.55	0.00	4,999,271.00	4,999,271.00
6640PH48	CP - DISC	J.P.Morgan Sec 0.000 08/04/20	4,971,527.80	0.00	0.00	20,727.75	0.00	4,992,255.55	4,973,330.00	4,999,382.50	26,052.50
7287CHR6	CP - DISC	Baylor Scott & White 0.000 08/25/20	0.00	2,678,785.07	0.00	232.25	0.00	2,679,017.32	0.00	2,679,016.17	2,679,016.17
1514BHP1	CP - INT	Univ of TX 0.290 12/17/20	0.00	5,000,000.00	0.00	0.00	0.00	5,000,000.00	0.00	4,999,550.00	4,999,550.00
130A1W95	AGCY BULET	FHLB 2.250 06/11/21	0.00	5,105,250.00	0.00	(7,737.95)	0.00	5,097,512.05	0.00	5,094,032.00	5,094,032.00
82724MR5	MUNICIPAL	State of TX 5.000 08/01/21	0.00	2,583,789.30	0.00	(17,823.10)	0.00	2,565,966.20	0.00	2,581,849.85	2,581,849.85
12828WZ9	TREAS NOTE	U.S. Treasury 1.750 04/30/22	99,806.94	0.00	0.00	22.67	0.00	99,829.61	103,160.16	102,898.44	(261.72
8213AHJ7	MUNICIPAL	TX A&M Univ 2.479 05/15/22	1,779,115.87	0.00	0.00	1,249.81	0.00	1,780,365.68	1,841,211.90	1,859,827.90	18,616.00
12828SV3	TREAS NOTE	U.S. Treasury 1.750 05/15/22	2,967,592.35	0.00	0.00	3,719.94	0.00	2,971,312.29	3,097,500.00	3,088,828.20	(8,671.80
130AJHV4	AGCY CALL	FHLB 0.600 07/27/22	0.00	10,000,000.00	0.00	0.00	0.00	10,000,000.00	0.00	10,001,504.00	10,001,504.00
130AHE58	AGCY CALL	FHLB 1.950 10/21/22	10,000,000.00	0.00	(10,000,000.00)	0.00	0.00	0.00	10,007,146.00	0.00	(10,007,146.00
133EFUJ4	AGCY BULET	FFCB 2.150 12/29/22	0.00	5,209,350.00	0.00	(17,369.60)	0.00	5,191,980.40	0.00	5,232,123,50	5,232,123.50
134GVSC3	AGCY CALL	FHLMC 0.400 02/07/23	0.00	7,500,000.00	0.00	0.00	0.00	7,500,000.00	0.00	7,502,008.50	7,502,008.50
otal for Com	m First Health Plan		136,157,905.62	74,255,600.80	(50,918,915.01)	68,543,98	0.00	159.563.135.39	136.358.802.53	159.836.881.81	23,478,079.28

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## UHS-Community First Change in Value

CUSIP	Security Type	Security Description	03/31/20 Book Value	Cost of Purchases	Maturities / Calls / Sales	Amortization / Accretion	Realized Gain/(Loss)	06/30/20 Book Value	03/31/20 Market Value	06/30/20 Market Value	Change in Mkt Value
Comm First Ho	ospital Svc Plan										
FED-PRIME	MMF	Federated Prime Oblig	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.0
FRGXX-CFP	MMF	Fidelity Gov Inst'l MM	753,009.20	1,021.05	(121.58)	0.00	0.00	753,908.67	753,009.20	753,908.67	899.4
912828R28	TREAS NOTE	U.S. Treasury 1.625 04/30/23	48,511.53	0.00	0.00	115.69	0.00	48,627.22	52,046.88	52,041.02	(5.8
Total for Com	m First Hospital Sv	c Plan	801,520.73	1,021.05	(121.58)	115.69	0.00	802,535.89	805,056.08	805,949.69	893.6
Total for UHS-	Community First		136,959,426,35	74,256,621.85	(50,919,036.59)	68,659.67	0.00	160,365,671,28	137,163,858.61	160,642,831.50	23,478,972.8



## **UHS-Community First**

## **Earned Income**

From 03/31/2020 to 06/30/2020

CUSIP	Security Type	Security Description	Beg. Accrued	Interest Earned	Interest Rec'd / Sold / Matured	Interest Purchased	Ending Accrued	Disc Accr / Prem Amort	Net Income
Comm First He	olsh Dian								
omm First ne	ann Fian								
RGXX-CFP	MMF	Fidelity Gov Inst'l MM	17,131.36	14,192.08	27,865.96	0.00	3,457.48	0.00	14,192.08
RGXXCFP2	MMF	Fidelity Gov Inst'l MM	30,666.40	22,603.14	47,347.81	0.00	5,921.73	0.00	22,603.14
6844CD84	CP - DISC	Northwestern Univ 0.000 04/08/20	0.00	0.00	0.00	0.00	0.00	1,555.55	1,555.55
13384WC9	AGCY DISCO	FHLB 0.000 04/27/20	0.00	0.00	0.00	0.00	0.00	5,669.45	5,669.4
7287CEM0	CP - DISC	Baylor Scott & White 0.000 05/21/20	0.00	0.00	0.00	0.00	0.00	6,944.45	6,944.45
13384XH7	AGCY DISCO	FHLB 0.000 05/26/20	0.00	0.00	0.00	0.00	0.00	11,993.05	11,993.05
9157P6J8	CP - INT	Emory Univ 2.300 06/03/20	0.00	19,480.87	19,480.87	0.00	0.00	0.00	19,480.87
7286MF97	CP - DISC	Baylor Univ 0.000 06/09/20	0.00	0.00	0.00	0.00	0.00	9,583.32	9,583.32
8459RG87	CP - DISC	Yale Univ 0.000 07/08/20	0.00	0.00	0.00	0.00	0.00	20,854.20	20,854.20
3506FAA5	CP - INT	DFW Intl Airport 1.850 07/23/20	37,770.83	23,381.95	0.00	0.00	61,152.78	0.00	23,381.95
1411SGP9	CP - DISC	Univ of CA 0.000 07/23/20	0.00	0.00	0.00	0.00	0.00	28,311.08	28,311.08
7286MH46	CP - DISC	Baylor Univ 0,000 08/04/20	0.00	0.00	0.00	0.00	0.00	611.11	611.1
6640PH48	CP - DISC	J.P.Morgan Sec 0.000 08/04/20	0.00	0.00	0.00	0.00	0.00	20,727.75	20,727.7
7287CHR6	CP - DISC	Baylor Scott & White 0.000 08/25/20	0.00	0.00	0.00	0.00	0.00	232.25	232.25
1514BHP1	CP - INT	Univ of TX 0.290 12/17/20	0.00	281.94	0.00	(40.28)	322.22	0.00	281.94
3130A1W95	AGCY BULET	FHLB 2.250 06/11/21	0.00	8,437.50	56,250.00	(54,062.50)	6,250.00	(7,737.95)	699.5
882724MR5	MUNICIPAL	State of TX 5.000 08/01/21	0.00	21,481.25	0.00	(29,664.58)	51,145.83	(17,823,10)	3,658.1
12828WZ9	TREAS NOTE	U.S. Treasury 1.750 04/30/22	735.58	434.26	875.00	0.00	294.84	22.67	456.93
8213AHJ7	MUNICIPAL	TX A&M Univ 2.479 05/15/22	16,763.55	11,093.52	22,187.05	0.00	5,670.02	1,249.81	12,343.3
12828SV3	TREAS NOTE	U.S. Treasury 1.750 05/15/22	19,903.85	13,051.31	26,250.00	0.00	6,705.16	3,719.94	16,771.2
3130AJHV4	AGCY CALL	FHLB 0.600 07/27/22	0.00	10,666.67	0.00	0.00	10,666.67	0.00	10,666.6
3130AHE58	AGCY CALL	FHLB 1.950 10/21/22	86,666.67	10,833.33	97,500.00	0.00	0.00	0.00	10,833.3
3133EFUJ4	AGCY BULET	FFCB 2.150 12/29/22	0.00	24,486.11	53,750.00	(29,861.11)	597.22	(17,369.60)	7,116.5
3134GVSC3	AGCY CALL	FHLMC 0.400 02/07/23	0.00	4,166.67	0.00	(333.33)	4,500.00	0.00	4,166.6
Total for Com	m First Health Plan		209,638.24	184,590.60	351,506.69	(113,961.80)	156,683.95	68,543.98	253,134.5
Comm First Ho	ospital Svc Plan								
RGXX-CFP	MMF	Fidelity Gov Inst'l MM	541.38	317.57	788,57	0.00	70.38	0.00	317.5
912828R28	TREAS NOTE	U.S. Treasury 1.625 04/30/23	341.52	201.62	406.25	0.00	136.89	115.69	317.3
Total for Com	m First Hospital Sve	Plan	882.90	519.19	1,194.82	0.00	207.27	115.69	634.8

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## **UHS-Community First**

#### **Earned Income**

CUSIP	Security Type	Security Description	Beg. Accrued	Interest Earned	Interest Rec'd / Sold / Matured	Interest Purchased	Ending Accrued	Disc Accr / Prem Amort	Net Income
Total for UH	S-Community First		210,521.14	185,109.79	352,701.51	(113,961.80)	156,891.22	68,659.67	253,769.46

#### ATTACHMENT A



#### BCHD BOARD OF MANAGERS Tuesday, July 28, 2020 CONSIDERATION OF PURCHASING ACTIVITIES

THE FOLLOWING CONTRACTS ARE PRESENTED FOR APPROVAL BY THE BOARD OF MANAGERS AS CONSENT ITEMS:

CO	ONSENT ITEMS:				
PAGE	COMPANY	CATEGORY	P.O./ CONTRACT#	TOTAL AWARD	AWARD BASIS
4	CLAFLIN SERVICE COMPANY, D/B/A CLAFLIN MEDICAL EQUIPMENT	CONTRACT FOR CAPITAL EQUIPMENT - EXAM TABLES	TBD	\$315,923	Exempt, GPO
5	FROST INSURANCE AGENCY, INCORPORATED	CONTRACT FOR INSURANCE AGREEMENT- WORKERS COMPENSATION	22006143-IF	\$672,348	RFP-220-03-019-SVC
6	HOLOGIC, INCORPORATED	CONTRACT FOR REAGENT, SUPPLY & TESTING AGREEMENT- THIN PREP	22006177-E	\$311,472	Exempt
7	INSTRUMENTATION LABORATORY COMPANY, D/B/A WERFEN UHA LLC	CONTRACT FOR REAGENT, SUPPLY & SERVICE AGREEMENT- COAGULATION INSTRUMENT	22006168-G	\$3,997,037	Exempt
8	LA QUINTA INN & SUITES BY WYNDHAM SAN ANTONIO MEDICAL CENTER	CONTRACT FOR LEASE AGREEMENT - SLEEP DISORDERS LAB	22006153-F	\$930,750	RFP-215-01-001-SVC
9	PHILIPS HEALTHCARE A DIVISION OF PHILIPS NORTH AMERICA, LLC	CONTRACT FOR CAPITAL EQUIPMENT - PHYSIOLOGICAL MONITORING	TBD	\$409,157	Exempt, GPO
10	SIEMENS HEALTHCARE DIAGNOSTICS	CONTRACT FOR REAGENT, SUPPLY & TESTING AGREEMENT- URINALYSIS	22006167-G	\$333,723	Exempt
11	TRANSMEDICS, INCORPORATED	CONTRACT FOR CAPITAL EQUIPMENT- PERFUSION SETS	TBD	\$413,400	Exempt

GRAND TOTAL FOR BOARD APPROVAL

\$7,383,810

#### SUMMARY OF PURCHASING ACTIVITY

A total of 12 contracts with a value of \$11,268,131 are being presented to the Board of Managers during the July 2020 meeting.

The following contracts require approval by the BCHD Board of Managers

8 Consent Contracts with a total value of \$7,383,810

4 Presented Contracts with a total value of \$3,884,321

## During the month of July 2020 there were 3 contracts classified as a Small, Minority, Woman, or Veteran Owned Business Enterprises (SMWVBE).

July 2020 SMWVBE Status Report (reflects items being submitted for Board approval)

Available Opportunity Proposed Award	SMWVBE	% SMWVBE	Local	% Local	Si	MWVBI	E Breakout	
					Small	\$	1,660,073	100.0%
					Hispanic	\$	-	0.0%
					African American	\$	-	0.0%
\$3,330,988	\$1,660,073	49.8%	\$1,603,098	48.1%	Asian	\$	-	0.0%
					Other/Minority	\$	-	0.0%
					Woman	\$	-	0.0%
					Veteran	\$	-	0.0%
Non-Opportunity Awarded	Local	% Local	Non Profit	Non Profit %				
\$3,939,706	\$1,523,220	38.7%	\$1,050,000	8.9%				

Board Approved YTD SMWVBE Status Report as of the July 2020 Board of Managers Meeting.

Available Opportunity Awarded	SMWVBE	% SMWVBE	Local	% Local	Si	MWVB	BE Breakout	
					Small	\$	5,228,995	28.2%
					Hispanic	\$	5,064,626	27.3%
					African American	\$	-	0.0%
\$304,217,128	\$18,565,135	6.1%	\$237,193,961	78.0%	Asian	\$	2,193,800	11.8%
					Other Minority	\$	-	0.0%
					Woman	\$	6,077,714	32.7%
					Veteran	\$	-	0.0%
Non-Opportunity Awarded (Non - CIP)	Local	% Local	Non Profit	Non Profit %				
\$71,243,408	\$42,604,456	59.8%	\$25,346,988	6.8%				

# Travis Smith Deputy Chief Financial Officer Reed Hurley Executive Vice President Chief Financial Officer

**RECOMMEND APPROVAL:** 

George Hernández, Jr.

President/Chief Executive Officer

## **SMWVBE 2020 Payments - Category**

Attachment B

					1 titue minem B
		June 2020			
Total Utilization				\$	12,545,197
	<b>IWVBE</b>	PAYMENTS	: TOTAL	Ф	12,343,177
<b></b>					
		ified Vendor	Opportunity		
	Pa	yment (\$)	(%)		
AFRICAN AMERICAN	\$	-	0.0%		
ASIAN	\$	40,844	0.3%		
HISPANIC	\$	89,603	0.7%		
NATIVE AMERICAN	\$	-	0.0%		
SMALL	\$	144,713	1.2%		
VETERAN	\$	22,111	0.2%		
WOMAN	\$	106,698	0.9%		
Other Minority	\$	=	0.0%		
Total*	\$	403,969	3.2%	ı	
	L	ocal Non SM	WVRE		
		ne 2020 Payn			
		\$1,223,870	9.8%		
	сомми	INITY NOT	FOR PROFIT		
	Ju	ne 2020 Payn	nent (\$)		
		\$58,327	0.5%		
		YTD 2020			
Total Utilization YTD		110 2020		\$	240 460 920
	NAXXXIDI	E PAYMENT	C. VTD	Þ	340,468,820
S					
		ified Vendor yment (\$)	Opportunity (%)		
AFRICAN AMERICAN	\$	17,044	0.0%		

	tified Vendor Payment (\$)	Opportunity (%)
AFRICAN AMERICAN	\$ 17,044	0.0%
ASIAN	\$ 3,189,097	0.9%
HISPANIC	\$ 1,893,401	0.6%
NATIVE AMERICAN	\$ 6,439	0.0%
SMALL	\$ 5,867,525	1.7%
VETERAN	\$ 532,235	0.2%
WOMAN	\$ 4,213,486	1.2%
Other Minority	\$ -	0.0%
Total*	\$ 15,719,227	4.6%

<sup>\*</sup>Totals do not include payments to 2nd Tier vendors.

Local Non SMWVBE
YTD Payment (\$)
\$25,834,663 7.6%

COMMUNITY NOT FOR PROFIT YTD Payment (\$)

\$48,096,371 14.1%

## BCHD BOARD OF MANAGERS July 2020

COMPANY TO BE AWARDED: TOTAL AWARD: CONTRACT PERIOD:

Claflin Service Company, d/b/a Claflin
Medical Equipment
\$315,923

NA, Capital

Your approval is requested for the purchase of fifty-eight (58) adjustable high-low exam tables for Ambulatory Services. This contract will provide replacement of 58 exam tables that are beyond repair at 10 ambulatory sites and will also create an updated and modern environment. Furthermore, the replacement of the non-functioning equipment serves as a risk mitigation effort and allows our providers and staff to better serve our patients.

#### **CATEGORY**

Capital Equipment - Exam Tables

**COMPETITIVELY BID:** AWARD BASIS:

Exempt, GPO This contract is being awarded based on the best value which includes

favorable Group Purchasing Organization pricing.

**PURCHASE ORDER #** 

**TBD** 

#### **FISCAL NOTES:**

1. Capital funds are available for this acquisition. This is a priority item on the 2020 Routine Capital List.

#### **SUPPLIER DIVERSITY:**

- 1. Claffin Medical Equipment has an Affirmative Action Policy in effect
- 2. Claffin Medical Equipment is classified as a SMWVBE vendor.
- 3. Claflin Medical Equipment has a total of 122 employees. The workforce composition is as follows.

Category		sian erican		African American		Hispanic		ite
	#	%	#	%	#	%	#	%
Non Professional	0	0.0%	7	5.7%	0	0.0%	18	14.8%
Professional	5	4.1%	5	4.1%	1	0.8%	86	70.5%
Total	5	4.1%	12	9.8%	1	0.8%	104	85.3%

## BCHD BOARD OF MANAGERS July 2020

**COMPANY TO BE AWARDED:** 

**TOTAL AWARD:** 

**CONTRACT PERIOD:** 

Frost Insurance Agency, Incorporated

\$672,348

Three Years

Your approval is requested for a an Excess Workers Compensation Insurance coverage contract for Health System employees. This contract will continue to allow coverage for employees when a claim reaches a designated threshold.

#### **CATEGORY**

Insurance Agreement- Workers Compensation

**COMPETITIVELY BID:** 

**AWARD BASIS:** 

RFP-220-03-019-SVC This contract was competitively bid and awarded based on the best

value, which includes favorable pricing and meeting the Health Systems bid requirements assigned by the Evaluation Team.

#### OTHER COMPANIES THAT SUBMITTED BIDS:

**HCDT** Insurance Agency

#### **CONTRACT #:**

22006143-IF

#### **FISCAL NOTES:**

- 1. This is a planned expense and operating funds have been included in the Year 2020 Operating Budget.
- 2. This is a new contract. Compared to the previous contract there is an average annual increase of 13.7%, \$26,979, due to an estimated increase of 10% in payroll which is going from \$462 million to \$509 million. Compared to previous contract, there is no change in the cost to administer this program

Contract	Vendor	Start Date	Term Date	Tot	tal Amount #	of Years A	Annual Cost	% change
Original	Frost Insurance Agency, Inc.	8/1/2015	7/31/2017	\$	333,609	2	\$ 166,805	
Mod #1-3	Add funds and renew	8/1/2017	7/31/2019	\$	373,562	2	\$ 186,781	
Mod #4	Add funds and renew	8/1/2019	7/31/2020	\$	197,137	1	\$ 197,137	
Proposed	Frost Insurance Agency, Inc.	8/1/2020	7/31/2023	\$	672,348	3	\$ 224,116	

#### Ave Increase/Decrease per Contract Year \$ 26,979 13.69%

#### **SUPPLIER DIVERSITY:**

- 1. Frost Insurance Agency has an Affirmative Action Policy in effect.
- 2. Frost Insurance Agency has a total of 265 employees. The Workforce Composition Data is as follows:

Category		erican dian				Asian American					Hisp	Hispanic		iite
	#	%	#	%	#	%	#	%	#	%				
Non Professional	0	0.0%	4	1.5%	7	2.6%	47	17.7%	73	27.5%				
Professional	1	0.4%	2	0.8%	3	1.1%	27	10.2%	101	38.1%				
Total	1	0.4%	6	2.3%	10	3.8%	74	27.9%	174	65.7%				

#### BCHD BOARD OF MANAGERS July 2020

**COMPANY TO BE AWARDED:** 

**TOTAL AWARD:** 

**CONTRACT PERIOD:** 

Hologic, Incorporated

\$311,472

Three Years

Your approval is requested for the purchase of a three (3) year supply contract for ThinPrep PAP tests. The Cytology Laboratory performs the FDA approved ThinPrep tests, which include PAP, HPV, GC Chlamydia, an Zika tests. This testing is the most efficient and convenient diagnostic testing for both the patient and physician. The Cytology Department performs over 11,000 of these tests per year.

