



**BEXAR COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS**

Tuesday, April 27, 2021
6:00 p.m.
Cypress Room, University Hospital
4502 Medical Drive
San Antonio, Texas 78229

MINUTES

BOARD MEMBERS PRESENT:

Ira Smith, Vice Chair
Margaret Kelley, M.D., Secretary
Roberto L. Jimenez, M.D., Immediate Past Chair
Anita L. Fernandez
L.P. Buddy Morris
Jimmy Hasslocher

BOARD MEMBERS ABSENT:

James R. Adams, Chair

OTHERS PRESENT:

George B. Hernández, Jr., President/Chief Executive Officer, University Health
Elizabeth Allen, Director, External Communications/Corporate Communications, University Health
Bryan J. Alsip, MD, Executive Vice President/Chief Medical Officer, University Health
Edward Banos, Executive Vice President/Chief Operating Officer, University Health
Antonio Carrillo, Executive Director, Supply Chain Management, University Health
Andrea Casas, Vice President/Chief Human Relations Officer, University Health
Francisco Cigarroa, MD, Director, University Transplant Center
Ted Day, Executive Vice President/Strategic Planning & Business Development, University Health
Isaac Daverick, Vice President/Chief Financial Officer, Community First Health Plans, Inc.
Leni Kirkman, Executive Vice President/Chief Marketing, Communication, and Corporate Affairs
Officer, University Health
William Henrich, MD, President, UT Health San Antonio
Rob Hromas, MD, Dean, Long School of Medicine, UT Health San Antonio
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health
Jennifer Milton, Chief Administrative Officer, University Transplant Center
Judy Razo, Director, Corporate Communications & Marketing, Community First Health Plans, Inc.
Serina Rivela, Vice President/General Counsel, Legal Services, University Health
Michael Roussos, Administrator, University Hospital
Don Ryden, Vice President/Project, Design & Construction, University Health
Theresa Scepanski, President/Chief Executive Officer, Community First Health Plans, Inc.

Board of Managers Meeting

Tuesday, April 27, 2021

Page 2 of 24

Travis Smith, Deputy Chief Financial Officer, University Health
Rajeev Suri, MD, Professor/Department of Radiology, UT Health San Antonio; and President/Medical-Dental Staff, University Health
Roberto Villarreal, MD, Senior Vice President/Chief Analytics Officer, University Health
Jessica Ruud, Vice President/Chief Performance Officer, Texas Organ Sharing Alliance
And other attendees.

CALL TO ORDER:

Mr. Smith called the meeting to order at 6:07 pm.

INVOCATION AND PLEDGE OF ALLEGIANCE:

Ms. Serina Rivela introduced Ms. Julie Rowe, University Health Chaplain, for the invocation, and Mr. Smith led the Pledge of Allegiance.

PUBLIC COMMENT: None.

SPECIAL REPORT: CENTER FOR LIFE UPDATE - (MICHAEL ROUSSOS/FRANCISCO CIGARROA, M.D./JENNIFER MILTON)

SUMMARY: Mr. Roussos greeted the Board members. He introduced and yielded the floor to Dr. Francisco Cigarroa, Medical Director; Ms. Jennifer Milton, Chief Administrative Officer, of the University Transplant Center; and Ms. Jessica Rudd from the Texas Organ Sharing Alliance, for a one-year update on the Center for Life (CFL), home of the first dedicated Organ Donation Biorepository in the country, collecting tissue and blood samples and data from donors who authorize research, to use in basic science research and collaborations to study an array of diseases, including liver cancer of particular concern in this region. The CFL is located on the campus of University Hospital, 11th floor, Horizon Tower. Dr. Cigarroa reviewed the timeline beginning in July 2019, when the Board of Managers approved the concept and business plan for creating the CFL. The space for the center was modified and prepared with specialized organ recovery equipment and furniture. The location of the CFL was selected due to its proximity to cardiology and pediatric floors. The CFL opened its doors in February 2020, and was featured in the San Antonio Express-News with a quote from the Chaplain who conducted the blessing at the grand opening, “This is a sacred place,” the few words that Dr. Cigarroa will never forget when he arrives at the CFL. It is a special and compassionate place for the donors and recipients. The CFL now serves as a national model for other hospitals. After obtaining Board approval, the transplant staff immediately went to work to implement phase one (Plan A), a transfer of University Hospital cases to start, and also began a phase-in requesting local regional transfers. In March 2020, the Center had its first case and three weeks later implemented phase two (Plan B), which entailed transferring brain dead donors to the CFL, from other hospitals in the region including hospitals in south Texas. Dr. Cigarroa yielded the floor to Ms. Jennifer Milton, who reported that the CLF collaborates with many agencies: UT Health SA, Texas Organ Sharing Alliance, GenCure Tissue Services, Miracles in Sight, San Antonio Eye Bank, and the Texas Donor Network. Both Dr. Cigarroa and Ms. Milton reiterated that the CLF has no role in authorization for organ, eye or tissue donation. The CLF’s mission is to act on authorization obtained to ensure every donors’ wish is carried out to the fullest. The total number of

donations to the CFL from date of inception is 557. The breakdown is as follows:

- Organ Donors, 98
- Transferred Organ Donors, 62
- Organs Recovered for Transplant, 387
- Tissue Donors, 262
- Transferred Tissue Donors, 219
- Corneal Donors, 197
- Total Recipient Impact, 18,466
- Days Open 419

The CLF has improved family experience through access to a safe, peaceful, and dedicated environment for organ recovery. A representative of the Texas Organ Sharing Alliance was quoted as saying that “Families feel relieved. They feel safe and as if the donor is going to a special place.”

Ms. Milton displayed a list of hospitals that transfer potential donors to the CFL:

Southern Region:

South Texas Health System Heart, South Texas Health System McAllen, Rio Grande Regional, and VB-Harlingen Medical Center

Central Region:

Brook Army Medical Center, Baptist Medical Center, Christus Medical Center, Christus New Braunfels, Doctors Hospital – Laredo, Laredo Medical Center, Methodist Stone Oak, Mission Trail, North Central Baptist, Northeast Baptist, Resolute Health, St. Luke’s Baptist, and Texas Vista Medical Center

Northern Region:

Baylor Scott & White Lakeway, Baylor Scott & White Round Rock, Baylor Scott & White Hillcrest, Advent Health Center Texas, Providence, Seton Hayes, Seton Medical, Seton Williamson, Shannon, Shannon South, St. David’s South Austin, St. David’s North Austin, St. David’s Round Rock, St. David’s Medical.

And, she provided a breakdown of the various reasons potential organ donors are not transferred to the CFL:

- Pediatric/Donation after Cardiac Death (DCD), 66 (53.66%)
- Hospital Declined Transfer, 27 (21.95%)
- Family Declined Transfer, 18 (14.63%)
- TOSA Decision, 6 (4.88%)
- Unstable Donor, 6 (4.88%)

The two CFL Intensive Care Unit (ICU) Medical Directors are Varun Goyal, MD (Critical Care Anesthesiology Intensivist) and Ashley McGinity, MD (Trauma), both described by Ms. Milton as “selfless and committed.” Dr. Tommye Austin serves as Chief Nursing Officer, Operating Room Executive Director, Lisa Devane, provides Operating Room Education; Nurse Michael Payne provide ICU care; Meenaksi Rani, MD, conducts research, Ms. Jennifer Milton supports tissue recovery, and Nurse Erica Zuniga provides Operating Room care. Donation

agencies are the Texas Organ Sharing Alliance, GenCare, and the San Antonio Eye Bank.

