



# 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 Monday, December 20, 2021, 5:00 p.m. or immediately following the Executive Committee Meeting**

### **Videoconference meeting<sup>1</sup>**

### **A quorum of the Board and the presiding officer will be present at:**

Austin Independent School District  
4000 S I-35 Frontage Rd.  
Austin, TX 78704

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

<https://meetings.ringcentral.com/j/1455556060?pwd=cnd4QSs3M0NhUm42bEhxb0NUVGFFZz09>

Password: 654124

Members of the public may also listen and participate by telephone at:

Dial: (888) 501-0031

Meeting ID: 145 555 6060

The Central Health Board of Managers has modified its meeting practices in light of orders by the Governor during the COVID-19 pandemic. Effective September 1, 2021, Governor Abbott has rescinded emergency waivers allowing Open Meetings to be conducted virtually. To reduce the possibility of infection as a result of attendance at in-person meetings, the Board 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 Central Health Board will be physically present at the location posted in the 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 each 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 each meeting notice. Masks are required inside AISD facilities and individuals should maintain proper social distancing from others. Resources related to COVID-19 can be found at the following link <https://www.austintexas.gov/covid19>.

A member of the public who wishes to make comments during Public Communication must properly register with Central Health **no later than 3:30 p.m. on December 20, 2021**. 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. Please leave a voice message with your full name and your request to comment via telephone at the meeting; with the name of the meeting at which you wish to speak; 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 Board and Committee meetings include setting a fixed amount of time per person to speak and limiting Board responses to public inquiries, if any, to statements of specific factual information or existing policy.

## **CONSENT AGENDA**

All matters listed under the CONSENT AGENDA will be considered by the Board of Managers to be routine and will be enacted by one motion. There will be no separate discussion of these items unless members of the Board request specific items be moved from the CONSENT AGENDA to the REGULAR AGENDA for discussion prior to the vote on the motion to adopt the CONSENT AGENDA.

- C1. Approve the minutes of the Central Health Board of Managers November 17, 2021 meeting.
- C2. Receive and ratify Central Health Investments for November 2021.
- C3. Approve the Fiscal Year (FY) 2022 Broker/Dealer Applicants for conducting investment business with the Travis County Healthcare District (dba Central Health) as recommended by the Travis County Cash/Investment Management Department.
- C4. Approve an update to the Central Health values statement, as recommended by the Executive Committee in September 2020.

## **REGULAR AGENDA<sup>2</sup>**

1. Approve the candidate recommendations made by the ad hoc Board Officer Nominations Committee for the following officer positions and elect the recommended candidates for calendar years 2022-23:

- a. Chairperson- Dr. Charles Bell
  - b. Vice-Chairperson- Dr. Cynthia Brinson
  - c. Treasurer- Dr. Julie Zuniga (*Action Item*)
2. Approve the recommendation made by the ad hoc Board Officer Nominations Committee regarding the Board Secretary position and appoint Ms. Cynthia Valadez as Board Secretary for calendar years 2022-23. (*Action Item*)
  3. Receive and discuss a report on fiscal year-to-date healthcare service expenditures made by, and accept the preliminary October and November 2021 financial statements for, Central Health and the Community Care Collaborative. (*Informational Item*)
  4. Discuss and take appropriate action on a resolution honoring Sherri Greenberg for her service as Chair on the Central Health Board. (*Action Item*)
  5. Discuss and take appropriate action on Central Health owned or occupied real property and potential property for acquisition, lease, or development in Travis County, including next steps in the redevelopment of the Central Health Downtown Campus, administrative offices of Central Health Enterprise partners, and new developments in Eastern Travis County. <sup>3,4</sup>(*Informational Item*)
  6. Discuss and take appropriate action to authorize the Central Health President and CEO to execute amendments to the contract with JR Ramon and other professional services contracts to increase overall contract spending authority related to the Brackenridge project.<sup>3</sup> (*Action Item*)
  7. Receive and discuss updates on the 1115 Medicaid Waiver, Delivery System Reform Incentive Payment (DSRIP) program and associated projects, the Community Care Collaborative, and other healthcare delivery partners, programs, projects, and arrangements, including agreements with Ascension Texas.<sup>3</sup> (*Informational Item*)
  8. Receive and take appropriate action on the President and CEO's performance evaluation tool for May 2021 - April 2022, or other timeframe as might be appropriate. <sup>3,5</sup> (*Action Item*)
  9. Confirm the next regular Board meeting date, time, and location. (*Informational Item*)

Notes:

<sup>1</sup> Although emergency orders allowing for fully virtual meetings have expired, the Travis County area continues to have a high COVID-19 infection rate. This meeting may include one or more members of the Board of Managers participating by videoconference. It is the intent of the presiding officer to be physically present and preside over the meeting at Austin Independent School District, 4000 S I-35 Frontage Rd, Austin, TX 78704. This meeting location will be open to the public during the open portions of the meeting, and any member participating by videoconference shall be both visible and audible to the public 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.**

<sup>2</sup> 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.

- <sup>3</sup> Possible closed session discussion under Texas Government Code §551.071 (Consultation with Attorney).
- <sup>4</sup> Possible closed session discussion under Texas Government Code §551.072 (Deliberation Regarding Real Property).
- <sup>5</sup> Possible closed session discussion under Texas Government Code §551.074 (Personnel Matters).

A recording of this meeting will be made available to the public through the Central Health website ([www.centralhealth.net](http://www.centralhealth.net)) as soon as possible after the meeting.

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.

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.

Consecutive interpretation services from Spanish to English are available during Public Communication or when public comment is invited. Please notify the Board Governance Manager by telephone at (512) 978-8049 if services are needed.

Servicios de interpretación consecutiva del español al inglés están disponibles durante la Comunicación Pública o cuando se le invita al público a comentar. Notifique al Gerente de Gobierno de la Junta por teléfono al (512) 978-8049 si necesita servicios.

## **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

**Our Vision**

Central Texas is a model healthy community.

**Our Mission**

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

**Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

**BOARD MEETING**

**December 20, 2021**

**AGENDA ITEM C1**

Approve the minutes of the Central Health Board of Managers November 17, 2021 meeting.

MINUTES OF MEETING – NOVEMBER 17, 2021  
CENTRAL HEALTH  
BOARD OF MANAGERS

On Wednesday, November 17, 2021, a meeting of the Central Health Board of Managers convened in open session at 4:45 p.m. remotely by toll-free videoconference and in person at the Austin Independent School District Central Office. Clerk for the meeting was Briana Yanes.

---

**Board members present at Austin Independent School District:** Chairperson Greenberg, Vice Chairperson Bell, Treasurer Zuniga, Secretary Valadez, and Manager Jones.

**Board members present via video and audio:** Manager Brinson, Manager Motwani, and Manager Museitif

**Absent:** Manager Zamora

**PUBLIC COMMUNICATION**

**Clerk’s Notes:** Public Communication began at 4:46 p.m. Yesenia Ramos announced that no speakers signed up for Public Communication.

**CONSENT AGENDA**

- C1. Approve the minutes of the Central Health Board of Managers October 27, 2021 meeting.**
- C2. Receive and ratify Central Health Investments for October 2021.**
- C3. Approve the proposed Calendar Year 2022 meeting dates for the Central Health Board of Managers, as recommended by the Executive Committee.**

**Clerk’s Notes:** Discussion on this item began at 4:46 p.m.

Manager Valadez moved that the Board approve Consent Agenda Items C1 through C3.

Manager Brinson seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Zuniga	For
Secretary Cynthia Valadez	For
Manager Cynthia Brinson	For
Manager Shannon Jones	For
Manager Amit Motwani	Absent
Manager Maram Museitif	For
Manager Guadalupe Zamora	Absent

**REGULAR AGENDA**

At 4:48 p.m. Manager Valadez moved that the Board of Managers limit debate on all items on the agenda to three minutes per member per item.

Manager Brinson seconded the motion.

Chairperson Sherri Greenberg	For
------------------------------	-----

Vice Chairperson Charles Bell	For
Treasurer Julie Zuniga	For
Secretary Cynthia Valadez	For
Manager Cynthia Brinson	For
Manager Shannon Jones	For
Manager Amit Motwani	Absent
Manager Maram Museitif	For
Manager Guadalupe Zamora	Absent

- 1. Discuss and take appropriate action to authorize the Community Care Collaborative (CCC) Executive Director to amend the CCC’s agreements with Ascension Texas Cardiovascular and Ascension Seton to include Mitraclip procedures and increase annual funding by \$400,000 to a total of \$500,000 for fiscal year 2022.**

**Clerk’s Notes:** Discussion on this item began at 4:49 p.m.

At 4:50 p.m. Chairperson Greenberg announced that the Board was convening in closed session to discuss agenda item 1 under Texas Government Code §551.085 Governing Board of Certain Providers of Health Care Services and §551.071 Consultation with Attorney.

At 6:14 p.m. the Board returned to open session.

Manager Valadez moved that the Board authorize the CCC Executive Director to amend the CCC’s agreement with Ascension Texas Cardiovascular and Ascension Seton to include Mitraclip procedures and increase annual funding by \$400,000 to a total of \$500,000 for FY 2022.

Manager Motwani seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Zuniga	For
Secretary Cynthia Valadez	For
Manager Cynthia Brinson	For
Manager Shannon Jones	Abstain
Manager Amit Motwani	For
Manager Maram Museitif	Abstain
Manager Guadalupe Zamora	Absent

- 2. Receive and discuss updates on the 1115 Medicaid Waiver, Delivery System Reform Incentive Payment (DSRIP) program and associated projects, the Community Care Collaborative, and other healthcare delivery partners, programs, projects, and arrangements, including agreements with Ascension Texas.**

**Clerk’s Notes:** Discussion on this item began at 4:50 p.m.

At 4:50 p.m. Chairperson Greenberg announced that the Board was convening in closed session to discuss agenda item 2 under Texas Government Code §551.071 Consultation with Attorney.

At 6:14 p.m. the Board returned to open session.

- 3. Receive and take appropriate action on the President and CEO’s performance evaluation tool for May 2021 - April 2022, or other timeframe as might be appropriate, as recommended by the Executive Committee.**

**Clerk's Notes:** Discussion on this item began at 4:50 p.m.

At 4:50 p.m. Chairperson Greenberg announced that the Board was convening in closed session to discuss agenda item 3 under Texas Government Code §551.071 Consultation with Attorney and §551.074 Personnel Matters.

At 6:14 p.m. the Board returned to open session.

Action on this item was postponed to the December Board of Managers agenda.

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

At 6:17 p.m. Manager Bell moved that meeting adjourn.

Manager Zuniga seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Zuniga	For
Secretary Cynthia Valadez	For
Manager Cynthia Brinson	For
Manager Shannon Jones	For
Manager Amit Motwani	For
Manager Maram Museitif	For
Manager Guadalupe Zamora	Absent

The meeting was adjourned at 6:17 p.m.

---

Sherri Greenberg, Chairperson  
Central Health Board of Managers

ATTESTED TO BY:

---

Cynthia Valadez, Secretary  
Central Health Board of Managers



CENTRAL HEALTH

**Our Vision**

Central Texas is a model healthy community.

**Our Mission**

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

**Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

**BOARD MEETING**

**December 20, 2021**

**AGENDA ITEM C2**

Receive and ratify Central Health Investments for November 2021.

STATE OF TEXAS

COUNTY OF TRAVIS

CENTRAL HEALTH

Whereas, it appears to the Board of Managers of the Central Health, Travis County, Texas that there are sufficient funds on hand over and above those of immediate need for operating demand,

Now, Therefore, the Board of Managers hereby orders

- 1.) that the County Treasurer of Travis County, Texas, acting on behalf of Central Health, execute the investment of these funds in the total amount of \$26,593,153.52 in legally authorized securities as stipulated in the Travis County Healthcare District Investment and Collateral Policy for the periods as indicated in Attachment A, which consists of 22 pages.
- 2.) that the County Treasurer, acting on behalf of Central Health, take and hold in safekeeping all individual security investment instruments, relinquishing same only by order of the Board of Managers or for surrender at maturity.

