202080548



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

Wednesday, April 22, 2020, 5 30 p m (in English) Toll-free Videoconference and Telephone*

Members of the public may access the audio feed of the meeting by dialing in using the number below. You will be prompted for the Meeting ID and Password

Toll-free Telephone 888-501-0031

Meeting ID 1489665435#

Password 778338#

A member of the public who wishes to make comments during the **Public Hearing** or **Public Communication** portions of the meeting must properly register with Central Health *no later than 4 00 p m on April 22, 2020* Registration can be completed in one of two ways

- Complete the virtual sign-in form at https://www.centralhealth.net/meeting-sign-in/, or
- Call 512-978-9190 Please leave a voice message with your full name and your request to comment via telephone at the meeting

PUBLIC HEARING

1 Receive public comment on amending the mandatory payment rate to be assessed on institutional healthcare providers during fiscal year 2020 in connection with the local healthcare provider participation program in Travis County

PUBLIC COMMUNICATION

Central Health will conduct Public Communication in the same manner as it has been conducted at inperson meetings, including setting a fixed amount of time for a person to speak and limiting Board responses to public inquiries if any to statements of specific factual information or existing policy

REGULAR AGENDA¹

- Discuss and take appropriate action on the proposed amended mandatory payment rate to be assessed on institutional healthcare providers during fiscal year 2020 in connection with the local healthcare provider participation program in Travis County (*Action Item*)
- Receive and discuss a briefing on the Central Health Enterprise's responses to the current COVID-19 pandemic, including response activities pursuant to local state, and federal guidelines and orders current and potential fiscal issues affecting the Central Health Enterprise available sources of reimbursement, and clinical and testing site operational status and challenges (*Informational Item*)
- Discuss and take appropriate action on a request by Sendero Health Plans Inc. to modify Amended and Restated Debenture No. 1. (Action Item)
- Discuss and take appropriate action on Central Health owned or occupied real property and potential property for acquisition or lease, including delegating authority to execute contracts for such property to the President & CEO ² (Action Item)
- Discuss and take appropriate action on a contract with Perkins Coie LLP for legal services in an amount not to exceed \$375,000 (*Action Item*)
- Receive an update on the annual performance evaluation of the Central Health President & CEO ² (*Informational Item*)
- 7 Confirm the next regular Board meeting date, time and location (Informational Item)
 - * By Emergency Executive Order of the Governor, issued March 16, 2020, Central Health may hold a videoconference meeting with no Board members present at a physical meeting location
- Note ¹, The Board of Managers 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 Board announces that the item will be considered during a closed session
- Note 2, Possible closed session item
 - A recording of this meeting will be made available to the public through the Central Health website (www centralhealth net) as soon as possible after the meeting. Additional options for connecting to the meeting are also available on the website
 - Any individual with a disability who plans to attend this meeting and requires auxiliary aids or services should notify Central Health at least 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.
- Consecutive interpretation services from Spanish to English are available during Citizens Communication or when public comment is invited. Please notify the front desk on arrival if services are needed

Los servicios de interpretacion consecutiva del español al inglés estan disponibles para la comunicacion de los ciudadanos o cuando se invita al publico a hacer comentarios. Si necesita estos servicios, al llegar sirvase notificarle al personal de la recepcion



Came to hand and posted on a Bulletin Board in the Courthouse, Austin, Travis County, Texas on this the 17 day of 20 20

Dana DeBeauvoir County Clerk, Travis County, Texas.

Deputy

E. MEDINA



202080548

FILED AND RECORDED OFFICIAL PUBLIC RECORDS

Dana De Beauvoir

Dana DeBeauvoir, County Clerk **Travis County, Texas**

Apr 17, 2020 03 12 PM Fee \$0 00 **MEDINAE**



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PUBLIC HEARING

April 22, 2020

AGENDA ITEM 1

Receive public comment on amending the mandatory payment rate to be assessed on institutional healthcare providers during fiscal year 2020 in connection with the local healthcare provider participation program in Travis County.



1111 E. Cesar Chavez St. Austin, Texas 78702

Phone: 512 978-8155 Fax: 512 978-8156 www.centralheath.net

MEMORANDUM

To: Central Health Board of Managers

From: Katie Coburn

CC: Mike Geeslin, President & CEO

Date: April 22, 2020

Re: Amending the Local Provider Participation Fund (LPPF) mandatory payment rate for FY

2020 - ACTION ITEM

Summary

Central Health staff recommend the Board amend the FY 2020 Local Provider Participation Fund (LPPF) mandatory payment rate to increase the rate from 2.38% to 4.17% of net patient revenue of Travis County inpatient hospitals. Unanticipated IGT requirements in Uniform Hospital Rate Increase Program (UHRIP), among other changes, necessitate additional local funds to maximize federal dollars in the program. This will generate an expected \$57 million in additional revenue.

Background

Under Chapter 298E of the Texas Health & Safety Code, the Central Health board is required to set the mandatory payment rate for inpatient hospitals in Travis County. The fee must be uniform and broad based. Funds generated by the mandatory payment may be used only to provide intergovernmental transfer (IGT) payments on behalf of nonpublic hospitals to draw down Federal matching funds available in certain Medicaid supplemental payment programs.

