



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.

Right by All - By being open, anti-racist, equity-minded, and respectful in discourse, we honor those around us and do right by all people.

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

STRATEGIC PLANNING COMMITTEE MEETING

Wednesday, May 10, 2023, 1:00 p.m.

Videoconference meeting¹

A quorum of the Committee and the presiding officer will be present at:

Central Health Administrative Offices
1111 E. Cesar Chavez St.
Austin, Texas 78702
Board Room

Members of the public may attend the meeting at the address above, or observe and participate in the meeting by using the Zoom meeting link below (copy and paste into your web browser):

<https://us06web.zoom.us/j/88305476431?pwd=WIVRTENDSEE2Tmk0K1BMM2NMN3FMdz09>

Meeting ID: 883 0547 6431

Passcode: 255865

Or to participate by telephone only:

Dial: (346) 248-7799

Meeting ID: 883 0547 6431

Passcode: 255865

The Committee will meet via videoconference with a quorum present in person and allow public participation via videoconference and telephone as allowed under the Open Meetings Act. Although a quorum of the Committee will be physically present at the location posted in this meeting notice, we strongly encourage all members of the public to observe the meeting virtually and participate in public comment, if desired, through the virtual meeting link or telephone number listed on this meeting notice.

Members of the public who attend in person should conduct a self-assessment before coming to the building to ensure they do not have a high temperature or any symptoms of COVID-19. Anyone who is symptomatic and/or has a fever should contact their healthcare provider for further instructions. Symptomatic members of the public can still participate, if desired, through the virtual meeting link or telephone number listed on this meeting notice. Resources related to COVID-19 can be found at the following link:

<https://www.centralhealth.net/covid-info/>.

A member of the public who wishes to make comments virtually during the Public Communication portion of the meeting must properly register with Central Health **no later than 11:30 a.m. on May 10, 2023**. Registration can be completed in one of three ways:

- Complete the virtual sign-in form at <https://www.centralhealth.net/meeting-sign-up/>;
- Call 512-978-9190 and leave a voice message with your full name, your request to comment via telephone, videoconference, or in-person at the meeting; or
- Sign-in at the front desk on the day of the meeting, prior to the start of the meeting.

Individuals who register to speak on the website or by telephone will receive a confirmation email and/or phone call by staff with instructions on how to join the meeting and participate in public communication.

PUBLIC COMMUNICATION

Public Communication rules for Central Health Committee meetings include setting a fixed amount of time for a person to speak and limiting Committee responses to public inquiries, if any, to statements of specific factual information or existing policy.

COMMITTEE AGENDA²

1. Review and approve the minutes of the April 12, 2023 meeting of the Strategic Planning Committee. (*Action Item*)
2. Receive an update on the Central Health Fiscal Year 2022 Annual Report. (*Informational Item*)
3. Receive and discuss updates on the 1115 Medicaid Waiver, the Community Care Collaborative, and other healthcare delivery partners, programs, projects, reporting, and arrangements, including agreements with Ascension Texas and the University of Texas at Austin.³ (*Informational Item*)
4. Receive and discuss a briefing regarding *Travis County Healthcare District d/b/a Central Health v. Ascension Texas f/k/a Seton Healthcare Family*, Cause No. D-1-GN-23-000398.³ (*Informational Item*)
5. Confirm the next Strategic Planning Committee meeting date, time, and location. (*Informational Item*)

¹ This meeting may include a member of the Strategic Planning Committee participating by videoconference. It is the intent of the presiding officer to be physically present and preside over the meeting at Central Health Headquarters, 1111 Cesar Chavez, Austin, Texas 78702. This meeting location will be open to the public during the open portions of the meeting, and any member participating

by videoconference shall be visible and audible to the public members in attendance whenever the member is speaking. **Members of the public are strongly encouraged to participate remotely through the toll-free videoconference link or telephone number provided.**

- ² The Strategic Planning Committee may take items in an order that differs from the posted order and may consider any item posted on the agenda in a closed session if the item involves issues that require consideration in a closed session and the Committee announces that the item will be considered during a closed session. A quorum of Central Health's Board of Managers may convene or participate via videoconference to discuss matters on the Committee agenda. However, Board members who are not Committee members will not vote on any Committee agenda items, nor will any full Board action be taken.
- ³ Possible closed session discussion under Texas Government Code §551.071 (Consultation with Attorney).

Any individual with a disability who plans to attend or view this meeting and requires auxiliary aids or services should notify Central Health as far in advance of the meeting day as possible, but no less than two days in advance, so that appropriate arrangements can be made. Notice should be given to the Board Governance Manager by telephone at (512) 978-8049.

Cualquier persona con una discapacidad que planea asistir o ver esta reunión y requiera ayudas o servicios auxiliares debe notificar a Central Health con la mayor anticipación posible de la reunión, pero no menos de dos días de anticipación, para que se puedan hacer los arreglos apropiados. Se debe notificar al Gerente de Gobierno de la Junta por teléfono al (512) 978-8049.