Date: December 22, 2021

\_\_\_\_\_  
CHAIR, BOARD OF MANAGERS

\_\_\_\_\_  
VICE CHAIR, BOARD OF MANAGERS

\_\_\_\_\_  
MANAGER

\_\_\_\_\_  
MANAGER

\_\_\_\_\_  
MANAGER

\_\_\_\_\_  
MANAGER

\_\_\_\_\_  
MANAGER

\_\_\_\_\_  
MANAGER

\_\_\_\_\_  
MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/1/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	29,800.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE:	N/A	BOND EQ. YIELD:	0.0374%
PRINCIPAL:	29,800.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	29,800.00	CUSIP #:	N/A
TRADE DATE:	11/1/2021	SETTLEMENT DATE:	11/1/2021

AUTHORIZED BY:

*Deborah A. Laudermitte*  
 CASH/INVESTMENT MANAGER



CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/1/2021  
 \_\_\_\_\_

TIME: 10:30  
 \_\_\_\_\_

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	1,088,958.60	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0374%
PRINCIPAL:	1,088,958.60	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	1,088,958.60	CUSIP #:	N/A
TRADE DATE:	11/1/2021	SETTLEMENT DATE:	11/1/2021

AUTHORIZED BY:

*Deborah A. Laudermilk*  
 CASH/INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/1/2021  
 \_\_\_\_\_

TIME: 10:30  
 \_\_\_\_\_

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
_____	_____	_____	_____
PAR VALUE:	751,000.00	SAFEKEEPING NO:	N/A
_____	_____	_____	_____
CPN/DISC RATE:	N/A	PRICE:	100%
_____	_____	_____	_____
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0374%
_____	_____	_____	_____
PRINCIPAL:	751,000.00	PURCHASED THRU:	TexPool
_____	_____	_____	_____
ACCRUED INT:	N/A	BROKER:	N/A
_____	_____	_____	_____
TOTAL DUE:	751,000.00	CUSIP #:	N/A
_____	_____	_____	_____
TRADE DATE:	11/1/2021	SETTLEMENT DATE:	11/1/2021
_____	_____	_____	_____

AUTHORIZED BY: Deborah A. Lauder milk  
 CASH/INVESTMENT MANAGER


CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/2/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	144,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE:	N/A	BOND EQ. YIELD:	0.0369%
PRINCIPAL:	144,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	144,000.00	CUSIP #:	N/A
TRADE DATE:	11/2/2021	SETTLEMENT DATE:	11/2/2021

AUTHORIZED BY:   
 CASH/INVESTMENT MANAGER



CENTRAL HEALTH  
INVESTMENT DEPARTMENT  
SECURITY TRANSACTION FORM

DATE: 11/4/2021  
\_\_\_\_\_

TIME: 10:30  
\_\_\_\_\_

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexasDaily	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	10,009,821.92	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0151%
PRINCIPAL:	10,009,821.92	PURCHASED THRU:	TexasDaily
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	10,009,821.92	CUSIP #:	N/A
TRADE DATE:	11/4/2021	SETTLEMENT DATE:	11/4/2021

AUTHORIZED BY:    
\_\_\_\_\_  
CASH/INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/8/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	35,500.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE:	N/A	BOND EQ. YIELD:	0.0373%
PRINCIPAL:	35,500.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	35,500.00	CUSIP #:	N/A
TRADE DATE:	11/8/2021	SETTLEMENT DATE:	11/8/2021

AUTHORIZED BY:

*Reagan Linn*  
 C/S INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/9/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	Texpool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	212,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0376%
PRINCIPAL:	212,000.00	PURCHASED THRU:	Texpool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	212,000.00	CUSIP #:	N/A
TRADE DATE:	11/9/2021	SETTLEMENT DATE:	11/9/2021

AUTHORIZED BY:  

CASH/INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/10/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	299,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0376%
PRINCIPAL:	299,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	299,000.00	CUSIP #:	N/A
TRADE DATE:	11/10/2021	SETTLEMENT DATE:	11/10/2021

AUTHORIZED BY:

*Deborah A. Lauder milk*  
 CASH/INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/12/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	447,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0377%
PRINCIPAL:	447,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	447,000.00	CUSIP #:	N/A
TRADE DATE:	11/12/2021	SETTLEMENT DATE:	11/12/2021

AUTHORIZED BY:    
 CASH/INVESTMENT MANAGER



CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/16/2021

---

TIME: 10:30

---

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
<hr/>		<hr/>	
PAR VALUE:	885,000.00	SAFEKEEPING NO:	N/A
<hr/>		<hr/>	
CPN/DISC RATE:	N/A	PRICE:	100%
<hr/>		<hr/>	
MATURITY DATE:	N/A	BOND EQ. YIELD:	0.0380%
<hr/>		<hr/>	
PRINCIPAL:	885,000.00	PURCHASED THRU:	TexPool
<hr/>		<hr/>	
ACCRUED INT:	N/A	BROKER:	N/A
<hr/>		<hr/>	
TOTAL DUE:	885,000.00	CUSIP #:	N/A
<hr/>		<hr/>	
TRADE DATE:	11/16/2021	SETTLEMENT DATE:	11/16/2021
<hr/>		<hr/>	

AUTHORIZED BY:  

---

CASH/INVESTMENT MANAGER

CENTRAL HEALTH  
INVESTMENT DEPARTMENT  
SECURITY TRANSACTION FORM

DATE: 11/17/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	1,044,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0380%
PRINCIPAL:	1,044,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	1,044,000.00	CUSIP #:	N/A
TRADE DATE:	11/17/2021	SETTLEMENT DATE:	11/17/2021

AUTHORIZED BY:

*Deborah A. Laudermitte*  
CASH/INVESTMENT MANAGER

CENTRAL HEALTH  
INVESTMENT DEPARTMENT  
SECURITY TRANSACTION FORM

DATE: 10/29/2021

TIME: 9:30 AM

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	CITY OF LAFAYETTE LA UTILITY - REV	FUND NAME:	CENTRAL HEALTH OPERATING
PAR VALUE:	\$ 5,715,000.00	SAFEKEEPING NO:	P 31317
CUPON / DISCOUNT RATE	2.000%	PRICE:	102.7200000
MATURITY DATE:	11/1/2025 US TREASURY CONVENTION YLD		1.2920%
PRINCIPAL:	\$ 5,870,448.00	PURCHASED THROUGH:	MULTI-BANK
ACCRUED INT:	\$ 0.00	BROKER:	CAROL MACKOFF
TOTAL DUE:	\$ 5,870,448.00	CUSIP #:	506498A95
TRADE DATE:	10/29/2021	SETTLEMENT DATE:	11/18/2021

AUTHORIZED BY: *Deborah A. Laudermitk*

CENTRAL HEALTH  
INVESTMENT DEPARTMENT  
SECURITY TRANSACTION FORM

DATE: 11/18/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	807,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0382%
PRINCIPAL:	807,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	807,000.00	CUSIP #:	N/A
TRADE DATE:	11/18/2021	SETTLEMENT DATE:	11/18/2021

AUTHORIZED BY:

  
REAGAN LEWIS  
CAPITAL INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/18/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	21,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE:	N/A	BOND EQ. YIELD:	0.0382%
PRINCIPAL:	21,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	21,000.00	CUSIP #:	N/A
TRADE DATE:	11/18/2021	SETTLEMENT DATE:	11/18/2021

AUTHORIZED BY:

  
 CASI INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/22/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	497,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0384%
PRINCIPAL:	497,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	497,000.00	CUSIP #:	N/A
TRADE DATE:	11/22/2021	SETTLEMENT DATE:	11/22/2021

AUTHORIZED BY

*Reagan Linn*  
 CASH/INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/23/2021  
 \_\_\_\_\_

TIME: 10:30  
 \_\_\_\_\_

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TEXPOOL	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	10,125.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE:	N/A	BOND EQ. YIELD:	0.0384%
PRINCIPAL:	10,125.00	PURCHASED THRU:	TEXPOOL
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	10,125.00	CUSIP #:	N/A
TRADE DATE:	11/23/2021	SETTLEMENT DATE:	11/23/2021

AUTHORIZED BY:    
 \_\_\_\_\_  
 CASH/INVESTMENT MANAGER

CENTRAL HEALTH  
INVESTMENT DEPARTMENT  
SECURITY TRANSACTION FORM

DATE: 11/23/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TEXPOOL	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	806,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE:	N/A	BOND EQ. YIELD:	0.0384%
PRINCIPAL:	806,000.00	PURCHASED THRU:	TEXPOOL
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	806,000.00	CUSIP #:	N/A
TRADE DATE:	11/23/2021	SETTLEMENT DATE:	11/23/2021

AUTHORIZED BY:

CASH/INVESTMENT MANAGER



CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/24/2021  
 \_\_\_\_\_

TIME: 10:30  
 \_\_\_\_\_

The following transaction was executed on behalf of Central Health:

DESCRIPTION	TEX POOL	FUND NAME:	CENTRAL HEALTH
<hr/>			
PAR VALUE:	554,000.00	SAFEKEEPING NO:	N/A
<hr/>			
CPN/DISC RATE	N/A	PRICE:	100%
<hr/>			
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0387%
<hr/>			
PRINCIPAL:	554,000.00	PURCHASED THRU:	TEX POOL
<hr/>			
ACCRUED INT	N/A	BROKER:	N/A
<hr/>			
TOTAL DUE:	554,000.00	CUSIP #:	N/A
<hr/>			
TRADE DATE:	11/24/2021	SETTLEMENT DATE:	11/24/2021
<hr/>			

AUTHORIZED BY:   
 \_\_\_\_\_  
 CASH/INVESTMENT MANAGER

CENTRAL HEALTH  
INVESTMENT DEPARTMENT  
SECURITY TRANSACTION FORM

DATE: 11/26/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TEXPOOL	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	600,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0384%
PRINCIPAL:	600,000.00	PURCHASED THRU:	TEXPOOL
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	600,000.00	CUSIP #:	N/A
TRADE DATE:	11/26/2021	SETTLEMENT DATE:	11/26/2021

AUTHORIZED BY:

*Deborah A. Lauder milk*  
CASH/INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/29/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	941,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.0387%
PRINCIPAL:	941,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	941,000.00	CUSIP #:	N/A
TRADE DATE:	11/29/2021	SETTLEMENT DATE:	11/29/2021

AUTHORIZED BY

*Reagan Dennis*  
 CASH INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/29/2021

---

TIME: 10:30

---

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	12,500.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE:	N/A	BOND EQ. YIELD:	0.0387%
PRINCIPAL:	12,500.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	12,500.00	CUSIP #:	N/A
TRADE DATE:	11/29/2021	SETTLEMENT DATE:	11/29/2021

AUTHORIZED BY:

  
 CASI INVESTMENT MANAGER

CENTRAL HEALTH  
 INVESTMENT DEPARTMENT  
 SECURITY TRANSACTION FORM

DATE: 11/30/2021

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TEXPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	1,528,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE:	N/A	BOND EQ. YIELD:	0.0388%
PRINCIPAL:	1,528,000.00	PURCHASED THRU:	TEXPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	1,528,000.00	CUSIP #:	N/A
TRADE DATE:	11/30/2021	SETTLEMENT DATE:	11/30/2021

AUTHORIZED BY:    
 CASH/INVESTMENT MANAGER

CENTRAL HEALTH MONTHLY INVESTMENT REPORT  
 PORTFOLIO STATISTICS

DATE: November 30, 2021

By Fund Type

Operating	\$	285,410,128.39	76.61%
LPPF		9,406,236.11	2.52%
Bond Proceeds		77,747,955.07	20.87%
Other		-	0.00%
Total Portfolio	\$	<u>372,564,319.57</u>	<u>100.00%</u>