#### **CATEGORY**

Reagent, Supply & Testing Agreement- Thin Prep

**COMPETITIVELY BID:** 

**AWARD BASIS:** 

Exempt

This contract is being awarded as exempt due to standardization of laboratory equipment and specific LIS interface specifications

#### **CONTRACT** #

22006177-E

#### **FISCAL NOTES:**

- 1. This is a planned expense and operating funds have been included in the Year 2020 Operating Budget.
- 2. This is a new contract with the same vendor. Compared to the previous contract there is an average annual decrease of 8.1%, \$9,199, due to the expected slight decrease in the number of tests.

Contract	Vendor	Start Date T	erm Date	Tot	al Amount #	of Years	An	nual Cost	% change
Original	Hologic, Incorporated	11/1/2015 1	10/31/2018	\$	339,069	3	\$	113,023	
Proposed	Hologic, Incorporated	10/1/2020	9/30/2023	\$	311,472	3	\$	103,824	
		Increase	Decrease	\$	(27,597)		\$	(9.199)	-8.14%

#### **SUPPLIER DIVERSITY:**

- 1. Hologic, Incorporated does not have an Affirmative Action Policy in effect. However, the vendor has provided a copy of their Equal Opportunity Statement and Policy.
- 2. Hologic, Incorporated has a total of 4,124 employees. The Workforce Composition data is as follows:

Category	American Indian		Asian American		African American		Hispanic		White	
	#	%	#	%	# %		# %		#	%
Non Professional	2	0.0%		4.0%	**	1.7%		3.5%	713	17.3%
Professional	4	0.1%	254	6.2%	62	1.5%	123	3.0%	2,014	48.8%
Total	6	0.1%	419	10.2%	134	3.2%	269	6.5%	2,727	66.1%

Category	0	ther
	#	%
Non Professional	206	5.0%
Professional	363	8.8%
Total	569	13.8%

#### **COMPANY TO BE AWARDED:**

TOTAL AWARD:

**CONTRACT PERIOD:** 

Instrumentation Laboratory Company, d/b/a Werfen UHA LLC

\$3,997,037

Seven Years

Your approval is requested for a seven (7) year equipment lease, service and supply contract for coagulation testing. This contract provides two new Coagulation TOP 700 instruments, one new TOP 300 instrument, service and the required testing supplies. The new instruments replace the cuurent instrumentation that is over 5 years old and provides updated technology, enhanced productivity, improved turnaround times, improved quality performance, and a new automated workflow process which will help to eliminate hands-on techniques. The Health System performs over 100,000 coagulation tests annually, providing critical information regarding blood hemostasis for emergency and surgery patients. Additionally, these tests help diagnose bleeding and clotting disorders, hemophilias, and Von Willebrand disease.

#### **CATEGORY**

Reagent, Supply & Service Agreement- Coagulation Instrument

#### COMPETITIVELY BID:

#### **AWARD BASIS:**

Exempt

This contract is being awarded as exempt because the Health System has standardized to these instruments and Werfen is the manufacture of the supplies used on the instruments.

#### **CONTRACT #:**

22006168-G

#### **FISCAL NOTES:**

- 1. This is a planned expense and operating funds have been included in the Year 2020 Operating
- 2. This is a new contract with the same vendor. Compared to the previous contract there is an average annual increase of 112%, \$301,436, because the new agreement includes new instruments, service and supplies. The previous agreement did not include new instruments

Contract Vendor	Start Date	Term Date	Total Amount	# of Years Annual Cost % change
Original Instrumentation Laboratory Company	6/1/2015	9/30/2020	\$1,347,844	5 \$269,569
Proposed Instrumentation Laboratory Company	10/1/2020	9/30/2027	\$3,997,037	7 \$571,005
	Increa	ase/Decrease	\$2,649,193	\$301,436 111.82%

- 1. Instrumentation Laboratory Company has an Affirmative Action Policy in effect.
- 2. Instrumentation Laboratory Company has a total of 830 employees. The Workforce Composition Data is as follows:

Category		erican dian	-	sian erican	Afric Amer		His	panic	Wl	hite	Ot	her
	#	%	#	%	#	%	#	%	#	%	#	%
Non Professional	1	0.1%	131	15.8%	15	1.8%	37	4.5%	171	20.6%	3	0.4%
Professional	1	0.1%	79	9.5%	7	0.8%	22	2.7%	358	43.1%	5	0.6%
Total	2	0.2%	210	25.3%	22	2.6%	59	7.2%	529	63.7%	8	1.0%

**COMPANY TO BE AWARDED:** 

**TOTAL AWARD:** 

**CONTRACT PERIOD:** 

La Quinta Inn & Suites by Wyndham San Antonio Medical Center

\$930,750

Three Years

Your approval is requested for a (3) year agreement for sleep lab space. Currently the sleep lab testing services are performed at La Quinta Inn and Suites Medical Center and Courtyard Marriot Downtown/Market Square. The renewal of this contract will allow the Health System to continue providing 2 Sleep Disorder Laboratories with 14 rooms in a comfortable setting outside of the hospital.

#### **CATEGORY**

Lease Agreement - Sleep Disorders Lab

#### **COMPETITIVELY BID:**

#### AWARD BASIS:

RFP-215-01-001-SVC

This contract was competitively bid and awarded based on the best value, which includes favorable pricing and meeting the Health Systems bid requirements assigned by the Evaluation Team.

#### **CONTRACT #:**

22006153-F

#### **FISCAL NOTES:**

- 1. This is a planned expense and funding has been included in the Year 2020 Annual Operating Budget
- This is a new contract with the same vendor. Compared to the previous contract there is an average annual decrease of 2.3%, \$7,420 resulting from the competitive bid solicitation process.

Contract Vendor	Start Date Term Date	Total Amount # of Years	s Annual Cost % change
Original La Quinta Inn & Suites Medical Center	9/1/2015 8/31/2020	\$1,588,350	\$317,670
Proposed La Quinta Inn & Suites Medical Center	9/1/2020 8/31/2023	\$\$ 930,750	\$310,250
	Total Contract Value	\$ (657,600)	\$ (7.420) -2.34%

- 1. La Quinta Inn & Suites Medical Center does not have an Affirmative Action Policy in effect. However, the vendor has provided a copy of their Equal Opportunity Statement and Policy.
- 2. La Quinta Inn & Suites Medical Center is classified as a SMWVBE vendor.
- 3. La Quinta Inn & Suites Medical Center has a total of 29 employees. The Workforce Composition is as follows:

Category	African American		Hisp	oanic	White		
	#	%	#	%	#	%	
Non Professional	15	51.7%	9	31.0%	0	0.0%	
Professional	0	0.0%	1	3.5%	4	13.8%	
Total	15	51.7%	10	34.5%	4	13.8%	

COMPANY TO BE AWARDED: TOTAL AWARD: CONTRACT PERIOD:

Philips Healthcare a Division of Philips North America, LLC

\$409,157

N/A, Capital

Your approval is requested for the purchase of a mobile patient physiological monitoring system. This system is an ICU capable, all-inclusive physiological monitoring system that is specified for use in emergent situations such as patient surges from local or regional events to supporting mobile medical units in any location in the region. This system can be utilized for both internal and external emergency where a quick expansion of capability is required. This purchase will help fulfill Joint Commission requirements by helping the Health System quickly create a viable alternate site for care, treatment, and services to meet the needs of the hospital's patients during emergencies. The system will have the capability to monitor up to 20 patients and have the ability to connect to the Health System's EMR when properly connected onsite.

#### **CATEGORY**

Capital Equipment - Physiological Monitoring

**COMPETITIVELY BID:** AWARD BASIS:

Exempt, GPO This contract is being awarded based on the best value which

includes favorable Group Purchasing Organization pricing.

**PURCHASE ORDER #** 

**TBD** 

#### **FISCAL NOTES:**

1. Capital funds are available for this acquisition. This is a priority item on the 2020 Routine Capital List.

- 1. Philips Healthcare a Division of Philips North America, LLC has an Affirmative Action Policy in effect.
- 2. Philips Healthcare a Division of Philips North America, LLC has a total of 181 employees. The Workforce Composition Data is as follows:

Category		sian erican		African American		Hispanic		White	
	#	%	#	%	#	%	#	%	
Professional	12	6.6%	2	1.1%	12	6.6%	155	85.6%	
Total	12	6.6%	2	1.1%	12	6.6%	155	85.6%	

COMPANY TO BE AWARDED: TOTAL AWARD: CONTRACT PERIOD:

Siemens Healthcare Diagnostics \$333,723 Three Years

Your approval is requested for the purchase of a three (3) year supply and service contract in support of urinalysis testing. Urinalysis lab testing is a group of physical, chemical, and microscopic tests that detect and measure several substances in urine samples such as byproducts of normal and abnormal metabolism, cells, cellular fragments, and bacteria. Over 80,000 of these tests are performed annually on the Siemens AUWi instruments in the Core Laboratory on a 24 hour basis and this contract provides the supplies and service needed to continue urinalysis testing on these instruments.

#### **CATEGORY**

Reagent, Supply & Testing Agreement- Urinalysis

#### COMPETITIVELY BID: AWARD BASIS:

Exempt Exempt contract is being requested due to ongoing standardization

efforts of laboratory equipment and specific LIS interface specifications. Siemens also has proprietary rights on their

instruments.

#### **CONTRACT #:**

22006167-G

#### **FISCAL NOTES:**

- 1. This is a planned expense and operating funds have been included in the Year 2020 Operating Budget.
- 2. This is a new contract with the same vendor. Compared to the previous contract there is an average annual increase of 15.9%, \$15,263.00, due to equipment maintenance service being on this contract for the full term. On the previous contract, equipment maintenance was not added until the second renewal year which kept the total price down in comparison to this agreement. The price per test remains unchanged.

Contract	Vendor	Start Date	Term Date	Tot	tal Amount	# of Years	Annual Cost	% change
Original	Siemens Healthcare Diagnostics Inc.	9/1/2017	8/31/2020	\$	287,934	3	\$ 95,978	
Proposed	Siemens Healthcare Diagnostics Inc.	9/1/2020	8/31/2023	\$	333,723	3	\$111,241	
		Total Co	ontract Value	\$	45,789		\$ 15,263	15.90%

- 1. Siemens Healthcare Diagnostics Inc. has an Affirmative Action Policy in effect.
- 2. Siemens Healthcare Diagnostics Inc. has a total of 604 employees. The Workforce Composition data is as follows:

Category		erican dian		sian erican	Afrio Amer		Hisp	anic	Wh	ite
	#	%	#	%	#	%	#	%	#	%
Non Professional	1	0.2%	20	3.3%	19	3.2%	24	4.0%	329	54.6%
Professional	0	0.0%	5	0.8%	11	1.8%	12	2.0%	182	30.2%
Total	1	0.2%	25	4.1%	30	5.0%	36	6.0%	511	84.7%

COMPANY TO BE AWARDED: TOTAL AWARD: CONTRACT PERIOD:

TransMedics, Incorporated \$413,400 N/A, PO

Your approval is requested for the purchase of six (6) Organ Care System perfusion sets. This purchase will allow for the Health System's Transplant team continue their participation in the Organ Care System Liver Technology 'liver pump' trial. The FDA has approved the Continued Access Protocol (CAP) and the Donation after Circulatory Death (DCD) protocol. The CAP protocol will be similar to the last trial except there will be no randomization which helps for marginal donors. The CAP protocol will enroll 74 subjects nationally. The DCD protocol is also a single arm protocol that will enroll 130 subjects. DCD protocol will enable potential use of DCD donors with more than thirty minutes warm ischemia time. We are marketing our use of this liver perfusion method that showcases the reduced waiting times for liver transplant as a result of this innovative approach.

#### **CATEGORY**

Capital Equipment- Perfusion Sets

COMPETITIVELY BID: AWARD BASIS:

Exempt This purchase is classified as exempt because TransMedics owns

proprietary rights to the Organ Care System, which the Health System

has standardized to

**PURCHASE ORDER #** 

**TBD** 

#### **FISCAL NOTES:**

1. This is a planned expense and operating funds have been included in the Year 2020 Operating Budget.

- 1. TransMedics, Inc. does not have an Affirmative Action Policy in effect.
- 2. TransMedics, Inc. is classified as a SMWVBE vendor.
- 3. TransMedics, Inc. cannot provide Workforce Composition data due to their confidential policy.



#### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

Consideration and Appropriate Action Regarding an Amendment to the Lease with Maseho, Inc.,for Office Space at Corporate Square Tower, 4801 NW Loop 410, San Antonio, Texas

#### **Background:**

University Health System (UHS) has been leasing office space at Corporate Square Tower since 2009. Since that time, a variety of administrative offices and functions have been located there. UHS continues this trend today because it does not have available office space in any of its buildings to accommodate these needs. Currently, Human Resources, Grants Management (i.e., Research and Information Management, Community Initiative and Population Health, Ryan White), Epic training and support staff, and the UHS Foundation have offices at Corporate Square.

#### **Analysis:**

Since the inception of the lease agreement at Corporate Square Tower, office space has been added or deleted through a series of respective lease amendments to address the specific area(s) at those defined intervals. With the exception of the Epic and Foundation offices, the remaining total of the office space at Corporate Square Tower is included in a lease that expires July 31, 2020. This area totals 21,032 rentable square feet. Staff recommends renewing this office space for one (1) year, as evaluation of the long term strategy for all UHS administrative space continues.

#### **Fiscal Impact:**

The Health System currently leases 43,304 rentable square feet (RSF) of office space in Corporate Square. This is comprised of offices for Human Resources, Grants Management, Epic, and UHS Foundation. The annual rent expense for all Health System space currently leased at Corporate Square is \$959,663.

Not including the Epic and Foundation offices, the offices for the aforementioned departments are located in Suite 111, 200, 203, and 260. The proposed renewal term is one (1) year. The commencement date for the renewal term for these Suites will be August 1, 2020. The lease expense for the renewal term is \$473,220 which will be an operational expense. This represents an increase in the current rental rate of approximately 2%.

The base lease rates and monthly rent for these suites combined are shown below.

Period	Period Base Rent/RSF/YR		Annual Rent	
8/1/20 - 7/31/20	\$22.50	\$39,435.00	\$473,220	

#### **Quality Note:**

Maintaining a pleasant work space will enhance employee productivity and customer satisfaction.

#### **Strategic Note:**

This project is in line with Health System's Triple Aim Plus goals and objectives. This lease agreement will allow for administrative functions to remain offsite and allow valuable hospital space to be used to improve the patient experience.

#### **Workforce Composition:**

Maseho Inc., is a single purpose real estate entity and has zero (0) employees.

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#### **Recommendation:**

Staff recommends Board of Managers' approval of a one (1) year lease amendment for a total of \$473,220 with Maseho, Inc. for the office space at Corporate Square Tower located at 4801 N.W. Loop 410, San Antonio, Texas.

Don Ryden Edward Banos
Vice President Executive Vice President/
Planning, Design and Construction Chief Operating Officer

George B. Hernández, Jr. President/Chief Executive Officer



#### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

Consideration and Appropriate Action Regarding an Authorization to Order Electrical Switchgear through CPS Energy for the Women's and Children's Hospital and Associated Projects

#### **Background:**

The architectural and engineering (A/E) team of Marmon Mok L.L.P. (a.k.a. Marmon Mok|ZGF) was selected by University Health System (Health System) for the design and planning services for the Women's and Children's Hospital, Garage and Advanced Diagnostic Center (formerly Heart, Vascular and Endoscopy Center) (Project). The A/E team was authorized and engaged in March 2018 to provide the first phase (Phase I) of design and planning services. Phase I included master planning, program validation, scope alignment, site investigations and budget development. In July 2018, the A/E team commenced full architectural and engineering design services for the Project.

The Project's design phase is on schedule. The A/E team will complete construction documents for the Women's and Children's Hospital (WCH) in late July 2020. Construction has begun on early design packages per previous authorizations.

The project design for the WCH project includes reliable, redundant permanent power connections to the existing utility grid. CPS Energy, the electrical service provider, is now prepared to commence the design for the electrical supply equipment to which the Project will connect. Coinciding with the start of its design, CPS Energy recommends ordering the electrical switchgear necessary to provide permanent power connections. CPS is requesting a Letter of Intent to authorize the ordering of the switchgear and to start the detailed design.

The Health System concurs that the early ordering of this critical equipment is necessary to ensure timely completion of the permanent power installation work.

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#### **Analysis:**

Prior to beginning detailed design to provide the Project's power requirements, CPS Energy has determined the sizing of the primary and secondary electrical switchgear and determined both an estimated cost and a lengthy delivery lead time.

Due to the A/E team's simultaneous completion of the Project's construction design and submission for permitting with the development of CPS Energy's electrical service design, it is necessary to authorize the early ordering of this long-lead equipment. By completing the electrical service design, CPS Energy will be able to refine their estimate for remaining equipment and installation costs and ensure that construction drawings submitted for permitting do not require further revision. It is therefore in the best interests of the Health System and the Project to avoid potential delays by authorizing CPS Energy to proceed. To begin both the equipment order and the detailed utility service design, CPS Energy, acting through the City Public Service Board, requires the Health System to sign a Letter of Intent to begin the design and release of equipment for fabrication.

#### **Fiscal**:

The estimated cost of the electrical switchgear is \$338,750 for both the primary and secondary equipment. This cost is within the current approved Board Project budget.

Upon completion of the detailed electrical service design, CPS Energy will provide an updated total cost estimate for all design, material, and installation costs. The actual final costs of the electrical switchgear will be reflected in this updated cost projection.

#### **Quality Note:**

The Health System is committed to constructing an advanced, state-of-the-art Women's and Children's Hospital and the integration of the Advanced Diagnostic Center within the current Sky Tower. These resources will allow the Health System to provide the highest quality, compassionate care that offers the best experience for patients and families. The Women's and Children's Hospital and the Advanced Diagnostic services will serve as a large regional referral center for Bexar County and all South Texas while meeting the growing needs of our community, particularly for maternal and pediatric care.

BCHD Board of Managers - Authorization to Order Electrical Switchgear through CPS Energy for the Women's and Children's Hospital and Associated Projects Tuesday, July 28, 2020 Page 3 of 3

#### **Strategic Note:**

This Project will achieve Triple Aim Plus objectives by improving quality, safety, the patient experience, and access to care.

#### **Recommendation:**

Staff recommends Board of Managers' approval to execute the Authorization to Order Switchgear and Letter of Intent with CPS Energy and the obligation for the early procurement of necessary electrical service switchgear for the Women's and Children's Hospital project in the amount of \$338,750.

Don Ryden

Vice President, Planning, Design & Executive Vice President/
Construction

Edward Banos

Executive Vice President/
Chief Operating Officer

George B. Hernández, Jr. President/Chief Executive Officer



#### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

Consideration and Appropriate Action Regarding an Agreement with UT
Health San Antonio for Radiation Therapy Services at the
Mays Cancer Center

#### **Background:**

University Health System, (Health System), does not provide radiation therapy services at any of its facilities. The Health System has historically entered into agreements for these services with UT Health at the Mays Cancer Center previously known as the Cancer Therapy & Research Center, (CTRC). The current agreement with UT Health expires on July 1, 2020. In accordance with the Health System's Policy no. 6.01, Procurement Services, this services agreement under consideration is exempt from competitive acquisition.