Central Health Board of Managers Shared Commitments **Agreed adopted on June 30, 2021**

Whereas, the Board of Managers of Central Health has come together as a governing body to ensure the Vision of Central Health: Central Texas is a model health Community;

Whereas, the Board of Managers of Central Health bring this vision into reality by enacting the mission of caring for those who need it most and thereby improving the health of our community;

Whereas, the Board of Managers of Central Health achieves excellence toward this vision and mission through the stated values of Stewardship, Innovation, Respect, and Collaboration;

Whereas, the Board of Managers of Central Health further known as we in this document understand that systemic racism is the root of health inequities that emerge from a history of racism in Texas including Travis County that contributes to the social determinants of health that play a primary role in producing inequitable health outcomes;

Whereas, as an organization, Central Health is anti-racist and committed to a diverse and inclusive culture that seeks equity and social justice in the pursuit of its mission:

1. We Commit to informing all of our actions as Board Managers with the understanding that we are accountable to recognizing and to interrupting systems of oppression. This includes understanding the power structure in the United States, and Texas, and Travis County, that advantages certain community members and has historically disadvantaged other community members based on the color of their skin, race, ethnicity, language, and/or other characteristics. We further understand that to disrupt this power structure and the health inequities it produces, we must collaborate to collectively respond to the lived realities of all ethnicities, races, and identities disadvantaged within this system and all historically oppressed identities and communities disadvantaged within this system. We Commit to understanding that when disadvantaged communities compete against each other, we all lose in this system, and the only way forward is to work together for the benefit of all oppressed communities collectively.
2. We Commit to a model of Generative Leadership which requires us to understand and practice collaboration and accountability demonstrated by following our agreed upon meeting procedures and ensuring all members have the opportunity for comparable speaking time. We further Commit to intentionality prior to speaking including: considering: what is the goal of what I

want to share; is this the right time to share it; and is this in keeping with our collective goal for this particular moment within this particular meeting?

3. We Commit to Generative Conflict which includes engaging in disagreements and differences in perspective in a way that deepens relationships and trust by expanding knowledge and understanding of each other, including expecting our ideas to be expanded and enriched by learning and engaging with other Board Manager ideas, choosing curiosity over competition of ideas, and anchoring our conversations in our common purpose.
4. We Commit to practicing emotional intelligence as leaders which includes being aware of our own emotions and reactions and managing them, as well as being aware of our impact on others and managing this impact for the collective good when we are in our role as Board Managers.
5. We Commit to being aware of our own privileges and advantages in the sociopolitical and economic structure of the United States, Texas, and Travis County to use these for the benefit of interrupting inequities across historically disadvantaged identities.
6. We Commit to preventing the commission of microaggressions through the awareness of the history and oppression of diverse identities and communities. To this end, we Commit to strive to learn the historical context informing the lived realities of all historically oppressed identities and communities, and to use this to prevent use of language and commission of actions that can be harmful given these histories.
7. If we inadvertently commit a microaggression, we strive to immediately become aware on our own of the harm we have caused. If another Board Manager generously helps us become aware of a microaggression we have committed we welcome the support in our learning and growing process as a leader and immediately express appreciation for having made us aware, own the mistake we have made, acknowledge the impact of the harm we have caused, and engage repair through apology and the articulation of what we will do to avoid the repetition of such harm in the future.
8. If we observe one of our fellow Board Managers commit a microaggression, we Commit to calling them in by letting them know in a respectful and kind manner of the mistake that has been made.
9. We understand that many of us, as survivors of historically oppressed identities and communities, carry internalized narratives of oppression, and we can inadvertently express these oppressions against others in ways that cause harm and we Commit to the same process identified in 7 and 8 to engage repair and return to generative collaborative processes.
10. We understand that even without the history of oppression potentiating the weight of harm, expressions of prejudice and rudeness can also cause harm to our shared aims, and we Commit to the same process identified in 7 and 8 to engage repair and return to generative collaborative processes.

11. We Commit to using our Racial and Social Justice Framework (next page) for decision-making as we work together for the collective good of our communities as we eradicate health inequities and create a model healthy community.
12. We understand that we are entrusted with a vital responsibility for our communities and are accountable stewards for the time and resources available to our Board of Managers. We understand that these commitments are entered into to ensure responsible stewardship of this time and resources through generative collaborative processes to reach our vision and mission and we agree that if we do not follow any one of these commitments we welcome our Board Manager colleagues to bring this to our attention through the agreed upon process reflected here and when this occurs, we commit to immediately acknowledging the mistake and engaging in a repair and correction process as indicated in these commitments so that our work to dismantle systemic racism and resulting barriers and achieve health equity can move forward.

Be it adopted that the above agreements will be honored and acted upon by each Board Manager as of 6/30/2021 and henceforth forward as indicated by signature below.

Board Manager Signature

Date

Board Manager Printed Name

Calling In and Repairing Harm

Calling In after Harm in Groups with Shared Values and Aims Stance

Hey, this thing you said/did hurt some folks or could hurt some folks.

A) Here's why that can be hurtful or,

B) Please do some research to learn the history of why that's hurtful.

Implied message: I know you are good and are on this journey with us and we are all going to make mistakes as we unlearn things.

Calling In after Harm in Groups with Shared Values and Aims Sample Language

- I know it wasn't your intention, but what you just said minimizes the horror of _____ e.g. the history of racism, enslavement, the holocaust, etc.
- I know it wasn't your intention but what you just said has the impact of implying that _____ are not competent or as intelligent as others.
- What you just said suggests that _____ people don't belong.
- That phrase has been identified as being disrespectful and painful to _____ people and it's important that we not use it.
- Oh, I have also used that term, but I have now learned that when we use it we are leaving out people who _____ or we are implying that _____ and the word people are learning to use now is _____.
- The term used now by people living with that identity is _____.

Repairing Harm after Microaggressions, Mistakes, and expressions of Prejudice

- Own / Name it
- Recognize the Impact
- Apologize (Do not share context or explanations)
- Make any amends that are possible
- State what you are going to do to learn and do better in the future.

Sample Language: Thank you so much for letting me know. You are right, I used this term or said that phrase and realize that it has the impact of minimizing the experience of _____ or implying that _____. I am deeply sorry and will practice learning the correct language and will research and learn more about this to ensure that I do not make this mistake and cause this harm in the future.