The Kronkowsky Foundation awarded Dr. Cigarroa a grant because they were so moved by the CFL'S mission, the volume of collaborators, and the ability to take the same number of donors but save and touch so many more lives. As a result, Kronkowsky Foundation is funding the research and education mission of the CFL, as well as on-demand audio-visual equipment in the operating rooms where transplant surgeons across the country can watch the University Transplant Center team procure a set of lungs without actually travelling, saving approximately \$30,000 per transplant. Kronkowsky also funds an FTE statistician for the Principal Investigator, Dr. Cigarroa.

Dr. Cigarroa is the Chair of Transplantation at UT Health and he shared that "The single biggest innovation in our program's modern history is the Center for Life," noting it was designed from input from around the country to improve donation, increase transplants, expand novel therapies and create education.

Ms. Milton reviewed University Transplant Center's milestones this past year:

- First in region to transplant hepatitis C + organs into hepatitis C- recipients followed by treatment/cure: 47 cases to date.
- First in the nation to perform a live liver paired donation exchange: 4 cases to date
- First in region to offer liver pulsatile perfusion technology
- First post COVID-19 positive lung transplant in South & Central Texas
- Celebrates 50th Anniversary, 5,000th transplantation, 300th pediatric case performed by a team of all women.
- 2021 record setting transplant activity
- Recipient of Medical Miracles proceeds to establish Living Donation Assistance Fund in excess of \$500,000.

The University Transplant Center had another successful year of innovation and transplantation. Mr. Roussos proudly reported that each adult program is in the top 5 in the country for survival outcomes; living liver program is number 1; kidney program is number 2, liver program is number 3, and lung transplant program is number 4. An all-female team also recently performed the 5000th transplant during its 50th anniversary year, which implies diversity, leadership, and an incredible operating room team. Dr. Cigarroa expressed his appreciation for the Board's continued support

RECOMMENDATION:

This report was provided for informational purposes only.

ACTION:

No action by the Board of Managers was required.

EVALUATION:

Dr. Jimenez asked if the CFL had recruited the support of Catholic bishops since there is some hesitancy to donate within the Hispanic community, although the church encourages organ donation. According to Ms. Jessica Rudd, the majority of organ donors in this area are Hispanic, and TOSA does very well educating the community, which is their top priority. TOSA is fortunate to have Spanish speaking coordinators, which appear to bring great comfort to a donors' loved ones. Dr. Cigarroa noted that the living liver donor program has been very well received by the Hispanic community. At University Hospital, the transplant program has "living donor champions," individuals who are completely focused on educating donors, recipients, and their loved ones; and social media has been helpful in this regard. It is very encouraging, and it makes Dr. Cigarroa proud,

to know that Hispanics have stepped forward with living liver transplant donations. The transplant team is going to publish a paper soon on this same issue. Dr. Kelley described the CFL as wonderful and fascinating. She is also aware how difficult it has been, on a national level, to improve organ donation among the African American community. Dr. Kelly asked about the meaning of the term “deceased circulatory.” Dr. Cigarroa explained that the term is used when there is an absence of brain circulatory. The CFL’s premise is that donation be made when a patient’s heart stops. When there is a patient in deceased circulatory condition, the teams are called in and the patient is cared for by a critical intensivist, an anesthesiologist. When the patient’s heart stops, after 3 to 5 minutes, the procurement team is called and the team is actually able to save and use that patient’s liver within 30 minutes of cardiac cessation. Board members thanked the transplant team for their presentation and for the work they do.

FOLLOW-UP: None.

SPECIAL RECOGNITION: QUARTERLY EMPLOYEE RECOGNITION AWARDS -

(ANDREA CASAS/LENI KIRKMAN)

Ms. Andrea Casas, Vice President/Chief Human Resources Officer; and Ms. Leni Kirkman, Executive Vice President/Chief Marketing, Communications, and Corporate Affairs Officer, virtually presented the employees of the first quarter 2021 for recognition by the Board of Managers:

Professional: (Nursing)	Liesl Boltruczyk Staff Nurse II, Medicine Acute
Professional: (Non-Nursing)	Kevin Garibay Network Engineer, Technical Services
Management:	Juanita Murray Director, Quality Outcomes, Quality Improvement
Technical:	Arturo Vasquez Medical Surgical Technician, Clinical Decision Unit
Clerical	Joe Mancillas Patient Access Leader, Admissions
Service:	Jonathan Avila Police Officer, Protective Services
Volunteer:	Ellen Szecsy Volunteer, Volunteer Services
Provider:	Illeana Silva, MD University Medicine Associates, Westgate Pediatrics

Board of Managers Meeting

Tuesday, April 27, 2021

Page 6 of 24

Team: Incident Management Response Team
Jonathan Avila, Ovidio Ramirez Jr, Jesse Rodriguez,
Ernest Ramirez, Robert Johnson

All of this year's quarterly recipients will be special honored guests at the Annual Employee Recognition Awards Ceremony. 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.

APPROVAL OF MINUTES OF PREVIOUS MEETING(S): MARCH 23, 2021(REGULAR MEETING) AND MARCH 30, 2021 (REGULAR MEETING)

SUMMARY: The minutes of the regular meetings of March 23, 2021, and March 30, 2021 were submitted for Board approval.
RECOMMENDATION: Staff recommends approval of the minutes as submitted.
ACTION: A **MOTION TO APPROVE** staff's recommendation was made by Mr. Hasslocher, **SECONDED** by Mr. Morris, and **PASSED UNANIMOUSLY**.
EVALUATION: None.
FOLLOW-UP: None.

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

SUMMARY: In follow up to Dr. Kelley's concerns last month regarding the lack of African Americans admitted to the School of Medicine and the various physician residency programs, Dr. Henrich reported that he has assembled the data from all across the UT Health campus and is ready to make a presentation to the Board of Managers as soon as Dr. Scott Jones, Dean for Graduate Medical Education is available to join him. He'd like to share what UT Health has done, is doing, where UT Health stands currently, and how that compares with other health science centers and schools of medicine across the country. Dr. Kelley appreciates the interest and follow up and looks forward to the presentation. He yielded the floor to Dr. Hromas who reported that the next incoming class of medical students is comprised of 233 students, with an average GPA of 3.9 and average MCAT score of 518, which is outstanding. Thirty-three (33) percent are minorities, and forty-nine (49) percent are women. There would not be residency programs without University Hospital since two thirds of the medical students train here. Dr. Jimenez requested a presentation by medical students to learn about their experience at University Hospital. During the pandemic in 2020, medical students raised 300 units of blood, answered telephones at University Hospital for countless hours, they all pitched in when their hospital rotations were suspended. They are mission-driven and proud to work in a hospital that serves all regardless of their ability to pay. Dr. Hromas thanked the Board their support of residents and medical students.
RECOMMENDATION: None.
ACTION: This report was provided for informational purpose only.
EVALUATION: No action was required by the Board of Managers.
FOLLOW-UP: Presentation by medical students as requested by Dr. Jimenez.