#### <u>Analysis:</u>

Contracting for this service with UT Health allows access to radiation therapy for hospitalized patients requiring emergency intervention and for uninsured outpatients on a limited basis. Provision of such service negates the necessity to transfer the patient to another hospital that has radiation services available, and thus improves the overall patient experience and quality of care. The availability of radiation services at the May's Cancer Center enhances operational efficiency for both University Hospital and UT Health medical staff and optimizes safer transition and continuum of care.

Primary indications for emergent inpatient radiation therapy include the following:

- (a) Heterotopic ossification (hip fracture radiation) treatment;
- (b) Radiation therapy for patients with spinal cord compression;
- (c) Brain Herniation;

BCHD Managers - Agreement with UT Health San Antonio for Radiation Therapy Services at the Mays Cancer Center

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- (d) Suspected or Actual Airway Obstruction;
- (e) Palliative care treatment; and
- (f) Emergently required services consistent with generally accepted medical standards of care in the community.

All cases referred for radiation therapy must be reviewed and authorized by the Health System before the patient is approved for this therapy. Radiation therapy services have been provided to 142 University Hospital patients during the past 11 months at a total expense of \$282,000.

#### **Quality Note:**

Quality and utilization review by the Health System has been enhanced during the past year by establishing evidence-based criteria for approval of radiation therapy services and transportation of patients. All requests must be completed with the necessary documentation which is reviewed by utilization review staff and a Senior Vice President.

#### **Fiscal Impact:**

The rate paid for this service is 100% of the Medicare allowable rate, which is the same methodology used in previous contracts. Based on historical volumes, it is estimated the total annual expense for this service will not exceed \$350,000 per year. The proposed contract is for three years at an amount not to exceed \$1,050,000.

#### **Strategic Note:**

This service meets the Triple Aim Plus objectives of Quality, Patient Experience and Access to care as well as the efficiencies explained above. Radiation therapy is a standard modality for patients with malignancies as well as the occasional patient with a special situation.

#### **Community Outreach Plan/Workforce Composition:**

The UT Health San Antonio has a total of 5,245 employees. The workforce composition data is as follows:

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NON	American	Asian	African				
PROFESSIONAL	Indian	American	American	Hispanic	White	Other	
#	7	46	93	1332	527	111	2116
%	0.3%	2%	4%	63%	25%	5%	100%
	American	Asian	African				
PROFESSIONAL	Indian	American	American	Hispanic	White	Other	
#	12	412	96	860	1593	156	3129
%	0.6%	13%	3%	27%	51%	5%	100%
	American	Asian	African				
TOTAL	Indian	American	American	Hispanic	White	Other	TOTAL
#	19	458	189	2192	2120	267	5245
%	0.4%	9%	4%	42%	40%	5%	100%

#### **Recommendation:**

Staff recommends that the Board of Managers approve and authorize the President/Chief Executive Officer to execute the Radiation Therapy Services Agreement with UT Health San Antonio for an amount not to exceed \$1,050,000 for a three-year contract.

Awoala Banigo
Reed Hurley
Senior Vice President/
Chief Revenue Officer

Executive Vice President/
Chief Financial Officer

George B. Hernandez, Jr. President/Chief Executive Officer



#### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

Consideration and Appropriate Action Regarding an Amendment to the Contract with TriZetto Corporation for Medicare Advantage and Dual Eligible Special Needs Plans Infrastructure Enhancements

#### **Background:**

On March 27, 2020, staff provided the Board of Directors an update on the progress and timeline requirements for obtaining a Medicare contract which is required for successful submission of anticipated STAR+PLUS Request for Proposal application. An overview of the application's content as well as key milestone dates for bid and formulary submissions, contract award dates, and tasks required for implementation were also presented for discussion.

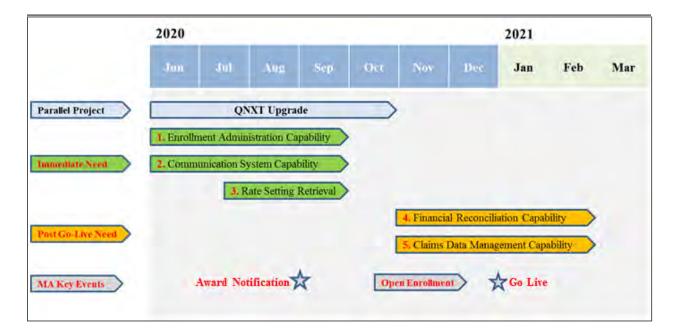
On May 20, 2020, Community First Health Plans' (CFHP) received notification from the Centers for Medicare and Medicaid Services (CMS) that its' 2021 Medicare Part C, Medicare Part D (Prescription Drug), and Dual Eligible Special Needs Plan (D-SNP) applications were conditionally approved. CFHP was also notified that its Model of Care (MOC), which is a substantial requirement for the D-SNP, received a perfect score of 100 and will be valid for three years, the maximum allowable licensure period. Following this notification, CFHP, in coordination with Milliman Inc. and Navitus Inc., submitted its bids and formularies to CMS one week ahead of the June 1, 2020 deadline for award consideration. CMS is expected to announce awards by August 31, 2020.

This report outlines the next steps in the project and requests Board of Directors approval to execute the required infrastructure enhancements to successfully implement the Medicare Advantage, and most importantly the D-SNP line of business, for a January 1, 2021 operational start date. As a reminder to the Board, obtaining a Medicare contract with CMS is a key requirement for STAR+PLUS because STAR+PLUS includes management of dual eligible population (i.e. members with Medicare and Medicaid) who have D-SNP coverage.

#### **Planning and Timeline:**

Staff is currently conducting bid and formulary reviews with actuarial and pharmaceutical auditors from agencies contracted with CMS. CFHP expects these reviews to conclude prior to July 31, 2020. It is also anticipated that CFHP will receive award notification on August 31, 2020, to provide Medicare Advantage Plans to the Bexar County service area beginning in January of 2021. While CFHP has strategically designed the benefits to significantly minimize enrollment in the first year, the organization must have infrastructures in place to enroll and manage membership. This is also a requirement for STAR+PLUS. Thus, in order to meet an operational start date of January 1, 2021, CFHP must be ready for membership enrollment during the open enrollment period between October 15 and December 7, 2020 and administer the benefit requirements starting January 1, 2021.

The following enhancements to CFHP's existing infrastructure are required. A timeline is provided to illustrate when these enhancements must be completed to ensure sufficient system testing for a successful implementation.



#### **Professional Services:**

CFHP will receive configuration build services from TriZetto to configure and unit test design guides for Enrollment Administration Manager, Enrollment

Administration Manager Workflow, TriZetto Communication System and NetWorX Add-on. Technical project management, infrastructure build, configuration and integration services are also included in the project scope. Training will be performed on site and remotely throughout the project build. A brief description of new system functionality is outlined below:

- 1. Immediate Needs (target completion date, September 30, 2020):
  - a. **Enrollment Administration** capability will allow CFHP to interface with CMS and enroll members. This capability/platform must reflect CMS regulatory changes and have the ability to pass data to the QNXT platform, making it a critical part of a complete enrollment solution. This capability will allow CFHP the ability to manage the overall enrollment process and improve enrollment visibility and tracking throughout the enrollment lifecycle.
  - b. **Communication System** capability will allow for the creation of membership correspondence compliant with CMS requirements. This capability will streamline member and provider notifications across multiple CFHP departments.
  - c. **Rate Setting Retrieval** capability is a current gap that must be addressed. This capability will allow CFHP the ability to access the Medicare provider fee schedules and effectively develop provider contracts.

As previously presented to the Board of Directors, there are several key milestones that must be met between July 1 and December 31, 2020 in order to successfully complete the infrastructure enhancements as outlined below:

 June 26: Board of Directors approval of contract amendment with Trizetto Corporation for required system enhancements

July 31: Complete bid and formulary reviews

July – Configuration and build of infrastructure systems
 September: enhancements

August 31: Medicare Advantage contract award/execution
 October 15: Medicare Open Enrollment (10/15/20 – 12/7/20)
 October – Anticipate Request for Proposal Submission for December: STAR+PLUS based on notification from HHSC\*

January 1, 2021: Medicare Advantage CY21 go-live

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#### Open Enrollment (January 1 – March 31)

\* No announcement has been communicated to date; however, CFHP must be prepared to submit a formal response. There may be additional delays due to the 2021 Legislative Session.

#### **Analysis and Fiscal Impact:**

CFHP has successfully completed the initial steps in obtaining the required licensure with minimal external support or consulting fees (compared to other community plans experiencing upwards of two million dollars in infrastructure enhancements expense). Board of Directors approval to amend the current contract with Trizetto for infrastructure enhancements is required to ensure a successful go-live on January 1, 2021. Based on a comprehensive assessment of the required system functionality and negotiation with our current vendor, the total estimated cost to support the software requirements is \$927,155 in 2020 and \$434,979 in 2021 as summarized below:

	2020	2021
Enrollment Capability		
Implementation	\$ 455,314	\$ -
Annual Maintenance Fee*	\$ 51,086	\$ 204,345
Application Management Fee*	\$ 57,516	\$ 230,634
Total Operating Cost	\$ 563,916	\$ 434,979
Total Capital Cost (Licensing Fee)**	\$ 363,239	\$ -
TOTAL COST	\$ 927,155	\$ 434,979

The funding for this amendment request will be allocated as listed:

#### 2020 Budget

- Capital Budget (Information Systems) \$363,239
- IT-Computer Repair and Maintenance \$563,916

BCHD Board of Managers - Contract Amendment with TriZetto Corporation for Medicare Advantage and Dual Eligible Special Needs Plans Infrastructure Enhancements Tuesday, July 28, 2020
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#### **Recommendation:**

Community First Health Plans received approval from the Board of Directors at its regular Board meeting on Friday, June 26, 2020, to proceed with the contract amendment with TriZetto Corporation.

Staff recommends the Board of Managers approve the contract amendment for the necessary infrastructure enhancements as presented, for an estimated cost of \$927,155 for the initial implementation phase and \$434,979 for application maintenance and management fees in subsequent years.

Jaramiah I Simpson Priti Mody Railay MD

Jeremiah J. Simpson Executive Director/Government Programs Community First Health Plans, Inc. Priti Mody-Bailey, MD Chief Medical Officer Community First Health Plans, Inc.

Daverick Isaac
Chief Financial Officer
Community First Health Plans, Inc.

Theresa Scepanski President/Chief Executive Officer Community First Health Plans, Inc.

George B. Hernández, Jr. President/Chief Executive Officer University Health System



#### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

Consideration and Appropriate Action Regarding an Extension of the Agreement with Luby's Fuddruckers Restaurants, LLC, for Management of Hospital Bistro, Robert B. Green Café, and Texas Diabetes Institute Cafeteria

#### **Background:**

In 2016, the Health System published RFP 216-02-004-SVC to obtain bids for management services for all three retail locations within the Health System. Luby's was awarded the contract by an evaluation committee due to the proposed development of expanding food options, and increasing operational efficiency for staff and customers. On February 21, 2017, the Board of Managers approved a contract with Luby's Fuddruckers Restaurants, LLC to provide management services at University Hospital Café (Sky Bistro), Robert B. Green Café, and Texas Diabetes Institute Cafeteria. The initial three-year contract included the option for two (2) one-year renewals. Under the terms of the agreement, Luby's is compensated a management fee representing 10% of gross revenue plus salary/benefits to provide one FTE of Food Service Director. Luby's in turn provides the Health System direct management and supervision for approximately 44 Health System FTEs, catering services, operational oversight for all three locations and access to food products/recipes branded by Luby's.

#### Analysis:

During the first term of this agreement with Luby's, gross sales have increased from \$2,386,700 per year to \$3,396,483 per year representing a 42% increase. This growth can be attributed to Luby's implementing an entirely new menu of fresh cooked options to include desserts, expanded grab and go, and the addition of healthy meals. Additionally, they have expanded the coffee bar menu in the Sky Bistro to include more unique coffee drink selections found at traditional Starbucks stores and added brewed self-serve Starbucks to RBG. Luby's developed local partnerships with several small local businesses to incorporate unique items such as: sushi,

breakfast tacos, sweet breads, and reduced calorie/sugar specialty deserts. Luby's dramatically improved and redesigned customer flow at all locations by observing

Employee productivity improved by

upgrading and relocating equipment to simplify workflow, introducing new cooking methods, and increased leadership rounding and feedback during peak times.

how people interacted within the spaces.

Patient activity growth for all locations during this same period was 14.7% (see below). On June 8, 2020, the Hospital Cafe/Gift Shop was renamed the Sky Bistro and hours of operation increased from 12 to 24 hours a day. These changes in Sky Bistro operations were implemented to focus hospital employee and visitor activity in the Sky Tower after hours and allow the Rio Tower Cafeteria to close at 8p.m. each evening. These operational changes to the Sky Bistro brought forth many new food options for the evening and night shift employees that were not traditionally offered. By expanding the hours of operations, increasing operational efficiency, and enhancing food options, the Sky Bistro increased sales by 52% when comparing June 2020 to June 2019. Sales projections for all three locations are estimated to increase to \$6,400,000 per year primarily driven by changes in the Sky Bistro.

<b>Patient Activity by Location</b>									
Location	2016	2019	Volume Increase	% Increase					
TDI Activity	86,870	87,333	463	0.5%					
RBG Activity	324,787	364,937	40,150	12.4%					
UH Activity	1,493,899	1,733,556	239,657	16%					
Total	1.905.556	2,185,826	280,270	14.7%					

#### Food Sales by Location

Location	2016 2019		Volume Increase	% Increase
TDI Sales	\$260,262	\$354,558	\$94,296	36.2%
RBG Sales	\$579,493	\$778,447	\$198,954	34.3%
UH Sales	\$1,546,945	\$2,263,478	\$716,533	46.3%
Total	\$2,386,700	\$3,396,483	\$1,009,783	42.3%

#### Sky Bistro Sales First Partial Month of 24/7 Operations

Location	Jun-19	Jun-20	Volume Increase	% Increase	
UH Bistro	\$196,124	\$298,740	\$102,616	52%	

#### **Quality Note:**

Luby's will continue to provide high quality meals and management services for all Health System patients, visitors, and staff. Quality food and leadership services enhance all our customer's experiences and increase sales. Luby's increased retail sales at all locations through expanded menu selection, increased hours of operation, implementation of a grab-and-go concept, and improved customer service. At TDI and RBG, Luby's converted both locations from serving primarily fried frozen products to meals cooked with fresh product, which has been a huge employee satisfier. For all locations, Luby's introduced a line of tasty and healthy meals trade marked as "Living Smart" which contain less than 600 calories and a fat content of less than 30%. Finally, Luby's implemented product labeling for all prepackaged food items at all locations to provide customers with information listing calorie, fat, carbohydrate, and ingredient contents. Ingredient labeling is a safety issue for customers with food allergies.

#### **Fiscal Impact:**

The initial three-year management award was for 10% of gross sales per year plus \$87,100 per year for salary/benefits for one dedicated director. For the two-year extension of this contract, the 10% management fee remains unchanged; however, due to expanding the Sky Bistro hours to a 24/7 operation, Luby's will add an assistant director to ensure adequate management of all locations. The salary/benefit compensation package for these two FTEs is \$179,483 per year. This contract renewal is valued at \$998,967 for the remaining two years.

#### **Strategic Note:**

This contract with Luby's aligns with all aspects of the Health System's Triple Aim Plus. Patient/employee experience and quality have been enhanced by providing hot and tasty meals. Efficiency improved by Luby's providing the Health System with professional food service operational expertise, which in turn have increased sales. Access improved by providing customers and staff with a greater variety of food options at all locations, and with increased hours at the Sky Bistro.

#### **Workforce Composition:**

Luby's Fuddruckers Restaurants, LLC has 3,532 employees and is headquartered in Houston, Texas. The workforce composition data follows:

NON	American	Asian	African				
PROFESSIONAL	Indian	American	American	Hispanic	White	Other	Total
	20	69	730	2054	633	4	3510
	0.6 %	2.0%	20.8 %	58.5 %	18.0 %	0.1%	100%
	American	Asian	African				
PROFESSIONAL	Indian	American	American	Hispanic	White	Other	
			1		21		22
	0 %	0 %	0.6%	0%	95.4 %		100%
	American	Asian	African				
TOTAL	Indian	American	American	Hispanic	White	Other	TOTAL
	20	69	731	2054	654		3532
	0.6%	2.0%	20.7 %	58.2 %	18.5 %		100.0%

#### **Recommendation:**

Staff recommends that the Board of Managers approve a non-assignable food service contract renewal for two years in the total amount of \$998,967 with Luby's Fuddruckers Restaurants, LLC.

James Willis Vice President, Associate Administrator University Hospital	Michael Roussos Hospital Administrator University Hospital
Edward Banos Executive Vice President Chief Operating Officer	George B. Hernández, Jr. President/Chief Executive Officer University Health System



#### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday July 28, 2020** 

#### **June 2020 Financial Report**

In June, the Health System operations continued to be significantly impacted by the COVID-19 crisis resulting in stay at home and social distancing directives reducing In and Out Patient activity. Clinical activity (as measured by inpatient discharges) was down 9.3% for the month compared to budget. Community First Health Plans (CFHP) fully insured membership was up 6.0% to budget. On a consolidated basis, gain from operations was \$26.7 million, \$19.9 million better than budget. The consolidated bottom line gain (before financing activity) was \$23.4 million, \$20.7 million better than the budgeted gain of \$2.7 million. Higher other operating revenue and lower operating expense resulted in performance better than budget. CFHP experienced a bottom line gain of \$6.3 million, which was \$1.3 million better than the budgeted gain of \$5.0 million. Higher premium revenue offset by higher claims and admin expense accounted for the performance to budget.

Debt service revenue was \$5.9 million, which was equal to budget.

Notable increases or decreases from the December 31, 2019 Consolidated Balance Sheet (Monthly Financial Report page 2) are as follows:

- Cash, cash equivalents and long-term investments decreased \$104.9 million due primarily to the reserve rebalance payment into board designated accounts offset by the collection of property taxes and the collection of provider fees for the LPPF.
- Other receivables and prepaid expenses decreased \$11.4 million due primarily to decreases in prepaid UHRIP IGT \$24.7 million, offset by increases in prepaid pension \$10.8 million.
- Board designated accounts increased \$172.1 million due primarily to the annual reserve rebalance.
- Restricted accounts related to the bond proceeds and payments increased \$114.4 million due primarily to the issuance of Series 2020 Certificates of Obligation and collection of property tax for debt service offset by disbursements for construction costs.
- Net property, plant and equipment increased \$20.2 million as capitalized purchases exceeded depreciation expense. Capital assets placed in service increased \$6.0 million. CIP project in progress increased \$22.6 million. Regular capital in progress increased \$27.1 million, primarily the Epic project. Accumulated depreciation increased \$35.5 million.
- Accounts payable decreased \$5.4 million due primarily to the net of higher amounts due to the new liability for LPPF \$67.0 million, lower amounts due to vendors \$51.9 million and lower amounts due to fund Medicaid supplemental service obligations \$20.4 million.

- Page 2
  - Long-term debt increased \$137.6 million due to the net of refunding of the Series 2010B CO's, issuance of the Series 2020 Limited Refunding and CO's and current principle payment due in 2021.
  - The Health System's Net Asset Value increased \$79.2 million on a Generally Accepted Accounting Principles (GAAP) basis including debt service tax revenue, Build America Bonds (BABs) subsidy and interest expense on bonds.
  - Financial performance for the year is subject to audit.