By Security Type

**Operating-**

TexasDAILY	\$	43,102,127.76	15.10%
TexPool	\$	31,633,486.12	11.08%
TexSTAR	\$	1,730,835.46	0.61%
TexasTERM CP		-	0.00%
Non-Int Bearing Bank Account		928,000.00	0.33%
Certificates of Deposit		-	0.00%
Treasury Securities		-	0.00%
Government Agencies		159,496,100.00	55.88%
Commercial Paper		-	0.00%
Municipal Bonds		48,519,579.05	17.00%
Total	\$	<u>285,410,128.39</u>	<u>100.00%</u>

**LPPF-**

TexPool		9,406,236.11	100.00%
Total	\$	<u>9,406,236.11</u>	<u>100.00%</u>

**Bond Proceeds-**

TexPool	\$	77,747,955.07	100.00%
Total	\$	<u>77,747,955.07</u>	<u>100.00%</u>

Compared to Policy Limits

		Actual %	Guidelines
TexasDAILY	43,102,127.76	11.60%	30.00%
TexPool	118,787,677.30	31.96%	50.00%
TexSTAR	1,730,835.46	0.47%	30.00%
TexasTERM CP	0.00	0.00%	30.00%
Total LGIPS	\$ 163,620,640.52	44.03%	70.00%
Certificates of Deposit	-	0.00%	50.00%
Treasury Securities	-	0.00%	100.00%
Government Agencies	159,496,100.00	42.92%	75.00%
Commercial Paper	-	0.00%	20.00%
Municipal Bonds	48,519,579.05	13.06%	20.00%
	\$ <u>371,636,319.57</u>	<u>100.00%</u>	

Commercial Papter by Entity as a Percentage of Portfolio

\$	-	0.00%	5.00%
<u>\$</u>	<u>-</u>	<u>0.00%</u>	<u>20.00%</u>

Municipal Bonds by Entity as a Percentage of Portfolio

City of Lafayette LA Utility - Rev	\$ 5,870,448.00	2.06%	5.00%
Alabama ST Pub Sch & Clg 2022	\$ 1,000,000.00	0.35%	5.00%
City of Hampton VA - GO	\$ 1,157,199.00	0.41%	5.00%
Chippewa Valley School Go Bonds	\$ 2,022,800.00	0.71%	5.00%
Oklahoma County OK ISD	\$ 4,662,698.00	1.63%	5.00%
Texas Tech Univ	\$ 525,840.00	0.18%	5.00%
Commonwealth of Virginia - GO	\$ 5,089,600.00	1.78%	5.00%
City of Dallas Waterworks	\$ 5,154,300.00	1.81%	5.00%
Multnomah CNTY OR - GO	\$ 5,415,174.00	1.90%	5.00%
Upper Occoquan VA - Rev	\$ 3,110,000.00	1.09%	5.00%
San Diego CA Pub Facs - Rev	\$ 1,067,164.80	0.37%	5.00%
City of Yuma AZ - REV	\$ 1,500,000.00	0.53%	5.00%
NYC Tran Fin Tax - REV	\$ 5,000,000.00	1.75%	5.00%
WA DC INC Tax - Rev	\$ 4,944,355.25	1.73%	5.00%
Shakopee MN ISD - GO	\$ 1,000,000.00	0.35%	5.00%
Univ Cincinnati OH Tax - Rev	\$ 1,000,000.00	0.35%	5.00%
	<u>\$ 48,519,579.05</u>	<u>17.00%</u>	<u>25.00%</u>

Investment Revenue & Accrued Interest

November-21

Fiscal YTD

Interest/Dividends-		
TexasDAILY	\$ 659.30	\$ 1,226.99
TexPool	801.04	\$ 1,342.61
TexSTAR	15.34	\$ 36.76
TexasTERM CP	0.00	\$ 19,830.14
Certificates of Deposit	0.00	\$ -
Treasury Securities	0.00	\$ -
Government Agencies	79,125.00	\$ 148,375.00
Commercial Paper	0.00	\$ -
Municipal Bonds	29,800.00	\$ 96,800.00
	<u>\$ 110,400.68</u>	<u>\$ 267,611.50</u>
Discounts, Premiums, & Accrued Interest		
TexasTERM CP	\$ -	\$ 1,273.97
-less previous accruals	0.00	\$ (18,558.91)
Certificates of Deposit	0.00	\$ -
-less previous accruals	0.00	\$ -
Treasury Securities	0.00	\$ -
-less previous accruals	0.00	\$ -
Government Agencies	42,250.53	\$ 88,776.69
-less previous accruals	(66,700.37)	\$ (124,358.04)
Commercial Paper	9,821.92	\$ 9,821.92
-less previous accruals	(9,657.53)	\$ (9,657.53)
Municipal Bonds	40,278.36	\$ 68,317.66
-less previous accruals	(50,662.26)	\$ (126,109.28)
	<u>\$ (34,669.35)</u>	<u>\$ (110,493.52)</u>
Total Investment Revenue & Accrued Interest	<u>\$ 75,731.33</u>	<u>\$ 157,117.98</u>



## CENTRAL HEALTH

### **Our Vision**

Central Texas is a model healthy community.

### **Our Mission**

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

### **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **AGENDA ITEM C3**

Approve the Fiscal Year (FY) 2022 Broker/Dealer Applicants for conducting investment business with the Travis County Healthcare District (dba Central Health) as recommended by the Travis County Cash/Investment Management Department.



**INVESTMENT MANAGEMENT DEPARTMENT**  
**TRAVIS COUNTY, TEXAS**



Planning & Budget Office  
700 Lavaca, Suite 1560  
P.O. Box 1748  
Austin, Texas 78767

Phone: (512) 854-9779  
Fax: (512) 854-4210  
Email: [deborah.laudermilk@traviscountytx.gov](mailto:deborah.laudermilk@traviscountytx.gov)

DATE: December 6, 2021

TO: Sherri R. Greenberg, M.S., Chairperson  
Charles E. Bell, M.D., M.S., Vice Chairperson  
Cynthia Valadez, Sr., Secretary  
Julie Zuniga, PHD, R.N., FAAN, Treasurer  
Cynthia Brinson, M.D., Manager  
Shannon Jones III, M.P.A., Manager  
Maram Museitif, Manager, MPH, CPH  
Amit Motwani, Manager  
Guadalupe Zamora, M.D., Manager

FROM: Deborah Laudermilk, Travis County Chief Investment Officer  
Reagan Grimes, Travis County Investment Manager  
Michael G'Benoba, Sr. Financial Analyst

RE: Travis County Healthcare District Annual Broker/Dealer Selection

The State of Texas Public Funds Investment Act requires that public entities review, revise, and adopt a list of qualified brokers at least annually.

For Travis County, we collect applications to do business with the County, and once a year our office goes through an extensive review process.

The following brokers have been reviewed, approved, and are authorized to do business with Travis County and recommended for the Healthcare District:

Primary Broker/Dealers

Bank of America Securities LLC  
Daiwa Capital Markets America Inc.  
UBS Financial Services Inc.

Jefferies & Company, Inc.  
RBC Wealth Management,  
a division of RBC Capital Markets

All of the primary listed firms are currently on the Travis County approved broker/dealer list.

Secondary Broker/Dealers

Bancroft Capital LLC  
Drexel Hamilton LLC  
CastleOak Securities L.P.  
FHN Financial Capital Markets  
Multi-Bank Securities, Inc

KeyBanc Capital Markets Inc.  
Samuel A. Ramirez & Co  
Stifel Financial Corp.  
Truist Securities (SunTrust Robinson Humphrey)  
Vining Sparks IBG, L.P  
Wells Fargo Securities, LLC

All of the secondary firms, with the exception of KeyBanc, are currently on the Travis County approved broker/dealer list.

In selecting these brokers, we address issues such as the size, financial strength, and trading volume for the firms. For the individual brokers, we look at such factors as experience, how long they have been

with their current firm, and we check references. For both, we check their records with the Financial Industry Regulatory Authority (FINRA) which was previously called National Association of Securities Dealers for regulatory and civil judicial actions against the firm or person. These and other factors are used in a point system to see which brokers are most compatible with Travis County's needs. For the last twelve years, we have used the list of brokers produced by this process to choose brokers for Central Health. We simply sent a letter to each Travis County approved broker, along with Central Health's Investment policy and Certification, asking if they would like to do business with the District as well. We have received good responses every year. Due to the amount of business that Travis County and Central Health have done in the past year, we have kept the number of primary brokers at four and the number of secondary brokers to eleven, selecting the brokers we believe are best qualified to do business with Travis County and Central Health.

This method avoids duplication of effort, and we also believe it provides a better group of brokers than if the District went out on its own. For the following reasons, it is more advantageous to use the same brokers: 1) the combination of both Travis County and Central Health provides us with greater market strength in being shown better securities, 2) it is very easy for these brokers to add the District, since they do not have to fill out an additional application, and they are familiar with the way our office does business. Again, this method is more likely to attract larger and more experienced firms and individual brokers.

We recommend that the Board authorize the use of the above described method to review, revise, and adopt a list of brokers for the Healthcare District again this year.

Attachment A – Copy of Approval memo for Travis County Brokers

cc: Mike Geeslin, President and CEO  
Jeff Knodel, VP and CFO  
Lisa Owens, VP, Financial Operations  
Jessica Rio, County Executive, Planning and Budget  
Christy Moffett, Interim Director Economic Development and Strategic Investing  
David Duncan, Travis County Attorney

# **ATTACHMENT A**

**INVESTMENT MANAGEMENT DEPARTMENT**  
**TRAVIS COUNTY, TEXAS**



Planning & Budget Office  
700 Lavaca, Suite 1560  
P.O. Box 1748  
Austin, Texas 78767

Phone: (512) 854-9779  
Fax: (512) 854-4210  
Email: [deborah.laudermilk@traviscountytx.gov](mailto:deborah.laudermilk@traviscountytx.gov)

DATE: October 18, 2021

TO: Andy Brown, Travis County Judge  
Jeffrey W. Travillion, Sr., Commissioner, Precinct 1  
Brigid Shea, Commissioner, Precinct 2  
Ann Howard, Commissioner, Precinct 3  
Margaret J. Gomez, Commissioner, Precinct 4

FROM: Deborah Laudermilk, Chief Investment Officer  
Reagan Grimes, Investment Manager  
Michael Gbenoba, Sr. Financial Analyst

RE: Approval of FY 2022 Broker/Dealer Applicants

**Proposed Motion**

Approve the following broker/dealers to conduct investment business with Travis County:

**Primary Broker/Dealers**

Bank of America Securities LLC	Jefferies & Company, Inc.
Daiwa Capital Markets America Inc.	RBC Wealth Management,
UBS Financial Services Inc.	a division of RBC Capital Markets

All of the primary listed firms are currently on the Travis County approved broker/dealer list.

**Secondary Broker/Dealers**

Bancroft Capital LLC	KeyBanc Capital Markets Inc.
Drexel Hamilton LLC	Samuel A. Ramirez & Co
CastleOak Securities L.P.	Stifel Financial Corp.
FHN Financial Capital Markets	Truist Securities (SunTrust Robinson Humphrey)
Multi-Bank Securities, Inc	Vining Sparks IBG, L.P
	Wells Fargo Securities, LLC

All of the secondary firms, with the exception of KeyBanc, are currently on the Travis County approved broker/dealer list.

**Summary and Authorizations**

The Public Funds Investment Act, Section 2256.025, requires that “the entity shall, at least annually review, revise, and adopt a list of qualified brokers that are authorized to engage in investment transactions with the entity”. The Travis County Investment Policy and Procedures Manual, Chapter 23, section 23.043-23.047 also specifies the procedures that must be followed in the selection process of broker/dealers.

All of the applications were reviewed for compliance with Approval of Broker/Dealer/Financial Applications Sections 23.043 through 23.047 of the Travis County Investment Policy and Procedures by the Investment Management staff. Primary dealers have been approved by the Federal Reserve Bank of

New York as large, financially sound firms. For secondary dealers, Investment Management requires additional information and completes a more thorough review, taking other criteria into consideration. These criteria include debt to equity ratios, total assets, regulatory and other actions recorded by the Financial Industry Regulatory Authority (FINRA) against the firm and/or individual, as well as references from other governmental entities, and experience. Past performance of individual brokers is taken into consideration for current broker/dealers.