CONSENT AGENDA – JIM ADAMS, CHAIR

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

SUMMARY: Pursuant to Article III, Section 3.3-1 of the Medical/Dental Staff Bylaws, initial appointments and reappointments to the Medical/Dental staff shall be made by the Board of Managers. The Board of Managers shall act on initial appointments, re-appointments, or revocation of appointments only after there has been a recommendation from the Executive Committee. The Credentials Committee met on March 29, 2021, and reviewed the credential files of the individuals listed on the Credentials Report and the Professional Performance Evaluation Report. In its meeting of April 6, 2021, the Executive Committee of the Medical-Dental Staff approved the Credentials Committee Report and recommends approval of clinical privileges by the Board of Managers for the providers listed in attachments provided to the Board.

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

SUMMARY: As part of continuous quality improvement, and in alignment with Joint Commission standards, University Health's Professional Staff Services Department monitors the clinical privileges of all privileged providers through the Professional Practice Evaluation process. Professional Practice Evaluation is a process whereby Medical-Dental staff member(s) are evaluated in regards to his/her competency and professional performance. New privileges, results of Peer Review, and assessment of Supervision are all examples of Professional Practice Evaluation. Also in alignment with Joint Commission standards, the Professional Staff Services Department maintains Delineation of Privileges (DOP) for the Medical-Dental Staff. The Delineation of Privileges is a process in which the organized Medical-Dental staff evaluates and recommends an individual practitioner be allowed to provide specific patient care services with well-defined training criteria. The Credentials Committee met on March 29, 2021, and reviewed proposed revisions to Delineation of Privilege and the Professional Performance Evaluation Reports and Forms. In its meeting of April 6, 2021, the Executive Committee of the Medical-Dental Staff approved the following:

1. Focused/Ongoing Professional Performance Evaluation Report
2. Delineation of Privileges
 - a) University Health
 - i) Advance Practice Professional (Revised)
 - ii) Certified Nurse Midwife (Revised)
 - iii) Pediatrics/Critical Care (Revised)
 - iv) Physician Assistant (Revised)

The Executive Committee of the Medical-Dental Staff recommends approval by the Board of Managers.

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN APPOINTMENT TO THE UNIVERSITY HEALTH FOUNDATION BOARD OF DIRECTORS - JIMMY HASSLOCHER, CHAIR, NOMINATING COMMITTEE

SUMMARY: The Board of Managers, as the governing body, shall approve appointments to the Board of Directors of the University Health Foundation, a 501(c)(3) charitable organization founded in 1983 to solicit, receive and maintain funds

exclusively for the benefit of University Health and the community served through its charitable mission.. On April 14, 2021, the University Health Foundation Board of Directors approved the nomination of Dr. Mahendra Patel to join the Foundation Board. Dr. Patel was invited to serve on this Board due to his accumulated experience in philanthropy locally, and in other countries. University Health Foundation Board of Directors request consideration by the Board of Managers' Nominating Committee to appoint Dr. Patel to the University Health Foundation Board. On behalf of the Board's nominating committee, Mr. Hasslocher recommends Board approval.

CONSIDERATION AND APPROPRIATE ACTION REGARDING THE 1ST QUARTER 2021 INVESTMENT REPORT — ROE GARRETT/REED HURLEY

SUMMARY: Staff provided copies of the Investment Portfolio Summaries for University Health and Community First Health Plans, Inc., invested funds for the first quarter of 2021. In total, the value of all invested funds as of March 31, 2021 was \$1,651,573,351 consisting of University Health, Project, Certificate and Community First Funds. The reports include all information required by the Texas Public Funds Investment Act. University Health's and Community First's portfolio reports were provided separately for the Board's review. The portfolios earned \$1,746,347 in interest income in the first quarter, a significant decline from \$6,575,534 in the same period a year ago that reflects the collapse in interest rates following the onset of the pandemic. The portfolio's unrealized gain declined to \$3,294,947. This information was presented for approval by the Board of Managers.

CONSIDERATION AND APPROPRIATE ACTION REGARDING PROFESSIONAL SERVICES AGREEMENTS WITH THE FOLLOWING ORGANIZATIONS FOR THE RYAN WHITE PROGRAM PART B SERVICE DELIVERY AND STATE REBATE, SERVING HIV AFFECTED CLIENTS, AND FUNDED THROUGH THE TEXAS DEPARTMENT OF STATE AND HEALTH SERVICES — ROBERTO VILLARREAL, MD

Ryan White Program funds are administered by the U.S. Department of Health and Human Services, Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau (HAB). Grant funding is made available through federal funding directly to Bexar County; additional funds are available through Texas Department of State Health Services (DSHS). The Administrative Agency administers the funds by contracting with health care providers and non-profit agencies to provide services to affected individuals. This contract will facilitate access to medical care for HIV/AIDS-affected patients residing in the San Antonio Transitional Grant Area, to include the following counties: Bexar, Comal, Guadalupe and Wilson; and Health Service Delivery Area of San Antonio which includes: Atascosa, Bandera, Bexar, Comal, Frio, Gillespie, Guadalupe, Karnes, Kendall, Kerr, Medina and Wilson. The Ryan White Grants consist of multiple parts, with each part having its own budget and objectives. Part B Service Delivery and State Rebate Programs include the following categories during fiscal years 2021-22: AIDS Pharmaceutical Assistance (Local); Early Intervention Services; Emergency Financial Assistance; Food Bank/Home Delivered Meals; Health Insurance Premium Cost Sharing Assistance; Medical Case Management; Medical Transportation Services; Mental Health; Non-medical Case Management; Outpatient Ambulatory Health Services; Substance Abuse (Outpatient); and Referral for Healthcare and Support Services. The term for both Part B Service Delivery and State Rebate Agreements is April 1, 2021 through March 31, 2022.

ALAMO AREA RESOURCE CENTER TO PROVIDE SERVICES INCLUDING MENTAL HEALTH, MEDICAL NUTRITION AND WRAP-AROUND SERVICES

SUMMARY: The Alamo Area Resource Center (AARC) was founded in 1990 to assist in meeting needs of individuals who face life threatening diseases, including but not limited to HIV in Bexar County and surrounding areas. AARC has provided housing, housing case management and housing placement for years and served hundreds of individuals and families in the San Antonio HSDA. AARC provides for, but is not limited to, referral for healthcare and support services, pharmaceutical assistance; medical and non-medical case management, medical nutrition, mental health, and emergency financial assistance services to enable clients receive necessary care for HIV/AIDS. This a new contract with the AARC for wrap-around care model services with a holistic approach to treatment. This includes medical providers, a primary provider, social workers, mental health counselors, housing specialists, and supportive services on-site. They help clients by managing all aspects of living with HIV through counseling, nutritional advice, and transportation support. They also provide an on-site pharmacy. They are located at 303 North Frio, San Antonio, Texas 78207. The contract amount for Part B Service Delivery is \$272,636, and a State Rebate in the amount of \$270,859, for a total sum of \$543,495.00. The funding source is TDSHS, contract number HHS000084600001. HIV services shall be invoiced monthly for actual costs incurred, and will be reimbursed. The Ryan White Program is a payer of last resort. This program provides financial and social services to those not covered by other resources. The workforce composition data was provided for the Board's review. Staff recommends approval of a new agreement with the Alamo Area Resources Center, a sub-recipient of Ryan White HIV/AIDS Program funds, to enhance services for Ryan White-eligible patients for a total of \$543,495, Part B Service Delivery and State Rebate funds.