RACIAL and SOCIAL JUSTICE FRAMEWORK

Values and Anti-Racism/Anti-Oppression

- Is this consistent with our values?
- Are we taking steps so we cannot predict outcomes by race and other systemically disadvantaged characteristics?

Intentional and Accountable Storytelling

- What data are we using and has it been disaggregated by race? What is the source of the data? Who is it making visible and invisible? Whose experience is being centralized and whose is being marginalized in the data? Does the way we are using the data reflect the complexity of the issues and reflect the issues accurately?
- What are the stories and narratives we are telling? What is the purpose? Who is interpreting the meaning? Who's it meant for? Who's impacted and how?
- Are we refusing to be ahistorical? Are we fully considering history and the impacts of the historical context?

Power Analysis

- What are the power dynamics in this situation? What are the intersecting spheres of oppression at work in this situation?
- What are the cultural norms of white supremacy at work in this situation?
- Who would benefit and who would be harmed by this action/decision?
- Does this interrupt/disrupt or collude with/reinforce oppressive systems/power structures?
- If this is attempting a solution, where are we locating the problem?
- Does the solution/strategy we are proposing change the system or the individual?
- Who are we asking to change and why?

Relationships

- Who is in the room and who isn't and why? Who is sharing and who is not and why?
- Whose perspective is represented/who is left out? And who is doing the representing? Who do we believe, who do we find credible? Why? Why not?
- Whose experience is being centralized and whose experience is being marginalized? Who is gazing and who is being gazed upon?
- Are we boldly leading toward our racial justice aim by building a broad coalition of support?
- Are we operating from a similar/shared understanding of anti-racism work? Do we have a shared anti-racist understanding of where the problem is located and a shared anti-racist theory of change to generate a solution? Have we agreed upon a shared goal?



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

May 10, 2023

AGENDA ITEM 1

Review and approve the minutes of the April 12, 2023 meeting of the Strategic Planning Committee.
(Action Item)

MINUTES OF MEETING – APRIL 12, 2023
CENTRAL HEALTH
STRATEGIC PLANNING COMMITTEE

On Tuesday, April 12, 2023, a meeting of the Central Health Strategic Planning Committee convened in open session at 1:31 p.m. in person at the Central Health Administrative Offices and remotely by toll-free videoconference. Clerk for the meeting was Briana Yanes.

Committee members present in person: Chair Jones, Manager Valadez, and Manager Kitchen

Committee members present via audio and video: Chair Brinson (arrived on video at 1:56)

Board members present via audio and video or in person: Manager Bell, Manager Motwani, Manager Martin, and Manager Museitif

COMMITTEE AGENDA

- 1. Review and approve the minutes of the March 8, 2023 meeting of the Strategic Planning Committee.**

Clerk's Notes: Discussion on this item began at 1:32 p.m.

Manager Bell moved that the Committee approve the minutes of the March 8, 2023 meeting of the Strategic Planning Committee.

Manager Valadez seconded the motion.

Chairperson Jones	For
Manager Valadez	For
Manager Kitchen	For
Manager Brinson	Absent

- 2. Receive an update on the Quality of Life and Patient Experience Survey.**

Clerk's Notes: Discussion on this item began at 1:33 p.m. Ms. Sarita Clark- Leach, Director of Analytics & Reporting, and Mr. Matt Richardson, Senior Data Strategy Analyst, Analytics and Reporting, presented on the Quality of Life Survey results. The presentation included an overview of the survey, a look at the surveyed population, and the demographics of the respondents. Lastly, they shared key findings and responses to the questions.

- 3. Receive an update on the Central Health dashboards associated with service-level reporting for Fiscal Year 2023.**

Clerk's Notes: Discussion on this item began at 2:15 p.m. Ms. Sarita Clark-Leach, Director of Analytics & Reporting, and Mr. JP Eichmiller, Senior Director of Strategy & Information Design, presented an external dashboard update. The presentation included a look at enrollment and clinic utilization and provider network dashboards.

- 4. Receive a Fiscal Year 2023 Service Delivery budget priority update.**

Clerk's Notes: Discussion on this item began at 2:33 p.m. Mr. Jonathan Morgan, Chief Operating Officer, announced that a memo was provided in the backup packet and that a full presentation would be coming to the Board at the May Board of Managers Meeting, but he would be available for any questions.

5. Confirm the next Strategic Planning Committee meeting date, time, and location.

Manager Bell moved that the Committee adjourn.

Manager Valadez seconded the motion.

Chairperson Jones	For
Manager Valadez	For
Manager Kitchen	For
Manager Brinson	For

The meeting was adjourned at 2:33 p.m.

ATTESTED TO BY:

Shannon Jones, Chairperson
Central Health Strategic Planning Committee

Cynthia Valadez, Secretary
Central Health Board of Managers



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

May 10, 2023

AGENDA ITEM 2

Receive an update on the Central Health Fiscal Year 2022 Annual Report. (*Informational Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date May 10, 2023

Who will present the agenda item? (Name, Title) JP Eichmiller, Senior Director of Strategy and Information Design

General Item Description Central Health FY 2022 Annual Report

Is this an informational or action item? Informational

Fiscal Impact NA

Recommended Motion (if needed – action item) NA

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- 1) Central Health experienced year-over-year increases in total patients served, primary care visits and enrollment in health coverage programs as utilization continues to rebound from the pandemic.
- 2) Central Health’s provider network added 24 locations in 2022, bringing the total to 228 locations for patients to access care and services.
- 3) The development and adoption of Central Health’s Health Care Equity Plan in 2022 is providing guidance toward addressing the health needs of Travis County’s low income residents.
- 4) Central Health launched and expanded numerous important initiatives, including new specialty care services, post-acute care and medication assisted therapy.
- 5) Central Health continued to invest in its future by beginning construction on three new clinics in eastern Travis County and funding a multi-specialty clinic in East Central Austin.