On January 14, 2020, the Central Health Board of Managers approved an FY 2020 mandatory payment rate of 2.38%. The original rate was intended to generate approximately \$76 million dollars to provide local funds needed for FY 2020 Uncompensated Care (UC) payments, additional UC funds previously withheld in relation to the Children's Hospital Association of Texas (CHAT) lawsuit, and payments through the Graduate Medical Education (GME) for private hospitals program.

Since the setting of the original FY 2020 rate, HHSC made a significant change in its plans for distribution of dollars in the Uniform Hospital Rate Increase Program (UHRIP). Rather than delaying IGT requests for UHRIP until 2021, as was originally expected, HHSC has decided to collect and distribute UHRIP IGT in both June and August of 2020. The increase in the rate will generate an expected \$57 million in additional payments to the LPPF.

Public input on the rate will be taken at a public hearing of the Board of Managers on April 22, 2020. The item will be taken up shortly afterward at the Central Health Board of Managers meeting. Notice of the hearing will be emailed to Travis County inpatient hospital contacts and published in the Austin American Statesman on April 17, 2020.

Action Requested

Central Health staff request the Board amend the FY 2020 Local Provider Participation Fund (LPPF) mandatory payment rate to increase the rate from 2.38% to 4.17% of net patient revenue of Travis County inpatient hospitals.



Travis County Healthcare District Local Provider Participation Program (LPPF)

LPPF FY 2020 Mandatory Payment Rate AMENDMENT

Central Health Board of Managers - Public Hearing April 22, 2020

Katie Coburn









LPPF mandatory payment rate

- Assessed as a uniform percentage of net patient revenue of Travis County inpatient hospitals.
 - The current rate for FY20 rate is 2.38% intended to generate \$76 million.
 - Proposed amendment increases FY 20 rate to 4.17%, generating approximately \$133 million
 - Additional funds needed to provide local funds for Uniform Hospital Rate Increase Program (UHRIP).
- Set by the Board of Managers
- Central Health, as LPPF administrator, collects funds to be held in fiduciary capacity and completes intergovernmental transfers
- Use of funds
 - Limited to legislative purposes
 - Central Health collaborates with hospitals representatives on uses of the funds















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April 17, 2020

Mike Geeslin President and CEO, Central Health 1111 East Cesar Chavez St. Austin, TX 78702

Dear Mike:

I am writing to reiterate Ascension Texas' commitment to partner with Central Health and other Central Texas healthcare organizations to meet the needs of our communities during the COVID-19 pandemic and maximize the federal dollars for the Texas Medicaid supplemental payment programs, such as the Uniform Hospital Rate Increase Program (UHRIP).

We take our critical role in the Travis County safety net health care system very seriously, including the care we provide in our four teaching hospitals. We appreciate the public/private partnership with Central Health which furthers the care we provide in our community, with special attention to the poor and the vulnerable.

As part of the commitment to the Travis County safety net, Ascension Texas is working hard to ensure our hospitals have access to adequate resources, both to combat COVID-19 and provide healthcare to vulnerable Texans. One key aspect is to ensure existing Texas Medicaid supplemental payment programs, such as the Uniform Hospital Rate Increase Program (UHRIP), are fully funded in this challenging time. Fully funding UHRIP requires Central Health do two things: (1) support utilizing the an assessment rate to return the greatest amount of resources to our community, as authorized by the Texas Health & Human Services Commission for all categories of eligible hospitals, and (2) amending the LPPF (Local Provider Participation Fund) Mandatory Payment Rate so there is sufficient resources available to fund the rate increase.

As part of the response to COVID-19, the state of Texas, Travis County and the City of Austin need to access all the available funding sources to support this important work. Our Ascension Texas mission calls on us to advocate for a compassionate and just society with our actions & our words and the UHRIP funds will assist in fulfilling our joint mission of serving the poor and the vulnerable.

I hope you, your leadership team and the Central Texas Board of Managers will assist us by supporting a UHRIP application which accesses the maximum amount of funds made available by the State of Texas and an LPPF Mandatory Payment Rate that generates sufficient funding of the required non-federal share of available Medicaid payments.

Ascension Texas appreciates your leadership on this important issue and looks forward to continuing to partner with you in service to the Travis County community.

Sincerely,

Andy Davis
President & CEO
Ascension Texas



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BOARD MEETING

April 22, 2020

REGULAR AGENDA ITEM 1

Discuss and take appropriate action on the proposed amended mandatory payment rate to be assessed on institutional healthcare providers during fiscal year 2020 in connection with the local healthcare provider participation program in Travis County.