Significant items to note from the Monthly Consolidated Statement of Revenues and Expenses (Monthly Financial Report page 3) include the following:

### Actual to Budget (Dollars in 000's)

	MTD	Plan	Variance	YTD	Plan	Variance
Operating Gain	\$26,663	\$6,783	\$19,880	\$81,005	\$19,273	\$61,732
Depreciation Expense	(\$5,266)	(\$6,414)	\$1,147	(\$32,353)	(\$38,496)	\$6,143
Other Non-operating	\$2,011	\$2,292	(\$281)	\$18,055	\$13,750	\$4,305
Bottom Line	\$23,407	\$2,661	\$20,746	\$66,707	(\$5,473)	\$72,180

- Net patient revenue of \$62.6 million in June was higher than budget by \$743 thousand and down \$32.9 million YTD due to lower activity related to COVID-19 disruptions.
- SNF patient revenue was up \$714 thousand from budget for the month. SNF operating expense, included in Purchased Services, was up \$706 thousand for the month. The table below illustrates the results of the SNF program.

#### SNF Program Actual to Budget (Dollars in 000's)

	MTD	Plan	Variance	YTD	Plan	Variance
SNF Supplemental Revenue	65	58	8	2,351	345	2,006
SNF Operating Revenue	3,471	2,765	706	21,103	16,590	4,513
Total Operating Revenue	3,536	2,823	714	23,455	16,935	6,520
SNF Operating Expense	3,471	2,765	(706)	23,094	16,590	(6,504)
Operating Gain	\$65	\$58	\$8	\$361	\$345	<b>\$16</b>

• Other operating revenue was over budget \$11.9 million for June due to the CFHP premium revenue exceeding budget by \$3.4 million, DSH revenue up \$3.0 million and UC revenue up \$2.9 million. Year to date, other operating revenue was over budget \$36.8 million due to recognition of \$8.1 million of CARES Act funds received in April, CFHP premium revenue up \$10.2 million, SNF revenue up \$6.5 million, DSH revenue up \$6.0 million, and UC revenue up \$5.8 million.

#### Bexar County Hospital District Board of Managers; June 2020 Financial Report Tuesday, July 28, 2020 Page 3

Executive Vice President/CFO

- Employee compensation was under budget \$2.3 million or 3.9% for June and under budget \$20.4 million year to date. Salaries were under budget \$933 thousand for the month and under budget \$15.2 million year to date due primarily to lower Epic salary costs due to delayed staff training and lower activity due to COVID-19. Benefits were under budget \$1.3 million in June due to lower retirement plan costs and under budget \$5.2 million year to date due to lower retirement plan expense offset by higher employee health plan costs.
- Purchased services were under budget \$3.6 million or 12.9% for the month and under budget \$8.1 million year to date. The \$3.6 million under budget is related to variances for lower Epic implementation costs of \$2.7 million and lower maintenance contract costs of \$891 thousand. Year to date is under budget due to lower Epic costs of \$7.1 million, Planning Design Constructions costs of \$3.5 million, management fees of \$3.3 million, and travel and registration costs of \$1.9 million offset by higher SNF costs of \$6.5 million and CFHP admin costs of \$5.1 million.
- Supply costs were under budget \$538 thousand or 2.4% in June and under budget \$9.0 million year to date. The variance to budget is the result of lower pharmacy costs \$1.8 million and lower implant costs of \$719 thousand offset by higher textiles costs \$2.7 million. Year to date pharmaceuticals were under budget \$8.4 million and implant costs were under \$5.2 million offset by medical supplies over budget \$5.0 million.
- Gain from operations in June of \$26.7 million was \$19.9 million above the budgeted gain of \$6.8 million.
- Investment income was under budget \$44 thousand in June due to lower interest rates.
- Unrealized loss on investments was \$282 thousand due to falling interest rates in June.
- Gain before financing activity of \$23.4 million was \$20.7 million above the budgeted gain of \$2.7 million in June.

Exhibit A is provided to reflect the consolidating financial summary of UHS less CFHP and CFHP.

Thank you.

Reed Hurley

George B. Hernández, Jr.

President/Chief Executive Officer

# Exhibit A University Health System Consolidating Financial Summary June 2020

(Dollars in 000's)

	(Donars in o	<del></del>	
	UHS less		
	CFHP	CFHP	Consolidated
Operating Revenue	\$133,568	\$51,429	\$184,997
Operating Expense	\$113,123	\$45,211	\$158,334
Operating Gain (Loss)	\$20,445	\$6,218	\$26,663
<b>Depreciation Expense</b>	(\$5,128)	(\$138)	(\$5,266)
Other Non Operating	\$1,772	\$238	\$2,011
Bottom Line	\$17,089	\$6,318	\$23,407
Budget	(\$2,376)	\$5,037	\$2,661
<b>Budget Variance</b>	\$19,466	\$1,281	\$20,746
		<u> </u>	

## University Health System Consolidating Financial Summary June Year to Date 2020

(Dollars in 000's)

	UHS less		
	CFHP	CFHP	Consolidated
Operating Revenue	\$735,681	\$303,648	\$1,039,328
Operating Expense	\$669,539	\$288,785	\$958,324
Operating Gain (Loss)	\$66,142	\$14,863	\$81,005
<b>Depreciation Expense</b>	(\$31,518)	(\$834)	(\$32,353)
Other Non Operating	\$16,008	\$2,047	\$18,055
<b>Bottom Line</b>	\$50,631	\$16,076	\$66,707
Budget	(\$3,238)	(\$2,235)	(\$5,473)
<b>Budget Variance</b>	\$53,869	\$18,311	\$72,180



## MONTHLY FINANCIAL REPORT June 2020

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#### UNIVERSITY HEALTH SYSTEM BENCHMARK PERFORMANCE REPORT

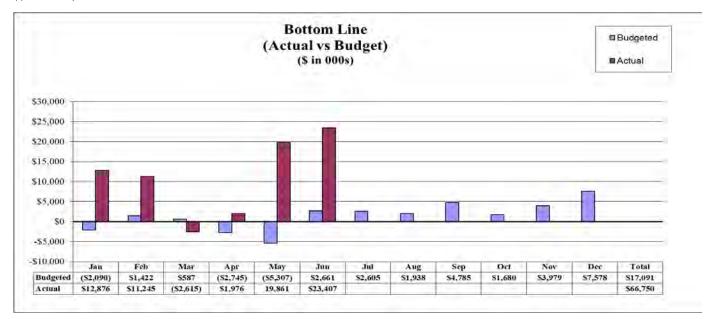
#### June

(UHS Consolidated)	Month	Budget	% Variance	YTD	YTD Budget	% Variance
Dollars in Thousands  Bottom Line	\$23,407	\$2,661	779.7%	\$66,707	(\$5,473)	-1318.9%
Gain(Loss) from Operations	\$26,663	\$6,783	293.1%	\$81,005	\$19,273	320.3%
Non-operating Income(Expense)	(\$3,256)	(\$4,122)	21.0%	(\$14,298)	(\$24,746)	-42.2%
Days Cash on Hand	230.3	204.2	12.7%	230.3	204.2	12.7%

	Actual 2019 Year End	Actual	Goal	% Variance
Days Revenue in Accounts Receivable excluding Carelink	66.72	60.44	66.00	8.4%
Days Revenue in Accounts Receivable excluding SNF and CareLink	61.37	54.85	61.00	10.1%

(UHS Less CFHP)	Actual 2019 Year End	Month	Budget	% Variance	YTD	YTD Budget	% Variance
Adjusted Discharges	5,509	5,188	6,019	-13.8%	28,895	34,208	-15.5%
Net Patient Revenue per AD	\$11,614	\$12,062	\$10,273	17.4%	\$11,686	\$10,834	7.9%
Salary Cost per AD	\$8,133	\$8,576	\$7,519	-14.1%	\$9,167	\$8,171	-12.2%
Supply Cost per AD	\$3,979	\$4,259	\$3,760	-13.3%	\$4,318	\$3,910	-10.4%
Total Expense per AD (1)	\$21,512	\$21,136	\$19,717	-7.2%	\$22,372	\$20,481	-9.2%
Gain(Loss) from Operations per AD	\$1,680	\$3,941	\$330	1094.5%	\$2,289	\$670	241.4%
Funded Patient %	74.0%	73.7%	74.0%	-0.4%	74.1%	74.0%	0.1%
Medicare CMI	1.809	1.890	1.806	4.7%	1.857	1.806	2.8%

(1) Excludes SNF Expenses



#### UNIVERSITY HEALTH SYSTEM Unaudited Consolidated Balance Sheet June 30, 2020

(In Thousands)	Assets			
•		6/30/2020		12/31/19
Assets				
Current Assets:				
Cash and cash equivalents	\$	192,117	\$	310,462
Investments		32,416		29,476
Investments (Taxes)		47,944		134,447
Assets Limited as to Use		34,320		9,623
Patient receivables, net		97,065		126,847
Property taxes receivable		34,781		242,075
Inventory		26,263		24,371
Other receivables and prepaid assets		193,662		205,107
Total current assets	\$	658,569	\$	1,082,408
Long Term Investments (Note-1)		97,595		25,244
Other Assets:				
Long-term patient receivables- net		12,657		12,657
<b>Board Designated Accounts</b>		757,089		585,021
Restricted Accounts		449,392		324,961
Property, plant, and equipment, net		1,185,144		1,164,943
Other Assets		81,873		87,608
Total assets	\$	3,242,320		3,282,843
Current liabilities:				
Accounts payable	\$	176,390	\$	181,802
Accrued Interest		16,095		15,095
Due to third-party payors, net		9,139		6,949
Compensated absences		21,591		20,945
Accrued liabilities		221,655		235,828
Claims payable		59,614		63,424
Current maturities of long-term debt		29,900		31,325
Total current liabilities	\$	534,385	\$	555,368
Long-term debt, less current maturities		1,015,897		878,253
<b>Estimated self-insurance costs</b>		1,667		1,667
Deferred tax		239,336		485,799
Deferred other		12,156		2,097
Total Long Term Liabilities	\$	1,269,056	\$	1,367,817
Fund balance-Unrestricted		1,431,898		1,352,677
Fund balance-Restricted		6,981		6,981
Total liabilities and fund balance	\$	3,242,320		3,282,843

## UNIVERSITY HEALTH SYSTEM Unaudited Consolidated Statement of Revenues and Expenses June 30, 2020

(In Thousands)	-	MTD Actual	-	MTD Budget	_	\$ Variance	% Variance	YTD Actual	YTD Budget	_	\$ Variance	% Variance
Net Patient Service Revenue	\$	62,579	\$	61,836	\$	743	1.2%	\$ 337,676	\$ 370,580	\$	(32,904)	-8.9%
Other Revenue:												
Property Tax M & O	\$	34,891	\$	34,891	\$	(0)	0.0%	\$ 209,347	\$ 209,347	\$	(0)	0.0%
Disproportionate Share Revenue		4,700		1,711		2,989	174.7%	16,243	10,265		5,978	58.2%
Uncompensated care/UPL Revenue		9,315		6,397		2,919	45.6%	44,216	38,379		5,837	15.2%
DSRIP Revenue		6,974		6,185		789	12.8%	38,689	37,110		1,579	4.3%
SNF PT Revenue		3,536		2,823		714	25.3%	23,455	16,935		6,520	38.5%
Graduate Medical Education Revenue		699		646		53	8.2%	3,979	3,874		106	2.7%
NAIP		2,965		2,461		504	20.5%	15,775	14,766		1,008	6.8%
Tobacco Settlement Fund		777		683		94	13.7%	4,378	4,097		281	6.9%
CFHP Premium Revenue		52,150		48,737		3,413	7.0%	304,091	293,859		10,232	3.5%
Other		6,411		6,030		381	6.3%	41,479	36,188		5,291	14.6%
<b>Total Operating Revenue</b>	\$	184,997	\$	172,399	\$	12,598	7.3%	\$ 1,039,328	\$ 1,035,400	\$	3,928	0.4%
Operating Expense:												
Employee Compensation	\$	55,786	\$	58,068	\$	2,282	3.9%	\$ 336,162	\$ 356,526	\$	20,364	5.7%
Medical Services		16,215		17,534		1,320	7.5%	99,178	105,185		6,007	5.7%
Purchased Services		24,654		28,295		3,641	12.9%	146,571	154,659		8,088	5.2%
Supplies		22,093		22,631		538	2.4%	124,757	133,762		9,005	6.7%
Medical Claims Expense		39,586		39,087		(499)	-1.3%	251,655	265,995		14,340	5.4%
Total Operating Expense	\$	158,334	\$	165,616	\$	7,281	4.4%	\$ 958,324	\$ 1,016,127	_ \$	57,804	5.7%
Gain/(Loss) from Operating Activities	\$	26,663	\$	6,783	\$	19,880	293.1%	\$ 81,005	\$ 19,273	\$	61,732	320.3%
NonOperating Revenue/(Expense):												
Investment Income		2,098		2,142		(44)	-2.0%	12,136	12,850		(714)	-5.6%
Unrealized Gain/Loss		(282)		0		(282)	-100.0%	4,753	0		4,753	100.0%
Premium Deficiency Reserve		194		150		44	29.6%	1,166	900		266	29.6%
Depreciation And Amortization		(5,266)	_	(6,414)	_	1,147	17.9%	(32,353)	(38,496)	_	6,143	16.0%
Total NonOperating Revenue	\$	(3,256)	\$_	(4,122)	\$_	866	21.0%	\$ (14,298)	\$ (24,746)	<b>\$</b> _	10,448	42.2%
Gain/(Loss) before Financing Activities	\$	23,407	\$	2,661	\$_	20,746	779.7%	\$ 66,707	\$ (5,473)	\$_	72,180	1318.9%

#### **University Health System**

#### Unaudited Consolidated Statement of Cash Flows June 30, 2020

	June(In Thousands)		
Operating Activities			
Gain (Loss) from Operations	\$	81,005	
Adjustments to Reconcile Gain (Loss) from			
Operations to Net Cash Used in Operating Activities:			
Property Tax Revenue Considered Noncapital Financing Activity		35,283	
Tobacco Fund Revenue		4,378	
Interest Expense Considered Financing Activity		23,236	
Changes in Operating Assets and Liabilities:			
(Increase) Decrease in Patient Receivables		29,782	
(Increase) Decrease in Prepaid Assets / Other Current Assets		9,553	
(Increase) Decrease in Intangible Assets		5,736	
Increase (Decrease) in Accounts Payable		(5,412)	
Increase (Decrease) in Compensated Absences		646	
Increase (Decrease) due to Third-Party Payor Settlements		2,190	
Increase (Decrease) in Accrued Liabilities		(14,173)	
Increase (Decrease) in Medical Claims Payable		(2,644)	
Increase (Decrease) in Deferred Revenue		10,059	
Record OPEB under GASB75			
Net Cash Used in Operating Activities	\$	179,639	
Noncapital Financial Activities			
Receipt of Property Taxes in Support of Operating Activity		(68,730)	
Proceeds from Tobacco Settlement		(4,378)	
Net Cash Provided by Noncapital Financial Activities	\$	(73,108)	

#### **University Health System**

#### Unaudited Consolidated Statement of Cash Flows June 30, 2020

	June
	2020
	(In Thousands)
Capital and Related Financing Activities	
Receipt of Property Taxes in Support of Long-Term Debt	\$29,560
Repayment of Long-Term Debt	(193,635)
Interest on Long-Term Debt	(45,005)
Acquisition of Property, Plant, and Equipment	(62,310)
Acquisition of Property, Plant, and Equipment Bond Projects	4,068
Issuance of CO Series 2020	277,105
Premium on Series 2020	58,437
Net Cash Used in Capital and Related Financing Activities	68,219
Investing Activities	
Investment Income	12,136
(Purchase) / Sale of Investments, Net	15,964
(Increase) Decrease Assets Limited as to Use	(321,196)
Net Cash Provided by (used in) Investing Activities	\$ (293,096)
Net Increase (Decrease) in Cash and Cash Equivalents	\$ (118,345)
Cash and Cash Equivalents, Beginning of Year	310,462
Cash and Cash Equivalents, End of Period	<u>\$ 192,117</u>

#### UNIVERSITY HEALTH SYSTEM

#### Unaudited Notes to Financial Statements June 30, 2020

#### (In thousands)

	CFHP	Foundation	UHS	Total
1. Cash & Investments				
Cash (1)	\$83,008		\$109,109	\$192,117
Investments- Short Term (1)(4)	\$32,416		\$47,944	\$80,361
Assets Limited as to Use (1)	\$0	\$9,536	\$24,785	\$34,320
Investments- Long Term (2)	\$37,657	*- ,	\$59,938	\$97,595
2 ( )	\$153,081	\$9,536	\$241,776	\$404,393
Patient Receivables - are net of allo as follows:	owance for charity and	l uncollectibles		
Accounts Receivable-Patients				\$390,529
Less: Allowance			-75.15%	(\$293,464)
Net Patient Receivables				\$97,065
1.00 1 40000 10000 14000				***************************************
3. Board Designated Accounts	pered Capital (1)(4)			\$9,392
	Capital Needs (1)(4)			\$205,029
	committed in 2019			(\$7,681)
_	Account Balance Comm	nitted to Women's and	Children's (1)(4)	\$217,888
_	Reserves Committed to		(1)(1)	\$13,984
	ncy Operating Account			\$313,024
=	urance Account (3)	(-)		\$5,453
		Total B	oard Designated Accounts	\$757,089
4. Restricted Accounts:	4 F 18 ' (1)(	40		\$17.052
	ate Fund-Securities (1)(			\$17,953
	Fund Certificate Series			\$261,150
Project	Fund Certificate Series		Total Pastriated Assaurts	\$170,289 \$449,392
			Total Restricted Accounts	\$449,392
5. Net PP&E Placed In Service				\$1,042,844
Non-Bond Projects - In Progress				\$103,473
Bond Projects - In Progress				\$38,827
, c				\$1,185,144
6. Other Assets				
	ents in and advances to	affiliates		\$2,115
	d Outflow of Resources			\$54,067
	d Outflow-Debt Refin 2			\$12,449
	Deferred Outflow of Ro			\$11,393
Tax Fur	nd Deferred Outflow Lo			\$1,849
	T	otal Other Assets		\$81,873

- (1) Frost Trust Money Market
- (2) Frost Trust Gov't Securities Invested in Gov't Securities compliant with Public Funds Investment Act
- (3) Broadway Bank Trust Invested in Gov't Securities compliant with Public Funds Investment Act
- (4) Local Government Pools