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Final report will be presented at the time of the meeting

Estimated time needed for presentation & questions? 10 minutes



CENTRAL HEALTH

Is closed session
recommended? (Consult
with attorneys.)

No

Form Prepared By/Date
Submitted:

JP Eichmiller – 5/2/2023



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

May 10, 2023

AGENDA ITEM 3

Receive and discuss updates on the 1115 Medicaid Waiver, the Community Care Collaborative, and other healthcare delivery partners, programs, projects, reporting, and arrangements, including agreements with Ascension Texas and the University of Texas at Austin.³ (*Informational Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date April 26, 2023

Who will present the agenda item? (Name, Title) Mike Geeslin, Monica Crowley

General Item Description Standing Partnership Item #6 (Reporting)

Is this an informational or action item? Informational

Recommended Motion (if needed – action item) N/A

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- Based upon direction from the Board of Managers, the FY2023 Central Health Budget Resolution, and the Affiliation Agreement between Central Health, CCC and UT, Central Health and University of Texas staff prepared a draft of an annual reporting matrix from UT to Central Health
- 1) Health
- Pursuant to the timelines set in the Budget Resolution, UT submitted initial examples of the types of data to be reported within the matrix on January 31, 2023. The matrix includes live, hyperlinks to datasets described in the matrix. UT is continuing to collect data to complete the reporting described in the matrix
- 2)
- The matrix was presented as informational material for review in board packets on 12/14/22, 1/25/23, 2/22/23, and 3/29/23. Discussion occurred on 1/25/23.
- 3)
- A preliminary report from Dell Medical School to the Board of Managers is tentatively scheduled for July 2023, in advance of the meetings for the FY 2024 Budget adoption. The FY 2023 Budget Resolution contemplates interval reports to occur during the time period from January 31, 2023 through January 31, 2024.
- 4)
- The purpose of the discussion on April 26 is to stage future reporting by UT-Dell Medical School and understand the reporting matrix as the Board’s tool for accountability.
- 5)

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Draft matrix including active hyperlinks to data

Estimated time needed for presentation & questions?



Is closed session recommended? (Consult with attorneys.)

N/A

Form Prepared By/Date Submitted:

Monica Crowley, April 18, 2023

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
<p>4.1. UT Austin Dell Medical School. UT will develop, own, and operate the UT Austin Dell Medical School and pursue full accreditation from the Liaison Committee for Medical Education (“LCME”) and the Accreditation Council for Graduate Medical Education (“ACGME”). Subject to continuing funding support from Seton and Central Health, UT Austin Dell Medical School will operate and serve as the Accreditation Council for Graduate Medical Education sponsoring institution of Graduation Medical Education residency programs in Austin, Texas, including those Graduation Medical Education programs currently sponsored by The University of Southwestern Medical Center (“UTSW”) in affiliation with Seton, with rotations at the Teaching Hospital and certain other IDS service sites in Travis County.</p>	<p>Accreditation Timeline and reaccreditation dates and overview of curriculum with any changes highlighted</p>	<p>Dell Medical School to provide</p>	<p>Liaison Committee for Medical Education (LCME) sets curriculum standards and oversight of medical schools through accreditation (hyperlink)</p>	
	<p><i>Graduation destination and specialty</i></p> <p>Comprehensive List of Dell Med UME Graduates Mapped by Residency Match</p>	<p>Dell Medical School to provide to Central Health to use data as desired</p>	<ul style="list-style-type: none"> Dell Medical School students would <u>only</u> now have the opportunity to match into local fellowships which have been started by Dell Medical School. A successful medical school matches residents to top tier residency and fellowship programs regardless of location. 	<ul style="list-style-type: none"> 300% growth in Graduation Medical Education programs (15→45) largely subspecialty fellowships in the last 7 years Pursuing Excellence in Medical Education (last updated June 2022)
	<p><i>Dell Medical School to provide rotation grids of programs, initial date of accreditation and # of resident positions within the programs for both Accreditation Council for Graduate Medical Education and Texas Medical Board programs</i></p> <p>Cumulative Dell Med ACGME Residency Totals</p> <p>Combined Residency Rotation Grid</p>	<p>The Office of Graduation Medical Education at Dell Medical School to provide with agreement from Ascension.</p>	<p>Accreditation Council for Graduate Medical Education (ACGME) in cooperation with American Boards of Medical Specialties govern residency training requirement including training experiences which influence locations of service provision.</p> <p>Additional grids to be added in the future.</p>	

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
	<p><i>Resident Matriculation Data - medical school of origin</i></p> <p>Graduating Med School of Incoming Resident</p>			
<p>4.2.1 Assist the CCC in serving low-income communities by offering opportunities to train Residents and Medical Students in community-based settings</p>	<ul style="list-style-type: none"> • <i>Med student curriculum including associated training sites.</i> <ul style="list-style-type: none"> ○ Dell Med UME Curriculum Overview • PC (Primary Care) Clerkship, Elective Enrollment Numbers <ul style="list-style-type: none"> ○ Primary Care Clerkship Enrollment Locations 	<p>Dell Medical School to provide</p>	<p>Covered in 4.1 with curriculum</p>	
	<p><i>Residency/Fellowship rotation grids including associated training sites</i></p>	<ul style="list-style-type: none"> • The Office of Graduation Medical Education at Dell Medical School to provide with agreement 	<p>Multiple clinics and hospitals across the developing Integrated Delivery System (IDS) are required to meet the necessary Accreditation Council for Graduate Medical Education (ACGME) training requirements to ensure that graduate learners have robust broad and deep training</p>	<p>Dell Med resident demographics (updated annually)</p>