### **Investment Officers' Recommendations and Issues**

#### **Primary Broker/Dealers**

Travis County received five applications from primary dealers, and five are recommended for approval.

Primary Dealers have greater access to an inventory of securities and as such, can provide availability and good prices for our purchases.

If these recommendations are approved, Travis County will be using one primary broker/dealer with offices in Chicago, (Bank of America), two in San Francisco (RBC Capital Markets and Daiwa), one in New York City (UBS) and one in Atlanta (Jefferies).

RBC Wealth Management is owned by a Canadian bank, and Daiwa Capital Markets is owned by a Japanese bank, a reflection of the internationalization of today's financial markets.

#### **Secondary Broker/Dealers**

Twenty secondary brokers requested applications, but only eighteen applications were received from secondary or regional broker/dealers. Eleven are recommended for approval. All broker/dealers are evaluated and scored on several criteria including financial strength, service, location, etc. The results are placed in a scoring matrix. Ten are currently approved broker/dealers, including: Bancroft, Drexel Hamilton; FHN Financial Capital Markets; Samuel A. Ramirez & Co; Truist Securities (formerly SunTrust Robinson Humphrey); Vining Sparks; Wells Fargo; Stifel; Castle Oak and Multi-Bank Securities, Inc. The new broker recommended for approval is KeyBanc Capital Markets Inc.

Due to the volume of investment business Travis County typically transacts in a year, we believe it is in the best interest of the County to limit the number of approved secondary broker/dealers to eleven which will become ten after the first of year since two of the approved firms are merging. The remaining secondary firms (see Attachment B) that applied are not recommended because Travis County does not need additional brokers at this time.

If these recommendations are approved, Travis County will be using four secondary brokers with offices located in Texas. Ramirez & Co. and CastleOak Securities are minority-owned businesses and in addition Multi-Bank Securities, Inc., Drexel Hamilton and Bancroft Capital are veteran-owned businesses.

### **Investment Advisory Committee**

These recommendations have been reviewed by the Investment Advisory Committee and have the Committee's concurrence.

### **Definitions**

#### **Primary Broker/Dealers**

Primary broker/dealers are national and international banks and investment firms that are authorized to deal directly with the Federal Reserve Bank of New York. They act as the Federal Reserve System's trading agent to implement monetary policy and are designated by the Federal Reserve as primary dealers in government securities. Primary dealers help to establish the market for all treasury securities by participating in the treasury auctions, from short term bills to 30-year long bonds. The Federal Reserve investigates these dealers thoroughly to make sure the firms comply with relevant capital standards.

Secondary Broker/Dealers

Secondary broker/dealers are all the other firms authorized to sell securities that have not been designated as primary dealers in government securities by the Federal Reserve. The secondary broker/dealers may be large or small, new or well established, and regional or national firms.

Minority Owned Businesses

The minority and/or women-owned businesses are at least 51% owned by one or more persons who have been historically underutilized because of their identification as members of the following groups: Asian-Pacific Americans, Black Americans, Hispanic Americans, Native Americans, American Woman and/or Service Disabled Veteran.

Exhibits: Attachment A – List of FY 2022 Applicants

Jessica Rio, County Executive, Planning & Budget  
Christy Moffet, Interim Director of Economic Development and Strategic Investments  
Travis Gatlin, Budget Director  
Bonnie Floyd, Purchasing Agent  
Dolores Ortega-Carter, County Treasurer  
Barbara Wilson, Assistant County Attorney

**ATTACHMENT A**  
**FY 2022 BROKER DEALER APPLICANTS**

**PRIMARY DEALERS**

\*Bank of America Securities, LLC  
101 N Wacker Dr.  
Chicago, IL 60606-1511

\*Jefferies Group, Inc.  
3414 Peachtree Rd. Ste. 200  
Atlanta, GA 30326

\*Daiwa Capital Markets America Inc.  
555 California St., Suite 3360  
San Francisco, CA 94104

\*RBC Wealth Management, a division  
of RBC Capital Markets  
345 California Street, 29<sup>th</sup> Floor  
San Francisco, CA 94104

\* UBS Financial Services Inc.  
51 JFK Parkway  
Short Hills, NJ 07078

**SECONDARY DEALERS**

\*Bancroft Capital LLC  
501 Office Center Drive  
Fort Washington, PA 19034

# Inspere LLC  
25 SE 4<sup>th</sup> Avenue, Suite 400  
Delray Beach, FL 33483

# Cabrera Capital  
10 South LaSalle Street, Suite 1050  
Chicago, IL 60603

\*\* KeyBanc Capital Markets, Inc.  
1 California St.  
San Francisco, CA 94111

\*CastleOak Securities, LP  
111 SW 5<sup>th</sup> Avenue  
Portland OR 97024

# Mischler Financial Group Inc.  
9330 LBJ Freeway, Suite 900  
Dallas, TX 75243

\*Drexel Hamilton, LLC  
8421 Amber Hill Ct, Suite 205  
Lincoln, NE 68526

\* Multi Bank Securities  
20 N. Wacker Drive, Suite 1829  
Chicago, IL 60606

\*FHN Financial Capital Markets  
920 Memorial City Way, 11<sup>th</sup> Fl  
Houston, TX 77024

#Piper Jaffray  
609 Main Street, Suite 3800  
Houston, TX 77002

# Great Pacific Securities  
151 Kalmus Drive, Suite H8  
Costa Mesa, CA 92626

#Raymond James  
50 North Front St., 12<sup>th</sup> Floor  
Memphis, TN 38103

# Hilltop Securities  
700 Milam Street, Suite 500  
Houston, TX 77002

\*Samuel A. Ramirez & Co.  
61 Broadway, Suite 2924  
New York, NY 10006

**ATTACHMENT A**  
**FY 2022 BROKER DEALER APPLICANTS**

\*Stifel Financial Corp.  
5956 Sherry Lane, Suite 875  
Dallas, TX 75225

\*Truist Securities (Formerly Suntrust)  
500 West Monroe, Suite 2600  
Chicago, IL 60661

\*Vining Sparks IBG, L.P.  
775 Ridge Lake Blvd, Suite 200  
Memphis, TN 38120

\*Wells Fargo Securities, LLC  
1445 Ross Avenue, Suite 420  
Dallas, TX 75202

\* Firms that are currently approved and recommended for re-approval.

\*\* Firms that are new applicants that are recommended for approval.

# Firms that applied, but are not recommended for approval.





## CENTRAL HEALTH

### **Our Vision**

Central Texas is a model healthy community.

### **Our Mission**

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

### **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **AGENDA ITEM C4**

Approve an update to the Central Health values statement, as recommended by the Executive Committee in September 2020.



MEMORANDUM

**To:** Board of Managers  
**From:** Mike Geeslin, President and CEO  
**Cc:** Executive Group; Equity & Inclusion Task Force  
**Date:** September 16, 2020  
**Re:** Informational Item: Central Health Values

---

**Synopsis**

Central Health has four values that are printed at the top of our Agendas: Stewardship, Innovation, Respect, and Collaboration. Each of these values is followed by a statement of what the value means.

Central Health's values are meaningful and should guide how we work. Given their importance, the values should be examined from time to time. In reading about other organizations and considering where we are as a community, and nation, there is one of our values that we should examine much deeper, *Respect*. This value currently reads:

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

Alternatively, and as a starting point for discussion, consider the following:

“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.”

While this phrase deviates from the one-word format, it captures a more encompassing value of doing right by people. Respect is important; but, as implied, it speaks only to how we outwardly relate to individuals in transactional relationships and encounters.

**Recommended Next Steps:**

1. The Central Health staff, through the Equity and Inclusion Task Force, should review this value statement relative to its current work on establishing values and objectives for the staff or workforce. This group is diverse - and courageously outspoken - and will inform how this statement is perceived and can be improved.
2. Concurrently, the Board, through the Executive Committee, will need to decide how and over what time period the Board should deliberate this and any other changes in our values statements.
3. At a regular meeting or workshop determined by the Board Executive Committee or full Board, we should set aside time to discuss how we can revise this value statement.

###

Central Health Values (as listed on agendas):

- 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.



# CENTRAL HEALTH

## **Our Vision**

Central Texas is a model healthy community.

## **Our Mission**

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

## **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **REGULAR AGENDA ITEM 1**

Approve the candidate recommendations made by the ad hoc Board Officer Nominations Committee for the following officer positions and elect the recommended candidates for calendar years 2022-23:

- a. Chairperson- Dr. Charles Bell
- b. Vice-Chairperson- Dr. Cynthia Brinson
- c. Treasurer- Dr. Julie Zuniga (*Action 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 December 20, 2021

Who will present the agenda item? (Name, Title) Chair Greenberg

General Item Description Discuss recommendations on candidates to serve Board Officer positions during calendar years 2022-2023 and elect recommended candidates.

Is this an informational or action item? Action Item

Fiscal Impact N/A

Recommended Motion (if needed – action item) Elect nominated candidates to serve Board officer positions during calendar years 2022-2023.

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

- 1) The Nominations Ad Hoc Committee met in November for the purposes of accepting nominations and/or making recommendations on officer candidates.
- 2) Members may nominate others or self-nominate. The Nominations Ad Hoc Committee may recommend one or more candidates for each position.
- 3) *Elected* officers include Chair, Vice-Chair, and Treasurer. The Board as a whole *appoints* the Secretary.

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

Estimated time needed for presentation & questions? 10 minutes

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

Form Prepared By/Date Submitted: Briana Yanes, 12/15/21



## CENTRAL HEALTH

### **Our Vision**

Central Texas is a model healthy community.

### **Our Mission**

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

### **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **REGULAR AGENDA ITEM 2**

Approve the recommendation made by the ad hoc Board Officer Nominations Committee regarding the Board Secretary position and appoint Ms. Cynthia Valadez as Board Secretary for calendar years 2022-23. (*Action Item*)



## CENTRAL HEALTH

### **Our Vision**

Central Texas is a model healthy community.

### **Our Mission**

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

### **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **REGULAR AGENDA ITEM 3**

Receive and discuss a report on fiscal year-to-date healthcare service expenditures made by, and accept the preliminary October and November 2021 financial statements for, Central Health and the Community Care Collaborative. (*Informational Item*)



# Central Health

## Financial Statement Presentation

FY 2022 – as of November 30, 2021  
(Preliminary)

Central Health Board of Managers

December 20, 2021

Lisa Owens, Deputy CFO

Patti Bethke, Controller



- Slide 2 Index
- Slide 3 Highlights
- Slide 4 Balance Sheet - Assets
- Slide 5 Balance Sheet - Liabilities & Net Assets
- Slide 6 Sources & Uses
- Slide 7 HCD - Summary
- Slide 8 HCD - Blank Page
- Slide 9 HCD - IGT & HCD Services
- Slide 10 HCD - Operating Cost
- Slide 11 HCD - Primary Care
- Slide 12 HCD - Specialty Care

Note: HCD = Health Care Delivery





- Year-to-date through November collected net property tax revenue is \$14 million compared to \$2 million as of November 2020 representing 5.2% of the adjusted tax levy compared to 0.9% as of November 2020.
- Healthcare Delivery is \$16 million for the two months ending 11/30/2021.
- GAAP reporting Net Assets increased \$81 million year-over-year.
- TCHD LPPF total restricted balance of LPPF as of 11/30/2021 is \$9 million.

GAAP: Generally Accepted Accounting Principles refer to a common set of accounting principles, standards, and procedures issued by the Financial Accounting Standards Board. GAAP primary focus is to improve clarity, consistency, and comparability of the communication of financial information.



