



**BEXAR COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS**

Tuesday, March 25, 2025
6:00 pm
Cypress Room, University Hospital
4502 Medical Drive
San Antonio, Texas 78229

MINUTES

BOARD MEMBERS PRESENT:

Jimmy Hasslocher, Chair
Anita L. Fernandez, Vice Chair
Margaret Kelley, MD, Secretary
Beverly Watts Davis
David Cohen, MD
Melinda Rodriguez

OTHERS PRESENT:

Edward Banos, President/Chief Executive Officer, University Health
Bill Phillips, Executive Vice President/Chief Operating Officer, University Health
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health
Serina Rivela, Vice President / Chief Legal Officer, University Health
Dr. Bryan Alsip, Executive VP, Chief medical Officer, University Health
Dr. Juan Garza, Sr. VP, Chief Quality & Health Informatics Officer, University Health
Ashley Windham, DO, Vice President Quality Informatics
Travis Smith, Sr. Vice President, Chief Financial Officer, Clinical Operations, University Health
Dr. Monika Kapur, President, CEO, University Medicine Associates, University Health
Leni Kirkman, Executive VP, Chief Marketing, Communications & Corporate Affairs Officer, University Health
Horacio Vasquez, Executive Director, Supply Chain Management, University Health
Robert Hromas, MD, Acting President, President and Professor of Medicine, Vice President for Medical Affairs, UT Health San Antonio
Michael Little, MD, President, Medical/Dental Staff, University Health; and Associate Professor, Department of Anesthesiology, UT Health San Antonio
Francisco G. Cigarroa, M.D., EVP/Health Affairs and Health System, UT Health San Antonio
Theresa Scepanski, President and CEO, Community First Health Plans
Anna Taranova, VP, Chief of Public Health, Innovation and Equity Officer, University Health
Dina Perez-Graham, Sr. Vice President, Chief Nursing Executive, University Health
Katherine Reyes, Sr. Vice President, Pre-Acute Services, University Health
Elizabeth Allen, Director, External Communications, Corporate Communications, University Health

Josh Nieto, Chief Compliance, HIPPA Officer, University Health
Brian Lewis, Deputy Chief Quality Officer, University Health
Carol Huber, VP, Institute for Public Health, University Health
Jennifer Rodriguez, Vice President, Chief Pharmacy Officer, Pharmacotherapy & Pharmacy Services, University Health
Ted Day, Executive Vice President, Strategic Planning & Business Development, University Health
Larry Wallis, Director, Internal Audit, University Health
Awoala Banigo, Sr. Vice President, Chief Revenue Officer, University Health
And other attendees.

CALL TO ORDER:

Mr. Hasslocher called the Board meeting to order at 6:05 pm.

INVOCATION AND PLEDGE OF ALLEGIANCE — JIMMY HASSLOCHER, CHAIR

Invocation – Julie Rowe, University Health Chaplain — *Jimmy Hasslocher, Chair*

Mr. Hasslocher led the pledge of allegiance.

PUBLIC COMMENT: NONE

APPROVAL OF MINUTES OF PREVIOUS MEETING: March 25, 2025 (*Regular Meeting*)

SUMMARY: The minutes of the Board meetings of Tuesday, March 25, 2025 was submitted for the Board's approval.

RECOMMENDATION: Staff recommends approval of the minutes as submitted.

COMMENTS /DISCUSSIONS: None

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

EVALUATION: None

FOLLOW UP: None

Report from UT Health San Antonio — Robert Hromas, MD., Acting President and Professor of Medicine, Vice President for Medical Affairs, UT Health San Antonio

SUMMARY: Dr. Cigarroa commented on how they are navigating with the issues at hand with the Federal Government and how it may impact the school in addition to the current legislative session and will provide updates as they become available. Peter Loomer will be stepping down as Dean of the School of Dentistry at the end of April and soon will begin the search for his replacement. Dr. Cigarroa commented on his last Grand Rounds that took place Friday, March 21st as former Director of the Transplant Center and expressed how grateful he is for the experience of a lifetime and much joy it has been for him in that position. Dean Hromas commented that Brian Meads, Chair of Medicine has stepped down and Dr. Tom Patterson has been appointed to be the new Chair of Medicine. Friday, March 21st UT Health had their Medical Students Match for Residency. UT Health San Antonio broke records of the number of students staying at University Health for their residency.