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
		from Ascension <ul style="list-style-type: none"> Central Health to determine which are community-based settings associated with the safety net population 	experiences for continued accreditation.	
<p>4.2.2 Assist Central Health and the CCC in developing appropriate levels of clinical services at Community Clinics and new clinic locations in Travis County</p>	<ul style="list-style-type: none"> <i>Annual report for UT Health Austin provided to Central Health including services, volumes, and outcomes for MAP and MAP basic patients</i> Effort allocation matrix for employed faculty could be provided with service specificity to affiliated partner. <ul style="list-style-type: none"> Dell Med MSRDP Allocation Matrix Include data from the master service 	UT Health Austin Information Technology Medical Service, Research, and Development Plan (MSRDP) Allocation Grids (Central Health to determine if affiliate provides services to safety net population and at what level)	We annually provide this data and have for 4 years. Medical Service, Research and Development plan effort allocation matrix represents distribution of Dell Med Clinical Faculty efforts across affiliates. Practice site location coordinated through affiliates.	

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
	<p>agreement that is shared at the joint operating committee level once this is completed.</p> <ul style="list-style-type: none"> ○ Executive Summary to be provided ● Include data from grids derived from exhibits to master service provider agreement with Central Health 			
<p>4.2.3 Promote effective and efficient medical practice by training professionals to work together in multi-disciplinary teams</p>	<p>Current examples of UT's accomplishments in this area.</p>	<p>Dell Medical School to provide</p>		<p>Center for Health Interprofessional Practice & Education 2022 Annual Report</p>
<p>4.2.4 Assist the CCC, Central Health, and Seton with their Delivery System Reform Incentive Payment (“DSRIP”) projects under the existing Medicaid 1115 Waiver Program of the State.</p>			<p>This work is complete with the end of the DSRIP program.</p>	
<p>4.2.5 Provide medical care with a focus on preventative health care and the multitude of factors that impact health outcomes;</p>	<ul style="list-style-type: none"> ● Listing of all primary care sites where Dell Medical School faculty and residents provide care. (From resident rotation grids and faculty effort allocations outlined below. See 4.3) <ul style="list-style-type: none"> ○ Dell Med GME 			<ul style="list-style-type: none"> ● List other relevant projects in Pop Health and Dell Medical School, e.g., M3 (Mobile, Medical, and Mental Health Care) Street Team, Community Driven initiatives, Community Care, Community Health Worker (CHW) programs in collaboration with Austin Public Health (APH), Lone Star Circle of Care (LSCC),

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
	<p style="text-align: center;">Clinical Training Locations</p> <ul style="list-style-type: none"> • Current examples of UT’s accomplishments in this area. <ul style="list-style-type: none"> ○ Examples of Progress and Impact • Medical Student Curriculum – Preventative Care <ul style="list-style-type: none"> ○ Overview of Preventive Care Components of UME Curriculum 			<p>Black Men’s Health Clinic (BMHC), Ascension; Cancer Prevention and Research Institute of Texas (CPRIT) projects (Drs. Pignone, Shokar) and other relevant grants/contracts.</p> <ul style="list-style-type: none"> • A Low-Cost Approach to Increasing Colorectal Cancer Screening in Vulnerable Patients • Innovation in Cancer Prevention & Care • Improving the Continuum of Care for Mental Health
<p>4.2.6 Recruit, train, and educate Medical Students, including those from diverse ethnic and cultural backgrounds, consistent with applicable Laws.</p>	<p><i>Student demographics</i></p>	<p>Dell Medical School to provide</p>	<p>Provided on Dell Med website and updated annually</p> <p>Dell Med student demographics (updated annually)</p>	
<p>4.2.7 Generate and utilize data to educate physicians and patients on methods to achieve better health outcomes and reduce health disparities in Travis County.</p>	<ul style="list-style-type: none"> • Grand Rounds, Speaker Series, Workshops, Symposia and Seminars across the institution on select topics • Ongoing Dell Med/Travis County 	<p>Dell Medical School to provide</p>		

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
	Medical Society Town Halls for Central Texas Physicians			
<p>4.2.8 Endeavor to promote training that integrates biomedical science with other disciplines, thereby providing students with a full understanding of the myriad of factors that influence the individual and population health and suggested interventions that improve both, by developing and teaching innovative ways to provide medical care and strengthen population health within Travis County through research, education, public health policy and clinical practice.</p>	<ul style="list-style-type: none"> • Provide MS3 curriculum and tracts populated. <ul style="list-style-type: none"> ○ MS3 Curriculum Overview <ul style="list-style-type: none"> ○ Annual list of community and leadership projects ○ Comprehensive List of MS3 Projects by Year • Provide data on the Distinction tract and residents. <ul style="list-style-type: none"> ○ ACT Curriculum Overview • Health Equity and IPE Curriculum <ul style="list-style-type: none"> ○ Dell Med Health Equity Course Overview by Academic Year ○ Dell Med IPE Curriculum Overview 	Dell Medical School to provide		<p>Healthscape tract students have focused on delivering food for low-income Travis County residents (in the thousands) & eliminating medical debt with a specific focus on low-income communities of color (30+ a month)</p>

