



STAYS IN FILE



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD OF MANAGERS

Meeting Agenda

Wednesday, December 19, 2018, 5:30 p.m.

Central Health Administrative Offices

1111 E. Cesar Chavez St.

Austin, Texas 78702

Board Room

CITIZENS' COMMUNICATION

CONSENT AGENDA

All matters listed under the CONSENT AGENDA subheading will be considered by the Board of Managers to be routine and will be enacted by one motion. There will be no separate discussion of these items unless a member of the Board requests that specific items be moved from the CONSENT AGENDA to the REGULAR AGENDA for discussion prior to the time the Board of Managers votes on the motion to adopt the CONSENT AGENDA.

- C1. Approve the minutes of the following meetings of the Central Health Board of Managers:
 - a. September 22, 2018 Special Called Board Meeting; and
 - b. October 24, 2018.

- C2. Receive the Quaterly Investment Report and ratify Central Health Investments for November 2018.

- C3. Approve Central Health's proposed legislative guiding principles for the upcoming 86th Legislative Session, as recommended by the Strategic Planning Committee.

- C4. Discuss and take appropriate action on the Central Health Board of Managers meeting schedule for Calendar Year 2019.

REGULAR AGENDA*

1. Discuss and take appropriate action on a resolution honoring Katrina Daniel for her service on the Central Health Board of Managers. (*Action Item*)
2. Receive, discuss, and take appropriate action on candidate recommendations made by the Subcommittee for Board Officers for the following officer positions:
 - a. Chairperson;
 - b. Vice-Chairperson; and
 - c. Treasurer. (*Action Item*)
3. Receive, discuss, and take appropriate action on recommendations made by the Subcommittee for Board Officers regarding the appointment of a Board Secretary. (*Action Item*)
4. Discuss and take appropriate action on the Fiscal Year 2019 budget for Sendero Health Plans, Inc.¹ (*Action Item*)
5. Discuss and take appropriate action on the execution of an employment contract with the President and CEO of Sendero Health Plans, Inc.¹ (*Action Item*)
6. Discuss an update on the expansion of the Central Health Premium Assistance Program related to Ideal Care offered by Sendero Health Plans, Inc.¹ (*Informational Item*)
7. Receive and discuss a presentation from Capital City Innovation on Fiscal Year 2018 operations and a proposed operational roadmap for Fiscal Year 2019. (*Informational Item*)
8. Receive a report of the November 2018 financial statements for Central Health. (*Informational Item*)
9. Receive a report of the November 2018 financial statements for the Community Care Collaborative. (*Informational Item*)
10. Receive reports from the following Board committees: Strategic Planning Committee and Budget and Finance Committee. (*Informational Item*)
11. Receive and discuss a report from the President & CEO on Central Health operations and current activities, including: (a) the Central Health Board of Managers strategic work plan and operational priorities; (b) an assessment of organizational work systems and processes; and (c) other personnel matters.¹ (*Informational Item*)
12. Discuss and take appropriate action on the 1115 Medicaid Waiver, Delivery System Reform Incentive Payment (DSRIP) projects, the Community Care Collaborative, including health care delivery arrangements, and other interrelated community partnerships.¹
13. Discuss and take appropriate action on an update regarding Sendero Health Plans, Inc., including the effect of federal legislative and regulatory actions.¹
14. Discuss and take appropriate action on Central Health owned or occupied real property, including the Downtown Campus and properties located in Eastern Travis County.¹
15. Confirm the next regular Board meeting date, time, and location. (*Informational Item*)

*The Board of Managers may take items in an order that differs from the posted order.

Note 1, Possible closed executive session item.

The Board of Managers may consider any matter posted on the agenda in a closed session if there are issues that require consideration in a closed session and the Board announces that the item will be considered during a closed session.

Members of the Board of Managers may participate in this meeting via videoconference in compliance with the Texas Open Meetings Act.

Consecutive interpretation services from Spanish to English are available during Citizens Communication or when public comment is invited. Please notify the front desk upon arrival if services are needed.

Los servicios de interpretación consecutiva del español al inglés están disponibles para la comunicación de los ciudadanos o cuando se invita al público a hacer comentarios. Si necesita estos servicios, al llegar sírvase notificarle al personal de la recepción.

Came to hand and posted on a Bulletin Board in the Courthouse,
Austin, Travis County, Texas on this the 14th day of

December 2018.

Dana DeBeauvoir

County Clerk, Travis County, Texas

By D. Campos Jr. Deputy

D. CAMPOS JR.



FILED AND RECORDED

OFFICIAL PUBLIC RECORDS

Dana DeBeauvoir

Dec 14, 2018 02:28 PM 201881938

FEE: \$0.00

Dana DeBeauvoir, County Clerk
Travis County TEXAS



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 1

Discuss and take appropriate action on a resolution honoring Katrina Daniel for her service on the Central Health Board of Managers.



**CENTRAL
HEALTH**

A RESOLUTION EXPRESSING APPRECIATION TO

KATRINA DANIEL, R.N.

**FOR HER SERVICE ON THE
BOARD OF MANAGERS OF CENTRAL HEALTH**

WHEREAS, Ms. Katrina Daniel has a history of volunteer and community service with organizations such as the American Red Cross, the Austin Neighborhoods Council, the Highland Neighborhood Association, and the Residential Design and Compatibility Commission; and

WHEREAS, Ms. Daniel started her career serving those who need access to critical life-saving medical treatment as a trauma nurse at Ben Taub Hospital, the teaching hospital of Harris Health; and

WHEREAS, Ms. Daniel recognized the need for a system of health care that improves health outcomes and championed partnerships that leveraged local tax dollars to bring down federal funding; and

WHEREAS, Ms. Daniel has been instrumental in the passage of Proposition 1 which established the Dell Medical School at the University of Texas at Austin and secured local match funding for participation in the Delivery System Reform Incentive Program which has brought millions of dollars to the local safety net health care system and improved the health of thousands of local Travis County residents; and

WHEREAS, Ms. Daniel has been a tireless and dedicated public servant who attained significant public healthcare experience in a variety of executive, planning, and public policy development positions with organizations such as the Texas Teacher Retirement System, Texas Department of Insurance, Texas Department of Health, the Sunset Advisory Commission, and the Texas Department of Family and Protective Services; and

WHEREAS, Ms. Daniel has been a strong advocate for women's health including reproductive health and a strategic, big picture thinker who positioned Central Health to be a uniquely Travis County solution to serve the health care needs of the community; and

WHEREAS, Ms. Daniel helped define Central Health's vision to transform the delivery of health care to Travis County residents and served as the Secretary and Treasurer for the Central Health board in 2013, becoming the Vice Chairperson in 2014, and the Chairperson of the board from 2015-2018; and

WHEREAS, Ms. Daniel brought unwavering dedication to the people of Travis County—especially for the people who need access to health care the most; and

WHEREAS, Ms. Daniel has brought steadfast commitment to her role as a board member; therefore

BE IT RESOLVED BY CENTRAL HEALTH that the Board expresses its sincere appreciation and gratitude to Ms. Daniel for her dedicated service to Central Health as a member of the Board of Managers; and

BE IT FURTHER RESOLVED, that the Secretary of the Board prepare a copy of this Resolution for presentation to Ms. Daniel.