NEW BUSINESS – CONSENT AGENDA – JIMMY HASSLOCHER, VICE CHAIR

Consideration and Appropriate Action Regarding Medical-Dental Staff Membership and Privileges — Michael Little, M.D., President, Medical/Dental Staff

SUMMARY: The Credentials Committee met on February 24, 2025 and reviewed the credential files of the individuals listed on the attached Credentials Report and the Professional Performance Evaluation Report. In its meeting of March 4, 2025, the Executive Committee of the Medical-Dental Staff recommended approval of the Credentials Committee Report.

Consideration and Appropriate Action Regarding Medical-Dental Staff Recommendations for Professional Practice Evaluations and Delineation of Privileges — Michael Little, M.D., President, Medical/Dental Staff

SUMMARY: The Credentials Committee met on February 24, 2025 and reviewed proposed revisions to Delineation of Privilege and the Professional Performance Evaluation Report and forms. In its meeting of March 4, 2025, the Executive Committee of the Medical-Dental Staff recommended approval the attached Delineation of Privileges and Focused/Ongoing Professional Performance Evaluation Report.

Consideration and Appropriate Action Regarding Infection Prevention and Control Program and Antibiotic Stewardship Lead Appointment — Bryan Alsip, M.D.

SUMMARY: As part of the Joint Commission standards and in the Centers for Medicare and Medicaid Services (CMS) Conditions of Participation (COP), annual appointment of designated leads for the University Health Infection Prevention and Control and Antibiotic Stewardship programs is required by the Board of Managers. In accordance with the Joint Commission requirements, we are asking the Board to approve this year's designated leads for the University Health Infection Prevention and Control and Antibiotic Stewardship programs.

University Health leadership, including nursing and pharmacy, along with representatives from the Medical-Dental Staff make recommendations for Infection Prevention and Control Program responsibility and Antibiotic Stewardship Program lead. The following individuals were selected based on a review of education, training, experience, and certification:

- Infection Prevention and Control Program Responsibility:
 - Laura Solis, BS, CIC
- Antibiotic Stewardship Program Lead:
 - Jason E. Bowling, MD, FIDSA

Consideration and Appropriate Action Regarding a Lease Renewal with Huebner Commons, Ltd., for Pediatric Clinic Space located at 11703 Huebner Road, Suite 104, San Antonio – Don Ryden

SUMMARY: On June 23, 2020, the Board of Managers authorized University Health to enter into a Lease Agreement with Huebner Commons, Ltd. for 2,283 square feet of clinic space located at 11703 Huebner Road, Suite 104, designated for family care. In September 2024, the clinic transitioned to solely serve pediatric patients to support the growing demand for pediatric care in northwest Bexar County.

The Lease was established for an initial term of five years and two months, with the provision for five one-year renewal options.

The initial lease term commenced on July 3, 2020, and is set to terminate on September 30, 2025. To ensure continued service to pediatric patients in northwest Bexar County, staff is recommending that the Board of Managers approve the exercise of the first of the five, one-year renewal options included in the original lease agreement. These renewal options are designed to provide flexibility for terminating the lease if necessary, with appropriate notice given prior to the next renewal period.

This property is conveniently located on the corner of Huebner and Vance Jackson. It provides ample patient parking and the convenience of restaurants and coffee shops within walking distance, which adds to the experience for patients, staff and visitors.

Consideration and Appropriate Action Regarding an Inter-local Agreement for Professional Health Care Services with Edgewood Independent School District – *Katherine Reyes/ Monika Kapur, M.D.*

SUMMARY: University Health entered into an initial contract with Edgewood Independent School District (EISD) in March 2021 and was renewed in 2023. The purpose of the agreement is to provide professional health care services for the employees of EISD. Since 2021, the contract has successfully completed over 3,000 encounters. EISD desires to continue contract with University Health to provide a primary care physician office use by EISD employees and dependents. Modifications to the new contract include a change of location from Edgewood Clinic to the Kennedy Clinic that is within the school district boundaries, increase in payment for telemedicine visits and inclusion of five additional laboratory tests.

Both University Health and EISD are political subdivisions of the State of Texas and as such have the ability to leverage the state statute that allows for local governments to contract with one another and with agencies of the state (*Title 7, Chapter 791 Interlocal Cooperation Contracts*). Through this avenue, EISD can provide its employees convenient access to care in proximity to their workplace at the University Health Kennedy Clinic. Employer-based clinics such as this have gained popularity throughout the country over the past-several years as a means to achieve better health outcomes for their employees and lower health insurance premiums as well as increase staff retention and productivity.