Assets	Preliminary as	
	of 11/30/2021	as of 11/30/2020
Current Assets		
Cash and cash equivalents	1,248,066	1,021,076
Short-term investments	258,136,664	173,175,933
Ad valorem taxes receivable	255,564,273	241,239,964
CO Reimbursement Receivable	21,686,449	-
Other receivables	5,534,993	2,152,468
Prepaid expenses	1,316,724	1,880,055
Total Current Assets	543,487,170	419,469,497
Restricted Cash and Investments or Noncurrent		
Restricted for capital acquisition	102,838,049	6,714,072
Sendero paid-in-capital	71,000,000	71,000,000
Working capital advance to CommUnityCare	4,000,000	4,000,000
Sendero Surplus Debenture	37,083,000	37,083,000
Restricted TCHD LPPF Cash & Investments	9,431,963	8,335,940
Total Restricted Cash and Investments or Noncurrent	224,353,013	127,133,012
Capital Assets		
Land	26,302,222	13,425,967
Buildings and improvements	61,260,637	132,724,885
Equipment and furniture	17,752,642	10,030,421
Capital Projects in progress	5,603,046	3,603,894
Less accumulated depreciation	(25,605,760)	(48,218,028)
Total Capital Assets	85,312,787	111,567,138
<b>Total Assets</b>	<b>853,152,970</b>	<b>658,169,647</b>



<b>Liabilities</b>	<b>Preliminary</b>	
	<b>as of 11/30/2021</b>	<b>as of 11/30/2020</b>
<b>Current Liabilities</b>		
Accounts payable	16,921,027	16,634,037
Salaries and benefits payable	1,782,179	1,512,248
Other Payables	1,297,385	7,276
Debt service payable, short-term	4,697,993	1,202,948
Deferred tax revenue	252,169,286	239,735,792
Other deferred revenue	-	610,000
<b>Total Current Liabilities</b>	<b>276,867,870</b>	<b>259,702,301</b>
<b>Restricted or Noncurrent Liabilities</b>		
Funds held for TCHD LPPF	9,431,963	8,335,940
CO Reimbursement Payable	21,686,449	-
Debt service payable, long-term	80,264,606	6,105,000
<b>Total Restricted of Noncurrent Liabilities</b>	<b>111,383,018</b>	<b>14,440,940</b>
<b>Total Liabilities</b>	<b>388,250,888</b>	<b>274,143,240</b>
<b>Net Assets</b>		
Unrestricted	323,207,794	272,459,269
Restricted	56,381,500	-
Investment in Capital Assets	85,312,787	111,567,138
<b>Total Net Assets</b>	<b>464,902,082</b>	<b>384,026,407</b>
<b>Liabilities and Net Assets</b>	<b>853,152,970</b>	<b>658,169,647</b>



<b>Sources / Uses</b>	<b>Nov 2021</b>	<b>FY22 YTD</b>	<b>FY22 Budget</b>	<b>Percent of Budget Used</b>	<b>FY21 YTD</b>
<b>Sources</b>					
Property Tax Revenue	12,429,944	13,892,610	260,933,097	5%	2,167,931
Lease Revenue	888,519	1,772,065	13,422,399	13%	1,724,476
Other Revenue	84,177	166,284	3,000,000	6%	123,968
Tobacco Settlement Revenue	-	-	3,000,000	0%	-
Contingency Reserve (Carryforward)	-	-	226,521,399	0%	0
<b>Total Sources</b>	<b>13,402,640</b>	<b>15,830,959</b>	<b>506,876,895</b>	<b>3%</b>	<b>4,016,375</b>
<b>Uses of Funds</b>					
<b>Healthcare Delivery</b>	<b>8,167,261</b>	<b>16,301,370</b>	<b>491,485,797</b>	<b>3%</b>	<b>15,899,797</b>
<b>Administrative Program</b>					
Salaries and benefits	477,321	921,496	7,134,758	13%	676,476
Consulting Fees	15,918	42,773	1,341,120	3%	24,091
Legal Fees	107,622	128,214	1,456,636	9%	177,398
Other Purchase Goods and Services	161,028	330,810	3,287,732	10%	176,622
<b>Total Administrative Program</b>	<b>761,889</b>	<b>1,423,293</b>	<b>13,220,246</b>	<b>11%</b>	<b>1,054,587</b>
<b>Tax Collection Expenses</b>	<b>114,156</b>	<b>193,803</b>	<b>2,170,853</b>	<b>9%</b>	<b>200,059</b>
<b>Total Uses</b>	<b>9,043,306</b>	<b>17,918,466</b>	<b>506,876,896</b>	<b>4%</b>	<b>17,154,443</b>
<b>Excess Sources / (Uses)</b>	<b>4,359,334</b>	<b>(2,087,507)</b>			<b>(13,138,068)</b>



<b>Healthcare Delivery Summary</b>	<b>Nov 2021</b>	<b>FY22 YTD</b>	<b>FY22 Budget</b>	<b>Percent of Budget Used</b>	<b>FY21 YTD</b>
<b>Inter-Governmental Transfers (IGTs)</b>	-	-	15,509,298	0%	-
<b>Healthcare Services</b>					
Primary Care - (see detail on Slide 11)	3,846,367	7,733,234	59,040,000	13%	8,026,936
Specialty Care, incld Dental & Behavioral Health	518,016	1,062,593	17,408,856	6%	1,167,112
Pharmacy	725,392	1,456,533	14,250,000	10%	1,633,464
Post Acute Care	-	-	2,125,000	0%	-
All Other Healthcare Services	28,100	55,700	7,887,035	1%	78,000
Community Healthcare Initiatives Fund	-	-	875,000	0%	-
Hospital and Specialty Services & Incentives	-	-	-	0%	-
<b>Subtotal Healthcare Services</b>	<b>5,117,875</b>	<b>10,308,060</b>	<b>101,585,891</b>	<b>10%</b>	<b>10,905,512</b>
<b>ACA Premium Assist, Education, Enrollment</b>	<b>1,017,926</b>	<b>1,974,144</b>	<b>13,902,929</b>	<b>14%</b>	<b>1,910,853</b>
<b>Healthcare Facilities and Campus Redevelopment</b>	<b>22,908</b>	<b>168,319</b>	<b>6,284,795</b>	<b>3%</b>	<b>330,935</b>
<b>Healthcare Delivery Operating Costs</b>	<b>1,863,228</b>	<b>3,560,199</b>	<b>35,631,887</b>	<b>10%</b>	<b>2,737,198</b>
<b>Debt, Reserves and Transfers</b>	<b>145,324</b>	<b>290,648</b>	<b>318,570,997</b>	<b>0%</b>	<b>15,299</b>
<b>Total Healthcare Delivery</b>	<b>8,167,261</b>	<b>16,301,370</b>	<b>491,485,797</b>	<b>3%</b>	<b>15,899,797</b>



Details for Health Care Delivery on the following slides.

DRAFT



Healthcare Delivery - Detail	Nov 2021	FY22 YTD	FY22 Budget	Percent of Budget Used	FY21 YTD
<b>Intergovernmental Transfers (IGTs)</b>					
DSH - Disproportionate Share	-	-	-	0%	-
DSRIP - CCC	-	-	15,509,298	0%	-
<b>Subtotal Intergovernmental Transfers (IGTs)</b>	<b>-</b>	<b>-</b>	<b>15,509,298</b>	<b>0%</b>	<b>-</b>
<b>Healthcare Services</b>					
Primary Care - (see detail on Slide 11)	3,846,367	7,733,234	59,040,000	13%	8,026,936
Specialty Care, incld Dental - (see detail on Slide 12)	446,616	920,993	16,025,000	6%	1,003,779
Specialty Care, Behavioral Health	71,400	141,600	1,383,856	10%	163,333
Pharmacy	725,392	1,456,533	14,250,000	10%	1,633,464
Post Acute Care	-	-	2,125,000	0%	-
Reproductive and Sexual Health	28,100	55,700	1,150,000	5%	78,000
Healthcare services, Pay for Success	-	-	-	0%	-
Medical Administration / ICC payment	-	-	687,035	0%	-
Primary, Specialty Care, & MAP Reserves	-	-	6,050,000	0%	-
Community Health Care Initiatives	-	-	875,000	0%	-
Hospital and Specialty Services	-	-	-	0%	-
Hospital Performance Incentives	-	-	-	0%	-
<b>Subtotal Healthcare Services</b>	<b>5,117,875</b>	<b>10,308,060</b>	<b>101,585,891</b>	<b>10%</b>	<b>10,905,512</b>
Service Expansion Funds					

(continued on next page)



Healthcare Delivery Detail (continued)	Nov 2021	FY22 YTD	FY22 Budget	Percent of Budget Used	FY21 YTD
<b>Healthcare Operations and Support</b>					
<b>ACA and Premium Assistance Programs</b>					
High Risk Premium Programs	678,672	1,358,830	10,240,575	13%	1,265,413
CHAP Program	227,926	455,697	3,079,354	15%	386,659
ACA Enrollment and Education Services	111,328	159,617	583,000	27%	258,781
<b>Subtotal ACA &amp; Premium Assist Program</b>	<b>1,017,926</b>	<b>1,974,144</b>	<b>13,902,929</b>	<b>14%</b>	<b>1,910,853</b>
<b>Healthcare Facilities and Campus</b>					
Salaries and benefits	28,379	54,057	395,914	14%	14,702
Consulting Services	(46,230)	(45,131)	1,512,000	-3%	26,350
Legal Fees	3,171	7,567	370,000	2%	35,768
Other Goods & Svc incl. UT Ground Lease	37,588	151,826	4,006,881	4%	254,115
<b>Subtotal Healthcare Facilities and Campus</b>	<b>22,908</b>	<b>168,319</b>	<b>6,284,795</b>	<b>3%</b>	<b>330,935</b>
<b>Healthcare Delivery Operating Costs</b>					
Salaries and benefits	1,161,028	2,241,930	18,866,066	12%	1,807,356
Consulting Services	75,964	130,093	840,000	15%	18,522
Legal Fees	1,159	3,481	339,000	1%	12,172
Other Services and Purchased Goods	625,077	1,184,695	15,586,821	8%	899,148
<b>Subtotal HCD Operating Cost</b>	<b>1,863,228</b>	<b>3,560,199</b>	<b>35,631,887</b>	<b>10%</b>	<b>2,737,198</b>
<b>Debt Service, Reserves and Transfers</b>					
Debt Service	145,324	290,648	6,152,676	5%	15,299
Healthcare Capital Line of Credit	-	-	1,091,773	-	-
FY2022 Capital reserve	-	-	12,546,013	-	-
FY2022 Contingency reserve appropriation	-	-	298,780,535	-	-
<b>Subtotal Debt, Reserves and Transfers</b>	<b>145,324</b>	<b>290,648</b>	<b>318,570,997</b>	<b>0%</b>	<b>15,299</b>
<b>Total Healthcare Delivery</b>	<b>8,167,261</b>	<b>16,301,370</b>	<b>491,485,797</b>	<b>3%</b>	<b>15,899,797</b>





<b>Healthcare Delivery - Primary Care</b>	<b>Nov 2021</b>	<b>FY22 YTD</b>	<b>FY22 Budget</b>	<b>Percent of Budget Used</b>	<b>FY21 YTD</b>
<b>Primary Care</b>					
CommUnity Care	3,257,600	6,511,267	45,885,000	14%	6,328,103
Lone Star Circle of Care	410,000	843,700	6,755,000	12%	1,259,167
People's Community Clinic	166,500	353,400	2,600,000	14%	371,667
Other Primary Care	32,267	24,867	3,800,000	1%	68,000
<b>Subtotal Primary Care Services</b>	<b>3,866,367</b>	<b>7,733,234</b>	<b>59,040,000</b>	<b>13%</b>	<b>8,026,937</b>

DRAFT

(continued on next page)