BLACK EFFORT AGAINST THE THREAT OF AIDS COALITION TRUST TO PROVIDE SERVICES INCLUDING MEDICAL TRANSPORTATION, NON-MEDICAL CASE MANAGEMENT, SUBSTANCE ABUSE TREATMENT

SUMMARY: Black Effort Against the Threat of AIDS Coalition Trust (BEAT AIDS) has years of experience delivering client-centered services to people living with HIV/AIDS. BEAT AIDS Coalition Trust's mission is to provide the highest quality HIV/AIDS prevention, education and services reaching out to the community. This is new contract with BEAT AIDS Coalition Trust for wrap-around care model services with a holistic approach to treatment. This includes medical providers, a primary provider, social workers, mental health counselors, and supportive services on-site. They help clients by managing all aspects of living with HIV through counseling, nutritional advice, and transportation support. They are located at 208 W. Euclid Ave, San Antonio, TX 78207. The contract amounts for Part B Service Delivery is \$44,220, and a State Rebate in the amount of \$80,165, for a total sum of \$124,385. The funding source is TDSHS, contract number HHS000084600001. HIV services shall be invoiced monthly for actual costs incurred, and will be reimbursed. The Ryan White Program is a payer of last resort. This program provides financial and social services to those not covered by other resources. The workforce composition data for BEAT AIDS was provided for the Board's review. Staff recommends approval of a new agreement with the Black Effort Against the Threat of AIDS, a sub-recipient of Ryan White HIV/AIDS Program funds, to enhance services for Ryan White-eligible patients

for a total of \$124,385, Part B Service Delivery and State Rebate funds. Staff recommends approval of a new agreement with the Black Effort Against the Threat of AIDS Coalition Trust, a sub-recipient of Ryan White HIV/AIDS Program funds, to enhance services for Ryan White-eligible patients for a total of \$124,385 Part B Service Delivery and State Rebate funds.

EL CENTRO DEL BARRIO D/B/A CENTROMED TO PROVIDE SERVICES INCLUDING MEDICAL CASE MANAGEMENT, AIDS PHARMACEUTICAL ASSISTANCE, MENTAL HEALTH, AND OUTPATIENT AMBULATORY SERVICES

SUMMARY: Centro del Barrio d/b/a CentroMed is a non-profit Federally Qualified Health Center that was founded to assist in meeting needs of individuals who face life threatening diseases, including but not limited to HIV in Bexar County and surrounding areas that offers medical care, behavioral health services, and other support services through a network of 21 sites throughout San Antonio and Bexar County. The term for both Part B Service Delivery and State Rebate Agreements is April 1, 2021 through March 31, 2022. The contract amount for Part B Service Delivery is \$213,903, and a State Rebate in the amount of \$177,110, for a total sum of \$391,013. CentroMed provides primary care services to individuals who have tested positive for HIV through patient education, counseling, and supportive and specialty services. They have been a sub-recipient of Ryan White funding since 1992. This partnership allows for a seamless continuum of care for persons living with HIV/AIDS and those affected by HIV/AIDS in Bexar County and surrounding areas. The CentroMed clinic is located at 315 N. San Saba, San Antonio, TX, 78208. The funding source is TDSHS, contract number HHS000084600001. HIV services shall be invoiced monthly for actual costs incurred, and will be reimbursed. The Ryan White Program is a payer of last resort. This program provides financial and social services to those not covered by other resources. The workforce composition data for CentroMed was provided for the Board's review. Staff recommends approval of the new Agreement with CentroMed, a sub-recipient of Ryan White HIV/AIDS Program funds, to provide and enhance services for Ryan White eligible patients for a total of \$391,013, Part B Service Delivery and State Rebate funds.

SAN ANTONIO AIDS FOUNDATION TO PROVIDE SERVICES INCLUDING ORAL HEALTH, OUTPATIENT AMBULATORY HEALTH SERVICES, AND WRAP-AROUND SERVICES

SUMMARY: The term for both Part B Service Delivery and State Rebate Agreements is April 1, 2021 through March 31, 2022. The San Antonio AIDS Foundation (SAAF) is a 501(c) (3) non-profit corporation founded in 1986. They offer a full range of services throughout Bexar County and 11 surrounding South Texas counties. Their services include: resource and benefits assistance, case management, mental health counseling, medical care, pharmacy services, and a year-round hot meal program. They provide onsite and mobile testing for HIV and STDs and HIV prevention education presentations in local public schools, colleges, universities, adult probation facilities and teen detention programs. The contract amount for Part B Service Delivery is \$234,550.00 and a State Rebate is \$105,100, for a total sum of \$339,650. The funding source is TDSHS, contract number HHS000084600001. HIV services shall be invoiced monthly for actual costs incurred, and will be reimbursed. The RW Program is a payer of last resort. This program provides financial and social services to those not covered by other

resources. The workforce composition for SAAF was provided for the Board’s review. Staff recommends approval of this new agreement with the San Antonio AIDS Foundation, a sub-recipient of Ryan White HIV/AIDS Program funds to enhance services for Ryan White eligible patients for a total of \$339,650, Part B Service Delivery and State Rebate funds.

CONSIDERATION AND APPROPRIATE ACTION FOR A LEASE AMENDMENT WITH EL CENTRO DEL BARRIO D/B/A CENTROMED FOR THE DIALYSIS SOUTH CLINIC LOCATED AT 3750 COMMERCIAL AVENUE, SAN ANTONIO, TEXAS 78221 — DON RYDEN

SUMMARY:

University Health established the Dialysis South Clinic at 3750 Commercial Avenue in San Antonio in 2009 with a lease agreement with El Centro del Barrio (d/b/a CentroMed). Since then, this clinic has served countless dialysis patients on the Southside of San Antonio by providing these outpatient services in a convenient location. The leased premises of the South Dialysis Clinic consists of 6,036 sq. ft. out of a portion of the CentroMed Health and Wellness Center located at the same address. The original lease agreement expires March 31, 2021 and has an option to renew. The terms for the renewal period(s) are for three years beginning April 1, 2021 with two additional renewal options of one year each. The new annual lease rate will be \$21.00 per sq. ft., with increases of 3 percent on each anniversary date. University Health will pay its pro-rata share of building expenses which are estimated at \$23,520 per year. The total lease expense over the 3 year renewal term is estimated to be \$464,495. Mr. Ryden shared a summary of the lease agreement for the renewal terms as follows

Period	Per SF/Yr	Monthly Base Rent	Annual Base Rent
4/1/21 – 3/31/22	\$ 21.00	\$ 10,563.00	\$126,756
4/1/22 – 3/31/23	\$ 21.63	\$ 10,879.89	\$130,559
4/1/23 – 3/31/24	\$ 22.28	\$ 11,206.84	\$134,482
		Subtotal	\$391,797

In addition, the lease agreement provides for University Health to pay a common area maintenance (CAM) charge which is estimated to be approximately \$1,960 per month. The estimated CAM charges are:

Period	Monthly Amount	Total
4/1/21 – 3/31/22	\$ 1,960	\$ 23,520
4/1/22 – 3/31/23	\$ 2,019	\$ 24,226
4/1/23 – 3/31/24	\$ 2,079	\$ 24,952
	Subtotal	\$ 72,698
	Grand Total	\$ 464,495

The workforce composition data for CentroMed was provided for the Board’s review. Staff recommends Board of Managers’ approve a lease amendment with El Centro del Barrio d/b/a CentroMed for the Dialysis South Clinic located at 3750 Commercial Avenue, San, Texas, in the amount of \$464,495.