University Health and EISD will collaborate on joint outreach and marketing efforts to promote the availability of the clinic to employees and their dependents, which will be key to support the success of this initiative.

Consideration and Appropriate Action Regarding an Agreement with UT Health for Radiation Therapy Services — *Awoala Banigo*

SUMMARY: University Health has maintained a longstanding partnership with UT Health San Antonio at the Mays Cancer Center, and previously Cancer Therapy & Research Center, to deliver essential radiation therapy for patients who require urgent bone and cancer treatment during their inpatient stay at University Hospital. The existing contract is scheduled to expire on March 31, 2025. Given that University Health does not offer radiation therapy services at any of its facilities, it is imperative to extend this agreement to guarantee the ongoing provision of radiation therapy for its inpatients.

The availability of radiation services at the May's Cancer Center enhances operational efficiency for both University Hospital and UT Health San Antonio medical staff and optimizes safer transition and continuum of care. It further improves the overall patient experience and quality 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;
- (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 University Health before the patient is approved for this therapy. If the indication for radiation therapy is not immediate or is unclear, authorization may be conditional, requiring hospital bedside consultation of a radiation oncologist within 24 hours of consult or next business day.

Consideration and Appropriate Action Regarding Temporary Health Care Staffing Agreements with Various Agencies — *Andrea Casas/Dina Perez-Graham*

SUMMARY: University Health continues to experience a critical need for professional nursing staff and other essential healthcare professionals. University Health has used contract or agency staffing to cover clinical areas with staffing shortages to assure patients receive appropriate care and prevent our regular staff from being overworked. To meet patient volume in an effective manner, University Health uses a common-sense approach to contingency layering to include utilizing agency staff when necessary. This also helps to keep core staff engaged and happy. In order to sustain current clinical operations, professional services provided by temporary staffing agencies are necessary to ensure the health and safety of our patients. University Health conducts ongoing analysis of temporary staffing requirements, and considered several agencies to help meet staffing needs. Accountable Healthcare Staffing, Angel Staffing and Cross Country Staffing are engaged to assist with this important effort. These agencies offer the depth and breadth of their candidate database, which is highly positioned in the market and competitive cost for professional temporary staffing services.

These contracts provide for Registered Nurses, Respiratory Therapists and other essential healthcare workers and professionals as needed at University Hospital and University Health clinic locations. The agreement referenced herein supports the University Health mission, vision and values to promote the good health of the community and provide the highest quality of care.

Utilization of Staffing Agencies will deliver skilled nursing and healthcare professionals in a timely manner, which ensures University Health continues to provide exceptional patient care for San Antonio, Bexar County and beyond.

The requested amount for a one-year period, based on current run rates, and reduced utilization, has been decreased to \$2,500,000. This request shall be for a one-year period beginning April 1, 2025 to March 31, 2026. Agencies will invoice University Health for services utilized pursuant to the rates and terms contained in the staffing agreement.

University Health is not obligated to utilize any specific amount of service; agency nurses are engaged on an as needed basis to cover areas where there is a need due to staff shortages or surges in volumes.

Consideration and Appropriate Action Regarding a Contract between Community First Health Plans, Inc., and Language Line Services, Inc., for Interpreter and Translation Services — Theresa Scepanski

SUMMARY: Interpreter and Translation Services provides high quality language translation services to empower our members and overcome language and cultural barriers on their path to self-sufficiency. Utilization of interpreters to facilitate communication between health care providers and non-native speaking members is essential to provide the best possible quality of care. Over the next four decades, the foreign-born population in the United States is expected to double. During every doctor's visit, parent-teacher conference, trip to the bank, and professional services appointment, individuals need to understand and be understood. Language Line Services, Inc., (LanguageLine) is an experienced and trusted language services provider. Founded in 1982, LanguageLine offers expert language assistance 24 hours per day, 7 days per week. LanguageLine is one of the largest providers of language access and a trusted advisor in the industry. Driven by humanity and powered by technology, LanguageLine is dedicated to breaking down language and cultural barriers in every moment.

Community First Health Plans has contracted with LanguageLine for more than ten (10) years, experiencing high member and provider satisfaction results. LanguageLine is experienced in servicing the Medicaid managed care industry in the state of Texas. LanguageLine will continue to provide highly qualified interpreters in-person onsite at the actual business location or using an online conferencing platform (virtual onsite) to perform consecutive interpreting between providers and Limited English Proficient (LEP) individuals, by converting spoken or signed language statements between English and another language.