Healthcare Delivery - Specialty Care	Nov 2021	FY22 YTD	FY22 Budget	Percent of Budget Used	FY21 YTD	YOY Percent Change	Comments
Specialty Care							
Ancillary Services	4,369	12,400	610,000	2%	8,397	48%	
Cardiology	14,800	29,600	15,000	197%	22,963	29%	
Consultation Services	25,000	50,000	6,125,000	1%	0	0%	Addition of services with CUC
Dental Specialty	67,515	132,915	1,300,000	10%	119,492	11%	
Dermatology	17,032	66,345	550,000	12%	63,234	5%	
Durable Medical Equipmen	2,300	2,600	125,000	2%	0	0%	
Ear, Nose & Throat ENT	22,096	46,301	350,000	13%	57,667	-20%	
Endocrinology	33,217	66,433	575,000	12%	42,910	55%	Increased utilization of e-consults
Gastroenterology	85,567	135,767	2,100,000	6%	212,213	-36%	
General Surgery	2,300	6,400	300,000	2%	11,600	-45%	
Gynecology IPU	0	0	100,000	0%	0	0%	Services currently contracted in CCC
Nephrology	2,200	4,400	200,000	2%	2,616	68%	New service in FY21 with lower volume
Oncology	19,500	47,100	700,000	7%	83,333	-43%	Lower volume
Ophthalmology	89,620	185,519	1,650,000	11%	162,875	14%	Increased volume
Orthotics & Prosthetics	399	13,810	200,000	7%	13,000	6%	
Podiatry	26,700	53,400	350,000	15%	48,300	11%	
Pulmonology	20,200	40,400	375,000	11%	56,971	-29%	Lower volume
Rheumatology	9,000	18,000	250,000	7%	23,471	-23%	
Musculoskeletal	0	0	0	0%	0	0%	Services currently contracted in CCC
Neurology	0	0	0	0%	0	0%	
Wound Care	4,800	9,600	150,000	6%	24,738	-61%	
<b>Total Specialty Care</b>	<b>446,615</b>	<b>920,990</b>	<b>16,025,000</b>	<b>6%</b>	<b>953,780</b>	<b>-3%</b>	



# Questions ? Comments ?

DRAFT



# Central Health

## Financial Statement Presentation

### FY 2022 – as of October 31, 2021 (Preliminary)

Central Health Board of Managers

December 20, 2021

Lisa Owens, Deputy CFO

Patti Bethke, Controller



Assets	Preliminary as	
	of 10/31/2021	as of 10/31/2020
<b>Current Assets</b>		
Cash and cash equivalents	1,087,632	795,852
Short-term investments	255,949,442	175,572,755
Ad valorem taxes receivable	266,435,127	242,861,457
CO Reimbursement Receivable	21,686,449	-
Other receivables	3,560,446	2,304,064
Prepaid expenses	597,603	1,249,396
<b>Total Current Assets</b>	<b>549,316,700</b>	<b>422,783,524</b>
<b>Restricted Cash and Investments or Noncurrent</b>		
Restricted for capital acquisition	102,423,298	6,755,867
Sendero paid-in-capital	71,000,000	71,000,000
Working capital advance to CommUnityCare	4,000,000	4,000,000
Sendero Surplus Debenture	37,083,000	37,083,000
Restricted TCHD LPPF Cash & Investments	9,431,670	23,419,418
<b>Total Restricted Cash and Investments or Noncurrent</b>	<b>223,937,967</b>	<b>142,258,285</b>
<b>Capital Assets</b>		
Land	26,302,222	13,425,967
Buildings and improvements	60,168,599	132,714,885
Equipment and furniture	17,753,592	10,018,626
Capital Projects in progress	5,573,240	2,920,435
Less accumulated depreciation	(25,137,947)	(47,837,824)
<b>Total Capital Assets</b>	<b>84,659,707</b>	<b>111,242,090</b>
<b>Total Assets</b>	<b>857,914,374</b>	<b>676,283,899</b>





	<b>Preliminary</b>	
	<b>as of</b>	<b>as of</b>
<b>Liabilities</b>	<b>10/31/2021</b>	<b>10/31/2020</b>
<b>Current Liabilities</b>		
Accounts payable	13,506,778	11,179,679
Salaries and benefits payable	1,614,664	1,445,509
Other Payables	1,297,385	14,540
Debt service payable, short-term	4,552,669	1,195,299
Deferred tax revenue	264,547,719	242,110,326
Other deferred revenue	-	610,000
<b>Total Current Liabilities</b>	<b>285,519,216</b>	<b>256,555,353</b>
<b>Restricted or Noncurrent Liabilities</b>		
Funds held for TCHD LPPF	9,431,670	23,419,418
CO Reimbursement Payable	21,686,449	-
Debt service payable, long-term	80,264,606	6,105,000
<b>Total Restricted of Noncurrent Liabilities</b>	<b>111,382,725</b>	<b>29,524,418</b>
<b>Total Liabilities</b>	<b>396,901,940</b>	<b>286,079,771</b>
<b>Net Assets</b>		
Unrestricted	319,971,226	278,962,038
Series 2021 Certificate of Obligation	56,381,500	-
Investment in Capital Assets	84,659,707	111,242,090
<b>Total Net Assets</b>	<b>461,012,434</b>	<b>390,204,128</b>
<b>Liabilities and Net Assets</b>	<b>857,914,374</b>	<b>676,283,899</b>







Balance Sheet (Assets) – Slide 4

**Current Assets**

Cash and Cash Equivalents – \$1.1M compared to \$795K October 2020

Short-term Investments – Short-term investments were \$256M at month-end net of restricted investments increased to \$103M to reflect certificates of obligation restricted for capital construction.

Ad Valorem Taxes Receivable – \$266M balance is composed of:

Gross Tax Receivables	\$	269M
Taxable Assessed Valuation Adjustment		0M
Est. Allowance for Doubtful collections		(2.9)M
Total Taxes Receivable	\$	266M

CO Reimbursement Receivable - \$21.7M

Other Receivables – Other receivables total \$3.6M and includes intercompany balances:

- CommUnityCare - \$2.3 M
- Sendero - \$742K
- Community Care Collaborative - \$147K
- Accrued Interest - \$329K
- Miscellaneous Receivables – \$32K



October 2021 Preliminary Monthly Financial Statements (unaudited)

Page 2 of 4

Balance Sheet (Assets) – Slide 4 (continued)

Prepaid Expenses – \$598K balance composed of:

- Prepaid Tax Collection Fees - \$859K
- TCAD Appraisal Fees - \$159K
- Prepaid Insurance - \$153K
- Software - \$142K
- Deposits - \$82K
- Memberships - \$59K

**Total Current Assets – \$549M**

**Restricted Cash & Investments or Noncurrent**

Investments Restricted for Capital Acquisition – \$102M in securities and reserves restricted for capital acquisition.

Sendero Paid-in-Capital – \$71.0M (unchanged)

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

Sendero Surplus Debenture – \$37.1M (unchanged)

Restricted TCHD LPPF Cash & Investments - \$9.4M

Capital Assets – \$85M, net of accumulated depreciation

**Total Assets – \$858M**



**Current Liabilities** – Slide 5

Accounts Payable – Major components of the \$14M balance are:

- \$10.0M estimated IBNR for healthcare services.
- \$3.5M vendor invoices due.

Salaries and Benefits Payable – \$1.6M balance is comprised of the accrued liability for salary costs unpaid at month-end, the value of accrued personal time off and various fringe benefit amounts withheld and not yet paid.

Other Payables – \$1.3M Contract Liability.

Debt Service Payable, Short-Term – \$4.5M in Certificates of Obligation Payable for 2011 and 2021 Taxable and non-Taxable Series, interest due 03/01/22

Deferred Tax Revenue - \$265M pending collection

**Total Current Liabilities** – **\$285.5M**

Funds held for TCHD LPPF - \$9.4M receipts from participants in the LPPF.

CO Reimbursement Payable - \$21.7M

Balance Sheet (Liabilities) – Slide 5 (continued)

**Restricted or Noncurrent Liabilities** – Slide 5 (continued)

Debt Service Payable, Long-Term – \$80.2M balance:

	Series 2020	Series 2021	
	General Obligation Bonds	Certificates of Obligation Bonds	
Non-tax LT	7.285 M	10.8 M	
Taxable LT		60.0 M	
Premium		2.1 M	
Totals	<b>7.285 M</b>	<b>72.9 M</b>	<b>80.2 M</b>

\$7.285M was originally issued in 2011 for the North Central clinic and refunded May 2020. \$72.9M was issued in 2021 for two clinics and an administration building. All are due annually on 3/1.

**Total Restricted of Noncurrent Liabilities – \$111.4M**

**Total Liabilities – \$397M**

**Net Assets**

Unrestricted Net Assets – \$320M

Restricted Net Assets – \$56M

Investment in Capital Assets – \$85M

**Total Net Assets – \$461M**

**Total Liabilities and Net Assets – \$858M**

# Community Care Collaborative

## Financial Statement Presentation

### FY 2022 – as of November 30, 2021 (Preliminary)

**Central Health Board of Managers**  
**Board of Managers Meeting**  
**December 20, 2021**

**Jeff Knodel, Chief Financial Officer**  
**Lisa Owens, Deputy Chief Financial Officer**



**Community Care**  
**COLLABORATIVE**

a partnership of Central Health and Seton Healthcare Family

*Preliminary*

# Highlights Community Care Collaborative

November 2021



- \* Cash is at \$23.8M compared to \$24.4M last year.
- \* Total Liabilities are at \$12.6M as of the end of November 2021.
- \* Net Assets at the end of November are \$11.3M.

*Preliminary*

# Balance Sheet Community Care Collaborative

As of November 2021



## Community Care Collaborative

	as of 11/30/2021	as of 11/30/2020
<b>Assets</b>		
Cash and Cash Equivalents	23,762,453	24,408,872
Other Receivables	36,298	21,530
Prepaid and Other	80,999	86,878
Total Assets	<u>23,879,750</u>	<u>24,517,279</u>
<b>Liabilities</b>		
AP and Accrued Liabilities	5,009,629	6,922,418
Deferred Revenue	7,455,418	4,350,228
Other Liabilities	134,407	206,991
Accrued Payroll	620	117,403
Total Liabilities	<u>12,600,073</u>	<u>11,597,039</u>
Net Assets	<u>11,279,677</u>	<u>12,920,240</u>
Liabilities and Net Assets	<u>23,879,750</u>	<u>24,517,279</u>

*Preliminary*

# Sources and Uses Report, Budget vs Actual

## Fiscal Year-to-Date through November 2021



Sources of Funds	Budget	YTD Actual	YTD %	Prior YTD
			of Budget	Actual
DSRIP Revenue	61,168,472	0	0%	0
Operations Contingency Carryforward	5,362,495	9,123,145	170%	11,802,979
Other Sources	100,000	2,061	2%	4,300
<b>Total Sources of Funds</b>	<b>66,630,967</b>	<b>9,125,206</b>	<b>14%</b>	<b>11,807,279</b>
<b>Uses - Programs</b>				
Healthcare Delivery	19,630,967	1,744,200	9%	2,655,050
UT Services Agreement	35,000,000	0	0%	0
DSRIP Project Costs	12,000,000	1,101,329	9%	745,137
<b>Total Uses</b>	<b>66,630,967</b>	<b>2,845,529</b>	<b>4%</b>	<b>3,400,188</b>
<b>Net Sources (Uses)</b>	<b>-</b>	<b>6,279,677</b>		<b>8,407,091</b>
<b>Net Assets</b>		<b>11,279,677</b>		<b>13,407,091</b>

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

*Preliminary*





# Healthcare Delivery Costs - Summary

Fiscal Year-to-Date through November 2021

	Budget	YTD Actual	YTD % of Budget	Prior YTD Actual
<b>Healthcare Delivery</b>				
Primary Care & Emergency Transport	921,822	151,836	16%	158,521
Specialty Care	3,908,000	398,275	10%	470,697
Specialty Behavioral Health	8,000,000	638,000	8%	1,344,000
Post-Acute Care	2,675,000	261,534	10%	269,292
Urgent and Convenient Care	475,000	21,800	5%	40,833
Healthcare Delivery - Operations	2,849,742	272,755	10%	371,708
Operations Contingency Reserve	801,403	0	0%	0
<b>Total Healthcare Delivery</b>	<b>19,630,967</b>	<b>1,744,200</b>	<b>9%</b>	<b>2,655,050</b>