Guadalupe Zamora, Chairperson,
Central Health Board of Managers

Date of Adoption



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 2

Receive, discuss, and take appropriate action on candidate recommendations made by the Subcommittee for Board Officers for the following officer positions:

- a. Chairperson;
- b. Vice-Chairperson; and
- c. Treasurer.



MEMORANDUM

To: Central Health Board of Managers
From: Nicole Aquino, Special Counsel – Board Governance and Open Records
CC: Mike Geeslin, President and CEO
Date: December 14, 2018
Re: Agenda items 2 & 3: Receive, discuss, and take appropriate action on candidate recommendations made by the Subcommittee for Board Officers for the following officer positions:
a. Chairperson;
b. Vice-Chairperson; and
c. Treasurer.

Receive, discuss, and take appropriate action on recommendations made by the Subcommittee for Board Officers regarding the appointment of a Board Secretary.

ACTION ITEM

Overview

The Central Health Bylaws require that the Board of Managers annually elect, from among themselves, a Chairperson, Vice-Chairperson, and Treasurer, and appoint a Secretary to serve as Board Officers for the next calendar year. The Bylaws set out processes for making recommendations on the slate of officers and subsequent election of the Chairperson, Vice-Chairperson, and Treasurer, and appointing a Secretary. This memo summarizes those processes and the proceedings of the November 28th, 2018 meetings of the Executive Committee, the Subcommittee on Board Officers, and the Board of Managers.

Synopsis

The Bylaws require that the members elect from amongst themselves a Chairperson, Vice-Chairperson, and Treasurer, and appoint a Secretary annually, at a December meeting of the Board. Elections and appointments must be conducted in open session and require the affirmative vote of a majority of those in attendance to be approved.

The Bylaws also require that the Executive Committee, comprised of the current Chairperson, Vice-Chairperson, Treasurer, and Secretary, form a subcommittee, chaired by the former Board Chairperson and comprised of at least one member of the Executive Committee, for the purpose of making recommendations for Board officers. In addition to recommendations made by this subcommittee, the bylaws also permit nominations, including self-nominations, for all positions to be made from the floor by the members at a regular meeting of the Board.

On November 28th, 2018 the Executive Committee convened a meeting, with the sole purpose of forming a Subcommittee for Board Officers to make officer recommendations to the full Board. In accordance with the requirements of the Bylaws, the Subcommittee for Board Officers (Subcommittee) was chaired by Katrina Daniel, the former Board Chairperson and comprised of Managers Guadalupe Zamora, Sherri Greenberg, and Charles Bell. Immediately following adjournment of the Executive Committee, the Subcommittee for Board Officers convened a meeting to discuss and make officer recommendations for calendar year 2019. In addition to the members of the Subcommittee, Managers Shannon Jones and Cynthia Valadez attended the meeting. It is customary and permissible for all Board members to participate in discussion of agenda items at most Board Committee and Subcommittee meetings, whether or not they are members of the particular Committee or Subcommittee. There was limited input or discussion regarding the slate of officers to be recommended to the full Board of consideration. The meeting concluded with the Subcommittee unanimously recommending the following slate of officers for calendar year 2019:

Chairperson - Guadalupe Zamora
Vice-Chairperson – Sherri Greenberg
Treasurer – Charles Bell
Secretary – Abigail Aiken

The November 28th, 2018 Board of Managers agenda included items for both the election of the Chairperson, Vice-Chairperson, and Treasurer and the appointment of the Secretary for calendar year 2019. However, due to the Bylaws requiring that these actions be taken at a December meeting of the Board, Chairperson Zamora determined that the best course of action was to postpone the item until the December meeting. However, there were questions from Board members on the process and the item was taken up by the Chairperson to permit discussion. The majority of the discussion focused on the permissibility of Board members, who were not members of the Subcommittee, to provide input or make alternative recommendations regarding the slate of officers. While non-Subcommittee members would not have been permitted to take formal action on recommendations for Board officers, all Board members in attendance at the Subcommittee meeting would have been allowed to participate in discussion of the proposed slate of officers, as is customary at most Board Committees and Subcommittees meetings.

When these items are considered at the December 19th, 2018 meeting, all members of the Board will have another opportunity to discuss the Subcommittee recommendations, as well as make alternative nominations, including self-nominations, and to vote in favor of or against any nominee for an officer position.



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 3

Receive, discuss, and take appropriate action on recommendations made by the Subcommittee for Board Officers regarding the appointment of a Board Secretary.



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 4

Discuss and take appropriate action on the Fiscal Year 2019 budget for Sendero Health Plans, Inc.1

SENDERO HEALTH PLANS 2019 BUDGET YEAR OVER YEAR

	<u>2018</u> PROJECTED thru DECEMBER 2018	<u>2019 PROJECTED</u> PROJECTED for DECEMBER 2019	<u>NOTES</u>
Total Revenue	\$149,971,943	\$90,141,600	Will depend on actual membership throughout 2019
Risk Adjustment	(\$19,080,416)	(\$3,408,000)	Difference redirected towards CHAP members
Revenue After Risk Adjustment	\$130,891,527	\$86,733,600	Dependent on final risk scores
Total Medical Expenses	\$123,282,377	\$66,091,003	Dependent on health of members
Contribution to Overhead	\$7,609,150	\$20,642,597	Increased contribution from risk management
Administrative Expenses	\$27,220,169 21%	\$19,487,345 22%	Maintaining ratio in spite of reduced membership
Net Income (loss)	<u>(\$19,611,019)</u>	<u>\$1,155,251</u>	Breakeven and within range of actuarial projections
Average Membership	30,888	14,200	2018 Includes STAR CHIP
Admin as % of Revenues After Risk Adj	21%	22%	Maintaining ratio in spite of reduced membership



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 5

Discuss and take appropriate action on the execution of an employment contract with the President and CEO of Sendero Health Plans, Inc.1



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 6

Discuss an update on the expansion of the Central Health Premium Assistance Program related to Ideal Care offered by Sendero Health Plans, Inc.1



MEMORANDUM

To: Central Health Board of Managers
CC: Mike Geeslin, President and CEO, Central Health
Wesley Durkalski, President and CEO, Sendero Health Plans
From: Stephanie Lee McDonald, Chief of Staff
Date: December 14, 2018
Re: **Agenda Item 6: CHAP Expansion Update – INFORMATIONAL ITEM**

Below is an update on outreach efforts current as of December 13, 2018 for eligible Medical Assistance Program (MAP) and Sliding Fee Scale (SFS) members for the Central Health Assistance Program Expansion (CHAP) with IdealCare by Sendero.