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

SUMMARY: A total of 24 contracts with a value of \$17,421,924 are being presented to the Board of Managers during the April Board meeting. The following contracts require approval by the BCHD Board of Managers: 16 consent contracts with a total value of \$13,884,776; and eight (8) presented contracts with a total value of \$3,537,148. During the month of April 2021, there were seven (7) contracts classified as Small, Minority, Woman, or Veteran-Owned Business Enterprises (SMWVBE). The April 2021 SMWVBE Status Report reflects items being submitted for Board approval. Staff recommends approval by the Board of Managers.

CONSENT AGENDA

RECOMMENDATION: Staff recommends approval of all items listed on the consent agenda.

CONSENT AGENDA

ACTION: A **MOTION TO APPROVE** staff's recommendation was made by Mr. Hasslocher, **SECONDED** by Mr. Morris, and **PASSED UNANIMOUSLY**.

CONSENT AGENDA

EVALUATION: Dr. Jimenez again noted the discrepancy in the workforce composition data for most of those vendors awarded contracts this month, as indicated in the consent agenda packet. Contracts awarded are high dollar items – over \$250,000 requires Board of Managers approval. Mr. Hernandez informed Dr. Jimenez that his concerns would be addressed during the supplier diversity presentation later this evening.

CONSENT AGENDA

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED PURCHASING ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT WITH DAVILA CONSTRUCTION FOR RENOVATIONS TO THE UNIVERSITY HEALTH SOUTHEAST CLINIC PHARMACY — DON RYDEN

SUMMARY: The existing Ambulatory Pharmacies were originally designed to serve only CareLink patients to ensure this specific population had access to medications that would otherwise be difficult to obtain. These pharmacies have since expanded the number of eligible patients and now accepts all common third party prescription insurance plans. Prescription dispensing volume at University Health Southeast Pharmacy has more than doubled. The physical space can no longer support the number of staff, work stations and counseling space is required. University Health solicited formal bids, RFCSP-221-01-003-CNST with eleven (11) contractors responding and construction pricing ranging from \$449,622 to \$730,000 and construction schedules, in calendar days, ranging from 81 to 210 days. The proposals were evaluated based on the criteria provided to the firms in the RFCSP. Of the firms that proposed, Davila Construction, Inc., is recommended based on their competitive pricing (\$449,622), proposed schedule (133 calendar days), healthcare

experience and safety record. The workforce composition data for Davila Construction was provided for the Board's review

RECOMMENDATION: Staff recommends Board of Managers' approval of the selection of Davila Construction, Inc., as Contractor for the Pharmacy Renovations at University Health Southeast and authorize the President/Chief Executive Officer to execute a contract with Davila Construction in the amount of \$449,622.

ACTION: A **MOTION TO APPROVE** staff's recommendation was made by Mr. Hasslocher, **SECONDED** by Dr. Jimenez, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT BETWEEN COMMUNITY FIRST HEALTH PLANS, INC., AND SOFTHEON INC. FOR PROFESSIONAL BILLING AND ENROLLMENT SERVICES — THERESA SCEPANSKI

SUMMARY: In January, 2021, staff provided the Community First Health Plans, Inc., (Community First) Board of Directors an update on the progress and timeline requirements for obtaining a Health Insurance Exchange (HIE) contract with the Centers for Medicare and Medicaid Services and the Texas Department of Insurance. Community First's approach is to identify a specific subset of CareLink members that are high medical and pharmacy utilizers that fall between 100 to 300 percent of the Federal Poverty Limit. Moving this targeted population to an individual Insurance Health Plan on the Texas Exchange within Community First's Exclusive Provider Organization (EPO) network allows for the exchange of county dollars and federal funding, which benefits the CareLink members, University Health, and Bexar County, and is in alignment with Community First's strategic goal to enhance integration with its parent owner. Diversification in the health insurance marketplace is a strong strategy to reduce the reliance on government lines of business. Community First received two (2) proposals for billing and enrollment services: Cognizant and Softheon. Both vendors submitted their comprehensive billing and enrollment solutions for evaluation and participated in formal demonstrations. The proposals were evaluated for overall experience and qualifications in the industry, experience in HIE products, implementation timeline, and pricing. After careful consideration and review of the proposals submitted, Softheon provides Community First with the best overall value and solution based on the following key strengths: (1) experience with Texas Health Insurance Exchange plans; (2) platform infrastructure and capabilities; (3) compliance with regulations; (4) staff support pre/post-implementation; (5) training approach; (6) pricing; and (7) implementation timeline. Softheon facilitates exchange enrollments for five (5) other Texas-based health plans, 19 percent of all issuers in Texas, and did so for Community First from 2015 through 2019. A billing and enrollment professional services solution for individual insurance products offered on the HIE is required as Community First's existing infrastructure requires a billing and enrollment solution to satisfactorily administer the EPO line of business. Ms. Scepanski provided a summary of costs

associated with required billing and enrollment for implementation and ongoing operations as follows:

Enrollment Capability Implementation Cost	\$370,000
Enrollment Operations Year – *	\$ 2,100
Project Reserves**	\$ 18,500
Total	\$442,100

**\$12,600 annual cost for Year 2 and 3 (\$2.10 pmpm)*

*** 5 percent of Enrollment Implementation Costs*

This is a planned expense and funding is included in the Annual Operating Budget. The contract is for three years beginning May 1, 2021 and ending April 30, 2024. The workforce composition for Southeon was provided for the Board’s review.

RECOMMENDATION:

Community First Board of Directors recommend Board of Managers’ approval of a contract with Softheon for professional billing and enrollment services for Individual Health Insurance Plans for a total estimated amount of \$442,100 for the initial implementation year and \$25,200 for subsequent years, totaling \$467,300 over a three-year period.

ACTION:

A **MOTION TO APPROVE** staff’s recommendation was made by Mr. Morris, **SECONDED** by Mr. Hasslocher, and **PASSED UNANIMOUSLY**.

EVALUATION:

For the new Board members, Mr. Hernandez explained that the CareLink financial assistance program is for Bexar County residents only, and is 100 percent funded by local property taxes. Dr. Jimenez asked if the staff would be learning anything about the selected individuals from the data collected, from a public health aspect, such as prevention, early case findings, and early interventions. The transition of this population from the CareLink model to the Exclusive Provider Organization model will allow University Health to expand whatever services might be needed by these individuals. Community First is also engaging all primary care providers in their network and asking them to start screening for social determinants of health because the staff understands that those determinants are a key factor in an individual’s overall needs. If the staff can identify, address, and provide early interventions on these social needs, the staff can help to improve their health care on a long term basis. This is new to Community First in terms of actual screening, but partnering with the providers will to help the staff understand what those needs are. Former University Health pediatric nurse, Dr. Michelle Ryerson, works at Community First and has a public health background. She is a huge advocate in terms of screening for social determinants, such as housing, transportation, food insecurities, and she is working first-hand with many of the providers and using a best practice tool, with only four or five questions. She works closely in collaboration with Community First’s medical director, Dr. Priti Mody-Bailey and the entire care coordination team.