Travis County Local Provider Participation Program (LPPF)

FY 2020 Proposed Mandatory Payment Rate - AMENDMENT

Central Health Board of Managers April 22, 2020

Katie Coburn







LPPF mandatory payment rate

- Assessed as a uniform percentage of net patient revenue of Travis County inpatient hospitals
- Set by the Board of Managers
- Central Health, as LPPF administrator, collects funds to be held in fiduciary capacity and completes intergovernmental transfers
- Use of funds
 - Limited to legislative purposes
 - Central Health collaborates with hospitals representatives on uses of the funds













Amending the FY 2020 LPPF Payment Rate

- Original FY 2020 payment rate of 2.38% intended to generate local funds for:
 - FY 2020 Uncompensated Care (UC) payments
 - Additional UC payments previously withheld due to CHAT lawsuit
 - Graduate Medical Education (GME) for private hospitals
- UHRIP IGT was not included because HHSC was planning program changes that would delay IGT calls until FY 2021
- HHSC did not implement those program changes
 - Additional LPPF payments are needed to fund UHRIP IGT in June and August of FY 2020











Hospital-Proposed Payment Rate

- Hospitals propose a payment rate of 4.17%
- Increased amount designed to generate the local portion for UHRIP IGT for Program Year 4
- Generate a total of \$133 million in local funds to be used for intergovernmental transfers
- Amended rate will generate increased payments of \$57 million













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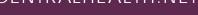














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BOARD MEETING

April 22, 2020

REGULAR AGENDA ITEM 2

Receive and discuss a briefing on the Central Health Enterprise's responses to the current COVID-19 pandemic, including: response activities pursuant to local, state, and federal guidelines and orders; current and potential fiscal issues affecting the Central Health Enterprise; available sources of reimbursement; and clinical and testing site operational status and challenges.

Central Health COVID-19 Weekly Updates

Central Health Board of Managers

April 22, 2020

Mike Geeslin, Central Health President and CEO

Kit Abney Spelce, Central Health Senior Director of Eligibility Services

Ted Burton, Central Health Vice President of Communications

Sarita Clark-Leach, Central Health Director of Analytics and Reporting

Jaeson Fournier, CommUnityCare Health Centers President and CEO

Jeff Knodel, Central Health Vice President and Chief Financial Officer







COVID-19 Situational Update

Agenda:

- Central Health operations overview
- Community response overview
- MAP/MAP BASIC applications and enrollment update
- Communications and community engagement update
- Data analytics and reporting update
- Clinical operations and testing update
- Fiscal impacts update











MAP/MAP BASIC

Previous week highlights:

- Soft launch of the online application and pending documents website.
 - apply4map.com
 - inscribaseamap.com
- As of Sunday, April 19, 83 submissions were received—77 through the online application and six through the pending documents site.
- Communications are being sent to community partners to promote online option to clients.









FY 2020 MAP/MAP BASIC Applications

| | Applicants | Enrollment* | Pending | Denial** |
|------------------------|------------|-------------|---------|----------|
| October | 12,792 | 8,345 | 583 | 3,864 |
| November | 10,491 | 6,755 | 429 | 3,307 |
| December | 10,609 | 6,949 | 428 | 3,232 |
| January | 12,630 | 8,322 | 547 | 3,761 |
| February | 11,012 | 7,217 | 359 | 3,436 |
| March | 14,106 | 7,822 | 2,183 | 4,101 |
| April (as of the 18th) | 6,874 | 2,152 | 2,830 | 1,892 |
| Grand Total | 78,514 | 47,562 | 7,359 | 23,593 |

^{*}Enrollment numbers signify the number of individuals who applied in the given month or week and were later enrolled

^{**}All Members of the household are included therefore denials include household members eligible for or enrolled in other coverage as well as applicants being over income or out of county











Weekly MAP/MAP BASIC Enrollment

| Enrollment on | MAP | MAP BASIC | Total |
|---------------|--------|-----------|--------|
| April 5 | 26,450 | 37,427 | 63,877 |
| April 12 | 26,843 | 37,530 | 64,373 |
| April 19 | 27,277 | 37,408 | 64,685 |











^{*}Due to the enrollment extensions the only people dropping off coverage are those found enrolled in Medicaid, Medicare or reporting a change that makes them ineligible

Communications and Community Engagement

Virtual Advisory Committee Meetings:

 Northeast Travis County, Austin's Colony/Hornsby Bend, Southeast Travis County, Pflugerville

Virtual Community Conversations:

- Strategic priorities
- FY 2021 proposed budget
- Developing approach to reach those without internet
- Grassroots Outreach
- Texting: Opt-in subscription—sign up via text or website
- Phone calls (Round 2): Calling 400+ MAP members lacking internet
- Direct mail: Three COVID-19 information mailers 60,000+ homes











Increases in COVID-19 Confirmed Cases in Travis County: March 23 – April 20, 2020

| Date | Number of Cases | Increase from Previous Week | Number of Cases Per 10,000 Residents | Estimated Doubling Time (Days) |
|-----------|--------------------|--------------------------------------|---|---|
| 3/23/2020 | 22 | 1,000%* | 0.172 | 2.02* |
| 3/30/2020 | 200 | 809%* | 1.57 | 2.20* |
| 4/6/2020 | 484 | 142% | 3.79 | 5.49 |
| 4/13/2020 | 774 | 59.91% | 6.06 | 10.33 |
| 4/20/2020 | 1108 | 43.15% | 8.68 | 13.52 |

Doubling time is the number of days for the number of diagnosed cases to increase by a factor of two. A longer time is better for confirmed cases.