Following the November Budget and Finance Committee Meeting, the Central Health Eligibility Team began outreach to two additional groups of patients in addition to the patients with a Risk Score of 15 or greater. The second group have a Score between 12 and 15; the third group had a Risk Score over 15 in FY17, but not in FY18 most likely due to medical record coding inconsistencies. An additional group, Cohort 4, were added. This cohort are Community Care Collaborative patients who did not have a risk score, but were identified by the Community Care Collaborative Assistant Medical Doctor as high risk based on current health conditions and recent utilization.

- Cohort 1- Individuals with an FY18 Risk Score of 15 or greater
- Cohort 2- Individuals with an FY18 Risk Score between 12-15
- Cohort 3- Individuals with an FY17 Risk Score of 15 and an FY18 score below 15
- Cohort 4- Individuals without a Risk Score, but identified by CCC as high risk

As of December 14, 2018 205 MAP or CCC Sliding Fee Scale members have enrolled for the CHAP Expansion Program in IdealCare.

- 2018 Average Risk Score -19.44 (does not include Cohort 4)
- FY19 Premium cost for Jan-Sept. \$2,385,274
- Average premium cost per month - \$1,293



Individuals Identified as CHAP Expansion Eligible

	<u>Cohort 1</u>	<u>Cohort 2</u>	<u>Cohort 3</u>	<u>Cohort 4</u>	<u>Total</u>
MAP Individuals	377	131	146	11	665
MAP-Homeless	105	45	56	10	216
CCC SFS	118	54	26	1	199
Total	600	230	228	22	1080
	<u>Cohort 1</u>	<u>Cohort 2</u>	<u>Cohort 3</u>	<u>Cohort 4</u>	<u>Total</u>
Enrolled	123	34	46	2	205
Undecided	6	3	2	0	11
Declined	5	0	0	0	5
Total	134	37	48	2	221

Overall Outreach Efforts as of December 13, 2018

Response from Outreach Attempts	Cohort 1	Cohort 2	Cohort 3	Cohort 4	Total
Appointment Scheduled	164	51	61	5	281
<i>Future Appointments</i>	2	8	7	2	19
<i>No shows</i>	63	2	2	0	67
Will Call Sendero Directly	47	17	8	1	73
Interested but has barriers	16	5	2	0	23
Interested- will review mailer, talk to family	22	15	15	0	52
Not Interested	42	20	23	1	86
Wrong or No Phone or ineligible	231	76	53	8	368
Total	522	184	162	15	883

Telephone Outreach	Cohort 1	Cohort 2	Cohort 3	Cohort 4	Total
Total Call Attempts	883	544	303	0	1,730

Information Mailed to Eligible Member	Cohort 1	Cohort 3	Cohort 2	Cohort 4	Total
MAP	348	146	131	0	625
CUC Sliding Fee Scale	74	26	45	0	145
Total	422	172	176	0	770



Home Visits	Delivered	Attempted	Total
1st Round	21	53	74
2nd Round	14	35	49
Total	35	88	123

** Members are ineligible if they are eligible for another coverage program including Medicare or Medicaid. The numbers reflect total outreach attempts; a member may appear in more than one row in outreach attempts. Numbers differ from total identified in the cohort as no record is generated if contact with the member was not established.*

Open Enrollment closes at 11:59 p.m. on Saturday, December 15, 2018. Currently there are 19 appointments scheduled today. United Way continues to make calls through Saturday.

Should you have any questions, please do not hesitate to contact me.



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 7

Receive and discuss a presentation from Capital City Innovation on Fiscal Year 2018 operations and proposed operational roadmap for Fiscal Year 2019.



Central Health Board Meeting

12/19/18





Innovation Quarter – Wake Forest



Why Austin? Why Now?

In 2012, Austin residents created the Dell Medical School at the University of Texas

- The largest city with a tier 1 university and no medical school
- Commitment to the community
- Partnership with Seton/Ascension Health and Central Health
- The opportunity to re-think health, which will require collaboration