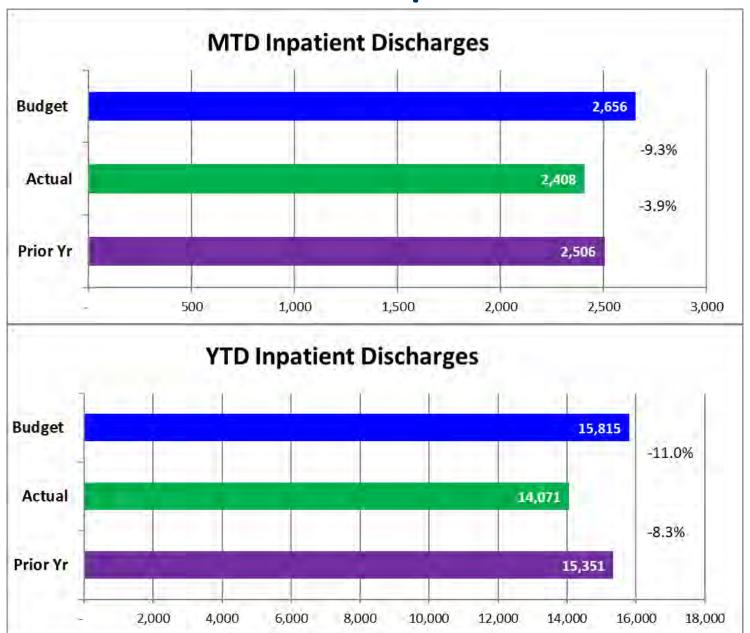
## **Financial Report**

# Presented to the Bexar County Hospital District Board of Managers

**Tuesday, July 28, 2020** 

**Reed Hurley, Chief Financial Officer** 

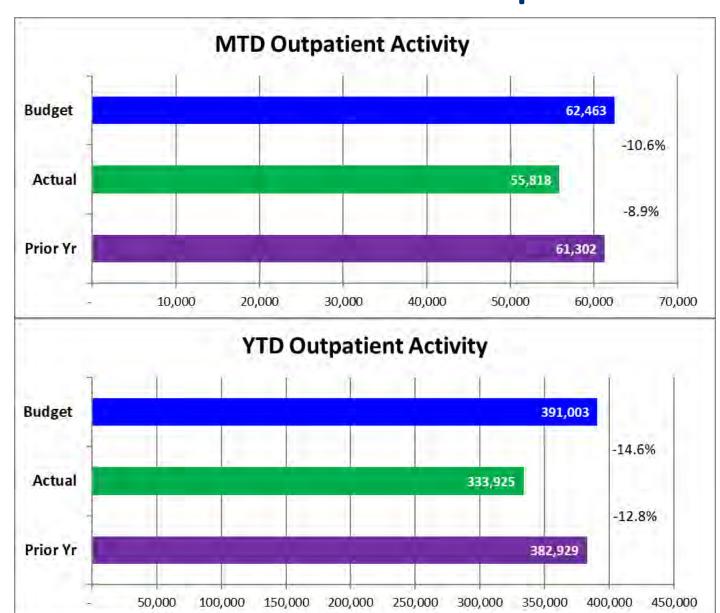
## June Inpatient Discharges







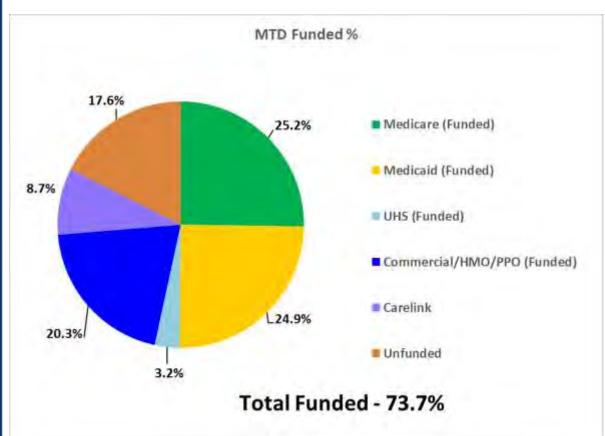
## June Outpatient Activity

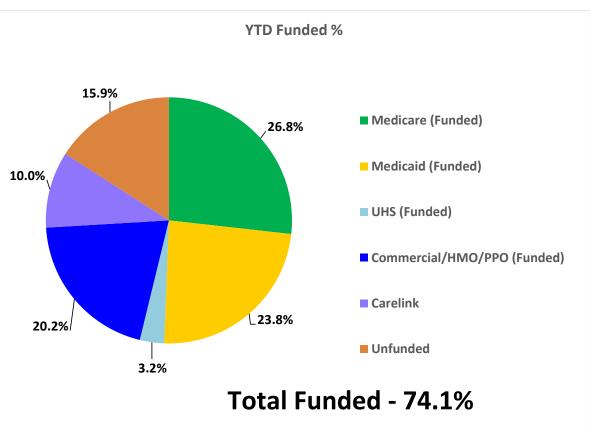






# June 2020 Payor Mix





2016 YTD Actual Funded: 73.5% 2017 YTD Actual Funded: 73.8% 2018 YTD Actual Funded: 74.3% 2019 YTD Actual Funded: 74.0%



# June 2020 Actual to Budget

(Dollars in 000's)

	MTD	Plan	Variance	YTD	Plan	Variance
Operating Gain	\$26,663	\$6,783	\$19,880	\$81,005	\$19,273	\$61,732
Depreciation Expense	(\$5,266)	(\$6,414)	\$1,147	(\$32,353)	(\$38,496)	\$6,143
Other Non-operating	\$2,011	\$2,292	(\$281)	\$18,055	\$13,750	\$4,305
Bottom Line	\$23,407	\$2,661	\$20,746	\$66,707	(\$5,473)	\$72,180



# June Consolidating Financial Summary

(Dollars in 000's)

June 2020

June Year to Date 2020

	UHS less			UHS less		
	CFHP	CFHP	Consolidated	CFHP	CFHP	Consolidated
Bottom Line	\$17,089	\$6,318	\$23,407	\$50,631	\$16,076	\$66,707
Budget	(\$2,376)	\$5,037	\$2,661	(\$3,238)	(\$2,235)	(\$5,473)
Budget Variance	\$19,466	\$1,281	\$20,746	\$53,869	\$18,311	\$72,180



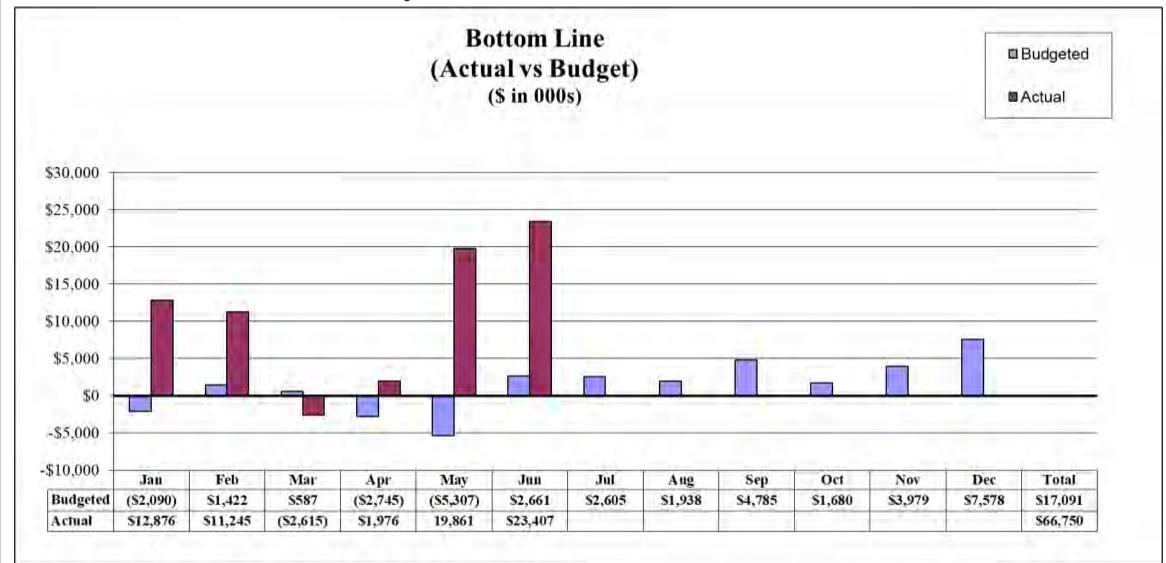
# Crosswalk Actual to Budget

(\$'s in millions)

June 2020 Budgeted Bottom Line		\$2.7	June YTD 2020 Budgeted Bottom	Line	(\$5.5)
Revenue Impacts			Revenue Impacts		
Supplemental Revenue (DSH, UC, DSRIP, GME, & NAIP)	\$7.3		Supplemental Revenue (DSH, UC, DSRIP, GME, &	NAI \$14.5	
CFHP Premium Revenue	\$3.4		CFHP Premium Revenue	\$10.2	
CARES Act Revenue	\$0.8		CARES Act Revenue	\$8.1	
Net Patient Revenue	\$0.7		SNF Pt Revenue	\$6.5	
SNF Pt Revenue	\$0.7		Net Patient Revenue	(\$32.9)	
Net Other Changes	(\$0.3)		Net Other Changes	(\$2.6)	
Revenue Variance to Budget		\$12.6	Revenue Variance to Budget		\$3.9
Operating Expense Impacts			Operating Expense Impacts		
Employee Compensation	\$2.3		Employee Compensation	\$20.4	
Epic Implementation	\$2.7		CFHP Claims Expense	\$14.3	
Pharmaceuticals	\$1.8		Other Purchased Services	\$12.7	
Medical Services	\$1.3		Supplies	\$9.0	
Management Fees	\$0.9		Epic Implementation	\$7.1	
SNF Expense	(\$0.7)		Medical Services	\$6.0	
Medical Supplies	(\$0.6)		SNF Expense	(\$6.5)	
CFHP Claims Expense	(\$0.5)		CFHP Admin Expense	(\$5.1)	
Net Other Expense Changes	\$0.1		Net Other Expense Changes	(\$0.0)	
Operating Expense Variance to Budget		\$7.3	Operating Expense Variance to Bud	dget	\$57.8
Non-Operating Expense Impacts			Non-Operating Expense Impact	S	
Unrealized Gain/Loss	(\$0.3)		Unrealized Gain/Loss	\$4.8	
Depreciation and Amortization	\$1.1		Depreciation and Amortization	\$6.1	
Premium Deficiency Reserve	\$0.0		Premium Deficiency Reserve	\$0.3	
Investment Income	(\$0.0)		Investment Income	(\$0.7)	
Non-Operating Expense Variance to Budg	et	\$0.9	Non-Operating Expense Variance to I	Budget	\$10.4
Bottom Line Reported		\$23.4	Bottom Line Reported		\$66.7



# Monthly Financial Performance





# 2020 Operating Indicators

	Actual 2019 Year End	Actual	Goal	% Variance
Days Revenue in Accounts Receivable excluding SNF	66.72	60.44	66.00	8.4%
Days Revenue in Accounts Receivable excluding SNF and CareLink	61.37	54.85	61.00	10.1%

(UHS Less CFHP)	Actual 2019 Year End	Month	Budget	% Variance	YTD	YTD Budget	% Variance
Adjusted Discharges	5,509	5,188	6,019	-13.8%	28,895	34,208	-15.5%
Net Patient Revenue per AD	\$11,614	\$12,062	\$10,273	17.4%	\$11,686	\$10,834	7.9%
Salary Cost per AD	\$8,133	\$8,576	\$7,519	-14.1%	\$9,167	\$8,171	-12.2%
Supply Cost per AD	\$3,979	\$4,259	\$3,760	-13.3%	\$4,318	\$3,910	-10.4%
Total Expense per AD (1)	\$21,512	\$21,136	\$19,717	-7.2%	\$22,372	\$20,481	-9.2%
Gain(Loss) from Operations per AD	\$1,680	\$3,941	\$330	1094.5%	\$2,289	\$670	241.4%
Funded Patient %	74.0%	73.7%	74.1%	-0.5%	74.1%	74.0%	0.1%
Medicare CMI	1.809	1.890	1.806	4.7%	1.857	1.806	2.8%

<sup>(1)</sup> Excludes SNF Expenses





### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

**Epic Electronic Health Record (EHR) Project Update** 

### **Background:**

In September 2018, the Health System Board of Managers approved the recommendation to transition the Health System to the Epic Electronic Health Record (EHR) suite. The Epic EHR Project will be transformational for the Health System, UT Health and our patients. The quality of clinical and operational functions will improve standardization of clinical workflows, data entry, and reporting across all Health System and UT facilities. The Epic enterprise suite will enhance the patient experience through a better appointment process, single portal access to medical and improved communication with providers. After implementation, the Health System will benefit from improved clinical productivity and better documentation. This will result in a reduction of accounts receivable days and misdirected claims while increasing revenue cycle efficiencies.

### **Operational Update:**

On July 11, 2020, the Health System launched the largest technology transformation it will ever see. On this day, at exactly 0400, the Epic EHR suite of products was brought on-line for go-live. This was a major undertaking that lasted almost two years and included replacing many disparate systems that have been installed for more than 20 years. The go-live implementation was successful with no major issues reported. In the pre-planning phase of go-live, a common concerns from other healthcare institutions that have adopted Epic is that it can take two to three months to return to normal clinically and financially. To date, the Health System is ahead of schedule in both areas.

Prior to July 11, a clinical and administrative team extracted over 1,000 ambulatory, 528 inpatient, and 3,849 inmate records into the Health System's Epic production environment in preparation for go-live. Additionally, 481 providers in select

specialties completed shadow charting to practice documenting in Epic with real patient scenarios. The team completed 237 steps in the plan to retire legacy systems and go-live with Epic.

In order to get the Health System ready for July 11, the team completed a total of 22,881 build tasks within Epic. The majority of these required input and direction from our operational users. Sessions were held in September of 2019, validating the initial workflow build in Epic. These sessions involved users seeing workflows and providing feedback, which flowed into the testing phase. The testing phase included 665 application scripts and 72 integrated scripts. Over the course of eight months more than 20,000 tasks and over 30,000 individual records were tested. Additionally, the team tested more than 72,000 individual charges and sent more than 3.4 million messages through the interface engine.

Implementing a new EHR system of this magnitude is challenging in itself. Navigating and successfully implementing during a pandemic added additional unplanned challenges to include training and support. The Health System had to change the majority of the existing scheduled face to face training classes to remote video classes. This resulted in the Epic team recording over 700 training sessions and making these available to staff and providers. The Health System's Epic onsite support that was originally going to consist of 230 Epic employees was moved to a remote methodology. Drastic changes in training and go live at-the-elbow-support were not ideal, the Health System in collaboration with UT Health San Antonio pushed through as a team to make it a successful go-live.

This report is provided for information only. No action by the Board of Managers is required.

William A. Phillips, Jr.
Senior Vice President/
Chief Information Officer

Edward Banos Executive Vice President/ Chief Operating Officer George B. Hernández, Jr. President/Chief Executive Officer



### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

Update on the Women's and Children's Hospital and Associated Projects

### **Background:**

The architectural and engineering (A/E) team of Marmon Mok Architecture, LLP (a.k.a. Marmon Mok/ZGF) was selected by University Health System (Health System) for the design and planning services for the Women's and Children's Hospital and Associated Projects (Project). The A/E team was authorized and engaged in March 2018 to provide the first phase (Phase I) of design and planning services for the Project. Phase I included master planning, program validation, scope alignment, site investigations, and budget development. In July 2018, the A/E team commenced full architectural and engineering design services for the Project.

The Project's design phase is on schedule. The Construction Documents (CDs) for the Garage and the Women's and Children's Hospital are 95% complete, including the build out of floors 8-11 which will accommodate the inpatient programs identified in the Blue Cottage Clinical Space Program. Also included in this design package is the 12<sup>th</sup> Floor Core and Shell and the Podium Expansion Core and Shell. In June 2020, the Board authorized additional design funding to add design scope including the build out of floor 12 for an additional thirty (30) private inpatient rooms, and the Kitchen, Servery, Dining Room, and Conference Rooms in the Podium expansion.

The Construction Manager (Joeris/Dunn, a Joint Venture) commenced work on site in June 2019 for the Advanced Diagnostic Center (formerly the Heart/Vascular & Endoscopy Center) and started other enabling projects in August 2019. The Underground Utility Reroute and North Garage Demolition are complete. Construction continues at the Advanced Diagnostic Center, which hosted an 80% completion inspection by the Texas Department of State Health Services in early July 2020.

Work on the Women's and Children's Hospital is also underway, with site clearing completed, mass excavation and soil retention walls significantly completed, and deep foundation piers being installed across the Project footprint.

### **Analysis:**

Comprehensive constructability review of the 95% CDs was performed in early July 2020 and the A/E team is making final revisions to the drawings and specifications to enable submission to the City of San Antonio for building permits in early August 2020. Concurrently, the Construction Manager is completing an updated cumulative construction cost estimate that aligns with the finalized design. The A/E team will progress the design for additional patient rooms on the 12th floor and future support services (kitchen, servery, dining, etc.) that will move to the Podium expansion to be located closer to the patients and allow more efficient operations. This will enable the rapid development of these spaces to meet future Health System requirements at best cost.

The current approved Project budget of approximately \$691.6M is summarized in Attachment "A".

### **Progress Update:**

- a) Advanced Diagnostic Center (formerly Heart/Vascular & Endoscopy Center)
  - Ongoing work includes HVAC, electrical, and plumbing rough-in, and fire sprinkler relocations, medical gas connections, and wall framing and structural re-enforcement for support of Cath Lab equipment.
  - Upcoming work includes final utility and medical gas connections and the start of finishes.
  - Procurement of remaining medical equipment (Groups 1 & 2) is ongoing.
  - Furniture and active IT equipment procurement has begun.

### b) Women's & Children's Hospital

- A/E construction documents are 95% complete; previous design packages for site work, mass excavation, and foundations enabled early work to commence.
- Ongoing work includes final sitework and soil retention walls for below-grade construction.
- Drilled foundation piers with associated underground utilities will continue through the summer of 2020.
- Procurement of new Automated Guided Vehicle System from Aethon was approved by Board in late June 2020.

### c) Garage

- A/E construction documents are 95% complete; previous design packages are permitted to enable early work.
- Ongoing work includes sitework, retention system and drilled piers.
- One of two tower cranes was erected to facilitate moving and placing heavy construction materials.
- Upcoming work will include underground utilities and concrete slabs.

### d) Podium Expansion

- A/E construction documents for core and shell are 95% complete.
- A/E construction documents for partial build out will begin in August.
- Demolition of existing cisterns is complete; ongoing work includes sitework and excavation.
- Upcoming work will include drilled piers and underground utilities.

### **Community Outreach/SWMBVE:**

The Outreach tracking information noted below for the Construction Manager at Risk was current as of early July but does not reflect pending awards for additional trade partners required by the scope of the Project through GMP 10.

Small	Hispanic	African American	Other Minority	Woman	Veteran	SWMBVE Total	Local
3.9%	6.54%	9.48%	0.05%	11.13%	0.42%	31.52%	77.66%

This report is	presented for	information	only.	No act	tion is 1	required	by	the
<b>Board of Mana</b>	agers.							