*Preliminary*

# Thank You

[www.ccc-ids.org](http://www.ccc-ids.org)

DRAFT



Community Care  
COLLABORATIVE

a partnership of Central Health and Seton Healthcare Family

*Preliminary*



November 2021 FYTD Financial Statements (unaudited)  
Page 1 of 4

## **Balance Sheet**

### **Current Assets**

Cash and Cash Equivalents – \$23.8M

Other Receivables – \$36K – Atrium rent receivable, transportation assistance

Prepaid and Other – \$81K – Atrium security deposit and software license

**Total Assets – \$23.9M**

### **Liabilities**

Accounts Payable and Accrued Liabilities – \$5.0M, which includes:

- \$4.2M estimated IBNR (Incurred But Not Received) for healthcare provider services
- \$175K due to Central Health (for July 2021 - November 2021)
- \$682K trade payables

Deferred Revenue – \$7.5M deferred revenue related to DSRIP projects

Other Liabilities – \$134K includes leasehold improvement allowance liability of \$43K and deferred rent of \$91K

Payroll Liabilities – \$1K

**Total Liabilities – \$12.6M**

### **Net Assets**

Unrestricted Net Assets – \$11.3M

**Total Net Assets** – \$11.3M

**Total Liabilities and Net Assets** – \$23.9M

### **Sources and Uses Report**

November financials → 2 months, 17% of fiscal year

### **Sources of Funds, Year-to-Date**

DSRIP Revenue - \$0K

Operations Contingency - \$9.1M from FY2020 (This excludes emergency reserves of \$5M)

Other Sources – \$2K interest income

**Uses of Funds, Year-to-Date**

Operating Expenses  
Healthcare Delivery (Excludes DSRIP) – \$1.7M

	Budget	YTD Actual	YTD % of Budget	Prior YTD Actual
<b>Healthcare Delivery</b>				
Primary Care & Emergency Transport	921,822	151,836	16%	158,521
Specialty Care	3,908,000	398,275	10%	470,697
Specialty Behavioral Health	8,000,000	638,000	8%	1,344,000
Post-Acute Care	2,675,000	261,534	10%	269,292
Urgent and Convenient Care	475,000	21,800	5%	40,833
Healthcare Delivery - Operations	2,849,742	272,755	10%	371,708
Operations Contingency Reserve	801,403	0	0%	0
<b>Total Healthcare Delivery</b>	<b>19,630,967</b>	<b>1,744,200</b>	<b>9%</b>	<b>2,655,050</b>

UT Services Agreement – \$0M

DSRIP Project Costs – \$1.1M, primarily made up of provider earnings of:

- Community Care - \$782K
- Lone Star Circle of Care – \$243K
- Hospice Austin – \$67K
- DSRIP Operating Expenses - \$9K

DRAFT

# Community Care Collaborative

## Financial Statement Presentation

FY 2022 – as of October 31, 2021 (Preliminary)

**Central Health Board of Managers  
Board of Managers Meeting  
December 20, 2021**

**Jeff Knodel, Chief Financial Officer  
Lisa Owens, Deputy Chief Financial Officer**



**Community Care  
COLLABORATIVE**

a partnership of Central Health and Seton Healthcare Family

*Preliminary*

# Balance Sheet Community Care Collaborative

As of October 2021



## Community Care Collaborative

	as of 10/31/2021	as of 10/31/2020
<b>Assets</b>		
Cash and Cash Equivalents	24,029,275	26,094,473
Other Receivables	57,127	43,078
Prepaid and Other	87,355	112,891
Total Assets	<u>24,173,758</u>	<u>26,250,442</u>
<b>Liabilities</b>		
AP and Accrued Liabilities	4,250,994	6,930,264
Deferred Revenue	7,455,418	4,350,228
Other Liabilities	142,534	211,487
Accrued Payroll	620	109,794
Total Liabilities	<u>11,849,565</u>	<u>11,601,773</u>
Net Assets	<u>12,324,193</u>	<u>14,648,669</u>
Liabilities and Net Assets	<u>24,173,758</u>	<u>26,250,442</u>

*Preliminary*





October 2021 FYTD Financial Statements (unaudited)  
Page 1 of 5

## **Balance Sheet**

### **Current Assets**

Cash and Cash Equivalents – \$24.0M

Other Receivables – \$57K – Atrium rent receivable, transportation assistance

Prepaid and Other – \$87K – Atrium security deposit and software license

**Total Assets – \$24.2M**

### **Liabilities**

Accounts Payable and Accrued Liabilities – \$4.3M, which includes:

- \$4.1M estimated IBNR (Incurred But Not Received) for healthcare provider services
- \$147K due to Central Health (for July 2021 - October 2021)

Deferred Revenue – \$7.5M deferred revenue related to DSRIP projects, increased for CY20 payment

Other Liabilities – \$143K; includes leasehold improvement allowance liability of \$46K and deferred rent of \$96K

Payroll Liabilities – \$1K

**Total Liabilities – \$11.8M**

**Net Assets**

Unrestricted Net Assets – \$12.3M

**Total Net Assets** – \$12.3M

**Total Liabilities and Net Assets** – \$24.2M

DRAFT



# CENTRAL HEALTH

## **Our Vision**

Central Texas is a model healthy community.

## **Our Mission**

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

## **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **REGULAR AGENDA ITEM 4**

Discuss and take appropriate action on a resolution honoring Sherri Greenberg for her service as Chair on the Central Health Board. (*Action Item*)



**CENTRAL  
HEALTH**

**A RESOLUTION EXPRESSING APPRECIATION TO**

**SHERRI R. GREENBERG, M.S.**

**FOR HER SERVICE AS THE  
CHAIR OF THE BOARD OF MANAGERS OF CENTRAL HEALTH**

**WHEREAS**, Ms. Greenberg has served as a Central Health Board member since February 2015 and as the Board Chair since January 2020; and

**WHEREAS**, Ms. Greenberg served as the Manager of Capital Finance for the City of Austin from 1985 to 1989, overseeing the City’s debt management, capital budgeting, and capital improvement program as a public finance professional; and

**WHEREAS**, Ms. Greenberg is a Clinical Professor and Fellow of the Max Sherman Chair in State and Local Government at the LBJ School of Public Affairs; and

**WHEREAS**, Ms. Greenberg served for 10 years as a member of the Texas House of Representatives, including service as chair of key legislative committees, completing her term in January 2001; and

**WHEREAS**, Ms. Greenberg ; bringing her talents, skills, scholarship and leadership from a prestigious career in public service and higher education; and

**WHEREAS**, Ms. Greenberg, having boundless energy and dedication to the Mission of Central Health, Social Justice, and Health Equity; and

**WHEREAS**, Ms. Greenberg , leading a growing and innovating health care district in Travis County through a pandemic, expansion of services, and commencement of new clinic site planning in Eastern Travis County; and

**WHEREAS**, Ms. Greenberg has brought steadfast commitment to her role as the Chairperson of the Central Health Board of Managers and its continuous improvement; therefore

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

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

\_\_\_\_\_  
Dr. Charles Bell, Vice-Chairperson,  
Central Health Board of Managers

\_\_\_\_\_  
Date of Adoption



# CENTRAL HEALTH

## **Our Vision**

Central Texas is a model healthy community.

## **Our Mission**

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

## **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **REGULAR AGENDA ITEM 5**

Discuss and take appropriate action on Central Health owned or occupied real property and potential property for acquisition, lease, or development in Travis County, including next steps in the redevelopment of the Central Health Downtown Campus, administrative offices of Central Health Enterprise partners, and new developments in Eastern Travis County. <sup>3,4</sup> (*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 December 20, 2021 Board of Managers Meeting

Stephanie Lee McDonald, VP Enterprise Alignment & Coordination

Jeff Knodel, Chief Financial Officer

Who will present the agenda item? (Name, Title) Mike Geeslin, President & Chief Executive Officer

General Item Description Update on Brackenridge Campus and Discussion on Next Steps

Is this an informational or action item? Informational

Fiscal Impact Current Strategic Priority in FY 2022 Budget

Recommended Motion (if needed – action item) NA

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

- 1) Presentation on Brackenridge campus existing condition and discussion of next steps
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Documents for review: Excerpt-Central Health Brackenridge Campus Master Plan Guiding Principles. Commercial Real Estate Key Terms

Estimated time needed for presentation & questions? 45 minutes

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

Form Prepared By/Date Submitted: Stephanie Lee McDonald 12/14/2021

## Commercial Real Estate Key Terms

**Biotech Space:** Highly specialized laboratory or research and development space. The space is uniquely configured and is typically developed to the needs of the biotech tenant. It may require significant retrofit should the tenant vacate the space. The space is often characterized by robust mechanical, electrical and plumbing systems, as well as by sophisticated ventilation systems to accommodate the highly specialized and complex activities that occur inside and that involve the handling of chemicals, drugs and biological matter.

**Broker:** A person who represents another person or a company during a buying or selling process.

**Build-to-Suit:** A property developed specifically for a certain tenant to occupy, with structural features, systems, or improvement work designed specifically for the needs of that tenant.

**Cap Rate:** Short for “capitalization rate,” the cap rate refers to the ratio of Net Operating Income (NOI) to property asset value. (e.g. A building with a NOI of \$10,000 valued at a 5% Cap is worth:  $10,000/0.05 = \$200,000$ )

**CBD:** Central Business District

**Class A Building:** A classification used to describe an office building with rents in the top 30 to 40 percent of the marketplace. Class A buildings are well-located in major employment centers and typically have good transit, vehicular and pedestrian access. Additionally, they are located adjacent to or in proximity to a high number of retail establishments and business-oriented or fast casual restaurants. Building services are characterized by above-average upkeep and management.

**Delivery/Delivery Date:** The time when a building completes construction and receives a certificate of occupancy.

**Floor Area Ratio (FAR):** FAR is the relationship between the total square footage of a building and the total square footage of the parcel on which the building is located. It is typically calculated by dividing the total square footage of the building by the land area in square feet. For example, if a 20,000-square-foot building is built on a 10,000-square-foot lot, the FAR is 2.0.

**Ground Lease:** A lease agreement (contract) whereby the landowner (lessor) agrees to lease a parcel of land for a set period of time to a third party (lessee). Depending on the agreement, the lessor can stipulate what the lessee can or cannot do with the property or build on the property. The lease term is typically 20 years or more, but many extend to 99 years. Upon expiration of the lease agreement, the lessor typically gains control and ownership of whatever is constructed on the land, unless the lease is renewed or an exception is created in the lease.

**Innovation Center or District:** Geographic areas with concentrations of innovative firms and entrepreneurial activity that focus on strengthening and growing new businesses and commercializing their products or services or both.

**Joint Venture:** A joint venture in real estate is when two or more investors combine their resources for a property development or investment. Despite working together, each party maintains their own unique business identity while working together on a deal. Therefore, even though a joint venture sounds like a partnership, it's a little bit different.

1. **Partnership** – Multiple people form one entity in which to conduct business alongside each other.
2. **Joint Venture (JV)** – Each party works under its own entity. JV partners only work together on a specific deal or project.

Who does what in a joint venture is decided on a project-by-project basis. Furthermore, the share of the profits is also agreed upon by the parties involved.

**Leased Space:** Space under contract between a landlord and a tenant or between a tenant and a subtenant. Leasehold A leasehold is an ownership structure in which a temporary right to use land has been granted by the landowner to another party. (See ground lease.) Although the tenants do not own the land, they are able to improve the land and operate it as stipulated in the ground lease for the term of the lease.

**LOI:** Letter of Intent

**Mixed-use Development:** The grouping of multiple significant uses within a single site or building such as retail, office, residential or lodging facilities. Examples include office buildings that contain ground-level retail and housing, plus projects that have separate office, retail and multifamily properties. Clustering of at least three different uses such as office, retail, residential and/or hotel adjacent to or in close walkable proximity to one another. Uses can be contained in the same building or dispersed in different buildings that are adjacent to or close to one another.