CONNECT



INVEST



TRAIN

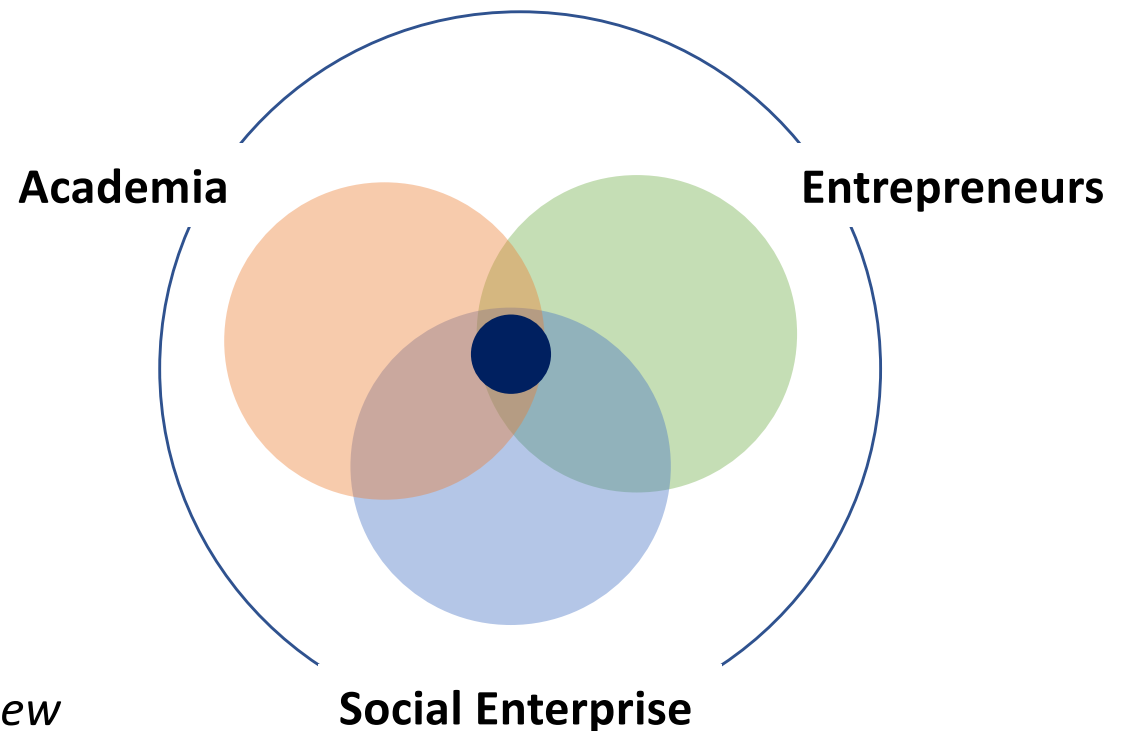


GROW



How can Austin interpret its vision for an Innovation District?

HEALTHY COMMUNITY
INCLUSIVE ECONOMIC GROWTH



Where Austin collaborates to create new models of health and economic growth for all.

Strategy: Roadmap Summary

DRAFT

AUSTIN'S INNOVATION DISTRICT ROADMAP SUMMARY

Innovation is the key to healthier and more vital communities

What is an Innovation District?

Innovation districts co-locate academic, business, and civic innovators within amenity-rich urban environments and with access to programs that help them more easily collaborate and turn new ideas into new products. They result in community benefit both by being inclusive in their process and by their output of new products.

What is Austin's Opportunity?

Austin has the chance to combine growing capabilities in health and life sciences with established academic and industry strengths in software and device technologies, within a creative and entrepreneurial environment.

What are the Strategic Priorities for Austin's Innovation District?

Austin's innovation district is a vibrant urban place and a set of programs that foster innovation through special access and systemic collaboration among universities, companies, entrepreneurs and community innovators. It will focus on better health and economic opportunities for all.

Its stakeholders:

- Connect the innovation community
- Invest in innovation projects
- Build regional workforce capacity
- Create inclusive and accessible places

How will Austin's Innovation District Take Root and Grow?

Austin's innovation district is a consortium of academic, corporate, and civic stakeholders who recognize the opportunity to harness health and life science innovation for inclusive economic growth and to create a scalable new model of health for all.

Starting with the downtown Brackenridge campus, Central Health, Dell Medical School – University of Texas at Austin, and others will participate in a

Austin's innovation district is a collaboration of public and private stakeholders including academic institutions, companies, startups, non-profits, community, healthcare systems, and government.

Capital City Innovation is a coordinating entity for these stakeholders.

chartered working group coordinated by Capital City Innovation.

The group will do the following for the district:

- Create a common identity
- Develop business attraction strategies
- Support programs and activities that promote community benefit through shared goals
- Grow a diverse membership comprising global businesses, civic groups, startups, and non-profits
- Transform the campus into a healthy, vibrant mix of commercial, residential, retail and public spaces

How Will Innovation District Activities Be Coordinated?

Innovation district stakeholders are already demonstrating the advantage of a coalition approach, by coordinating the planning of developments, attracting the interest of companies who want to be a part of the district, partnering on programs, and creating the story of Austin's health and life sciences innovation.

Capital City Innovation's plan is to extend and amplify these early achievements for the district by:

- Engaging stakeholders and adopting a charter for collaboration
- Organizing a framework and business model to coordinate future efforts
- Developing a blueprint
- Creating a common value proposition, business attraction approach, and identity
- Developing a strategy for supporting and scaling innovation and community benefit programs

Austin's innovation district will ultimately connect other innovation hubs along the I-35 corridor to attract and grow innovators, companies and investors, and to create new jobs, economic benefits, and better health for the entire community.

AUSTIN'S INNOVATION DISTRICT STARTS WITH YOUR PARTICIPATION

Starting with the transformation of the Brackenridge Campus, the Innovation District is being led by Central Health and Dell Medical School along with the Downtown Austin Alliance, Opportunity Austin, and Seton. It will expand to include many more.



We are creating a coalition to coordinate district activities

Collaborating on these activities helps achieve a shared vision and goals for the innovation district, focusing on better health and economic opportunities for all.

Communications & Engagement



Innovation & Community Benefit Programs



A Shared & Vibrant Environment



Business Attraction



Using these tools



Roadmap

A shared understanding of where we've been and where we are heading



Blueprint

A guide for growing a vibrant, compact, and mixed-use district



Market Analysis

An analysis of industry potential and projected economic impact

**TOGETHER WE CAN ADVANCE
AUSTIN'S ECOSYSTEM OF INNOVATION!**



How can
you help?

Follow us on social media:

- @CapCityTx
- @ChrisLaing
- #AustinInnovates

Go to our website, sign up for our monthly blog, and join us:

- www.capitalcityinnovation.org

Be an advocate! Be a constructive critic! Want to get involved in planning our structure and sustainability model? Contact us!

- howdy@capitalcityinnovation.org
- claing@capitalcityinnovation.org

Help us build and tell the story of Austin's rise as a health and life science innovation hub!

AUSTIN'S INNOVATION DISTRICT ROADMAP SUMMARY

Innovation is the key to healthier and more vital communities

What is an Innovation District?

Innovation districts co-locate academic, business, and civic innovators within amenity-rich urban environments and with access to programs that help them more easily collaborate and turn new ideas into new products. They result in community benefit both by being inclusive in their process and by their output of new products.

What is Austin's Opportunity?

Austin has the chance to combine growing capabilities in health and life sciences with established academic and industry strengths in software and device technologies, within a creative and entrepreneurial environment.

What are the Strategic Priorities for Austin's Innovation District?

Austin's innovation district is a vibrant urban place and a set of programs that foster innovation through special access and systemic collaboration among universities, companies, entrepreneurs and community innovators. It will focus on better health and economic opportunities for all.

Its stakeholders:

- Connect the innovation community
- Invest in innovation projects
- Build regional workforce capacity
- Create inclusive and accessible places

How will Austin's Innovation District Take Root and Grow?

Austin's innovation district is a consortium of academic, corporate, and civic stakeholders who recognize the opportunity to harness health and life science innovation for inclusive economic growth and to create a scalable new model of health for all.