FOLLOW-UP:

None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING A CONTRACT BETWEEN COMMUNITY FIRST HEALTH PLANS, INC., AND CHAMOY CREATIVE, LLC., FOR MARKETING AND ADVERTISING SERVICES — THERESA SCEPANSKI

SUMMARY:

It is essential for Community First to strategically and successfully market to remain competitive. Without a strong marketing presence in the community, it will be difficult to gain enhanced traction among eligible members. Several key benefits of a strong marketing plan include: Establish brand recognition, gain and retain membership, establish member trust, educate and inform members, and it encourages referrals. Community First received five (5) proposals for professional services in 2019. A professional services contract with Chamoy Creative was initially approved in October 2019 for an 18-month term. The initial term was for an abbreviated period since this was a new vendor offering services to Community First. This contract request with Chamoy Creative is for a new three-year period, beginning April 1, 2021 and ending December 31, 2023. Over the course of the last 18-months, Community First in collaboration with Chamoy Creative, has developed an effective and creative marketing strategy to reach current and potential members. Chamoy Creative has consistently delivered the best overall value for professional marketing and advertising services for Community First Health Plans' strategic marketing plan. The total contract amount for the new three-year period is \$757,188. The total cost of the previous 18-month contract amount was \$321,030. As compared to the previous annual contract amount of \$214,020, there is an increase of \$29,520 (14 percent) for the first year of the new term and \$8,856 (3.7 percent) for the second and third year of the contract period. This is a planned expense and funding is included in the Annual Operating Budget. Chamoy Creative is a local vendor, certified as a small, minority-owned, historically underutilized, and emerging business enterprise. The workforce composition data was provided for the Board's review.

RECOMMENDATION:

Community First Board of Directors recommend Board of Managers' approval of a contract for professional services with Chamoy Creative in the amount of \$757,188 for a three-year period.

ACTION:

A **MOTION TO APPROVE** staff's recommendation was made by Mr. Morris, **SECONDED** by Ms. Fernandez, and **PASSED UNANIMOUSLY**.

EVALUATION:

Ms. Scepanski introduced Ms. Judy Razo, Director, Corporate Communications & Marketing, at Community First, who has done a phenomenal job leading the CFHP marketing team. Chamoy Creative surprised the staff with their creativity and expertise in reaching members and soon to be members during the previous short, 18-month contract. The team did a lot of community outreach, launched a new website that saw over 180,000 visits, and two advertisement campaigns with over 400 million impressions last year. The teams were required to quickly pivot when the COVID pandemic arrived in 2020 during Community First's 25th anniversary year, which entailed a whole new campaign. The staff optimized that budget, and with Chamoy Creative's help created two campaigns with the same amount of time and money. Dr. Kelley was interested in knowing who Community First would be targeting in the ad campaigns delivered by Chamoy Creative. The campaign will target those who have not selected a Medicaid plan administered by Community First. The corporate communications department educates and recruits new membership; however due to certain HHSC regulations that prevent Community First from making direct recruitment efforts, the strategy will be to focus on brand

recognition, and empowering potential clients with all the materials and education they need in the process of selecting a plan without saying, “select Community First.” The staff will do this by creating step-by-step guides and automatic dial calls reminding potential clients that it’s time to renew, along with a public relations campaign introducing the steps and the resources. The fact that Community First provides the information first creates a brand impression and the majority will likely select Community First. Dr. Kelley also asked what other campaigns, if any, Chamoy Creative has presented in the community, and are they going to target all quadrants of Bexar County? Chamoy Creative is a general advertisement agency specializing in the sensitivity of communicating with cultural groups. Dr. Kelley noted that Chamoy Creative does not have a diverse workforce, it has zero African-Americans on its staff, so she sees some limitations on who they will target. However, Ms. Judy Razo reported that Community First prefers to go local and cross-collaborate with more than one agency rather than create a bubble by hiring only one agency. Chamoy Creative is aware of their blind spot, they are a very small organization with only 14 employees, which is why the Community First staff wanted to try their services with the short 18-month contract. Mr. Hernandez and Ms. Scepanski reiterated that the small firm will target the African-American community, and in addition, the University Health Corporate Communications Department often shares their activities and resources with Community First, and Mr. Hernandez is confident the staff’s strategy to use two smaller advertisement agencies will work out, which will also spread the dollars in the community. Dr. Jimenez thanked Dr. Kelley for raising the issue. Although the Board was not aware that a smaller agency would be used for targeting the African-American community, he cautioned the staff that there is a growing population in Bexar County that are both African American and of Latino descent, mostly from Central America and Puerto Rico, and the advertising agencies must be able to reach such diverse populations of Bexar County.

FOLLOW-UP: None.

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

SUMMARY: In February, clinical activity (as measured by inpatient discharges) was down 12.3 percent for the month compared to budget. Community First Health Plans, Inc., (Community First) fully insured membership was up 11.2 percent to budget. On a consolidated basis, gain from operations was \$29.3 million, \$20.8 million better than budget. The consolidated bottom line gain (before financing activity) was \$21.7 million, \$20.1 million better than the budgeted gain of \$1.6 million. Higher supplemental revenues combined with lower operating expenses resulted in performance better than budget. Community First experienced a bottom line gain of \$5.1 million, which was \$3.9 million better than the budgeted gain of \$1.2 million. Lower claims expense and higher premium revenue accounted for the performance to budget. Debt service revenue was \$6.1 million, which matched budget. Last year, mid-March 2020 is when COVID hit and everything shut down, and University

Health's volume dropped off dramatically. One year later, University Health is still impacted by the decrease in volumes, but during the month of March, 2021, volume has started to come back up. Emergency Department visits were down by 4.5 percent in March, 2021, compared to 25-30 percent below budget since March 2020. Inpatient days were over budget, admissions were below budget, surgeries, interventional radiology, and Cath lab were all over budget in March. The ambulatory clinics are still light on volume and University Health's Southwest Clinic was down for the most of March due to damage sustained during the ice storm in February. For the remainder of this year, Mr. Hurley predicts that University Health will start beating the prior year's volume. From a financial stand point, March was a good month, not quite as strong as January and February, however, the volume University Hospital did see were high end, elective cases, which correlates with the high medical supply expense of \$2.7 million. The nursing labor market is very tight right now. Although the state provided "free" nurses to help during COVID, their assignments have concluded, and University Health still has about 50 agency nurses in house. Agency nurses make twice the hourly rate of what staff nurses makes, but those staff nurses who left to make more money during COVID are also starting to settle down; leadership is confident that most of these vacant positions will be filled. The big drivers in the variance are the supplemental funds which are still higher compared to last year due to the Federal Medical Assistance Percentage (FMAP) for Medicaid since the country is still under an emergency declaration. Disproportionate Share Hospital (DSH) cuts have also been delayed, and Mr. Hurley acknowledged that such supplemental funding helped University Health on the revenue side. Regarding Community First, when University Health volume goes up, their claims volume goes up as well, since people have started going back to the doctor. Mr. Hurley expects to see Community First in the March range for the remainder of the year. Community First Medicaid membership has remained on the books during the pandemic. Dr. Kelley asked if Community First had notified their members that they were still eligible for Medicaid during COVID, to which Ms. Scepanski replied that the state notified its members and providers also did a good job of informing them of their Medicaid status. Mr. Hurley explained a Texas program - DSP - which covers pregnant women and provides a one-time lump sum payment of \$3,200 for the birthing event. All other claims are paid on a per member/per month basis. Net patient revenue was over budget by \$8 million and driven by surgeries and high-end, elective procedures. Mr. Hurley yielded the floor to Mr. Hernandez for an update on the 1115 Waiver. He reported that the Centers for Medicare & Medicaid Services recently rescinded the ten-year Medicaid 1115 waiver extension in Texas. Mr. Hernandez has been working with the Texas Hospital Association, Teaching Hospitals of Texas, the Council of Academic Medical Centers, on a letter to HHSC and to the Governor's Office suggesting changes and emphasizing hospitals' support of coverage expansion and the waiver. Mr. Hernandez's professional opinion is that the waiver will have to be renewed one way or another, albeit under different terms. Of particular concern to University Health is the DSRIP program that will expire at the end of September, 2021. The uncertainty will make budget planning difficult