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
<p>4.2.9 Engage in clinical research to improve the quality of care in the community that will include integration of care, cultural sensitivity in treatment, and effective use of population data in the treatment of patients.</p>	<ul style="list-style-type: none"> • Funded/unfunded clinical research information. <ul style="list-style-type: none"> ○ List of Active Dell Med Research Projects by Department (Funded) • Annual publications/presentations <ul style="list-style-type: none"> ○ Examples of Impactful Research Stories • Blue Ridge Rankings • Annual Funding Levels <p>Dell Med Blue Ridge Ranking and Current Research Funding Overview</p>	<p>Dell Medical School to provide</p>	<p>Should show growth over time</p>	<ul style="list-style-type: none"> • Depression & other mental health for low-income older population with at least one comorbidity through health callers • Diabetes management through non-medical approaches for patients with unmanaged diabetes at LSCC • Mental health support for vulnerable LGBTQ youth • Food vouchers and impact on child diet. • Produce prescription programs with Peoples Community Clinic • Meal delivery for better management of diabetes with Community Care patients.
<p>4.3 UT Austin Dell Medical School Provision of Clinical Services. As soon as the Faculty and Residents are available in Travis County, Texas to provide clinical services, UT will make available, through the Seton 162b Entity or UT Austin Dell Medical School provider practice entities, appropriate members of its Faculty and Residents to provide clinical services at clinics and other facilities acting as providers for the IDS, including the Teaching Hospital, Dell Children’s Medical Center, and other</p>	<ul style="list-style-type: none"> • Resident rotations and sites • Faculty effort allocations as described in section 4.2.2 	<p>Dell Medical School Graduation Medical Education to provide with Ascension approval</p> <p>Central Health to abstract relevant sections.</p>	<p>As students and residents do not operate without supervision, it is not possible to determine at the patient level the level of involvement. The entity could provide based on claims data at the faculty level as we do for UT Health Austin, request between Central Health and entity.</p>	

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
<p>reasonably accessible facilities and clinics utilized by such Faculty and Residents to provide clinical services for IDS patients (“Service Sites”). Subject to evolutions in the generally accepted practice of medicine as reflected in periodic adjustments by the UT Austin Dell Medical School to its teaching programs, this participation will include Faculty and Residents providing a comprehensive range of medical services and clinic experiences to residents of Travis County who present to the various Service Sites and coordination with those Service Sites to assure efficient and quality care to the residents seeking services in those settings. At such Service Sites, the Seton 162b Entity or UT Austin Dell Medical School provider practice entities will accept MAP (or its successor) patients, Charity Care Enrollees, members of any health plan owned by Central Health and the CCC, any residents participating in any program of the IDS and uninsured patients, in the same manner and pursuant to procedures that ensure the same access as other patients of the Seton 162b Entity or UT Austin Dell Medical School provider practice entities regardless of the patient’s age, gender, race, color, religion, origin, sexual orientation, disability, health status, insurability, genetic information, source of payment, or utilization of medical or mental health services, consistent with the applicable UT Austin Dell Medical School Charity Care Policy. The Parties understand that the permanent and ongoing funding commitments of Central Health, CCC, and Seton to UT described in this</p>		<p>See Sec. 4.9 for charity care policy response</p>		

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
<p>Agreement, in that certain affiliation agreement between Seton and UT being prepared as of the Effective Date of this Agreement, and indirectly through the comprehensive affiliation arrangement existing as of the Effective Date of this Agreement between or among Central Health, Seton, and/or CCC, including the Master Agreement and Omnibus Agreement, are the bases for UT Austin Dell Medical School's provision of clinical services under this Section 4.3. Should such funding commitments be diminished or otherwise compromised during the Term of this Agreement, UT Austin Dell Medical School will use its best efforts to continue to provide the same level of clinical services as furnished prior to the diminution or compromise of such funding commitment, subject to good faith negotiations among the Parties to promptly identify and arrange for comparable, alternative levels of funding to UT Austin Dell Medical School.</p>				

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
<p>4.4 Women’s Health. A primary obligation of Central Health and the CCC is to assure that adequate services of all types are available to the women of Travis County. The UT Austin Dell Medical School will assist Central Health and the CCC in meeting this obligation by providing comprehensive education and training in women’s health services to its Residents and Medical Students and comprehensive women’s clinical services to this population as described in Section 4.3 above. Further, the UT Austin Dell Medical School plans to accept the transfer of sponsorship from UTSW and maintain an accredited graduate medical education residency program which includes all aspects of women’s health.</p> <p>4.5 Ethical and Religious Directives. The Parties acknowledge that Seton is limited by the Ethical and Religious Directives of the Catholic Church and cannot provide ERD Restricted Services in Seton facilities. UT agrees that it will cooperate with and assist the CCC and Central Health such that (i) the ERDs shall not impede the delivery of medically appropriate health care to the residents of Travis County outside of Seton facilities and (ii) the ERDs do not limit the education provided by Faculty to Medical Students and Residents. UT will participate with providers other than Seton to assure the education and training of the Residents and Medical Students in a comprehensive range of clinical services and the availability of such clinical services to Travis County residents.</p>	<p>Compliant with LCME and ACGME requirement (hyper link to LCME and ACGME)</p> <ul style="list-style-type: none"> • Curricula and other data to be shared through the JOC <ul style="list-style-type: none"> ○ <i>Current # of interval tubals performed by faculty</i> ○ <i>Current # of postpartum risk reducing salpingectomies done by our faculty at Seton</i> 	<p>Dell Medical School to provide</p> <p>Dell Medical School to provide in conjunction with Ascension and St. David’s</p>	<ul style="list-style-type: none"> • Dell Medical School has recruited and retained 3 Family Planning boarded faculty. • Current residents can no longer rotate at St. David’s. No longer have access in our program for postpartum tubal training except for those procedures done for risk reduction at Seton Medical Center Austin 	