Starting with the downtown Brackenridge campus, Central Health, Dell Medical School – University of Texas at Austin, and others will participate in a

Austin's innovation district is a collaboration of public and private stakeholders including academic institutions, companies, startups, non-profits, community, healthcare systems, and government.

Capital City Innovation is a coordinating entity for these stakeholders.

chartered working group coordinated by Capital City Innovation.

The group will do the following for the district:

- Create a common identity
- Develop business attraction strategies
- Support programs and activities that promote community benefit through shared goals
- Grow a diverse membership comprising global businesses, civic groups, startups, and non-profits
- Transform the campus into a healthy, vibrant mix of commercial, residential, retail and public spaces

How Will Innovation District Activities Be Coordinated?

Innovation district stakeholders are already demonstrating the advantage of a coalition approach, by coordinating the planning of developments, attracting the interest of companies who want to be a part of the district, partnering on programs, and creating the story of Austin's health and life sciences innovation.

Capital City Innovation's plan is to extend and amplify these early achievements for the district by:

- Engaging stakeholders and adopting a charter for collaboration
- Organizing a framework and business model to coordinate future efforts
- Developing a blueprint
- Creating a common value proposition, business attraction approach, and identity
- Developing a strategy for supporting and scaling innovation and community benefit programs

Austin's innovation district will ultimately connect other innovation hubs along the I-35 corridor to attract and grow innovators, companies and investors, and to create new jobs, economic benefits, and better health for the entire community.

AUSTIN'S INNOVATION DISTRICT STARTS WITH YOUR PARTICIPATION

Starting with the transformation of the Brackenridge Campus, the Innovation District is being led by Central Health and Dell Medical School along with the Downtown Austin Alliance, Opportunity Austin, and Seton. It will expand to include many more.



We are creating a coalition to coordinate district activities
Collaborating on these activities helps achieve a shared vision and goals for the innovation district, focusing on better health and economic opportunities for all.

Communications & Engagement



Innovation & Community Benefit Programs



A Shared & Vibrant Environment



Business Attraction



Using these tools



Roadmap

A shared understanding of where we've been and where we are heading



Blueprint

A guide for growing a vibrant, compact, and mixed-use district



Market Analysis

An analysis of industry potential and projected economic impact

TOGETHER WE CAN ADVANCE AUSTIN'S ECOSYSTEM OF INNOVATION!



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 8

Receive a report of the November 2018 financial statements for Central Health.



CENTRAL HEALTH

Central Health

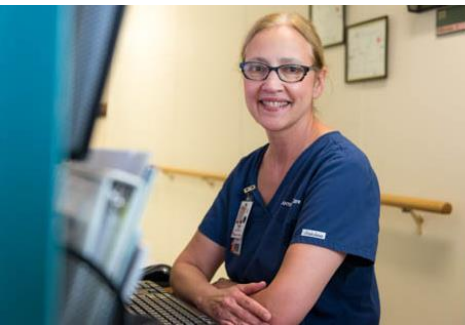
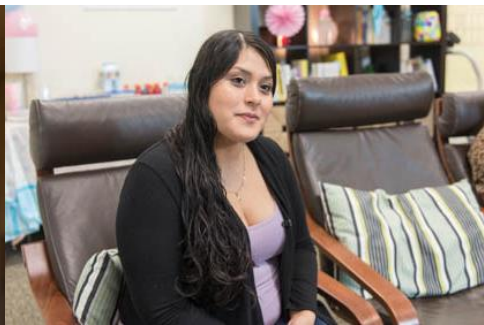
Financial Statement Presentation

FY 2019 – as of November 30, 2018 (Preliminary)

Central Health Board of Managers

December 19, 2018

Lisa Owens, VP of Financial Operations





November 2018 Financial Highlights

- Financial results are preliminary. Audited FY2018 financials will be presented when the audit is complete.
- Year-to-date, collected net property tax revenue is \$11.7 million compared to \$9.9 million in Nov 2017.
- The IGT for YTD Nov 2018 was \$13.7 compared to \$18.3 million in YTD Nov 2017.

Preliminary



Balance Sheet
As of November 30, 2018
(Page 1 of 2, Assets)

Assets	Preliminary as of 11/30/2018	as of 11/30/2017
Current Assets		
Cash and cash equivalents	1,573,927	1,612,892
Short-term investments	71,378,337	81,178,331
Ad valorem taxes receivable	189,899,631	175,420,242
Other receivables	6,130,349	2,925,817
Prepaid expenses	1,294,279	841,481
Total Current Assets	<u>270,276,523</u>	<u>261,978,763</u>
Noncurrent or restricted cash and investments		
Restricted for capital acquisition	6,328,247	6,836,552
Sendero paid-in-capital	71,000,000	39,000,000
Working capital advance to CommUnityCare	4,000,000	4,000,000
Sendero Surplus Debenture	17,083,000	17,083,000
Total Noncurrent or restricted cash and investments	<u>98,411,247</u>	<u>66,919,552</u>
Capital Assets		
Land	11,770,184	11,770,184
Buildings and improvements	134,241,485	132,381,882
Equipment and furniture	8,779,232	8,900,240
Construction in progress	379,122	2,190,690
Less accumulated depreciation	(40,683,296)	(36,670,375)
Total Capital Assets	<u>114,486,727</u>	<u>118,572,621</u>
Total Assets	<u><u>483,174,498</u></u>	<u><u>447,470,936</u></u>

Preliminary



Balance Sheet
As of November 30, 2018
(Page 2 of 2, Liabilities and Net Assets)

Liabilities	Preliminary as of 11/30/2018	as of 11/30/2017
Current Liabilities		
Accounts payable	1,059,450	1,736,603
Salaries and benefits payable	722,326	611,965
Other Payables	90,127	15,327,416
Debt service payable, short-term	1,119,799	1,096,599
Deferred tax revenue	187,845,355	173,999,303
Other deferred revenue	0	2,679,374
Total Current Liabilities	190,837,057	195,451,260
Noncurrent Liabilities		
Debt service payable, long-term	8,350,000	9,380,000
Capital Lease Obligation, Long-Term		
Total Noncurrent Liabilities	8,350,000	9,380,000
Total Liabilities	199,187,057	204,831,260
Net Assets		
Unrestricted	169,500,714	124,067,056
Investment in Capital Assets	114,486,727	118,572,620
Total Net Assets	283,987,441	242,639,676
Liabilities and Net Assets	483,174,498	447,470,936

Preliminary



Sources and Uses Report
Fiscal Year-to-Date through November 30, 2018
(Excludes Depreciation Expense)