RECOMMENDATION: Staff recommends approval of the financial reports subject to audit.
 ACTION: A **MOTION TO APPROVE** staff’s recommendation was made by Mr. Hasslocher, **SECONDED** by Dr. Kelley, and **PASSED UNANIMOUSLY**.
 EVALUATION: As noted above.
 FOLLOW-UP: None.

PRESENTATIONS AND EDUCATION:

ANNUAL COMMUNITY FIRST HEALTH PLANS, INC., OPERATIONS REPORT
— THERESA SCEPANSKI

SUMMARY: Ms. Scepanski provided an annual update regarding the State of the Organization. While 2020 was a year like no other, she reported the following accomplishments during these unprecedented times:

- Community First remains the most widely favored plan in the Service Delivery Area (23.9 percent of respondents, compared to 12.8 percent and 8.5 percent for other health plans), with ease of working with the health plan being the most common reason for rating it as the best.
- Membership increased by 25 percent in STAR (from 103, 523 to 128,885) and 7 percent in STAR KIDS (from 7,337 to 7,824), while decreasing by 24% in CHIP (15,871 to 11,992), due to Member eligibility and the ability to transition from CHIP to STAR.

Positioning Community First for the Future

- Secured a Medicare Advantage contract with Center for Medicare Services (CMS) to include a Dual Special Needs Plan (D-SNP), positioning the company for a successful bid for STAR+PLUS program once Texas Health and Human Services Commission (HHSC) releases the Request for Proposal (RFP) in late 2021.
- Developed and implemented a strategic plan that aligns with the organization’s mission and vision to be the community’s health plan of choice.

Enterprise Risk Management

- Identification and prioritization of top risks and opportunities for mitigation.
- Hard-wire risk management and mitigation into existing committees and infrastructure fostering a shift in organizational discussions and focus.
- Leadership assignment and accountability in addressing top risks.

Operations

- Improved claims auto-adjudication rate from 64 percent to 79 percent (goal 85 percent or higher). The positive results are attributed to significant process improvement efforts in the Claims department.

Performance Indicators

	Post Go-Live	June 2020	December 2020
Auto-Adjudication Rate	64%	76%	70%
Claims Inventory 30+Days	20,913	22	0
Claims Appeals	5,827	7,034	4,011

Quality Management

- For Healthcare Effectiveness Data and Information Set (HEDIS) 2020 (*measurement year 2019*), rates improved in key STAR and CHIP metrics to include timeliness of prenatal care and well child exams, counseling for physical activity and nutrition, and appropriate treatment for upper respiratory infections, thus, successfully retaining 3% (\$8M) of premium at risk with State’s Managed Care Organizations’ (MCOs) Pay for Quality (P4Q) Program based on preliminary calculations.
- HHSC final determination of results for the 2019 medical P4Q show Community First Health Plans, is eligible for a distribution of \$172,868

Year End Financials

- Generated Net Income at year-end of \$57,366,130 compared to budgeted Net Income of \$7,259,997, representing a favorable variance of \$50,106,133 largely attributed to effects of COVID-19 Pandemic (increase in STAR/STAR KIDS membership and decrease in utilization).

RECOMMENDATION: This report was provided for informational purposes only.
ACTION: No action was required by the Board of Managers
EVALUATION: None.
FOLLOW-UP: None.

MASTER PLANNING FOR THE ROBERT B. GREEN CAMPUS — DON RYDEN/ED BANOS

SUMMARY: In the interest of time and in the Chairman’s absence, Mr. Hernandez pulled this item from the agenda and will bring it back next month.
RECOMMENDATION: None.
ACTION: None.
EVALUATION: None.
FOLLOW-UP: None.

2021 QUARTER 1 SUPPLIER DIVERSITY REPORT — ANTONIO CARRILLO/TRAVIS SMITH

SUMMARY: Mr. Smith and Mr. Carrillo provided an update regarding the supplier diversity program for 2021 and began by reiterating University Health’s commitment for supplier diversity: To improve the business outcomes for the community.

- Aligned with the Triple Aim Plus
- Elevate local businesses
- Support diversity across multiple business categories

University Health Spend (less Community First Health Plans, Inc.)
Employee Compensation \$605M, 48 percent

- 76 percent minority
- 94 percent women & minority

Growing Minority Leaders

- 83 percent minority leaders in Supervisor Development Academy

Medical Services \$179M, 14 percent

- \$170M to UT Health Academic Partner

Medical Supplies \$146M, 18 percent

- Medline Prime Distributor
- Targeted Diverse Tier 2 Spend: 20%
- Morris & Dickson Pharmaceutical, \$78M

Purchased Services \$231M, 18 percent of total

- Primary Opportunity for Supplier Diversity Growth

Purchased Services Spend (less Community First Health Plans, Inc.)

<u>SMWVBE</u>	<u>Annual Spend</u>
2019	\$26.7 million
2020	\$27.8 million

- 2020 Achieved 4 percent SMWVBE Growth
- Supplier Diversity Team Driving Further Growth

Primary Targeted Opportunities, \$106 million

- 2019 purchased services, \$231 million
- Advertising and Foundation, \$6 million
- Equipment repair, \$9 million
- Leases and medical equipment rent, \$16 million
- Various other expenses, \$26 million
- Management Fees, \$49 million

Supplier Diversity Goals

- Commitment to ensure University Health's vendor community reflects the diversity of our community
- Focusing on Small, Minority, Women and Veteran owned Business Enterprises (SMWVBE)
- Includes efforts to contract locally and with not-for-profit entities
- Ensure an equitable approach for all opportunities to do business with University Health

SMWVBE Vendors

- Acknowledge & Support SMWVBE Certification
- Support those who qualify to become certified
- Partnership with South Central Texas Regional Certification Agency (SCTRCA)
- University Health representative on Board of Directors
- No cost to vendor
- Includes Bexar County and 15 surrounding Counties
- DOT Texas UCP Program
- 5 Certifying Agencies
- Texas HUB Program
- Improve future business opportunities & visibility