LanguageLine has achieved ISO 9001 certification for onsite and translation and localization products and services demonstrating their ability to consistently provide products and services that meet regulatory requirements and demonstrate continuous improvement, receiving certification in three areas:

- On-Demand
- OnSite
- Translation & Localization

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

SUMMARY: University Health's Purchasing Consent attachment for the month of March 2025 includes 11 proposed contracts for Board of Managers action. The total requested Board of Managers approval for these 11 contracts is \$19,444,870. All other Board of Managers agenda items and contracts will be addressed and approved separately by the Board.

RECOMMENDATION:

Staff recommends Board of Manager's approval of:

- 1) Purchasing Consent Agenda Items; and,
- 2) Purchasing Consent Attachment "A" in the amount of \$19,444.870

COMMENTS /DISCUSSIONS:

None

ACTION:

A **MOTION** to **APPROVE** staff's recommendation was made by Ms. Fernandez, **SECONDED** by Ms. Watts Davis, and **PASSED UNANIMOUSLY**.

EVALUATION:

None

FOLLOW UP:

None

First Quarter Quality Presentation — *Bryan Alsip, M.D./Juan Garza, M.D.*

SUMMARY: The University Health quality goals include improving publicly reported ratings across multiple healthcare assessment agencies while reducing pay for performance program financial penalties. This Quality Report provides an overview of the Quality Plan for 2025 and a review of clinical contract monitoring.

Given University Health's continued achievement of a Hospital Safety grade of "A" from the Leapfrog Group through the Fall 2024 period, University Health will focus on sustaining many of the improvements in patient outcomes while continuing to include high-impact outcome metrics and leading indicators in proven quality improvement processes and reporting.

Important to this process is the annual review of all hospital publicly reported regulatory, reputational, and informational programs. Through this review, the University Health quality team aggregates metrics for inclusion in the quality metric matrix and sets goals for the calendar year. This year, this includes over 283 unique metrics across 14 publicly reported programs, identifying 27 tactical metrics that have significant impact on overall patient outcomes, safety and publicly reported programs.

Long reported on the CMS Hospital Compare website and included in CMS Star Rating consideration, the SEP-1 core measure outcomes will now be included in the outcomes component for scoring in the CMS Value-Based Purchasing (VBP) program penalty/incentives beginning FY2026. The quality team has been tracking these developments and, through multidisciplinary working and leadership accountability meetings, made sepsis outcomes a priority long before the inclusion by CMS as a VBP metric with a 2025 metric target set at top decile performance.

The 2025 Tactical Metric Categories consist of Mortality, Readmissions, Not Present on Admission (NPOA) Complications, Healthcare-Associated Infections, Health Equity and Ambulatory Metrics.

Additional working meetings have been developed for engaged physicians, staff, and identified key leaders to address expanded tactical goals. For readmissions this includes the University Health quality team, care coordination, nursing, and physician leaders. Initial focus will include tracking defined metrics, data-driven opportunities for improvement, and key actions to better manage discharge handoffs, patient navigation, and returns to acute care throughout University Health.

For postoperative DVT/PE, a new workgroup is focusing on developing University Health protocols and guidelines to standardize processes for the reduction of these not present on admission complications. Co-chaired by a physician leader and the quality team lead, this multidisciplinary team includes University Health physicians nursing leaders, and other staff.

To reduce healthcare-acquired pressure injuries, the University Health quality team will build on the successes of 2024 by working with nursing and physicians, and wound care clinicians to review, document clarifications, and implement actions to improve the wound care for all patients.

In 2025, the outcomes from the CMS Star Rating, as well as the specific metrics that comprise these ratings, will be a focus area for University Health to improve the overall publicly-reported performance.

With guidance from executive leadership, the quality team has reviewed the 46 metrics that comprise the rating and assigned key senior leaders responsible for each metric/domain. Each leader has been notified of their responsibilities, action/improvement templates have been created and shared, and mandatory presentations at either the inpatient or ambulatory quality improvement and patient safety (QIPS) meetings have been scheduled.

It is the expectation that each leader reviews ongoing progress towards targets and develops actions to meet or exceed goals with regular updates to leadership.

Clinical contracts are external contracts for the provision of care, treatment, and services provided to the hospital's patients. In accordance with UHS Policy 2.04; CMS Conditions of Participation 482.12; and Joint Commission standard LD.04.036.09, all clinical contracts must be reviewed annually. This review must include quality and performance metrics as well as compliance with overall contract provisions. All clinical contracts were reviewed as per policy with a complete assessment of the quality and performance metrics during which University Health was determined to meet all of the CMS Conditions of Participation and Joint Commission standards for 2024.