	Preliminary This Month	Prelim - Fiscal Year to Date	Fiscal Year Budget	Percent of Budget Used	Prior Fiscal Year to Date
Sources					
Property Tax Revenue	9,874,161	11,658,703	196,861,527	5.9%	9,876,715
Lease Revenue	857,841	1,715,682	18,067,937	9.5%	1,860,000
Other Revenue	123,371	274,268	400,000	68.6%	194,680
Tobacco Settlement Revenue	0	0	2,000,000	0.0%	0
Contingency Reserve (Carryforward)	0	0	41,039,184	0.0%	51,560,311
Total Sources	10,855,373	13,648,653	258,368,648	5.3%	63,491,706
Uses of Funds					
Healthcare Delivery	8,320,949	16,570,168	247,343,600	6.7%	20,473,669
Administrative Program					
Salaries and benefits	444,652	757,586	4,690,997	16.1%	586,707
Legal Fees	42,577	37,444	1,198,320	3.1%	92,876
Consulting Fees	14,839	28,797	1,026,500	2.8%	130,703
Other Purchase Goods and Services	88,908	165,076	2,406,021	6.9%	276,773
Total Administrative Program	590,976	988,903	9,321,838	10.6%	1,087,059
Tax Collection Expenses	9,505	19,010	1,703,211	1.1%	74,046
Total Uses	8,921,430	17,578,081	258,368,648	6.8%	21,634,774
Excess Sources / (Uses)	1,933,943	(3,929,428)	0		41,856,932

Preliminary



Healthcare Delivery Expense

Fiscal Year-to-Date through November 30, 2018

(Excludes Depreciation Expense)

	Preliminary This Month	Prelim - Fiscal Year to Date	Fiscal Year Budget	Percent of Budget Used	Prior Fiscal Year to Date
Intergovernmental Transfers (IGTs) ⁽¹⁾	6,876,931	13,711,986	139,130,000	9.9%	18,278,393
Provider Costs					
Primary Care	65,862	134,124	790,344	17.0%	60,588
DSRIP Project Expense	-	-	-	0.0%	23,000
Charity Care	-	-	-	0.0%	708,622
Member Payment to CCC ⁽²⁾	-	-	34,000,000	0.0%	0
Medical Administration	51,440	101,232	719,990	14.1%	154,319
Subtotal Provider Costs	<u>117,302</u>	<u>235,356</u>	<u>35,510,334</u>	<u>0.7%</u>	<u>946,529</u>
Service Expansion Funds	-	-	4,480,000	0.0%	-
Total IGTs and Provider Costs	<u>6,994,233</u>	<u>13,947,342</u>	<u>179,120,334</u>	<u>7.8%</u>	<u>19,224,922</u>
Healthcare Delivery Operating Costs					
Salaries and benefits	498,124	831,019	3,818,591	21.8%	580,876
Consulting Services	7,654	9,932	559,590	1.8%	27,694
Legal Fees	3,277	35,692	51,200	69.7%	2,228
Other Services and Purchased Goods	239,403	431,796	5,164,895	8.4%	138,431
Subtotal HCD Operating Costs	<u>748,458</u>	<u>1,308,439</u>	<u>9,594,276</u>	<u>13.6%</u>	<u>749,229</u>
Other Costs					
UMCB Campus Redevelopment	263,468	501,021	11,125,542	4.5%	95,318
ACA Enrollment and Subsidy	284,857	753,500	8,916,000	8.5%	339,801
Debt Service	29,933	59,866	1,372,818	4.4%	64,399
Subtotal Other Costs	<u>578,258</u>	<u>1,314,387</u>	<u>21,414,360</u>	<u>6.1%</u>	<u>499,518</u>
Reserves and Transfers					
FY2019 Capital reserve			2,840,000		
FY2019 Emergency reserve			1,000,000		
FY2019 Sendero risk-based capital			20,000,000		
FY2019 Contingency reserve appropriation			13,374,630		
Subtotal Reserves, Appropriated Uses and Transfers	<u>-</u>	<u>-</u>	<u>37,214,630</u>	<u>0.0%</u>	
Total Healthcare Delivery	<u>8,320,949</u>	<u>16,570,168</u>	<u>247,343,600</u>	<u>6.7%</u>	<u>20,473,669</u>

Preliminary

⁽¹⁾ Budget includes allocated portion of the contingency reserve appropriation, for IGT timing differences.

⁽²⁾ Final contributions will be subject to provisions of the MSA, which requires the parties to collaborate to adequately fund the CCC, but leaves the amount of funding up to each parties' discretion. Each member contribution could be more or less than the budget, depending upon a variety of factors.



Recap of FY18 IGT Payments Actuals Through November 30, 2018

<i>\$ in millions</i>	This Month	Fiscal Year-To-Date	Fiscal Year Budget	Under (Over) Budget	Prior Year Fiscal Year-To-Date
Private UC	-	-	24.0	24.0	-
UMCB UC	-	-	24.5	24.5	-
DSH	6.9	13.7	35.0	21.3	18.3
DSRIP - CCC	-	-	27.5	27.5	-
DSRIP - UMCB, Dell Children's	-	-	27.5	27.5	-
DSRIP - St. David's	-	-	0.6	0.6	-
Total	6.9	13.7	139.1	125.4	18.3

Preliminary



Questions ? Comments ?



Balance Sheet (Assets) – Slide 3

Current Assets

Cash and Cash Equivalents – \$1.6M compared to \$1.6M Nov 2017

Short-term Investments – Short-term investments were \$71.4M at month-end, which is net of restricted investments of \$6.3M for capital acquisitions.

Ad Valorem Taxes Receivable – \$190M balance is composed of:

Gross Tax Receivables	\$192.2M
Taxable Assessed Valuation Adjustment	(.1)
Est. Allowance For Doubtful collections	<u>(2.2)</u>
Total Taxes Receivable	\$190.0M

Other Receivables – Other receivables total \$6.1M and consists of intercompany balances:

- CommUnityCare - \$1,709K
- Sendero - \$1,015K
- Community Care Collaborative - \$3,185K
- and interest receivable of \$120K

Prepaid Expenses – \$1.3M balance composed of:

- Prepaid Travis County Tax Collection Fee - \$687K
- Prepaid Travis County Tax Appraisal Fee - \$206K
- Prepaid ICC dues - \$51K
- Prepaid expenses other - \$356K

Total Current Assets – \$270M

Noncurrent Assets

Investments Restricted for Capital Acquisition – \$6.3M in short-term securities restricted for capital acquisition.