Don Ryden
Vice President
Planning Design and Construction

Edward Banos Executive Vice President/ Chief Operating Officer

George B. Hernández, Jr.
President/Chief Executive Officer

#### **Attachment A**

### WOMEN'S AND CHILDREN'S HOSPITAL & ASSOCIATED PROJECTS BOARD APPROVED PROJECT BUDGET SUMMARY

(in millions)

July 21, 2020

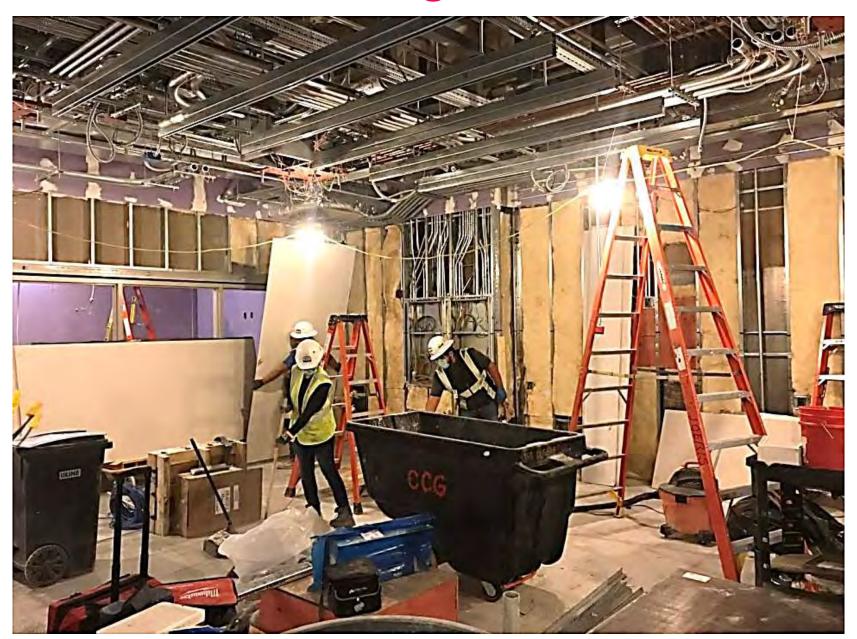
			Ch	Budget Changes Approved		urrent proved udget
Construction	\$	21.0	\$	(1.1)	\$	19.9
A/E Fees	\$	1.9	\$	-	\$	1.9
Other Fees/Permit/Contingency/Misc	\$	2.1	\$	(1.3)	\$	0.8
FFE/IT	\$	2.0	\$	-	\$	2.0
Medical Equipment	\$	25.0	\$	7.2	\$	32.2
ADVANCED DIAGNOSTIC CENTER	\$	52.0	\$	4.8	\$	56.8
Construction	\$	262.0	\$	127.0	\$	389.0
A/E Fees	\$	28.2	\$	8.1	\$	36.3
Other Fees/Permit/Contingency/Misc	\$	29.8	\$	11.4	\$	41.2
FFE/IT	\$	19.0	\$	-	\$	19.0
Medical Equipment	\$	25.0	\$	-	\$	25.0
WOMEN'S & CHILDREN'S HOSPITAL	\$	364.0	\$	146.5	\$	510.5
Construction	\$	30.0	\$	13.5	\$	43.5
A/E Fees	\$	1.9	\$	-	\$	1.9
Other Fees/Permit/Contingency/Misc	\$	4.1	\$	0.2	\$	4.3
PARKING STRUCTURE	\$	36.0	\$	13.7	\$	49.7
Construction	\$	-	\$	39.4	\$	39.4
A/E Fees	\$	-	\$	8.6	\$	8.6
Other Fees/Permit/Contingency/Misc	\$	-	\$	3.6	\$	3.6
FFE/IT	\$	-	\$	-	\$	-
Medical Equipment	\$	-	\$	-	\$	-
PODIUM EXPANSION	\$	-	\$	51.6	\$	51.6
BOARD CONTINGENCY	S	22.0	\$		s	23.0
DOARD CONTINGENCY	Ş	23.0	ş	-	Ÿ	23.0
TOTAL	\$	475.0	\$	216.6	\$	691.6



# Women's and Children's Hospital & Associated Projects

Board of Managers Update July 28, 2020

### **Advanced Diagnostic Center**





### **Advanced Diagnostic Center**



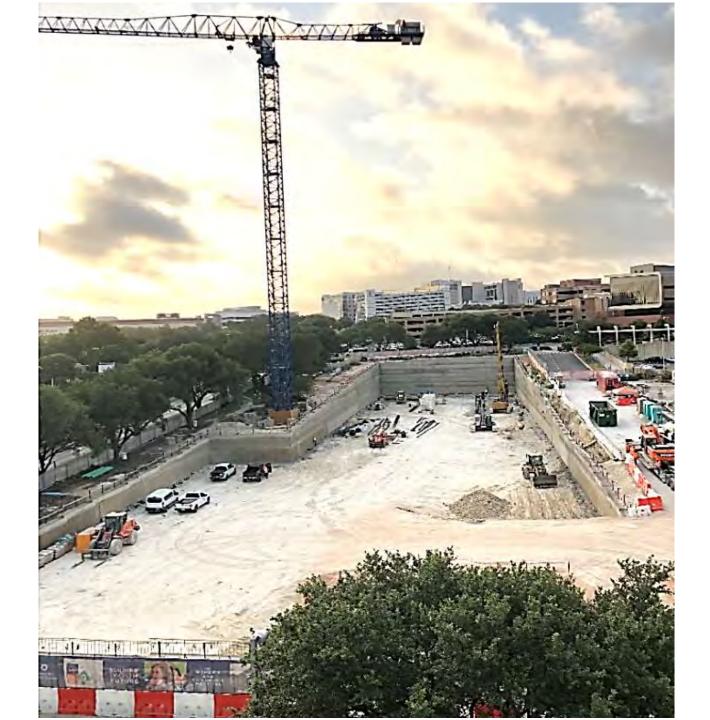


### July 21, 2020





### Garage





### Garage



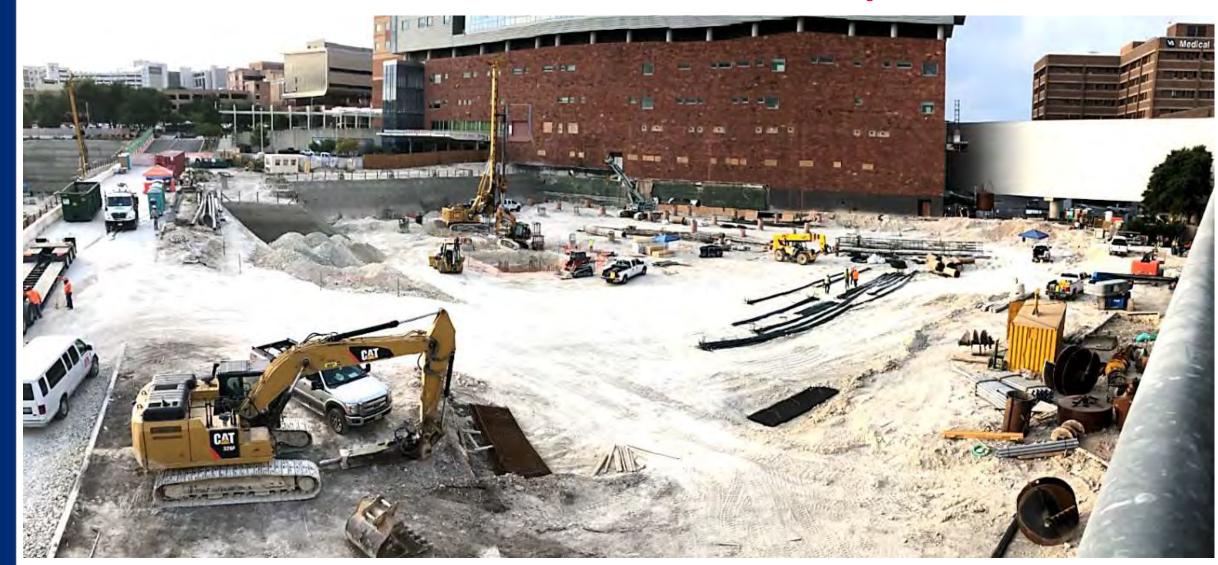


### Garage



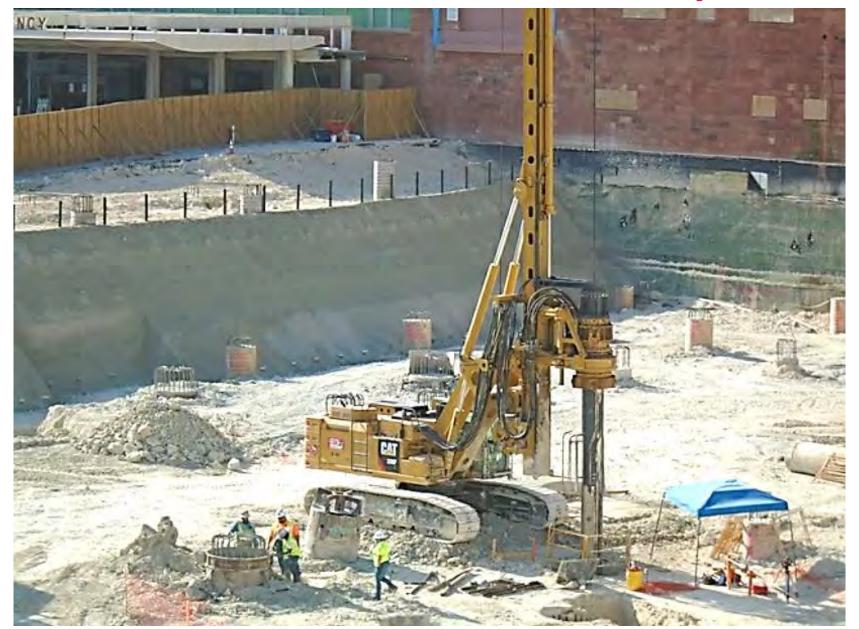


## Women's and Children's Hospital





### Women's and Children's Hospital





### Women's and Children's Hospital











### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 21, 2020** 

### **Annual CareLink Report**

CareLink is a financial assistance program for uninsured Bexar County residents. The program was created in 1997 to help address the needs of Bexar County residents without healthcare coverage who were not eligible for Medicaid or other public or private funding. While CareLink is not an insurance product per se, it has many similar advantages in terms of encouraging a lasting relationship with a primary care provider, promoting access to preventive health services, and instilling a sense of shared responsibility between the member and Health System for the member's health. Applicants who are at or below 200% of the federal poverty level (FPL), have valid identification and are Bexar County residents are eligible for the program. Once enrolled, members choose a primary care provider to manage their healthcare needs. Members are eligible for a wide array of healthcare services including primary care, specialty care, outpatient surgery, hospitalization, pharmacy benefits, laboratory services, and imaging.

This report provides an overview of enrollment activities, membership, claims, and departmental activity for 2019.

#### **CareLink Enrollment Overview**

The average monthly enrollment in CareLink in 2019 was 26,768 members. This includes our MedLink program (program for people who have Medicare, but still meet eligibility guidelines for CareLink) which averaged 1,284 members each month. With no major healthcare legislative changes in recent years, enrollment remained steady with only a slight increase from the 2018 monthly average of 25,398. Since Texas did not expand Medicaid, those adults under 138% of the federal poverty level (FPL) are left without coverage and often make up a considerable portion of the uninsured and our CareLink population.

CareLink members are grouped based upon their income relative to the FPL. For reference purposes, 100% of the 2019 FPL was \$12,490 for one person and \$25,750

for a family of four. The levels by household size are summarized in Chart 1. The federal government updates and publishes the FPL information on an annual basis.

Household Size 100% of Federal Poverty Level \$12,490 1 2 \$16,910 3 \$21,330 4 \$25,750 5 \$30,170 \$34,590 6 7 \$39,010 \$43,430 8

Chart 1: 2019 Federal Poverty Level

CareLink A members have incomes up to 75% of the FPL, CareLink B members have incomes between 76% and 138% of the FPL, and CareLink C members have incomes between 139% and 200% of the FPL. CareLink A decreased from 30% in 2018 to 28% in 2019. CareLink B stayed the same between 2018 and 2019 at 54%. CareLink C increased from 11% in 2018 to 13% in 2019. Chart 2 shows the average monthly CareLink enrollment by year.

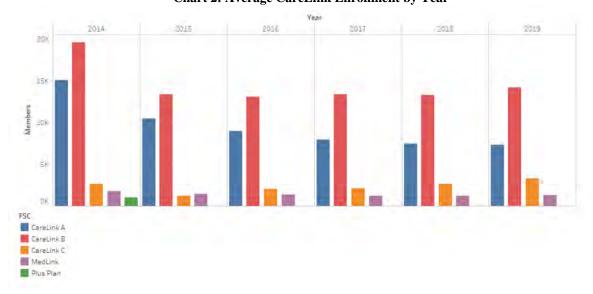


Chart 2: Average CareLink Enrollment by Year

In 2019, there were 42,237 applicants for CareLink of which 32,940 were eligible for CareLink A, B, or C. During the interview process for CareLink, over 4,200 applicants were found to be eligible for Medicaid, 1,985 were eligible for Title V Maternal and Child Health Services Block Grant, 740 for CHIP and 738 for CHIP—

Perinatal. Average wait times for a CareLink appointment were usually less than 5 business days. However, even with appointments being confirmed and applicants receiving reminder calls, CareLink still had an average "No show" rate of 29%.

The CareLink Call Center has done an excellent job of handling the call volume that comes through our Member Services line. In 2019, the Call Center received 112,220 calls and was able to answer 93%. The Call Center also responded to 5,043 emails from members and others interested in the CareLink program. We have seen an increase in emails due to members sending their proof of residency or proof of income documents. With more and more companies switching to electronic statements, more of our members can only access these documents online and may not have access to print them. We are working on an electronic renewal process that will facilitate renewals for both members and our staff.

CareLink continues to work with different organizations in the community to offer CareLink assistance. Currently, CareLink works with Catholic Charities, Volunteers of America, Alpha Home, H.O.W. Foundation and Haven for Hope to provide eligibility assistance to their clients.

### **Demographics**

Eighty percent (80%) of CareLink members are Hispanic (see Chart 3). The average age of CareLink members is 43. Fifty-seven percent (57%) of all members are female. The zip codes with the highest concentration of CareLink members are 78207, 78228, 78201, 78237 and 78227 with most members living in central and southern Bexar County.

80%

CareLink 2019

Bexar County 2019

Hispanic

Not Hispanic or Latino

**Chart 3: Ethnic Composition** 

#### **Cost of Care**

The total cost of care (including inpatient, outpatient, lab, imaging, etc.) during 2019 was \$102,783,017 which was a 14% increase from 2018. This equals to a per member per month (PMPM) cost of \$325.89 or a per member per year cost of approximately \$3,911.

Increase in spending can result from increase in use, increases in average prices (spending per unit), or a combination of both. After increasing 4% in 2018, spending associated with inpatient admissions rose 8% in 2019. Spending on outpatient facility visits and procedures grew the fastest of any category rising 25% from \$36,703,750 in 2018 to \$45,746,238 in 2019. A review of outpatient services utilization based on Current Procedural Terminology (CPT) codes shows that the costliest codes were for operating room services, open procedure codes, computerized tomography of the abdomen and pelvis, followed by emergency department visits.

#### **Collections**

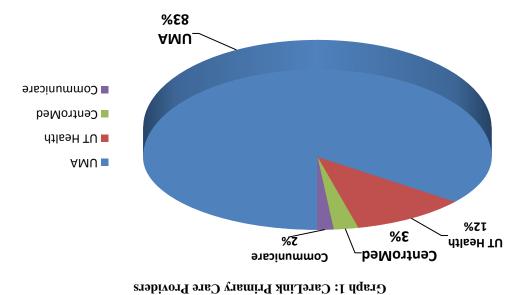
CareLink collected \$9,076,742 in member payments which is a 3% decrease compared to the \$9,382,855 collected in 2018. Many members still choose to mail in their payments or go to a CareLink service center to pay in person, but implementation of new collection processes resulted in an 11% increase in phone collections and a 9% increase in online payments. Staff receives a monthly report that lists members who have not made a payment in 90 days and have a balance on their account. We contact the members and work out payment arrangements or take a payment over the phone. We also educate them on how to make their payment online. This new process has allowed us to work with members and assist them with re-evaluation appointments due to changes in their income or household size. Members also have an option of automatic payment withdrawal from their bank account. In 2019 we had an increase of 1,000 members choosing this method for their CareLink monthly payments.

Insurance recoupments in 2019 totaled \$10,547,777. Insurance recoupments are dollars paid retroactively to the Health System because members qualified for Medicaid or other third party payers for services previously paid through CareLink. This figure includes \$769,688 the Health System received in refunds from UT Health.

### **Primary Care Overview**

All CareLink members choose a primary care physician (PCP) at the time of enrollment. The following chart illustrates the 2019 distribution of members across

providers. Similar to 2018, the largest proportion of our members received primary care through University Medicine Associates (UMA) followed by UT Health, CentroMed and CommuniCare.



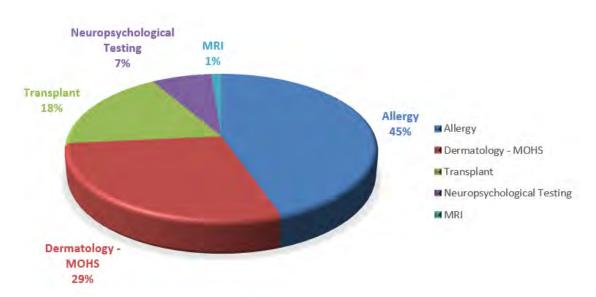
Emergency Department (ED) visits and admissions are also tracked by provider groups. ED visits overall increased slightly with the number per 1000 increasing from 18.4 in 2018 to 21.9 in 2019. Me believe this reflects that those enrolled in CareLink are the most vulnerable in Bexar County, in regards to income as well as multiple chronic conditions.

# Medical Management CareLink requires pre-authorization for many of the covered services for our members. This is done to ensure established medical criteria are followed while attempting to provide a level of cost containment. Pre-Authorization services

completed 16,552 referral requests in 2019 which is a 10% increase from 2018.

In addition to services rendered within the Health System, CareLink requires preauthorization for any admission or procedure outside of our health system. When services could not be provided within the Health System due to physician shortage, lack of equipment, or access issues, authorization was completed for another location of service if the condition was warranted and approved by the Medical Director. A total of 85 patients were referred (outsourced) to community providers for specialty care in 2019 compared to 74 in 2018. This is a 9% increase in services rendered outside of the Health System. Claims paid for these services decreased from \$453,798 in 2018 to \$335,326 in 2019.

The large variance between 2018 and 2019 related to a specific CareLink member and charges associated with their complex stem cell transplant in 2018. The majority of services that were sent outside of our system were for allergy issues or allergy-related conditions. Several other services were also sent out during 2019 due to a lack of a provider for a particular specialty or UT Health not having that specialty at all. These would include autologous stem cell transplants, Mohs surgeries for basal cell or squamous cell carcinomas, neuropsychological testing, ocular prostheses and specialized MRI.



**Graph 2: Outsourced Specialty Services** 

### **Case Management**

CareLink utilizes Case Management to focus on members with high costs or high utilization of services such as hospital admissions or emergency room visits. "Super Utilizers" continued to be our focus during 2019. The Data Team continues to improve the reporting "Dashboard" for those members who were seen in our emergency department or admitted to UHS within the past week. This continues to provide us more timely information for patients who may need additional help navigating UHS, assistance in seeking care other than at the emergency department or those with chronic conditions who would benefit from case management to help improve their health status.

Many of our members have multiple chronic complex diseases which impact their care and provide challenges to seeing quality outcomes. Case Management has been instrumental in assisting and navigating our members successfully along the continuum of care. With our dashboard we are aware of issues or trends in care quicker and, hopefully, impact changes before a re-admission or serious event occurs. Our goals remain improving outcomes, containing costs, and strengthening communication with providers. Cost savings from case management for 2019 are estimated at over \$200,000. Active census continued to climb in 2019, ending the year with 133 active members being case managed. We continue to have two full time case managers to assist with these complex patients.

#### **Success Stories:**

- Case Managers continue to assist members with navigation and help them get appointments to our clinics as soon as possible. One of the goals for the Case Managers was to identify and work through the application process of getting Via Trans to assist with transportation and improve no show or cancellation rates. In several situations, this application allowed the patients to be more involved in their care, along with becoming more active with the care team and improving outcomes.
- Case Managers assisted members with enrollment in education classes depending on the patients' needs. Concentrated efforts were made on diabetic education, especially for those with diabetes and comorbidities worsening their disease state. Many of our patients have lowered their A1C after involvement in diabetic education and more frequent monitoring. In one instance, a member was able to decrease an A1C of 12.4 to 8.2 in six months.
- Case Managers continue to assist members with obtaining or refilling prescriptions to avoid an emergency department visit or hospitalization. In one example, a member with a diagnosis of congestive health failure (CHF) was out of medications due to needing a refill order. The Case Manager reached out to the physician, obtained a refill order along with their assessment; the physician advised the patient to increase his dose for three days then resume previous dose. This intervention was beneficial to avoid a CHF exacerbation.
- Case Managers continue to help with obtaining services or navigating members to obtaining services that CareLink does not cover. Examples include navigation to hospice, dental care and durable medical equipment (DME). Staff work with community organizations along with our own Health System to obtain equipment or services for the member. Case Managers have worked with members on supplies and respiratory and generalized DME. We

are able to obtain many of these items at a reduced cost. This broadens the scope of our work and coordination while serving our local community.