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
<p>4.6. Ground Lease. UT will execute and maintain a ground lease with Central Health which shall, consistent with the terms of the ground lease, authorize Central Health to sublease certain property to Seton for the purpose of building and operating the new Teaching Hospital on such property (“Ground Lease”).</p>				
<p>4.7. Permitted Investment Payments. UT shall utilize the Permitted Investment Payments for funding of Permitted Investments and shall periodically inform Central Health and the CCC through the JAC and other means acceptable to UT as to the nature of the Permitted Investments being supported by such Permitted Investment Payments.</p>	<ul style="list-style-type: none"> • Permitted investments to be discussed in the JAC including: <ul style="list-style-type: none"> ○ Clinical Overhead Expenses Breakdown • Annual review with the previously agreed upon procedures. 	<p>Central Health may abstract to present and explain to their board.</p>	<p>Central Health and Dell Medical School will work within the JAC and other relevant working groups to consider a staged approach to provide a university-wide acceptable means of reporting with a goal to complete stage one by September 1, 2023.</p>	
<p>4.8 Medical Support. Consistent with Section 4.3 above, (i) UT will coordinate with the CCC, Central Health, and Seton in developing and staffing programs that will provide medical and clinical services through the Faculty and Residents that will benefit the residents of Travis County and (ii) UT Faculty and Residents licensed, privileged, or otherwise authorized to provide patient care services shall be available to participate in the IDS.</p>	<p>No additional information available beyond the data noted for 4.2.2 and 4.3 above.</p>			
<p>4.9 MAP and Charity Care Patient Access to Clinical Services. As soon as the Faculty and Residents are licensed, privileged, or otherwise authorized and available to provide patient care services in Travis County, they will provide clinical services to the residents of Travis County as described in Section 4.3</p>	<p><i>Annual report to include reference to UT Health Austin Charity Care Policy</i></p> <p><i>Also related to reporting in 4.3 and 4.4</i></p>		<p>UT Health Austin Charity Care Policy previously provided</p>	

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
<p>above. Additionally, as described in Section 4.3 above and subject to evolutions in the generally accepted practice of medicine as reflected in periodic program adjustment by the UT Austin Dell Medical School, the UT Austin Dell Medical School shall coordinate with Central Health, the CCC, Seton, the Seton 162b entity and UT Austin Dell Medical School provider practice entities to make available Faculty and Residents to provide part of the physician services component of the (i) MAP Healthcare Services and Charity Care Health Care Services in comparable specialties and scope as are provided as of the Effective Date of this Agreement by UTSW faculty and residents under the Omnibus Agreement, through or in conjunction with that certain UTSW and Seton Affiliation Agreement, effective as of November 30, 2009, and (ii) women’s or other health services that Seton cannot provide because of ERDs. It is understood by the Parties that a period of five (5) years will be required for the UT Austin Dell Medical School to recruit a full complement of Faculty. In conjunction with the recruitment of additional Faculty and expansion of Graduation Medical Education programs by UT Austin Dell Medical School, additional specialty and sub-specialty care will be provided by Faculty and Residents at such Service Sites, consistent with the efficient delivery of clinical services and the UT Austin Dell Medical School mission. Expansion of specific clinical programs will be addressed by the JAC. On an annual basis, the JAC shall</p>				

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
<p>consider changes to the types and volume of clinical services that it proposes to be provided by the Faculty and Residents through the Seton 162b Entity or UT Austin Dell Medical School provider practice entities. In the event that the members of the JAC cannot agree on the changes to the type and volume of clinical</p> <p>Dell Medical School services that it proposes to be provided by the Faculty and Residents licensed, privileged, or otherwise authorized to provide patient care services, the UT Austin Dell Medical School shall, consistent with Section 4.3 above, cooperate with Central Health, the CCC, the Seton 162b Entity or UT Austin Dell Medical School provider practice entities to provide in the next year the same type and volume of clinical services to Travis County residents (including MAP Enrollees and Charity Care Enrollees) as were provided in the immediately previous year, subject to evolutions in the generally accepted practice of medicine as reflected in periodic programmatic adjustments by the UT Austin Dell Medical School.</p>				
<p>4.10 Medical and Clinical Research Resources. The Parties acknowledge that UT will, as a part of the UT Austin Dell Medical School’s mission, engage in research activities to develop medical and clinical innovations that will improve and enhance the medical care available to patients. The UT Austin Dell Medical School will participate in clinical research programs that are intended to expand the medical research presently performed in Travis County. UT will pursue a</p>	<p>No additional information available beyond the data noted for 4.2.9 above.</p>			

Affiliation Agreement Term	Relevant Information or Data for Inclusion in Annual Report	Source of Information	Context Notes	Highlights
broad range of medical research regardless of any potential conflict with the ERDs and in doing so will consider the eventual availability and accessibility to Travis County residents of the innovations developed from this research.				
4.11 Seton/UT Affiliation Agreement. UT intends to enter into and maintain an Affiliation Agreement with Seton that will govern the relationship between the UT Austin Dell Medical School and Seton. UT will use reasonable efforts to maintain a similar affiliation agreement with Seton or any other entity that owns or operates the Teaching Hospital during the term of this Agreement.	Annual report to include reference to Seton affiliation agreement.			
4.12 Master Agreement. UT will cooperate where reasonably possible with the CCC, Central Health, and Seton to assist in their performance under the Master Agreement.	No additional information to include in annual report.			
4.13 Communication. The UT Austin Dell Medical School, CCC, and Central Health will communicate and share information on a regular basis regarding the participation of each Party in the IDS and will coordinate with each other in the effort to achieve IDS integration and efficiency.	Annual report to demonstrate UT’s ongoing communication and information sharing.		Annual report to be created specific to Central Health as subset of an overarching Dell Medical School/UT Health Austin report	