Sendero Paid-in Capital – \$71M (unchanged)

Working Capital Advance to CommUnityCare – \$4.0M (unchanged)



November 2018 Preliminary Monthly Financial Statements (unaudited)
Page 2 of 4

Sendero Surplus Debenture – \$17.1M (unchanged)

Capital Assets – \$115M, net of accumulated depreciation

Total Assets – \$483M

Balance Sheet (Liabilities and Net Assets) – Slide 4

Current Liabilities

Accounts Payable – Major components of the \$1.1M balance are:

- \$1,021K estimated healthcare delivery costs for services incurred but not received invoicing.
- \$39K in vendor invoices at month-end.

Salaries and Benefits Payable – \$722K balance is comprised of the accrued liability for salary costs unpaid at month-end, the value of accrued personal time off and various fringe benefit amounts withheld and not yet paid.

Other Payables – \$90K capital lease obligation related to medical equipment leased at Southeast Health and Wellness Center, compared to \$15.3M for Nov 2017 which was Charity Care \$4M & Seton lease revenue \$10M.

Debt Service Payable, Short-Term – \$1M balance is comprised of \$1M in Certificates of Obligation Payable.

Total Current Liabilities – \$191M

Noncurrent Liabilities

Debt Service Payable, Long-Term – \$8.4M balance of the \$16M in Series 2011 Certificates of Obligation, reduced by nine principal payments made to date. This debt was issued for the North Central clinic.

Total Noncurrent Liabilities – \$8.5M

Total Liabilities – \$199.2M

Net Assets



Unrestricted Net Assets – \$170M

Investment in Capital Assets – \$114M

Total Net Assets – \$284M

Total Liabilities and Net Assets – \$483M

Sources and Uses Report – Slide 5

November Preliminary financials → two months into the fiscal year, 17% of the fiscal year.

Sources – Total \$10.9

Property Tax Revenue – Net property tax revenue for the month was \$9.9M. Net revenue includes \$9.8M current month's collections, plus \$54K in adjustments for prior year delinquent taxes.

Lease Revenue – \$858K recorded for Seton lease payment and UT ground lease.

Other Revenue – \$123K investment income for the month, \$274K YTD, compared to \$195K last year.

Uses of Funds – Total \$8.9

Total Healthcare Delivery Program – Total healthcare delivery expenses were \$17M YTD compared to \$20 YTD thru Nov. 2017. The decrease is due to lower IGT in FY2019.

Administration Program – \$591K in expense for the month, which includes:

- Personnel costs – \$445K
- Legal fees – \$43K
- Consulting services – \$15K
- Other general and administrative – \$89K

Tax Collection Expenses – \$9.5K

Excess Sources/(Uses) – Increased by \$1.9M in November.



Healthcare Delivery Expense – Total \$8.3M and \$16.6M YTD - Slide 6

Intergovernmental Transfer "IGT" – November totaled \$7.0M, \$14M YTD compared to \$18M for the prior year.

Provider Costs – Healthcare delivery providers' expense for November totaled \$117K, which includes:

- Primary care – \$66K
- Medical Administration – \$51K

Healthcare Delivery Operating Cost – \$748K in expenses for the month and includes:

- Personnel costs – \$498K
- Consulting services – \$8K
- Legal fees – \$3K
- Other services and purchased goods – \$239K

Other Costs – \$578K in expense for the month, which includes:

- UMCB Campus Redevelopment – \$263K
- ACA Enrollment and Subsidy – \$285K
- Debt Service – \$30K

Total Healthcare Delivery for the month of September was \$8.3M.



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 9

Receive a report of the November 2018 financial statements for the Community Care Collaborative.

Community Care Collaborative

Financial Statement Presentation

FY 2019 – as of November 30, 2018 (Preliminary)

Central Health Board of Managers
Budget and Finance Committee
December 19, 2018

Jeff Knodel, Chief Financial Officer
Lisa Owens, VP of Financial Operations



Community Care
COLLABORATIVE

a partnership of Central Health and Seton Healthcare Family

- Financial Statements
 - Balance Sheet
 - Sources and Uses Report, Budget vs. Actual
 - Healthcare Delivery Summary
- Two months of information, October – November 2018

Preliminary

Balance Sheet

As of November 30, 2018



	FY 2018	FY 2017
Assets		
Cash and Cash Equivalents ⁽¹⁾	37,300,318	28,038,940
Other Receivables	164,710	83,428
Prepaid and Other	297,645	214,501
Total Assets	37,762,673	28,336,869
Liabilities		
AP and Accrued Liabilities	34,573,632	11,672,163
Deferred Revenue	773,780	2,801,052
Other Liabilities	269,214	208,328
Accrued Payroll	413,453	312,270
Total Liabilities	36,030,079	14,993,813
Net Assets	1,732,594	13,343,056
Liabilities and Net Assets	37,762,673	28,336,869

Preliminary

Sources and Uses Report, Budget vs Actual

Fiscal Year-to-Date through November 30, 2018



Sources of Funds	<u>Approved Budget</u>	<u>YTD Actual</u>	<u>YTD % of Budget</u>	<u>Prior YTD Actual</u>
DSRIP Revenue	59,417,759	0	0%	0
Member Payment - Seton ⁽¹⁾	40,000,000	10,133,245	25%	0
Member Payment - Central Health ⁽¹⁾	34,000,000	0	0%	0
Operations Contingency Carryforward	8,331,095		0%	0
Other Sources	300,000	49,500	17%	9,963
Total Sources of Funds	142,048,854	10,182,745	7%	9,964
Uses - Programs				
Healthcare Delivery	95,048,854	14,857,954	16%	4,723,827
UT Services Agreement	35,000,000	0	0%	0
DSRIP Project Costs	12,000,000	1,146,608	10%	8,425
Total Uses	142,048,854	16,004,563	11%	4,732,253
Net Sources (Uses)	-	(5,821,817)		(4,722,289)

⁽¹⁾ Final contributions will be subject to provisions of the MSA, which requires the parties to collaborate to adequately fund the CCC, but leaves the amount of funding up to each parties' discretion. Each member contribution could be more or less than the budget, depending upon a variety of factors.