### **Pharmacy Services**

The number of prescriptions filled for CareLink members in 2019 was 12% higher than 2018. On average, 34,000 prescriptions were filled per month at UHS pharmacies for CareLink members.

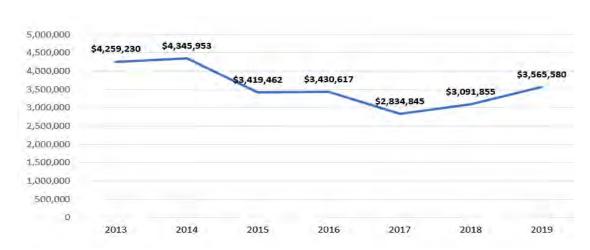
700 Chart Area 575,338 600,000 505,705 500,000 404,820 364,873 363,607 360,982 360,060 400,000 300,000 200,000 100,000 0 2013 2014 2015 2016 2017 2018 2019

Chart 4: Prescriptions for CareLink Members

Total Prescriptions

As expected with an increase in prescription volume, prescription costs also rose (15%) in 2019. However, our costs remain under control by use of formulary management and pharmaceutical patient assistance programs. The per member per month (PMPM) prescription cost was \$11.11 in 2019 compared to \$10.13 in 2018.

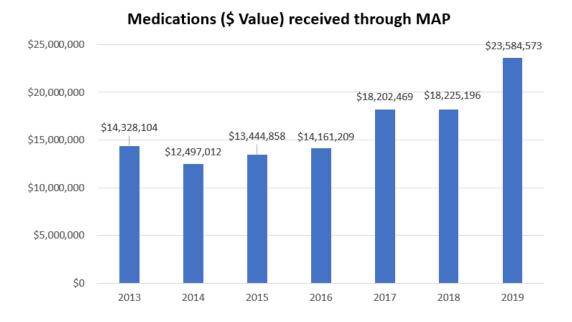
**Chart 5: Prescription costs** 



Members contributed to covering prescription costs with over \$2.6 million in pharmacy co-pays collected at UHS pharmacies.

Another valuable resource for our members is the UHS Medication Assistance Program (MAP). In 2019, \$19,264,742 worth of free medications was received for CareLink members, which is 82% of total dollar value received from MAP. Since 1999, our MAP has helped UHS patients apply for and receive over \$281 million worth of free medications from pharmaceutical companies. This is tremendous savings to the Health System and taxpayers of Bexar County and it enables our members to access therapies that would otherwise not be available.

Chart 6: MAP Savings



Medicare-eligible individuals enrolled in the MedLink program can also receive pharmacy services at UHS. MedLink provides prescription co-pay assistance to help decrease co-pay burden for our elderly population. Eligible members are assisted with applications for the Medicare Savings Program (MSP) and Low Income Subsidy (LIS) Program, which help cover the premiums, co-insurance, and co-pays associated with Medicare Parts A, B, and D. We notify all CareLink members who may be transitioning to Medicare about our MedLink program. Beginning in 2018, our UHS pharmacies started accepting additional Medicare prescription plans, allowing us to further reach and assist our senior population.

#### **Outreach and Education Services**

The CareLink Outreach and Education team has various programs and community efforts in place to educate and serve our community: professional training sessions, workshops, community events, blood drives and grant funded services such as food distribution. Education efforts help CareLink members prepare for appointments and understand services provided by CareLink. Outreach efforts such as community events help develop stronger partnerships with external organizations.

### CareLink Professional Training Sessions

There were 32 presentations made to departments within University Health System, community organizations, and service-oriented agencies. Approximately 650 organization representatives received the training. Organizations that participated in the CareLink Professional Training Sessions included Next Level Youth Opportunity Center, SA KIDS, Bexar County Family Justice Center, San Antonio ISD, Avance, Methodist Healthcare Ministries and Enroll San Antonio to name a few. The purpose of these trainings is to familiarize the organizations with CareLink so they will be able to better serve and provide their clients appropriate referrals to CareLink as needed.

### Community Events

The Outreach and Education Team attended 109 community events and health fairs throughout Bexar County. These events reached 3,813 individuals and educated 2,137 community members about the CareLink program. In July of 2019, we renewed the Connecting Kids to Coverage (CKC) grant, with the goal to outreach and educate, enroll, and retain underserved children and their parents in Medicaid and CHIP. Beginning in November, we collaborated with schools from some of Bexar County's largest school districts including North East Independent School District, San Antonio Independent School District, Harlandale Independent School District, Edgewood Independent School District and South Side Independent School

District. This strategy has helped to reach children and their families to enroll in Medicaid or CHIP. In 2019, we were able to enroll 150 families in the Medicaid or CHIP program. Additionally, we were able to outreach to over 500 people and 177 of those individuals received detailed education on the Medicaid and CHIP programs. This information included facts about the Public Charge policy, which helped some of our families understand this policy and move forward with application submissions for their children. During CKC outreach events, we also referred parents, who were not eligible for Medicaid, to our CareLink Member Services team to inquire and apply for CareLink coverage.

### CareLink Workshops

CareLink Workshops were offered twice each month with a focus on educating CareLink members, as well as community members preparing to apply for the CareLink program. From January 2019 through June 2019, the team led Health Insurance 101 workshops twice each month. When this series was completed, the team collaborated with the Texas Diabetes Institute to host the Healthy Living Workshops from July to December 2019. CareLink members were offered an incentive of a \$15 credit towards their CareLink balance. This was an effort to encourage CareLink members to attend sessions and learn about healthy lifestyles.

- CareLink Workshop A 60 minute session that presents CareLink membership requirements, the contract, and bill statement.
- Health Insurance 101 Workshop A 60 minute session that presents the basic elements of a health insurance plan, services, and resources.
- Healthy Living Workshops A six-session series focused on improving overall health and well-being. Topics include chronic disease management, healthy eating and meal planning, healthy weight maintenance, exercise, healthy coping skills and problem solving and risk reduction.

Additionally, the team provided over 3,900 CareLink one-on-one sessions. These educational sessions are done with members and new applicants in the CareLink service centers while they are waiting for their enrollment appointment. This provides an opportunity for members and applicants to ask questions on a more personal level.

#### CareLink Blood Drive Initiative

In partnership with Blood Donor Services, six CareLink blood drives were held in 2019. CareLink members, their families, and friends were encouraged to donate blood. As an incentive, CareLink members received a \$25 credit toward their

CareLink account balance for each blood donation given in their name. These blood drives yielded 568 units of blood, which is an estimated cost savings of nearly \$82,000 for the Health System. Since May 2009, when the CareLink Blood Drives were initiated, the drives have generated approximately 4,500 units of blood resulting in a total estimated cost savings of \$955,667 for University Health System.

#### CareLink Food Distribution

In 2019, a grant from the UHS Foundation provided the opportunity to distribute food to CareLink members beginning in February and ending in November. Many of our members experience food insecurity and this grant gave us the opportunity to serve our members in this capacity. We collaborated with the San Antonio Food Bank to obtain produce bags once a month. Additionally in November, we were able to include turkeys in addition to the produce bag. Member feedback was positive, with many expressing gratitude and appreciation.

#### **Business Services**

CareLink Business Services has maintained partnerships with the Texas Workforce Commission and Alamo Area Resource Center to receive payments for clients approved for payment assistance from these organizations. Over the course of the year, these organizations have made payments of over \$48,068.

The Business Services area has also taken on additional responsibilities outside of CareLink. In an effort to assist Clinical Enterprise, we are processing invoices for home health and wound care services. This allows clinical staff to focus on the patients and not on claims processing. We were able to identify savings of nearly \$37,000. This eliminated any back log and the provider received payments in a timely manner. Business Services staff has been able to assist hospital administration in reviewing claims received under the Sponsored Care services agreement resulting in a savings of \$1,054,700 in medical services and \$160,234 in dental care.

#### **CareLink Initiatives**

CareLink has continued its partnerships with both City Public Service (CPS) and San Antonio Water System (SAWS) to enroll CareLink applicants into their affordability programs. Any person being screened for CareLink eligibility is automatically screened for both of these cost-savings programs. In 2019, a total of 1,509 people were found eligible for the CPS Affordability Discount Program and 2,068 were found eligible for the Casa Verde program which offers free energy efficiency upgrades. Over 1,128 people were also found eligible for the SAWS affordability program. The feedback given by applicants and members has been

overwhelmingly positive. Most are extremely pleased with the convenience of being screened all at once for eligibility thereby reducing the time and hassle of having to go to different places to apply for various programs. The people we serve are often struggling financially so when we offer them a resource that saves them money on a monthly basis, they are very excited and thankful.

The partnerships have also allowed CareLink to develop close working relationships with these organizations. Our case managers have contacts they can reach out to in order to request assistance with getting utilities reinstated for our sickest members or for those with a medical need. Additionally, we have been able to work together at community events to educate individuals and their families about CareLink and the partnerships we have established.

We have continued our initiative of scheduling Primary Care Physician (PCP) appointments for new members. This has become part of the standard practice for enrollment staff and continues to allow us to help our members establish routine care with their PCP. For people who are new to the Health System, it also allows them to experience how a PCP appointment is scheduled and see what information is needed.

#### **Conclusion:**

CareLink continues to provide a medical home and much needed medical services to uninsured residents of Bexar County. We are continuously working to improve or enhance our program so we can better assist our members in improving their health and addressing the social determinants of health. We recognize the importance our program plays in the lives of many and work diligently to ensure we are meeting the needs of those who rely on us while being good stewards of the tax fund.

Virginia Mika, PhD, MPH Roberto Villarreal, MD, MPH **Executive Director** Senior Vice President CareLink

Research & Information Management

George B. Hernández, Jr. President/Chief Executive Officer



### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

## Community First Health Plans 2019 Annual Report

### **Overview:**

In 2019, Community First Health Plans (CFHP), achieved strong results associated with quality outcomes. 2019 YTD financial results reflect a net income of \$1.1 million, but was below the budget of \$4.1 million by \$3.0 million. CFHP membership also experienced a decrease in overall membership of 3%, which is mostly due to an overall decline in Medicaid enrollment of 2.5%. Even with the decline in membership and slight decrease in market share, CFHP remains confident that improved claims system processing, building relationships with providers and a strong marketing campaign will result in membership and market share increases. CFHP experienced a claims system platform conversion on June 1, 2019 from Amysis to Cognizant – QNXT. This transition has been challenging for CFHP, but improvements have been achieved as CFHP moves toward significant process improvement, which also includes enhanced data governance, dashboard and analytic reporting for continuous tracking, efficient issue identification and effective problem resolution.

Specifically, CFHP has the following highlights:

- All key quality healthcare effectiveness data and information set (HEDIS) metrics in the State's pay for performance program for STAR and CHIP improved from 2018 to 2019. This progress resulted in improved care for CFHP members and protected 3% or \$10 million of CFHP's premium revenue at risk for Medicaid and CHIP. These metrics remain above the 50th percentile nationally:
  - Well child visits,
  - Prenatal and postpartum rates,
  - Treatment for upper respiratory infection rates,
  - Well child counseling rates
- Based upon satisfaction surveys, member and provider satisfaction scores maintain high rates:
  - Members score CFHP between the 67th and 95th percentile

- 91.5% of providers would recommend CFHP to patients
- 98.8% of providers view the relationship as long term
- 92.6% of providers would recommend CFHP to other providers
- Fiscal year 2019 resulted in a net income of \$1.1 million and CFHP budgeted in fiscal year 2020 for a net income of \$7.3 million.
- Currently, there is significant improvement in claims processing, as well as, data governance, dashboard metrics and analytic reporting through the Power BI tool to enhance operational effectiveness and efficiency for 2020.
- A targeted marketing and branding campaign and relationship building with providers is anticipated to have a positive impact on membership growth in 2020 that has experienced a slight decrease from 2018 to 2019.

In summary, CFHP is very optimistic for 2020 and beyond as we improve, grow and succeed in our current lines of business while exploring other opportunities which could diversify the organization.

#### Financial:

CFHP generated Net Income at year-end of \$1,079,826 compared to budgeted Net Income of \$4,117,343, representing an unfavorable variance of (\$3,037,516). Included in Reported YTD Net Income is a net favorable Premium Deficiency Reserve adjustment of \$210,000, consisting of positive \$1,765,000 pertaining to losses recognized in December 2018 under the STAR Kids line of business for the State Fiscal Year contract period September 2018 through August 2019, and negative (\$1,555,000) pertaining to losses recognized in September 2019 under the ERS Commercial contract for the State Fiscal Year contract period September 2019 through August 2020.

Actual YTD 'Run Rate' Net Income is \$7,167,283, while identified prior period adjustments included in Reported YTD Net Income are negative (\$6,087,456). Prior period adjustments YTD include negative true-ups to prior year IBNR and IBNR margin estimates of (\$5,999,435) and a negative accrual for FQHC wrap payments liability to HHSC of (\$3,460,295), partially offset by positive prior year reinsurance recoveries of \$1,108,910 and positive prior period provider cash recoveries received of \$2,263,364.

The determination of the incurred-but-not-reported (IBNR) medical expense liability continued to be challenging in the monthly and year-end financial reporting process. The following have contributed to aberrations in the historical paid claim

completion factors utilized in the determination of the IBNR medical expense liability:

- 1) June 2019 conversion to QNXT:
  - a. Configuration and other conversion errors resulted in no claim payments being issued until late June. This delay in processing claims created a significant backlog of claims inventory.
  - b. QNXT incorporates previously unavailable front-end edits that validate the claim submissions for accuracy, completeness, and regulatory compliance. Upon go-live, a significant number of claims rejected due to configuration errors in the front-end edits and/or provider submission errors. These initially rejected claims are now being aggressively reprocessed.
- 2) CFHP made the business decision to terminate NetMark, an outsourced claims processing subcontractor. This loss of claims processing capacity contributed to a secondary build-up of backlogged claims inventory.

While a large percentage of the initial QNXT configuration and interface errors have now been remediated, there remains a meaningful outstanding inventory of claims awaiting processing and payment. The Claims Department has aggressively hired and trained additional temporary staff, and significant progress is being made to reduce the outstanding claims inventory.

In the interim, Finance staff utilized line of business specific trended and seasonally adjusted medical expense per-member-per-months to develop the IBNR medical expense liability estimates for June through December (QNXT months of service), rather than rely on the IBNR tool's historical completion factor projections. This approach was discussed in detail with the external Milliman actuaries, who concur with its application. CFHP Finance believes the current medical expense liability estimates are adequate.

Total premiums are favorable to budget by \$15,909,077 in spite of below budget membership, due to favorable membership mix and the State Fiscal Year 2020 rate increases that went into effect September 2019.

Medicaid premiums are favorable to budget by \$1,716,753 in December 2019 due to the State Fiscal Year 2020 rate increases that went into effect September 2019, partially offset by lower than budgeted membership. Medicaid YTD premiums are favorable by \$9,582,967 in spite of unfavorable YTD membership due to favorable

membership mix and the State Fiscal Year 2020 rate increase that went into effect September 2019.

STAR Kids premiums are favorable to budget in December 2019 by \$1,985,672 in spite of unfavorable membership due to the State Fiscal Year 2020 rate increase that went into effect September 2019. STAR Kids YTD premiums are favorable by \$8,117,544 in spite of unfavorable YTD membership due to favorable membership mix and the State Fiscal Year 2020 rate increase that went into effect September 2019.

Commercial premiums are unfavorable to budget in December by (\$188,279) and YTD by (\$1,593,241) due to less than budgeted membership, a budgeting error (an anticipated September 2019 ERS rate increase was incorrectly budgeted for the full calendar year), and ERS declining to grant a rate increase upon September 2019 renewal.

CHIP/CHIP-P premiums are unfavorable to budget in December 2019 by (\$35,765) due to unfavorable membership, partially offset by the State Fiscal Year 2020 rate increase that went into effect September 2019. YTD CHIP/CHIP-P YTD premiums are unfavorable by (\$311,580) due to unfavorable YTD membership, partially offset by the State Fiscal Year 2020 rate increase that went into effect September 2019.

Milliman (CFHP's external certifying actuaries) completed an independent actuarial analysis of the HHSC and ERS Commercial State Fiscal Year 2020 (September 2019 through August 2020) final rates. This analysis projects the likelihood of profitability in the STAR Kids and CHIP lines of business and of losses in the STAR, CHIP-P, and Commercial lines of business.

Governing statutory accounting regulations allow the HHSC contracts (STAR, STAR Kids, CHIP, and CHIP-P) to be evaluated for Premium Deficiency Reserve purposes in aggregate, and under this convention, Milliman projects overall HHSC profitability.

Milliman recommended that CFHP record a Premium Deficiency Reserve of (\$1,555,000) for the ERS Commercial line of business. This Premium Deficiency Reserve is reflected as an immediate reduction of net income and the establishment of a Premium Deficiency Reserve liability that will be amortized over the ERS Commercial contract term (September 2019 through August 2020). In conjunction with the 2019 year-end financial audit, Milliman updated their Premium Deficiency Reserve analysis as of December 31, 2019 and CFHP will make any necessary

adjustment. The updated Premium Deficiency Reserve liability will be amortized on a straight-line basis over the remaining term of the ERS Commercial contract (January 2020 through August 2020).

### **Membership:**

Overall, in 2019, CFHP maintained a steady market share across all three product lines. All government product lines experienced an overall decrease in market share but none of the product lines surpassed a one percent decline. This is relatively steady compared to previous years.

CFHP saw significant growth across all product lines in the first half of 2019. The growth was attributed to a refresh in advertising and updated strategy that focused on brand recognition. This increased member election which in turn increased the rate of default assignments and resulted in increased members and market share.

During the last six months, CFHP experienced some operational issues that are believed to have contributed to the decrease in membership and market share. These challenges included: the change in core platforms from Amisys to QNXT; the gap in advertising media in the market during the ad agency RFP process; STAR Kids members aging out; the immigration related political climate; and Superior's widely recognized campaign promoting other product lines.

Despite challenges and decreases in the overall market, CFHP membership and market share remained stable across all three product lines.

2019 Market Share (%) & Membership Comparison						
	2018 Market	2018 Actual	2019 Market	2019 Actual	Change Over	Change Over
	Share	(Members)	Share	(Members)	Year	Year
STAR	41.82%	106,629	41.64%	103,523	0.18% 🔻	3,106 ▼
CHIP	55.23%	17,247	54.24%	15,871	0.99% 🔻	1,376 ▼
STAR Kids	54.69%	7,701	54.36%	7,337	0.33%	364 ▼

In 2020, CFHP is celebrating 25 years of providing much-needed health care to the residents of the Bexar County Service Area. Celebrations will include CFHP hosted community events, an advertising campaign, increased community sponsorships, increased community outreach, and participation in well-known civic events to mark this health plan's quarter-century of service.

The anniversary campaign is tentatively scheduled for April through October 2020.

The campaign will include CFHP-hosted community events, an advertising campaign, targeted community sponsorships, increased community outreach, and participation in local civic events.

### **Campaign Overview:**

The goal of the campaign is to increase brand recognition and positive perception of CFHP across all target audiences, while increasing knowledge of CFHP offerings and quality of service. To accomplish this, the campaign messaging focuses on milestones, data, and community impact.

### **Target Audiences:**

In line with CFHP's ongoing marketing strategy, the anniversary campaign targets the following three audiences:

- 1) The primary target audience focuses on mothers from households whose yearly income qualifies them for subsidized or free health care. This audience tends to be in the age range of 18 to 45 years old.
- 2) The secondary target audience comprises primary target influencers to include family members, friends, physicians, health care providers, and other people they trust, and commercially insured individuals.
- 3) CFHP's tertiary target comprises the Bexar Service Area provider business community, which includes the surrounding counties of Atascosa, Bandera, Comal, Guadalupe, Kendall, Medina, and Wilson -- plus each county's local and state government stakeholders.