At the county level, doubling time seems to have stabilized at a value > seven days.

This is in contrast to some of the worst affected metropolitan areas in the United States, where the doubling times were often < four days.

Note: Initial large increases are likely an artifact of low initial rates of testing, and the fact that the population started from a near-zero case count











Zip Codes With Highest Total Confirmed Cases

| Zip Code | Neighborhood | Number of Cases 4/13 | Number of Cases 4/20 | Increase | Estimated Doubling Time (Days) |
|----------|---|-------------------------|-------------------------|------------|--------------------------------------|
| 78741 | Pleasant Valley/ Montopolis | 57 | 89 | 33 (56%) | 10.9 |
| 78748 | Bauerle Ranch/ Slaughter Creek | 71 | 88 | 17 (24%) | 22.6 |
| 78744 | Dove Springs | 51 | 73 | 22 (43.1%) | 13.5 |
| 78660 | Pflugerville | 43 | 68 | 25 (58.1%) | 10.6 |
| 78704 | South Lamar/ Zilker/ South River City | 48 | 62 | 14 (29.2%) | 19.0 |
| 78758 | Rundberg/ North Burnet | 37 | 61 | 24 (64.9%) | 9.7 |

Note: Some zip codes, such as 78660 (Pflugerville), have a high total confirmed cases due to large population size, but a relatively low per-capita (7.57 confirmed cases per 10,000 residents)











Zip Codes With Highest Per-Capita Rate of COVID-19 Cases with Continuous Growth

| Zip Code | Neighborhood | Cases Per 10,000 (4/13) | Cases Per 10,000 (4/20) | Increase | Estimated Doubling Time (Days) |
|----------|------------------------------------|----------------------------|----------------------------|----------------|--------------------------------------|
| 78752 | St. John's | 7.50 | 21.57 | 14.07 (187.5%) | 4.59 |
| 78748 | Bauerle Ranch/Slaughter Creek | 13.92 | 17.26 | 3.3 (23.9%) | 22.6 |
| 78741 | Pleasant Valley/ Montopolis | 10.81 | 16.88 | 6.07 (56.1%) | 10.89 |
| 78725 | Austin's Colony | 10.14 | 16.48 | 6.34 (62.5%) | 9.99 |
| 78747 | Onion Creek/ McKinney Park East | 11.90 | 15.87 | 3.97 (33.3%) | 16.87 |
| 78744 | Dove Springs | 10.41 | 14.91 | 4.49 (43.1%) | 13.53 |
| 78724 | Colony Park/ Hornsby Bend | 8.07 | 11.7 | 3.50 (45.0%) | 13.06 |











Zip Codes With High Per-Capita Confirmed Cases with Little or No Growth Over the Past 2 weeks

| Zip Code | Neighborhood | Cases Per 10,000 (4/13) | Cases Per 10,000 (4/20) | Increase | Estimated Doubling Time (Days) |
|-------------|------------------|----------------------------|----------------------------|---------------|--------------------------------------|
| 78701 | Downtown Austin | 36.07 | 35.01 | -1.06 (-2.9%) | - |
| 78703 | Tarrytown | 16.75 | 16.28 | -0.48 (-2.9%) | - |
| 78705 | North University | 16.20 | 16.20 | 0 (0%) | - |

- Doubling time are not calculated for these zip codes as there was no growth over time or first confirmed COVID-19 cases were reported in the last week.
- Negative rate increases may reflect a correction in the public dataset. For example, the number of total confirmed COVID-19 cases reported for Downtown Austin was 34 on 4/13/2020 and was corrected to 33 on 4/20/2020. For Tarrytown it was 34 cases reported on 4/13/2020 and 33 cases reported on 4/20/2020.











Race and Ethnicity Observations

| Race | 4/14/2020 | 4/20/2020 |
|---------|-----------|-----------|
| White | 76% | 73% |
| Black | 10% | 10% |
| Other | 6% | 8% |
| Unknown | 4% | 5% |
| Asian | 4% | 4% |

| Ethnicity | 4/8/2020 | 4/13/2020 | 4/20/2020 |
|--------------|----------|-----------|-----------|
| Non-Hispanic | 67% | 60% | 55% |
| Hispanic | 33% | 39% | 41% |
| Unknown | 0% | 2% | 4% |

- While there has been an increase in the proportion of people who identify as Hispanic/ People of Latin American origin in the total confirmed cases population over time, that increase has slowed in the last week.
- There has been no change in the proportion of people who identify as Black or Asian in the last week while the proportion of people who identify as White has decreased over time.











Top 10 Zip Codes/ Neighborhoods of Interest

The following zip codes/ neighborhoods are areas that were identified with the highest per capita rates as well as an indication of continuous growth in the number of confirmed cases.