Preliminary

Healthcare Delivery Costs - Summary

Fiscal Year-to-Date through November 30, 2018



	<u>Approved Budget</u>	<u>YTD Actual</u>	<u>YTD % of Budget</u>	<u>Prior YTD Actual</u>
Healthcare Delivery				
Primary Care	52,046,817	8,335,477	16%	2,429,944
Specialty Care	10,673,000	1,492,235	14%	207,695
Specialty Behavioral Health	8,933,856	1,422,309	16%	75,120
Specialty Dental Care	1,100,000	127,128	12%	71,490
Post-Acute Care	1,225,000	588,145	48%	0
Pharmacy	5,850,000	1,081,452	18%	396,526
Medical Management	1,915,141	286,810	15%	417,303
Urgent and Convenient Care	250,000	51,684	21%	1,794
Healthcare Delivery - Operations ⁽¹⁾	12,866,947	1,124,932	9%	845,967
Operations Contingency Reserve	188,093	347,781	185%	277,988.00
Total Healthcare Delivery	95,048,854	14,857,954	16%	4,723,827

⁽¹⁾ Additional detail provided

Preliminary

Healthcare Delivery Costs – Primary Care

Fiscal Year-to-Date through November 30, 2018



	<u>Approved Budget</u>	<u>YTD Actual</u>	<u>YTD % of Budget</u>	<u>Prior YTD Actual</u>
Primary Care				
CommUnityCare	41,760,000	6,464,233	15%	1,629,082
El Buen Samaritano	2,100,000	461,914	22%	169,538
Lone Star Circle of Care	4,364,995	925,737	21%	311,618
People's Community Clinic	2,500,000	346,667	14%	123,148
Volunteer Healthcare Clinic	200,000	18,978	9%	28,808
UT School of Nursing	25,000	667	3%	41.08
Prevention and Wellness	400,000	1,144	0%	-
City of Austin EMS	696,822	116,137	17%	0
Other	-	-		167,709
	52,046,817	8,335,477	16%	2,429,944

Preliminary

HCD Operations Expenditures

Fiscal Year-to-Date through November 30, 2018



	<u>Approved Budget</u>	<u>YTD Actual</u>	<u>YTD % of Budget</u>	<u>Prior YTD Actual</u>
Healthcare Delivery Operations				
Service Delivery Operations	1,516,171	-	0%	-
Claims Payment & Analysis	2,425,492	110,193	5%	-
Eligibility and Enrollment	1,620,005	96,238	6%	-
Health Information Technology	3,230,901	329,830	10%	419,673
Project Management Office	918,619	128,536	14%	120,191
Quality Assessment Performance	1,567,385	162,352	10%	115,440
Strategy, Comm, Pop. Health, IDS	381,582	54,098	14%	410
Administration	1,206,792	243,684	20%	190,254
Total Healthcare Delivery Operations	12,866,947	1,124,932	9%	845,967

Preliminary

Thank You

www.ccc-ids.org



a partnership of Central Health and Seton Healthcare Family



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 10

Receive reports from the following Board committees: Strategic Planning Committee and Budget and Finance Committee.



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 11

Receive and discuss a report from the President & CEO on Central Health operations and current activities, including: (a) the Central Health Board of Managers strategic work plan and operational priorities; (b) an assessment of organizational work systems and processes; and (c) other personnel matters.¹



MEMORANDUM

To: Board of Managers
CC: Larry Wallace, Stephanie McDonald
From: Mike Geeslin
Date: December 12, 2018
Re: Eastern Travis County Focus Areas **INFORMATIONAL ITEM**

Overview

In September 2018, Central Health management recommended focusing on four areas in Travis County in need of additional health resources. Those four areas included:

- Creedmoor
- Kellam Road (previously Elroy)
- Austin's Colony-Hornsby Bend
- Colony Park

This memorandum serves as an update on the work for the above areas and notice of future media announcements. Anticipated service start dates vary, beginning in the spring of 2019.

Details

Thousands of individuals living in areas east of Austin's main urban core are currently receiving care by Central Health partners with funding through the Community Care Collaborative. As more of the population shifts eastward, additional assets and modes of service are needed further east to better serve our patients.

In the fall of 2017, work began on mapping out demographic trends and sketching out service delivery strategies for Eastern Travis County. This work, coordinated under a group convened by Larry Wallace, involved extensive collaboration among multiple agencies and provider partners. Moreover, the work encompassed many sites involving clinical and non-clinical resources.

To begin focusing project resources on a few locations, the Eastern Travis County Project Team 1 (ETCPT-1) was formed in late September 2018 in advance of the new fiscal year. ETCPT-1 is an enterprise-wide work group, consisting of staff from Central Health, the Joint Technology Team, Community Care Collaboration, Community Care Health Centers, UT School of Nursing, and Emergency Services District 11.

The ETCPT-1 mission was to determine whether the envisioned services in the four focus areas were possible and viable. These determinations are critical to fulfilling public commitments

and good stewardship. In performing its work, ETCPT-1 completed in-depth business, operational, technology, and real estate planning tasks.

Based on the work of ETCPT-1, the following service modalities and dates will be included in future media announcements and community awareness updates:

Site	Modality	Scope of Services	Expected Service Date
Creedmoor	Mobile Clinic, 2 days per week	Primary care, lab collection, preventive medicine	Late Spring, early Summer 2019
Kellam Road (previously Elroy)	Leased building space, 5-6 days per week	Primary care, lab, preventive medicine, community health, behavioral health, in-home follow-up, transportation to appointments	Construction to commence Spring 2019; clinical services will move to new site upon completion
Austin's Colony-Hornsby Bend	Home Visit Pilot Program Temporary modular building, 2 or 3 days per week depending on shared space arrangements for clinical or non-clinical services	Primary care, lab, preventive medicine, limited pharmacy, behavioral health	Home Visit late Spring 2019 Temporary modular building services Summer 2019
Colony Park	Mobile Clinic, 3 days per week	Primary care, lab collection, preventive medicine	Late Spring, early Summer 2019

For Austin's Colony-Hornsby Bend and Colony Park, work on longer-term health and wellness centers will continue while temporary or mobile arrangements are in use.

Media and community updates will occur in the immediate future and throughout calendar year 2019.

###



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 12

Discuss and take appropriate action on the 1115 Medicaid Waiver, Delivery System Reform Incentive Payment (DSRIP) projects, the Community Care Collaborative, including health care delivery arrangements, and other interrelated community partnerships.¹



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 13

Discuss and take appropriate action on an update regarding Sendero Health Plans, Inc., including the effect of federal legislative and regulatory actions.¹



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 14

Discuss and take appropriate action on Central Health owned or occupied real property, including the Downtown Campus and properties located in Eastern Travis County.¹



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Respect - We honor our relationship with those we serve and those with whom we work.

Collaboration - We partner with others to improve the health of our community.

BOARD MEETING

December 19, 2018

REGULAR AGENDA ITEM 15

Confirm the next regular Board meeting date, time, and location.