SMWVBE Support

- Supplier Diversity team as integral part of University Health Supply Chain
- Retain & Grow relationships with Diverse Vendors
- Recruitment Events
- Education for Vendor Community & University Health stakeholders
- Train & Mentor Vendors
- Tier II Subcontracting
- Capturing Diverse Spend
- Monthly & Quarterly Reports to Board of Managers
- Partnership with University Health teams
- Construction & Planning
- Women’s & Children's
- Other significant construction projects
- Facilities
- Encouraging National Vendors to subcontract with local, diverse vendors (Tier II)
- Workforce Composition & Equal Employment policies
- Reinforce expectations to improve Diversity

Supplier Diversity Successes

- Virtual Construction Project Walkthroughs
- Driven by COVID Social Distancing
- Increased bid participation by local, SMWVBE
- COVID PPE Supply
- Multiple local, SMWVBE vendors supported
- B2G Bid Opportunities

	2018	2019	2020	2021
Non-SWMVBE	97	135	139	165
Small	198	317	354	412
Minority	101	145	149	124
Woman	45	59	72	92

Ongoing Process Improvement

- 2021 Enhancements
- Making it Easier for Vendors
- Certification Efforts
- University Health Webpage
- Remote Project Walkthroughs
- 1:1 Vendor Support
- Virtual Event sponsored by Joeris+JE Dunn, A Joint Venture Marketing & Business Development 101 (Valuable Tools for SMWVBE)
 Thursday, April 29, 2021

2021 Enhancements

- Further Collaborate with others
 - Premier GPO SEEDS
 - Large Public Entities
 - Community Partners

SEEDS: A Component of the University Health Supplier Diversity Initiative

- Sourcing Education and Enhancement for Diverse and Small Suppliers through Premier

Mission and Objectives

- Increase the number of “certified” diverse suppliers, Minority-Women-, Veteran-Owned, and Small Business Enterprises on contract portfolio.
- Provide our members with expanded options to do business with diverse suppliers that offer innovative, cost-competitive products.
- Provide suppliers currently doing business with Premier members an opportunity to expand their business capacity across our member alliance (local, regional to national).

Program Rules of Engagement

- Supplier must maintain annual certification as a Minority-, Woman-, Veteran-owned business or a small business enterprise.
- Supplier cannot be a subsidiary of a non-diverse entity.
- Supplier must attend the Premier University prior to a contract award through SEEDS.
- Product(s) must be FDA approved or FDA exempt.

Program Features

- Premier University provides suppliers with information about the GPO industry and Premier, Inc.
- Provides the supplier with an introduction to the Premier Sourcing Process.
- Supplier business development assistance through quarterly business line review.

Partnership Opportunities

- Supplier Diversity success relies on partnerships
- Always open to additional ideas

Mr. Travis Smith and Mr. Antonio Carrillo thanked the Board of Managers for their support of the Supplier Diversity Program and opened the floor for questions. University Health’s supplier diversity management position remains vacant at this time and is open for recruitment of a qualified individual.

RECOMMENDATION:

This report was provided for informational purposes only.

ACTION:

No action was required by the Board of Managers.

EVALUATION:

Discussion ensued regarding the Board’s workforce diversity policy when doing businesses with large national companies, international corporations, and high tech companies who take millions of dollars from University Health. These vendors seem to have the resources and wealth to promote minorities from within and it boggles Dr. Jimenez’s mind as to why they are not interested; the Board of Managers makes no impact in terms asking them to do this. There must be organizations around the country that have creative ways of influencing these large corporations into developing a mentoring program. Ernst & Young has a very strong

minority program, they recruited several people from San Antonio to join their firm. Mr. Hernandez stated the dilemma – that University Health is too small of an organization to make such powerful impact. The SEEDS program described by Mr. Carrillo may be the opportunity to do what the Board has suggested. It is a Premier council joined by other academic institutions like University Health and together these academic institutions purchase massive amounts of supplies. Dr. Bryan Alsip sits on the Board of Premier and he has been trying to make progress there. Mr. Hernandez's believes that if University Health partners with businesses that have like minds, these academic medical centers will then ask from their vendors what we ask of ours. Mr. Carrillo suggested that with many of the large vendors that do not have a minority mentoring program, the staff can focus on Tier 2, which is an indirect way of procuring from small and minority vendors. Many already do purchase from small and minority owned businesses, they just do not track that information. Dr. Jimenez noted that his sister is the first ever female engineer with Chevron and he is aware of various specialty associations whose membership is comprised of well-educated and well-trained Latinos, Asian Americans and African Americans. He believes these minority associations and large companies can be helpful in terms of formulating a plan.

FOLLOW-UP:

None.

ANNOUNCEMENTS:

Dr. Jimenez informed Dr. Alsip and Dr. Hromas that in his private psychiatric practice, he sees at two or three mothers/grandmothers a week who have lost a loved one to gun violence. This issue has recently been elevated as a public health problem, and he would like to know what University Health can do education-wise to help with this, which is a political issue in Texas. There have been 45 mass shootings in the last three months, and this does not include individual shootings. Dr. Alsip replied that one strategy by University Health is to change the verbiage from gun prevention or gun control, to fire arm injury prevention. Dr. Ronald Stewart, Chairman, Department of Surgery, UT Health; and Director of University Hospital's Trauma Orthopaedics Clinic, has three active gun safety programs and has testified before national congressional committees on this issue and is also reaching out directly to gun owners. Mr. Hernandez agreed that the issue is a national problem and University Health will address by providing trauma informed care. In addition, Bexar County Judge Nelson Wolff has been active promoting gun safety in the community and he is giving away gun locks on behalf of University Health. Mr. Hernandez cited a book that was published in the mid-1990's titled, Deadly Consequences, which at that time called for the diagnosis of gun violence as a public health crisis. Dr. Jimenez thanked the staff for the information and stated that he was not aware of the efforts currently in place for Bexar County.

Dr. Jimenez asked Ms. Kirkman to elaborate on an award recognizing her and Mr. Bill Phillips for their compassionate work helping many Bexar County citizens register for their COVID-19 vaccinations. Both were bestowed Life Saver awards from La Prensa Texas on April 15, 2021. The awards, presented by La Prensa board member and Bexar County Commissioner Tommy Calvert, recognized their efforts to help end the COVID-19 pandemic by making it as easy and convenient as possible for people in the community to be vaccinated.

INFORMATION ONLY ITEMS:

REPORT ON THE 87TH TEXAS LEGISLATURE — ANDREW SMITH

UNIVERSITY HEALTH FOUNDATION UPDATE — SARA ALGER

**REPORT ON RECENT RECOGNITIONS AND UPCOMING EVENTS — LENI
KIRKMAN**

**UPDATE ON THE WOMEN'S AND CHILDREN'S HOSPITAL AND ASSOCIATED
PROJECTS — DON RYDEN**

**AGENCY FOR HEALTHCARE RESEARCH AND QUALITY CULTURE OF
PATIENT SAFETY SURVEY REPORT — BRYAN ALSIP, M.D.**

ANNUAL REPORT ON LEARNING AND DEVELOPMENT — ANDREA CASAS

SUMMARY: Mr. Smith directed his Board colleague's attention to the six reports above, and asked that they review these materials on their own time.

RECOMMENDATION: These reports were provided for informational purposes only.

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

EVALUATION: None.

FOLLOW-UP: None.

ADJOURNMENT:

There being no further business, Mr. Smith adjourned the public meeting at 8:39 pm.

Ira Smith
Vice Chair, Board of Managers

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

Sandra D. Garcia, Recording Secretary