- 78752 St. John's
- 78748 Bauerle Ranch/Slaughter Creek
- 78741 Pleasant Valley/ Montopolis
- 78725 Austin's Colony
- 78747 Onion Creek/ McKinney Park East
- 78744 Dove Springs

- 78660 Pflugerville
- 78704 South Lamar/ Zilker/ South River City
- 78758 Rundberg/ North Burnet
- 78724 Colony Park/ Hornsby Bend

Note: Increases in confirmed cases in these areas can be the result of low initial rates of testing followed by increased access to testing and information about testing.









Reference

- Confirmed COVID-19 Case Counts by Zip Code in Travis County: https://services.arcgis.com/0L95CJ0VTaxqcmED/ArcGIS/rest/services/web0420/FeatureServer/2
- Travis County Total Confirmed COVID-19 Case Counts: https://txdshs.maps.arcgis.com/apps/opsdashboard/index.html#/ed483ecd702b4298a b01e8b9cafc8b83
- Aggregated Race/ Ethnicity Data for Travis County Population with COVID-19 Infection: https://austin.maps.arcgis.com/apps/opsdashboard/index.html#/39e4f8d4acb0433baae6d15a931fa984
- Zip Code Total Population Counts: 2018 American Community Survey 5-Year Estimates, Table S0101











COVID-19 Federal Funding Highlights

| Local Governments – Coronavirus Relief Fund | City of Austin - \$170.8MTravis County - \$54M |
|--|---|
| Hospitals | Immediate infusion of \$30B to hospitals based on Medicare FFS Travis County hospitals – estimated \$32.9M Remaining \$70B TBD – some focus on Medicaid/Uninsured Enhanced FMAP increased by 6.2 percentage points Eliminates \$8B DSH scheduled cuts Enhanced Medicare funding, including uninsured patients Proposed legislation (passed by Senate) allocates \$75B |
| Community Health Centers | \$100M HRSA Supplemental CUC-\$3.7M, LSCOC-\$2.5M, PCC-\$1M CUC-\$241K Public Health & Emergency Fund |
| Central Health | Request for FEMA Public Assistance |





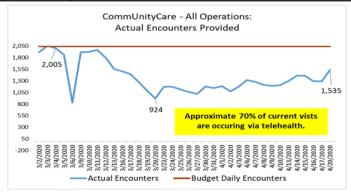






COVID-19 Financial Update - FY 2020

| Central Health | Fixed revenues - property taxes collected – 99% No ownership of hospital risk, still negotiating payment model Reserve levels of \$62.1M + \$2M primary care expansion |
|------------------------------|--|
| CommUnityCare | 70% encounter level Dental services – uncertainty of resuming services DSRIP revenue shortfall – focus on Covid testing and patient services |
| Sendero | Waived member Covid-19 costs Five of 13,400 members treated for Covid-19 to date Reserves of \$2M per quarter |
| Community Care Collaborative | DSRIP revenue based on CY 2019 reporting period – no impact |









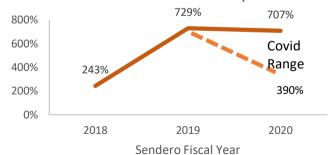




COVID-19 Financial Challenges – FY 2021

| Central Health | Property Tax rates may not mirror previous forecasting Uncertainty of hospital risk participation Enterprise risk |
|------------------------------|---|
| CommUnityCare | Risk of second COVID-19 wave Resumption of pre-COVID-19 service levels DSRIP revenue shortfall EPIC EHR implementation |
| Sendero | Higher than anticipated COVID-19 costs Cash flow due to risk adjustment receivable timing |
| Community Care Collaborative | DSRIP revenue shortfall Category C outcomes = \$35.2M, 75% risk Cat B partial risk of \$6.2M if patient volumes not met |

Sendero Risk-based Capital















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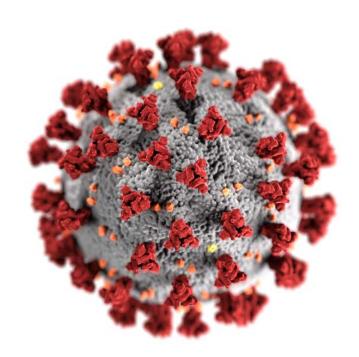






Coronavirus Response Update

April 22nd, 2020



Testing in the Eastern Crescent

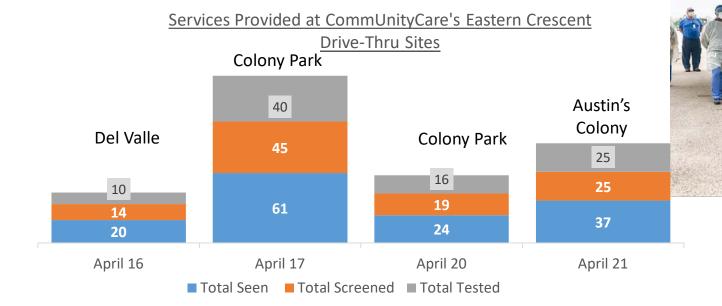
Every week for the foreseeable future CommUnityCare will provide community testing from 9 am to 4 pm as follows:

Mondays and Fridays at Barbara Jordan Elementary School:

Tuesdays at Austin's Colony Home Owners Association

Wednesdays at Manor Senior High School

Thursday at Southeast Metropolitan Park located in Del Valle

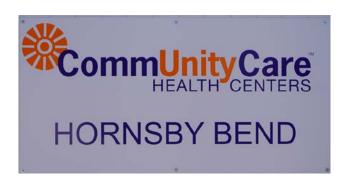


- Other potential testing sites being worked on:
 - William Cannon (Dove Springs)
 - Pflugerville Health Center



Reopened Clinics

- Hornsby Bend Health Center re-open last week and normal schedule reviewed.
- Del Valle Health Center opene this week.
- Mobile Medical will start again in Colony Park next Monday.
- Mays Crossing Pediatrics (Round Rock) expected to resume this week / next week.
- Community First Village and street medicine to resume possibly next week.

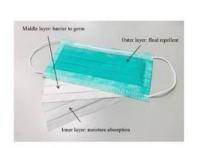






Managing Personal Protective Equipment

- Vigilantly researching opportunities to secure PPE through our partnerships and direct procurement.
- Watchfully monitoring daily uses of the PPE at each health center.
- Fortunately, our community has responded with donations of masks, gowns, and gloves.
- Effectively managing PPE during the initial COVID response supports the expansion of testing centers and re-opening of health centers.







Status of Personal Protective Equipment

Preferred PPE – Use N95 or Higher Respirator



| PPE | Days on Hand (4/17/20) |
|----------------------|------------------------------|
| Barrier Mask (Adult) | 30.21 |
| Barrier Mask (Child) | 64.11 |
| N95 Respirator | 48.38 |
| Face Shield | 28.08 |

Seems like a lot but dependent on:

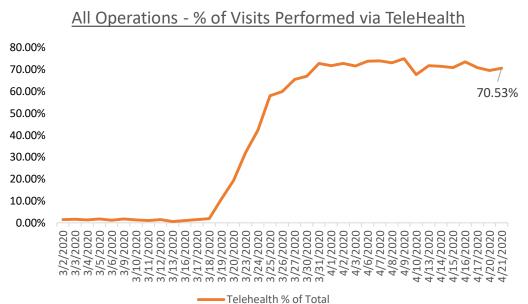
- Continued supplies coming in.
- Continuation of staff conservation of supplies (for example wearing PPE / N95 for several days unless direct exposure.
- Continued reduced on-site demand staying at about 20% of normal.

Days PPE on Hand would be halved if we got back to 40% of services normally provided.



Telehealth – The New Norm!

- Patients, including new patients, can call (512) 978-9015 to schedule a telehealth visit.
- Providing about 1,300 visits a day (normally over) 2,000) with @ 70% provided via telehealth.
- Patients do not need a computer or smart phone just a phone!







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BOARD MEETING

April 22, 2020

REGULAR AGENDA ITEM 3

Discuss and take appropriate action on a request by Sendero Health Plans, Inc. to modify Amended and Restated Debenture No. 1.



MEMORANDUM

To: Central Health Board of ManagersFrom: Jeff Knodel, Chief Financial OfficerCc: Mike Geeslin, President & CEO

Date: April 17, 2020

Re: Agenda Item 3- Discuss and take appropriate action on a request by Sendero Health Plans, Inc. to

modify Amended and Restated Debenture No. 1. Action Item

Overview:

On December 18, 2019, the Central Health Board of Managers approved an amendment to the terms of Surplus Debenture No. 1, which was initially approved by the Central Health Board of Managers on December 15, 2015. The par value of the debenture is \$17,083,000, with an interest rate of 1%. The amendment approved on December 2019 revised the floor of RBC levels that triggers the repayment of the debenture and interest accrual.

The original terms of the debenture approved in 2015 established the floor to trigger repayment at the greater of RBC levels of a) \$1,500,000 or b) 375%. The amendment approved in December 2019 revised the trigger of repayment to RBC of 500% over a rolling three-year average. However, Sendero legal counsel is requesting a revision to the trigger of repayment from the rolling three-year RBC average of 500% to three consecutive years of 500% for Texas Department of Insurance approval.

Below is a summary of the risk-based capital levels that trigger repayment of the Sendero Surplus Debenture:

| Approved December 2015 | Approved December 2019 | Requested Amendment April 2020 |
|---------------------------------|--------------------------------------|--|
| Greater of a) \$1,500,000 or b) | Greater of a) \$1,500,000 or b) | Greater of a) \$1,500,000 or b) |
| 375% | Three year <u>rolling average</u> of | Three <u>consecutive</u> years of 500% |
| | 500% | |

Action Requested:

Central Health staff requests approval to amend terms of the Sendero Surplus Debenture approved by the Central Health Board of Managers on December 18, 2019. The requested amendment will revise the floor that triggers repayment of the Debenture from a rolling three - year average of 500% risk-based capital (RBC) to three consecutive years of 500%.