## **Campaign Design:**

CFHP's goal is to be the health plan of choice. The 2019 advertising campaign theme was "The health plan you choose makes all the difference." The 2020 anniversary theme is "Thank you for choosing us."

By continuing to use derivatives of the word "choose" the advertising campaign accomplishes two things: creates a thematic thread throughout the campaigns, building on brand recognition, and informs members that they have a choice when selecting a health plan.

Saying "thank you" openly communicates gratitude, as well, and demonstrates the homegrown tone and heart of CFHP, which is a very big draw for members based on survey feedback.

The overall design is simple, easy to read at any distance or size, and emphasizes 25 years. The style of the design is meant to appeal to a young-adult demographic, who have more modern design tendencies. The design also is meant to break through the health care industry's traditional designs and stand out from the crowd.

Additionally, the predominant use of numbers in the campaign design will allow the presentation of impressive data and statistics to remind the public of the impact CFHP has had in the community. As an example, a headline might be "25 years of serving more than 700,000 members" or "More than 700,000 individuals have experienced our compassionate care."

CFHP's goal is to be the health plan of choice. The 2020 anniversary theme, "Thank you for choosing us," will increase brand recognition and a positive perception of CFHP across all target audiences, while increasing knowledge of CFHP offerings and quality of service throughout the year.



# **Quality:**

CFHP monitors the quality of the services it provides in two main ways. The first is its Healthcare Effectiveness Data and Information Set (HEDIS) results. HEDIS is a quality improvement tool that is used by more than 90 percent of America's health

plans to measure performance on important dimensions of care and service, and to identify areas of improvement. Specific efforts are focused on those HEDIS measures that Texas Health and Human Services Commission (HHSC) has deemed significant to improve health of Texans by virtue of their inclusion in the HHSC pay for performance program which has 3% of MCO premium at risk for Medicaid and CHIP.

For HEDIS 2019, which is the 2018 measurement year, CFHP improved over the previous year's HEDIS rates in all of the key STAR and CHIP HEDIS measures identified as priorities by HHSC.

CFHP outreach and education efforts in partnership with network providers resulted in improvement in timeliness of prenatal and postpartum care, counseling for physical activity and nutrition, treatment for upper respiratory infections, and child and adolescent well care for Medicaid and CHIP members.

Based on these improved HEDIS rates, preliminary calculations indicate that CFHP will not lose any of the premiums at risk. For the Commercial population, timely prenatal and postpartum visits, diabetes eye exams, and follow-up care after hospitalization for behavioral health admissions were at or above the 50<sup>th</sup> percentile when compared to other health plans across the nation that report their rates to the National Committee on Quality Assurance (NCQA).

The second way that CFHP monitors the quality of services of CFHP providers is through member and provider satisfaction surveys. The 2019 (measurement year 2018) CAHPS (Consumer Assessment of Healthcare Providers and Systems) scores, for the metric "Rating of Health Plan", CFHP remained at or above the 67<sup>th</sup> percentile when compared to other health plans across the country that report their rates to the National Committee for Quality Assurance (NCQA). National rates for "Rating of Health Plan" for the three surveys conducted in 2019 include:

- 67<sup>th</sup> percentile for Medicaid and CHIP children,
- 75<sup>th</sup> percentile for Medicaid adults,
- 95<sup>th</sup> percentile for Commercial adults.

CFHP provider satisfaction remains high. CFHP utilizes an external vendor, to assess provider satisfaction with the service they receive from the health plan. Providers surveyed included primary care physicians (PCPs), specialists and behavioral health practitioners. Overall satisfaction with CFHP remains high, with 93.4% of providers being very satisfied or satisfied with the health plan (an increase

from 92.2% for the previous survey in 2017), and 98.8% view their relationship with CFHP to be long term in nature (up from 93.7%). Key findings include:

- 91.4% were satisfied with CFHP Medical Directors, above the national average (90.4%);
- 91.5% of respondents indicated they would recommend CFHP to patients (above the previous year rate, 88.4%; above the national average, 85.2%);
- 92.6% would recommend CFHP to other providers (up from 88.7% and above the national average of 87%); and
- 95.5% indicated CFHP was committed to working with them to provide quality care (up from 91.9% and above the national average, 89.8%).

### **Operations:**

In December 2019, staff presented a status update to the CFHP Board of Directors on the continuing post-implementation efforts to stabilize QNXT.

Additionally, the Information Technology team has worked diligently to expand configuration and functionality to re-launch an analytic tool for daily usage and trending. Power BI (a Microsoft tool) is a data visualization and business intelligence tool that converts data from other data sources (QNXT) to interactive dashboards and reports.

The Data Governance Committee, comprising a multi-disciplinary team, has been tasked with researching and defining specific data points for review, approval and configuration in Power BI, to ensure all end-users are consistently utilizing accurate data when monitoring operational productivity.

CFHP owns and maintains the Power BI servers and data structures. Incorporating risk scores and risk stratification techniques for probability, tolerance, and cost impact are foundational for CFHP to enhance our population health management program. This added functionality is scheduled for activation later in the year.

The Power BI tool allows staff to visualize the overall claims productivity on a daily basis. The tool now captures the volume of new claims and appeals activity, allowing management the ability to shift resources to meet daily demands.

The QNXT claims lifecycle remains the highest priority for the team. The Power BI tool also tracks the aging of claims inventory, thus allowing the team advance notice to course-correct and focus on reducing the manual adjudication period. The

following processes continue to remain the focus based on internal assessment of workflow and feedback by our provider community:

- Electronic Data Interchange (EDI)
- QNXT Claim Workflow and Lifecycle
- Quality and Accuracy of Claims Processing

# **QNXT Outcomes and Claims Analysis:**

With support from the University Health System Chief Information Officer, a third party vendor, IGNW was secured to facilitate an objective assessment of the current state and opportunities for improvement. Based on the initial phase of the assessment critical action items were accomplished in 2019 with positive results:

- Reduced QNXT system delays by removing performance degradation of scanning tool which stabilized record inputs for data integrity;
- Reduced the number or urgent and high priority issues identified by CFHP technical team;
- Reduced the need to re-enter claims and the number of duplicated claims activity resulting from daily process improvement efforts;
- Introduced new issues tracking and ownership tools to drive performance of tasks and accountability for completion in a transparent manner;
- Increased review cycles to the daily task list to quickly identify highest priority tasks for Cognizant and CFHP; and
- Instituted a set of performance indicators for continuous monitoring.

The Information Technology team continues to engage with third-party vendor, IGNW, to assess new opportunities for improvement and develop metrics to monitor performance on a continuous basis proactively, rather than reactively.

The QNXT implementation, from initial kickoff through post go-live stabilization, has been an ongoing learning experience providing CFHP the opportunity to assume control of the remediation efforts while continuing to hold Cognizant accountable for timely solutions.

# <u>Operational Strategies – Lean Methodology:</u>

In January 2020, the Claims Department began its operational excellence journey by launching a Lean A3 event, a problem-solving technique. The team is currently conducting observations of daily workflows to identify areas of processing

inconsistencies and ultimately achieve "standard work" for all claims examiners. The anticipated completion period for the Lean A3 event is scheduled for early April. By incorporating Lean Methodology, the claims function will dramatically improve overall performance in a relatively short timeframe.

CFHP plans to employ the Lean Methodology across the organization. Several key benefits of functioning as a Lean organization at CFHP include

- Align frontline staff and management by aligning goals and outcomes
- Improve employee, provider, and member satisfaction
- Reduce significant backlogs by focusing on process bottlenecks and inefficiencies
- Allocate resources more effectively by focusing on strategic goals
- Decrease throughput times and cycle times for a process
- Reduce unnecessary complexity in processes and eliminate non-value-added activities
- Reduce variation in quality and results

The team visit to the Toyota Motor Manufacturing plant on February 24, offers awareness and understanding into the concepts of Lean Methodology as they will be applied throughout CFHP.

"Gemba" also will be a standard function at CFHP. Gemba is leadership rounding "where the work is done" with the intent to discuss current progress and issues on daily metrics. Gemba includes the use of performance boards. These performance boards keep frontline staff accountable for:

- Tracking process measures daily
- Identifying new opportunities for success
- Conducting root cause analysis when required

Using Lean Methodology techniques and Power BI as the sources of truth for data retrieval and analysis, the team will have the ability to seek solutions that will prove to enhance our operational strategies in 2020.

# This annual report is provided for information only. No action is required.

Priti Mody-Bailey, MD

Chief Medical Officer

Community First Health Plans

Daverick Isaac

Chief Financial Officer

Community First Health Plans

<del>\_\_\_\_\_</del>

Theresa Scepanski, Interim President/Chief Executive Officer Community First Health Plans George B. Hernández, Jr. President/Chief Executive Officer University Health System



### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

#### **Report on Recent Recognitions and Upcoming Events**

### **Recognition**

- University Health System' Extracorporeal Membrane Oxygenation (ECMO) program has received the Gold Level Extracorporeal Life Support Organization (ELSO) Award for Excellence in Life Support. The ELSO award recognizes programs worldwide that distinguish themselves by having processes, procedures and systems in place the promote excellence and exceptional care. University Health System's ECMO program was recognized as achieving the highest level of performance in three categories: Promoting the mission, activities and vision of ELSO; Using the highest evidence-based quality measures, processes and structures; and training, educating, collaborating and communicating ELSO guidelines that contribute to a healing environment for families, patients and staff. This designation is valid for three years and will be officially awarded the ELSO's first virtual conference later this year.
- Optum has renewed our transplant services Center of Excellence (COE) designations for 2020. Optum is the largest US transplant services network and is owned by UnitedHealth Group. These renewed COE designations include Adult Liver, Adult Kidney, Adult Lung, and Pediatric Kidney

# Media Highlights – June 2020

**Major topics:** The Health System's response to COVID-19 surge, Reflections of staff working with COVID-19 patients, Universal testing of pregnant women at UHS shows high rate of asymptomatic positives, Convalescent plasma, Pros and cons of sending kids back to school, younger people getting the virus, record heat brings heat illnesses, how to know when it's OK to go back to work after having COVID-

19, Importance of wearing masks, Impact of COVID-19 surge on the ER at University Hospital, SA cases rising highest in the state, Army sends medical personnel, It is safe to come to the ER, Hospitals straining to manage growing number of COVID-19 patients, Epic go-live, Making the best homemade mask, Second hand smoke and COVID-19, Cystic Fibrosis patient offers social distancing advice, How to care for a loved one with COVID-19, University Health System assisting universities with health and safety plans, Master hornists in Boerne holds online classes and concerts to raise money for University Health System Foundation COVID-19 response fund, Stay at home for 4th of July, University Hospital turns rehab unit into a med/surg floor, University Health System CMO appeals to the community to help reduce the spread, Dr. Ronald Stewart OpEd on living in a time of COVID-19 requires responsibility and care for others to protect freedoms, SA #5 on Top "hot spots" for COVID-19, Understanding COVID-19 data, Remdesivir, University Health System' Why I Wear a Mask campaign, Responding to Governor's order to suspend elective surgeries that require an overnight hospital stay. Lungs aren't the only organ damaged by COVID-19, Mask myths, How treating COVID-19 is evolving, Hospital visitation policy.

### **Key PR metrics:**

Number of print/website placements: 103

Total reach: 98.1 million Twitter Echo: 2, 259 Facebook Echo: 83,335

Number of broadcast stories: 87

# **Upcoming Events:**

Due to the ongoing pandemic, most special events have been cancelled or postponed. University Health System staff is working closely with our community partners to help them find ways to successfully host virtual events.

University Health System is proud to support our community and important causes by sponsoring the following nonprofit virtual & drive- thru events:

- Councilwoman Rebecca Viagran 8<sup>th</sup> Annual Back-to-School Giveaway partnering with Food Bank Drive-Thru , Saturday, July 28<sup>th</sup>.
- Councilman Roberto Trevino's Back to School Wellness Fair Drive-Thru, Saturday, August 1st.

- San Antonio Association of Hispanic Journalist Scholarship Gala, Saturday, August 15<sup>th</sup>.
- Make a Wish 4th Annual Walk for Wishes, Sunday, August 16.
- The Komen More than Pink Walk is also going to be a virtual event. It will be held on September 26. University Health System is a sponsor and our staff can sign-up without a registration fee. We are currently in 6<sup>th</sup> place and planning now to encourage staff to participate and fundraise. Cancer does not stop for COVID-19.

This report is provided for informational purposes only.

Leni Kirkman	George B. Hernández, Jr.
Senior Vice President	President/Chief Executive Officer
Strategic Communications &	
Patient Relations	



### BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

**Tuesday, July 28, 2020** 

#### **University Health System Foundation Update**

#### **COVID-19 Response Efforts:**

The San Antonio community continues to demonstrate its support for University Health System and its dedicated staff. As of July 16, the Foundation staff has coordinated:

- Grants and monetary donations totaling more than \$111,000
- Direct patient assistance of more than \$13,000 (lodging, HEB cards and Valero gas cards)
- In-Kind gifts totaling more than \$386,000, including
  - o 88,185 masks, 107,033 gloves and 1,237 other personal protective equipment and 80 Teddy bears
- More than 165 food deliveries of more than 14,145 meals
- About 15,000 snacks and beverages

One donation of note: French hornist Marc Lumley, a local retired middle school band/orchestra director, used his talent and musical connections to support the University Health System Foundation COVID-19 Response Fund. He and several of his colleagues offered online master classes for a small donation. At the end of June, they organized musicians across the world to play two online concerts. Mr. Lumley presented the Foundation with a check for \$10,000 earlier this month. We told Express-News features writer Melissa Stoeltje about Mr. Lumley and she wrote this wonderful story.

### **Gala and Special Events:**

The 2020 Medical Miracles Gala will be held as an online event on Friday, September 25. The featured story involves the country's first paired living donor liver transplantation, which allowed for two patients in need of new livers to receive

a portion of a liver from two generous donors they had never even met. The two donors and two recipients are this year's honorees. In June, Dr. Francisco Cigarroa, director of the University Health System Transplant Center secured a \$50,000 presenting sponsorship from Cisco. In addition to the sponsorship, Cisco will also provide technical expertise, as the virtual event will be hosted on its WebEx Events platform. As the Foundation team and Foundation Special Events Committee continue to plan this event in the midst of a pandemic, their focus is on the important goal to create an endowment for people willing to save the life of their loved one in need of transplantation but who may not have appropriate health coverage or financial resources to do so.

#### **Recent Grants:**

	Award Amount
Prolacta Bioscience Foundation	\$100,000
American Cancer Society - COVID-19 Transportation I	\$3,000
Whataburger- Cancer Care Fund	\$5,000
Pampers- COVID Relief for Angel Eye	\$25,000

# **Employee Giving Program and Lifeline Grants:**

A modified Employee Giving program was held during the month of June under the leadership of Co-Chairs: Bexar County Hospital District Police Chief AJ Sandoval and Virginia Mika, Executive Director of CareLink. They exceeded expectations by raising more than \$240,000 to benefit programs to support University Health System patients and staff.

The Foundation awards approximately \$100,000 annually for innovative programs through the Lifeline Grants program, funded through employee giving. The new application period opens August 4. The 2019-2020 Lifeline Grant recipients turned in their mid-year reports in July. It is impressive to see how many of these grant recipients have found creative ways to implement their project despite the pandemic.

# **Scholarships**:

The Nursing and Allied Heath Scholarship Program, supporting University Health System employees pursuing nursing or other targeted allied health degrees, is currently underway with final recommendations and scholarship awards to be announced later this summer. Through the Our Sons and Daughters program, 24 children of University Health System staff members each received a \$2,000 scholarship as they graduated from high school with plans to pursue higher education.

### **Lifeline Heroes:**

The Foundation's new grateful patient program began its first pilot program in May. Materials include information on the Foundation, along with how to make a gift in honor of a special healthcare professional or team, or in gratitude for care received.

### Women's and Children's Hospital Capital Campaign Re-Boot:

The capital campaign, put on hold due to COVID-19 this spring, is set to resume in late August with campaign leadership recruitment. Staff and the Major Gifts Committee have completed campaign materials, finalized the list of naming opportunities, completed the initial prospect list and updated the campaign timeline.

This report is provided for information only. No action is required.

Leni Kirkman George B. Hernández, Jr.

Sr. Vice President President/Chief Executive Officer

Strategic Communications & Patient Relations

**Interim Foundation President** 

# BOARD OF MANAGERS REPORT

July 28, 2020



# COVID-19 EFFORTS

# BUILDING LIFELINES. TOGETHER.

- COVID-19 Grants and Donations: \$111,907
- Direct Patient Assistance: More than \$13,000 (Lodging, HEB, Valero)
- In-Kind gifts: \$386,000
  - 88,185 masks, 107,033 gloves, 1,237 other PPE, 80 teddy bears
- 171 deliveries of 15,620 meals
- About 15,000 snacks and beverages
- 247+ new "friends of the Foundation"
- Board Member Challenge Results





# MEALS AND PPE









# BUILDING LIFELINES. TOGETHER.







# FROM THE FAMILY OF BABY JADE

BUILDING LIFELINES

# Thank you, H-E-B!

TELL US HOW THEIR GIFT IMPACTED YOU AND YOUR FAMILY.

(FEEL FREE TO USE THE REVERSE SIDE IF NEEDED!)

Our baby was coming, carly, we weren't
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Your NAME Gustava & Perla Mariz
EMAIL
PHONE NUMBER
78852

SEND YOUR STORY TO THE UNIVERSITY HEALTH SYST

AND WE'LL SHARE YOUR GRATITUDE WITH OUR FRI

4502 MEDICAL DRIVE, MS 1-2 | SAN ANTON



# Thank you, Valero!

TELL US HOW THEIR CIFT IMPACTED YOU AND YOUR FAMILY.

(FEEL FREE TO USE THE REVERSE SIDE IF NEEDED!)



The hospital set us up with a hotel, a ItEB & Valero Gift Card One thing less to worry about as we left the hospital but our baby at the NICU. 10 days later we are going home with our baby girl, Jade.

Thank you!

Muriz family

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DRIVE. MS 1-2 | SAN ANTONIO, TX 78229





# **OTHER GRANTS**

# BUILDING LIFELINES. TOGETHER.



Submitted/Pending Grant Application	Amount Requested
SA Area Foundation - Teen Health Clinic Incentives	\$50,000
Impact SA- Capital Gift Naming Women's Center Family Area	\$75,000
Baptist Foundation - Nurturing Program	\$196,617
American Cancer Society - COVID-19 Transportation (7/15/20)	Minimum \$5,000
Grant Awards	Award Amount
Prolacta Bioscience Foundation	\$100,000
American Cancer Society - COVID-19 Transportation I	\$3,000
Whataburger- Cancer Care Fund	\$5,000
Pampers- COVID Relief for Angel Eye	\$25,000



# BUILDING LIFELINES. TOGETHER.

- Our Sons and Daughters Scholarship Program
  - 46 Applicants
  - \$2,000 scholarships to 24 children of staff members
- Nursing and Allied Heath Scholarship Program, currently underway







# SPECIAL EVENTS IN THE "NEW NORM"



- Medical Miracles Gala: Sept. 25 virtual event
- Living Donor Assistance Fund
- New sponsors:
  - Cisco Presenting Sponsor \$50,000
  - Joeris & JE Dunn \$30,000
- Gala Commitments total: \$715,400
- Actual Paid: \$465,000
- Follow up continues; no requests for refunds





# EMPLOYEE GIVING PROGRAM



- June 1 July 1
- Co-Chairs, Chief AJ Sandoval & Virginia Mika
- 65 Ambassadors
- 1,210 donors/ avg gift: \$249 (2019: \$203)
- New recurring donors: 72 (new total: 522, 30 increased their pledge amount)
- Pledges: \$241,287 (2019: \$262,506.10)





# BUILDING LIFELINES. TOGETHER.