Action Items:

Consideration and Appropriate Action Regarding the 2025 Health Equity Through Action and Leadership (HEAL) Strategic Plan — Carol Huber, DrPH

SUMMARY: Regulatory and accrediting organizations, including the Centers for Medicare and Medicaid Services and the Joint Commission, require hospitals and health systems to proactively address these disparities. This necessitates ongoing and comprehensive efforts to cultivate an organizational culture centered on health equity. In late 2022, University Health established the Institute for Public Health to spearhead this initiative.

University Health Policy 2.19, Commitment to Advancing Health Equity, was initially approved by the Board of Managers in March 2024. This policy delineates the leadership responsibilities of the Institute for Public Health and emphasizes the collective obligation of all University Health departments, programs, providers, and staff to mitigate health disparities and promote health equity. Additionally, it mandates an annual development of a health equity strategic plan, which must be approved by the Board of Managers and reported to key stakeholders and made publicly accessible.

The Institute for Public Health led the implementation of the inaugural 2024 Health Equity through Action and Leadership (HEAL) Strategic Plan, which was approved by the Board of Managers in March 2024. Stakeholders across University Health contributed to the identification and prioritization of new strategies for this year. An expanded interdisciplinary team was appointed to serve as the Health Equity Leadership Team (HELT). The Institute for Public Health developed and shared the proposed 2025 HEAL Plan with the HELT, senior leaders, and the Board of Managers ad-hoc committee on Public Health. The final HEAL Plan (see attachment) contains five domains, aligned with regulatory and accreditation requirements. Each domain includes at least one goal and two or more strategies.

- I. Advance Health Equity as a Strategic Priority
- II. Enhance Internal Processes and Programs to Support Health Equity
- III. Identify Health Disparities
- IV. Implement Evidence-Informed Interventions to Reduce Health Disparities
- V. Partner with the Community to Advance Health Equity

RECOMMENDATION: Staff recommends Board approval the 2025 Health Equity through Action and Leadership (HEAL) Strategic Plan.

COMMENTS /DISCUSSIONS: Ms. Fernandez commented on when these conversations started and to see where the plan is now almost two years later and the beginning of implementation.

Ms. Fernandez added that she appreciates the systematic approach and also the integration not only as a system but also the integration with the Community because that is kind of the next phase and being informed by the community for that process, but also it is a very reciprocal relationship that she can see happening and growing and she expressed her gratitude to Dr. Huber and the team. Dr. Kelley added how she is excited on how the plan is progression and moving forward and added her appreciation for Dr. Huber's work.

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

EVALUATION: None

FOLLOW UP: None

Consideration and Appropriate Action Regarding the Capital Purchase of the Da Vinci 5 System with Intuitive Surgical, Inc. — *Bill Phillips*

SUMMARY: At the February 2025 Board Meeting, the Board of Managers approved the acquisition of a Da Vinci Xi Surgical Robot by Intuitive Surgical, Inc. This would replace University Health's oldest model Si robot to the Xi. University Health's procurement was notified by Intuitive Surgical, Inc. that the Xi was no longer in production and that University Health would need to purchase the Da Vinci 5 System to complete this upgrade project.

Once University Health was notified of the change, this information was presented to 30 of the robotic surgeons. This multidisciplinary team agreed that the purchase of the Da Vinci 5 System would be beneficial to the organization and still provide the access needed to robotic surgeries for patients. The Da Vinci 5 System is designed to provide flexibility for procedures performed across multiple specialties with broader anatomical access and enhanced ease of use for surgeons. Additionally, many procedures that required an overnight hospital stay can now be performed as outpatient surgery. The dimensions of the instrument enables surgeons to operate through one or a few small incisions, which can decrease patient recovery time and inpatient length of stay, ultimately improving patient outcomes and satisfaction.

RECOMMENDATION: Staff recommends the Board of Managers approve the purchase a Da Vinci 5 Surgical Robot System from Intuitive Surgical, Inc., that includes the upgrade cost from the Xi to the 5 System for \$510,250 for a new total of \$2,861,000 to be funded from the Board designated capital account.

COMMENTS /DISCUSSIONS: Dr. Cohen commented on how he would like to try the Robot and he expressed how this is a fortuitous thing that the technology is increasing so rapidly. Bill Phillips added that he is working on having the Robot will be at the Medical Miracles Gala for the donors and guests to see.