MEMORANDUM

To: Central Health Board of Managers
From: Monica Crowley, CSO & Sr. Counsel
Mike Geeslin, President and CEO
CC: Perla Cavazos, Deputy Administrator
Date: March 24, 2023
RE: Information Item - Update on UT Reporting to Central Health

Overview

Based on feedback from the Board of Managers, the FY2023 Central Health Budget Resolution, and the Affiliation Agreement between Central Health, CCC and UT, Central Health and University of Texas staff prepared a draft annual reporting matrix from UT to Central Health. Pursuant to the timelines set in the Budget Resolution, UT submitted initial examples of the types of data to be reported within the matrix on January 31, 2023. The matrix includes live, hyperlinks to datasets and source documents described in the matrix.

Although UT has provided annual reporting to Central Health since 2015, as UT Health Austin and Dell Medical School have matured, the reporting requested by Central Health has also become more detailed. The current reporting matrix is intended to be a living document that will be updated annually by August to inform the Central Health board and the community about work UT is doing pursuant to the Affiliation Agreement.

Key areas of additional information in the matrix include:

- Detailed information on residency rotations pursuant to Section 4.1
- Allocations of employed faculty pursuant to Section 4.2.2
- GME clinical training locations pursuant to Section 4.2.5
- Active Dell Med research projects pursuant to Section 4.2.9

These past reports as well as the latest iteration of the reporting matrix, still in progress, are attached to this memo to demonstrate the progress that is underway towards improved reporting.

Next Steps

- UT will continue to collect data and present a review of the information in the matrix to the Board at the April Board of Managers meeting
- UT will complete collection of data to be presented in the matrix
- Central Health and Dell Medical School will work within the JAC and other relevant working groups to consider a staged approach to provide a university-wide acceptable means of reporting with a goal to complete stage one by September 1, 2023, pursuant to timelines set in the Budget Resolution and Section 4.7 of the Affiliation Agreement.



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date February 23, 2023

Who will present the agenda item? (Name, Title) No Presentation – draft matrix including active hyperlinks attached

General Item Description Standing Partnership Item

Is this an informational or action item? Informational

Fiscal Impact _____

Recommended Motion (if needed – action item) N/A

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- 1) Based on feedback from the Board of Managers, the FY2023 Central Health Budget Resolution, and the Affiliation Agreement between Central Health, CCC and UT, Central Health and University of Texas staff prepared a draft annual reporting matrix from UT to Central Health.
- 2) Pursuant to the timelines set in the Budget Resolution, UT submitted initial examples of the types of data to be reported within the matrix on January 31, 2023.
- 3) The matrix includes live, hyperlinks to datasets and source documents described in the matrix.
- 4) UT will continue to collect data to complete the reporting and present to the Board at the March Board of Managers meeting.
- 5) Future presentations will be compiled and aggregated information, with context. Source documents and datasets are being provided to the Board as a demonstration of work progress.

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Draft matrix including active hyperlinks to data

Estimated time needed for presentation & questions? No Presentation

Is closed session recommended? (Consult with attorneys.) N/A

Form Prepared By/Date Submitted: Monica Crowley, February 16, 2023



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date January 25, 2023

Who will present the agenda item? (Name, Title) Monica, Charles, Mike

General Item Description Standing Partnership Item – UT Dell Medical School

Is this an informational or action item? Informational

Fiscal Impact _____

Recommended Motion (if needed – action item) N/A

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- As part of the FY23 budget resolution, the board directed staff to work with UT to develop an
- 1) annual reporting matrix from UT to the Central Health board
- 2) A draft matrix was presented in December of 2022
- An updated reporting structure based upon the Affiliation Agreement between CH, CCC and UT
- 3) and based upon the draft matrix was developed collaboratively between CH and UT
- The finalization of financial reporting structures will continue with a report to the board in June
- 4) of 2023

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Draft reporting document

Estimated time needed for presentation & questions? 30 minutes

Is closed session recommended? (Consult with attorneys.) Potential consult with attorneys

Form Prepared By/Date Submitted: Monica Crowley, January 18, 2023



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date 12/14/2022

Who will present the agenda item? (Name, Title) Perla Cavazos & Monica Crowley

General Item Description Partnership Item

Is this an informational or action item? Informational

Fiscal Impact

Recommended Motion (if needed – action item) Not applicable

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- As directed by the FY2023 Budget Resolution staff are sharing a draft reporting matrix that lists
1) reporting requirements for UT Austin Dell Medical School.
Staff have scheduled a meeting with UT to discuss required details that should be provided to CH
2) including a timeline for receiving the information.
3) Staff will return in January for a broader board update on the matrix and reporting information.
4)
5)

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Draft matrix on UT Dell Medical School Reporting

Estimated time needed for presentation & questions? 5 minutes

Is closed session recommended? (Consult with attorneys.) Yes



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

May 10, 2023

AGENDA ITEM 4

Receive and discuss a briefing regarding *Travis County Healthcare District d/b/a Central Health v. Ascension Texas f/k/a Seton Healthcare Family*, Cause No. D-1-GN-23-000398.³ (*Informational Item*)



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

May 10, 2023

AGENDA ITEM 5

Confirm the next Strategic Planning Committee meeting date, time, and location. (*Informational Item*)