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Our Mission

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BOARD MEETING

April 22, 2020

REGULAR AGENDA ITEM 4

Discuss and take appropriate action on Central Health owned or occupied real property and potential property for acquisition or lease, including delegating authority to execute contracts for such property to the President & CEO.²



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BOARD MEETING

April 22, 2020

REGULAR AGENDA ITEM 5

Discuss and take appropriate action on a contract with Perkins Coie, LLP for legal services in an amount not to exceed \$375,000.



1111 E. Cesar Chavez St. Austin, Texas 78702 Phone: 512 978-8155

Fax: 512 978-8156 www.centralheath.net

MEMORANDUM

To: Central Health Board of Managers

From: Monica Crowley, Chief Strategy & Planning Officer & Sr. Counsel

Date: April 22, 2020

RE: Agenda Item 5 – Authorize CEO to contract for legal services with Perkins Coie, LLP

(Action Item)

Overview:

Zubin Khambatta has been part of the team representing Central Health at Husch Blackwell, LLP for the past 3 years and is an integral part of the ongoing negotiations and mediation between Central Health and Ascension Texas. Mr. Khambatta is an expert in Medicaid supplemental funding programs such as the 1115 Waiver and structures such as Local Provider Payment Funds, and he has extensive knowledge of Central Health's agreements with Ascension Texas.

Last month, Mr. Khambatta accepted employment with Perkins Coie, LLP. In order to continue to engage the services of Mr. Khambatta, and maintain continuity in representation, Central Health needs to contract with Perkins Coie in these areas among others: negotiation of foundational agreements, Medicaid Disproportionate Share Hospital Program and 1115 Medicaid waiver matters, and Travis County Local Provider Participation Fund matters.

Fiscal Impact:

There is no anticipated fiscal impact beyond the current budgeted legal services because the hourly rate for Mr. Khambatta's services at Perkins Coie is identical to the rate at his previous law firm, and the scope and amount of work is anticipated to be the same.

Action Requested:

We request that you authorize the President and CEO to contract with Perkins Coie, LLP for legal services in an amount not to exceed \$375,000.



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BOARD MEETING

April 22, 2020

REGULAR AGENDA ITEM 6

Receive an update on the annual performance evaluation of the Central Health President & CEO.²



1111 E. Cesar Chavez, St. Austin, Texas 78702 Phone: 512 978-8155 Fax: 512 978-8156 www.centralheath.net

MEMORANDUM

To: Central Health Board of Managers

From: Susan Willars, Enterprise Vice President of Human Resources

CC: Mike Geeslin, President and CEO

Date: April 17, 2020

Re: President & CEO's Performance Evaluation Process for 2020

PURPOSE

The purpose of this memorandum is to share the process for the 2020 President & CEO's performance evaluation.

The Central Health's President & CEO evaluation tool is designed to enable the Board of Managers (BOM) to objectively evaluate and rate the President & CEO's performance on an annual basis.

PROCESS - CEO SCORECARD

The goal of the performance scorecard process is to align the work of the President & CEO based on the achievement of results, as outlined on the Central Health Strategic Work Plan.

- The performance scorecard objectives and strategies were selected by the BOM in June 2019.
- The performance scorecard consists of three (3) dimensions: Strategic Leadership, Board Relationship & Professional Development.
- The Strategic Leadership dimension includes key milestones for the Objectives 1, 2 & 3 of the Strategic Work Plan.
- Each dimension and each individual objective listed under Strategic Leadership will be scored individually.
- For the *Strategic Leadership* dimension, the rating will be on a three (3) point scale based on the outcome of each key milestones:
 - 1 = Not met (did not meet a minimum of 50% of the milestone without any mitigating factors)
 - 2 = Met the key milestones (has met a minimum of 51% or did not meet the milestone, due to significant mitigating factors despite the sign significant & meaningful effort towards the milestone.)
 - o 3 = Exceeded the key milestone (has met a minimum of 75% of the milestone and continues to work towards the milestone.)

- The Board Relationship & Professional Development dimensions will be rated as follows:
 - o 1 = Did not meet competencies
 - o 3 = Met the competencies
 - o 5 = Exceeds the competencies
- To evaluate the *Professional Development Dimension*, a written summary will be submitted by the President & CEO for each area listed under this dimension.

Process for evaluation completion:

| April 30, 2020: | President & CEO will provide a self-evaluation and a written report on the BOM feedback of the May 2019 evaluation |
|-----------------|--|
| May 01, 2020: | The BOM will receive the evaluation tool for completion |
| May 20, 2020: | BOM completed evaluations must be sent to the VP of HR for compilation. |
| May 25, 2020 | The VP of HR will send the completed evaluation to the full Board of Managers to review. |
| May 27, 2020: | The Executive Committee of the Board will meet (virtually) to review the employment contract and discuss the completed evaluation. |
| May 28, 2020 | The Board of Managers will meet with the President & CEO to discuss the evaluation and contract terms. |

June 2020 (Date TBD): The BOM will review and approve the 2020-2021 evaluation tool

ENCLOSURE:

For review only:

- Attachment 1: Performance Evaluation Scorecard
- Attachment 2: Employment Contract