ACTION: A **MOTION** to **APPROVE** staff's recommendation was made by Dr. Cohen, **SECONDED** by Ms. Rodriguez, and **PASSED UNANIMOUSLY**.

EVALUATION: None.

FOLLOW UP: None

Consideration and Appropriate Action Regarding the Financial Report for February 2025 — *Reed Hurley*

SUMMARY: The February 2025 financials showed University Health's consolidated bottom line for the month of January 2025 reflects a gain of \$34.1 million, \$31.1 million better than the budgeted gain of \$3 million. This gain to budget is primarily due to patient activity driving positive net patient revenue of \$28.8 million.

In February, clinical activity (as measured by inpatient days) was up by 8.4% and inpatient discharges were higher than budget by 10.8%. Volumes exceeded budget across all key service delivery areas.

Community First experienced a bottom line gain of \$4.2 million, which was \$2.2 million greater than the budgeted gain of \$2 million. Community First membership is up 3.7% compared to Budget.

Year to Date Operating Revenue:

- Net patient revenue is over budget by \$50 million driven by high patient volumes, acuity of inpatient services, and the continued growth of retail pharmacy volumes.
- Supplemental revenue is under budget \$1.1 million due to a change in estimated NAIP program revenue.
- Community First premium revenue is over budget by \$11.1 million due to a 3.4% increase in insured membership compared to budget

Year to Date Operating Expense:

- Employee Compensation is over budget by \$9.7 million due to increased patient volumes requiring additional bedside staff and an increase in related health insurance expense.
- Purchased Services are under budget by \$2.5 million due to the timing of purchased service contract implementation.
- Supplies are under budget by \$1.4 million primarily due to implementation of supply savings initiatives reducing the cost per patient in procedural areas.
- Community First claims expense is over budget by \$14.7 million due to higher than expected enrollment.

Year to Date Non-Operating Expense:

- Investment income of \$13.9 million was higher than budget by \$3.2 million.
- A net unrealized gain of \$7.3 million has been recorded.

Consolidated Balance Sheet Report:

- Days Revenue in Patient Accounts Receivable: 37.5 days on a budget of 38.0 days.
- The Community Hospitals project has a total expected budget of \$1.58 billion; \$1.278 billion of contracts have been approved by the Board of Managers. Total payments of \$270.9 million have been paid to date. \$1.1 billion in cash and bond proceeds have been encumbered for the project, additional cash reserves will be allocated over the next two years to fully fund the project.
- Unencumbered funds reserved for future capital needs has a balance of \$77.7 million.
- University Health's Net Asset Value has increased \$74.3 million year to date on a Generally Accepted Accounting Principles (GAAP) basis including debt service tax revenue and interest expense on bonds.

RECOMMENDATION: Staff recommends approval of the February 2025 Financial Report subject to audit.

COMMENTS /DISCUSSIONS: Mr. Hasslocher thank Reed Hurley and the staff for their hard work as we have in the past and continue to have another good month.

ACTION: A MOTION to APPROVE staff's recommendation was made by Ms. Fernandez, SECONDED by Dr. Cohen, and PASSED UNANIMOUSLY.

EVALUATION: None.
FOLLOW UP: None

Presentations and Education: None

Information Only Items:

- A. Cybersecurity Annual Report — *Bill Phillips*
- B. Update on the 89th Texas Legislative Session — *Andrew Smith*
- C. Update on the Community Hospitals — *Don Ryden*
- D. University Health Foundation Update — *Sara Alger*
- E. Report on Recent Recognitions and Upcoming Events — *Leni Kirkman*

Adjournment: — *Jimmy Hasslocher, Chair*

There being no further business Mr. Hasslocher adjourned the public meeting at 7:04pm.

Jimmy Hasslocher
Jimmy Hasslocher
Chair, Board of Managers

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

Janie M. Guevara
Janie M. Guevara, Recording Secretary

The Board of Managers may recess during the open meeting in order to hold a closed meeting. Alternatively, a closed meeting may be held before the open meeting or after its adjournment.

Closed Meeting: A closed meeting will be held pursuant to TEX. GOV'T CODE, Section 551.085 to receive information regarding pricing, market data and/or financial and planning information relating to the arrangement or provision of proposed new services and/or product lines.

Closed Meeting: A closed meeting will be held pursuant to TEX. GOV'T CODE, Section 551.085 to receive information regarding pricing or financial planning information relating to a bid or negotiation for the arrangement or provision of services or product lines to another person if disclosure of the information would give advantage to competitors of the hospital district.