ATTACHMENT 1

President & CEO's Performance Evaluation Tool - 2020 Review Process

| OBJECTIVE 1: Develop and | Key Milestones | Exceeded the | Met the | Did not Meet the Comments: | Comments: |
|------------------------------|--|--------------|-----------|----------------------------|-----------|
| execute health care delivery | | Milestone | Milestone | Milestone 1 | |
| strategy based on people and | | ന | 2 | | |
| place | | | | | |
| | | | | | |
| SERVICE EXPANSION: Eastern | SERVICE EXPANSION: Eastern Continue completion of short-term | | | | |
| Travis County | projects and commence long-term | | | | |
| | projects, including but not limited | | | | |
| | to, capital acquisitions or related | | | | |
| | work for establishing services for | | | | |
| | communities in Eastern Travis | | | | |
| | County. | | | | |
| COMMUNITY PRESENCE: | Improve communications and | | | | |
| Advocacy & Tansparency | relationships with the community | | | | |
| | about Central Health Enterprise | | | | |
| | partners' pivotal roles in ensuring | | | | |
| | health coverage and delivery of | | - | | |
| | care to the served population. | | | | |
| | | | | | |
| Total Score: | | | | | |
| Total Average Score: | | | | | |

| OBJCTIVE 2: Implement patient-focused and coordinated health care system | Key Milestones | Exceeded the Milestone 3 | Met the Milestone 2 | Did not meet Comments: the Milestone 1 | Comments: |
|--|---|--------------------------|---------------------------|--|-----------|
| ACCESS TO CARE: Patient | Work with Central Health | | | | |
| inceus of Delvice Capacity | needs and increase access to | | | | |
| | primary care, specialty care and alternative delivery methods and | | | | |
| | decrease service wait times. | | | | |
| PATIENT EXPERIENCE: | Improve patient experience and | | | | |
| Quality of Care | enhance care coordination through more efficient information | | | | |
| | technology and process | | | • | |
| | improvement efforts. Improve | | | | |
| | patient reported health outcomes | | | | |
| | including quality of life and patient | | | | |
| | satisfaction. | | | | |
| Total Score: | | | | | |
| Total Average Score: | | | | | |

| OBJECTIVE 3: Implement sustainable financial model for health care delivery and system strategies through 2024 | Key Milestones | Exceeded the Milestone 3 | Met the Milestone 2 | Did not Meet the Milestone 1 | Comments: |
|--|--|--------------------------|---------------------------|------------------------------------|-----------|
| STEWARDSHIP: Downtown Campus Redevelopment | Optimize Downtown Campus redevelopment to fund Central Health's mission. | | | | |
| PAYMENT MODEL: Hospital Funding | Establish new payment model for hospital services and amend current service agreements to ensure financial transparency. | | | | |
| Total Score: | | | | | |
| Total Average Score: | | | | | |

| Board Relationship Competency | Exceeded | Meets | Did not Meet | Comments |
|---|----------|-------|--------------|----------|
| | m | 2 | п | |
| Ensures the Board of Managers receive a quarterly financial and operational reporting on CommUnityCare, Sendero and the Community Care Collaborative. | | | | |
| Demonstrates to the BOM an attitude of openness, collegiality and support. | | | | |
| Facilitates the Board's decision making process by anticipating and promptly responding to inquiries, concerns and/or request for additional information. | | | | |
| Communicates information in a timely manner to ensure full and informed consent about matters of enterprise governance. | | | | |
| Board policies are properly implemented and the CEO leads in the development of new policies. | | | | |
| Total Score: | | | | |
| Total Average Score: | | | | |

| Professional Development: | Exceeded | Meets | Did not Meet | Comments |
|---|--------------|--------------|--------------|----------|
| | Expectations | Expectations | п | |
| | 3 | 2 | | |
| Board Relationship: | = | | | |
| Ensured that the Board of Managers receive a thorough and | | | | |
| transparent summary/report of Central Health's Financial | | | | |
| position. | | | | |
| The CEO appears to be forthcoming and transparent with | | | | |
| information that needs to be shared with the Board. | | | | |
| The CEO has respected the voice and vote of Board of | | | | |
| Managers. | | | | 3 |
| The CEO has kept the Board of Managers informed in advance | | | | |
| of situations that may cause dissatisfaction politically or with | | | | |
| community members/leaders. | | | | |
| Has ensured that decisions, which require Board of Managers | | | | |
| approval has been vetted by the Board first, before a decision is | | | | |
| made and/or communicated. | | | | |
| Professional Development: | Exceeded | Meets | Did not Meet | Comments |
| | Expectations | Expectations | 1 | |
| Management & Administration: | | 1 | | |
| CEO has provided the Board of Managers with Central Health's | | | | |
| workforce demographics by race and gender on a quarterly | | | | |
| basis. | | | | |
| CEO has provided the Board of Managers with workforce | | | | |
| turnover on a quarterly basis. | | | | |
| CEO has kept the Board informed of status update on the | | | | |
| Central Health Enterprise, focusing on initiatives and staff | | | _ | |
| development. | | | | |
| | | | | |



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BOARD MEETING

April 22, 2020

REGULAR AGENDA ITEM 7

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