**Multitenant Office Building:** A building that is not owner occupied and space that is leased to two or more tenants.

**Office Building:** A structure providing environments that are conducive to the performance of management and administrative activities, accounting, marketing, information processing, consulting, human resources management, financial and insurance services, educational and medical services, and other professional services. At least 75 percent of the interior space is finished to accommodate office users, but the rest of the space can include other uses such as retail, restaurant or fitness. Office Building Types and Sizes Low-rise: Fewer than 7 stories above ground level Mid-rise: Between 7 and 25 stories above ground level High-rise: More than 25 stories above ground level Office Condo Short for “office condominium,” this term refers to the ownership structure of an office property in which individual units housed in one structure are sold to independent owners. Typically, there are covenants that govern the activities that can be carried out in and improvements that can be made to each unit. Such covenants also stipulate the distribution of costs related to the maintenance and operations of common elements in the building such as the roof and the elevators.

**Preleased Space:** Space that has been leased to a tenant and announced for future development but is not yet under construction.

**PM:** Property Manager. An individual who oversees all operational aspects of a building. Once a tenant signs a lease, it is the Property Manager who will assist the tenant with any questions, the build-out of the space, and any on-going issues once they have moved in.

**PSF:** Per Square Foot



**RFP:** Request for Proposal

**Return on Investment (ROI)** A measure of the value created by a real estate investment. It is the difference between the net gains from investing in the property less the net cost from investing in the property divided by the purchase price of the property. Usually, it is reported as a percentage.

**RSF:** Rentable Square Feet

**Shell Space:** A building space that has an unfinished interior and requires improvements.

**Speculative:** A building developed and constructed without any preleasing in place. Construction commences without a prelease when the developer believes there is so much demand for that type of building in that market or submarket that a lease commitment is bound to come through.

**Sublease/Sublet Space:** Space that has been leased by a tenant and is being offered for lease back to the market by that tenant.

**Tenant:** A person, business, or group that pays rent to an owner or landlord for the right to use/occupy a property or space.

**Tenant Representation:** When a broker represents a tenant in a typical lease transaction between a tenant and an owner/landlord.

**Trophy Building:** A landmark property that is located in a highly desirable submarket, is designed by a recognized architect, and features high-end finishes and modern or efficient systems. This building commands among the highest rents in the market and is more than 80 percent occupied by the market's premier tenants. It is highly sought after by institutional investors such as pension funds and insurance companies as well as by foreign investors. These properties are more desirable than Class A buildings.

### **Direct Investment**

Investors can use [direct investments](#) where they become landlords through the ownership of the physical property. People best suited for direct investment in commercial real estate are those who either have a considerable amount of knowledge about the industry or who can employ firms who do. Commercial properties are a high-risk, high-reward real estate investment. Such an investor is likely to be a high-net-worth individual since CRE investing requires a considerable amount of capital.

The ideal property is in an area with low CRE supply and high demand, which will give favorable rental rates. The strength of the area's local economy also affects the value of the CRE purchase.

### **Indirect Investment**

Alternatively, investors may invest in the commercial market indirectly through the ownership of various market securities, such as real estate investment trusts ([REITs](#)) or exchange traded funds ([ETFs](#)) that invest in commercial property-related stocks, or by investing in companies that cater to the commercial real estate market, such as banks and realtors.

Sources: CCIM Institute, National Association of Realtors, NAIOP Research Foundation

# The Guiding Principles and Planning Parameters

The Master Plan is guided by three, over-arching guiding principles developed and adopted by Central Health's Board of Managers at the outset of the planning process. These principles have been used to evaluate different scenarios for developing a "complete community" that could feature medical uses, housing needs, recreation and retail. The principles have also been used to formulate the 33 planning parameters listed on the following pages. The guiding principles are:

## **M** MISSION

**Advance Central Health's efforts to provide access to health care to those who need it most, and promote Travis County as a model healthy community.**

## **S** STEWARDSHIP

**Promote uses and programs at the Central Health downtown campus that support the short- and long-term fiscal stability of Central Health and deliver returns for the citizens and taxpayers of Travis County.**

## **P** PARTNERSHIP

**Strengthen and expand relationships with health and wellness providers, collaborate with other public-sector entities, and help advance the goals of the larger community.**

The recommended planning parameters of the Master Plan are organized under each of the three foundational principles, and are labeled with a prefix of "M," "S" or "P" as appropriate. The text shown in bold denotes the Board-adopted language.



Attendees review the guiding principles at the Brackenridge Campus Open House – October 2015



## MISSION: Advance Central Health's efforts to provide access to health care to those who need it most, and promote Travis County as a model healthy community.

### M-1: HEALTH CARE USES

Consider programs and uses for existing and new buildings that advance Central Health's Strategic Plan and that make the best use of its downtown location.

**M-1.1:** Develop the Brackenridge Campus as a major, community oriented space that supports Central Health's mission to provide for access to health care that will improve health outcomes and overall community health.

**M-1.2:** Increase health equity and reduce health disparities for Central Health's constituency through thoughtful building and site design that organizes a synergistic mix of uses, throughout the Brackenridge Campus.

**M-1.3:** Provide opportunities for early term redevelopment by deconstructing certain buildings, such as the Professional Office Building (POB), the Helipad, the Hospital Tower and its South Wing. Relocate any medical office and clinical uses to remain on the Brackenridge Campus from the POB to the Clinical Education Center (CEC), or to facilities located within the UT Medical District or other locations, as appropriate.

**M-1.4:** In partnership with public, non-profit and/or private entities, develop a permanent, public market focused on healthy food and activities as a major community gathering space promoting healthy lifestyles for all in the Central Texas region.

### M-2: CENTRAL HEALTH PRIORITIES

Sustain Central Health's commitment to enhance outpatient specialty care, cancer care, behavioral health services and women's health services throughout Travis County in the most appropriate locations.

**M-2.1:** In keeping with transforming best practices in health care delivery, distribute health care services in appropriate facilities and settings throughout Travis County that promote appropriate public access.

**M-2.2:** Focus any on-campus medical uses along East 15th Street, to take advantage of the proximity to the new Dell Seton Medical Center, the Dell Medical School and supporting facilities in the UT Medical District.

**M-2.3:** At the outset of more detailed planning for Phase 2 redevelopment (Block 166, 167 and the Original Hospital Block), conduct a programming process with health care providers and other Central Health partners to better determine such medical and health care uses prior to Phase 2 implementation. At this time, consider including a range of medical, health care and/or wellness-related uses that could be developed within mixed-use buildings.

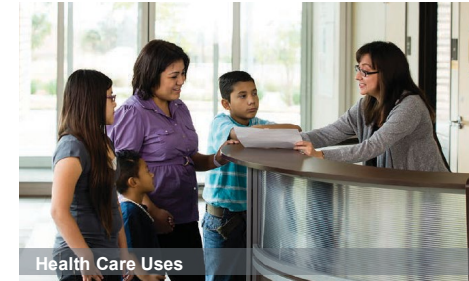
**M-2.4:** Consider including uses that support and/or enhance health care and medical uses.

### M-3: HEALTHY COMMUNITIES

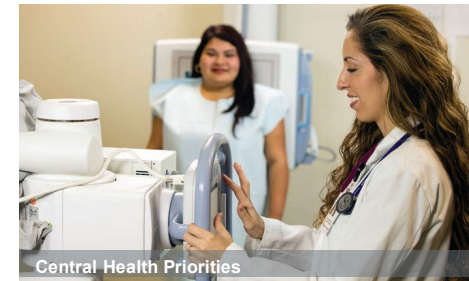
Promote physical activity and improve health with comfortable and safe access to, within and through the site for people of all abilities – whether walking, biking, using transit or driving.

**M-3.1:** Realign Red River Street and generally reinstate the historic Waller Plan's grid. Develop streets in concert with the City of Austin, Capital Metro and others as "complete streets." These new streets and pathways will be walkable, bikeable and shaded streets that strive to reduce auto-dependency and to offer "active transportation" connections to adjacent areas – including downtown, the Capitol Complex, UT, Waller Creek and East Austin.

**M-3.2:** Participate in efforts to be led by the City of Austin and the Downtown Austin Alliance to create an area-wide, multi-modal transportation and parking management plan to provide employees, patients, residents and visitors convenient mobility choices, while helping reduce vehicle trips and improving air and water quality.



Health Care Uses



Central Health Priorities



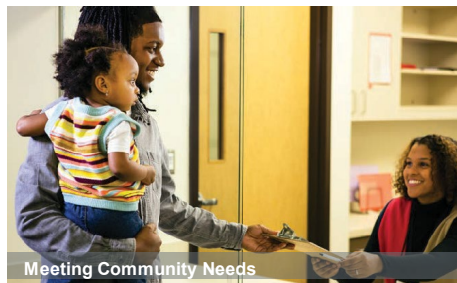
Healthy Communities



## STEWARDSHIP: Promote uses and programs at the Central Health Brackenridge campus that support the short-and long-term fiscal stability of Central Health and deliver returns for the citizens and taxpayers of Travis County.



Fiscal Responsibility



Meeting Community Needs



Sustainability

### S-1: FISCAL RESPONSIBILITY

Optimize cash flow to Central Health, make wise and effective use of taxpayer dollars, and attract new revenue to support Central Health’s mission.

**S-1.1:** Maintain maximum flexibility in both the zoning and the development itself to take advantage of unforeseen opportunities, as well to be better able to address unforeseen challenges – such as changing capital market dynamics and changing models of health care delivery.

**S-1.2:** Balanced with Central Health’s mission, maximize the revenue-generating potential of each of the six redevelopment blocks to support Central Health’s mission throughout Travis County, including that from existing buildings to remain on the campus during the first phase of redevelopment.

**S-1.3:** Keep the existing Main Parking Garage for the foreseeable future to maintain this revenue source to Central Health and to provide parking for the Dell Seton Medical Center. Enhance the Main Garage by constructing a new “liner” building on its west, Waterloo Park-facing façade that provides ground-floor, pedestrian-oriented uses with leaseable space above. Keep the existing CEC Building and the CEC Parking Garage during Phase 1 of the project, given their high functionality and their lease revenue.

**S-1.4:** Expedite the first phase of deconstruction and infrastructure construction to advance the redevelopment of the three Phase 1 blocks so that these buildings may begin generating lease revenue as soon as possible.

**S-1.5:** Pursue all forms of public, non-profit and private funding, financing and reimbursement for deconstruction, design, construction and maintenance of public streets, open spaces and infrastructure.

### S-2: MEETING COMMUNITY NEEDS

Leverage Central Health’s property assets to support ongoing efforts to address community health needs, close gaps in service delivery and achieve Central Health’s priorities.

**S-2.1:** Collaborate with health care partners and the community to promote those uses to be developed in and around the Brackenridge Campus that can most benefit from their physical proximity to the new Dell Seton Medical Center and the Dell Medical School at The University of Texas at Austin.

**S-2.2:** Encourage opportunities for combining wellness and health care uses and programs along with other uses that can be located in mixed-use buildings, within and around the Brackenridge Campus.

**S-2.3:** Recognizing that healthy eating is essential to well-being, provide ground floor uses that feature healthy, affordable and local food within and outside the public market building and adjacent spaces.

**S-2.4:** Through partnerships with affordable housing providers, the development community and other stakeholders, consider a range of housing types in and around the proposed Innovation Zone, UT and/or the Brackenridge Campus.

### S-3: SUSTAINABILITY

Promote efficient use of resources, energy and water; reduce auto dependency; and improve the natural and built environment at and around Central Health’s downtown site.

**S-3.1:** Require best practices related to green building and natural resource protection – at both the overall campus or district-level and the individual block or building-level of development.

**S-3.2:** Coordinate the campus’ watershed protection and water management efforts with the City of Austin, State, UT, Travis County, TxDOT, the Waller Creek Conservancy and others.

**S-3.3:** Develop the campus to maximize climate protection and resilience, leveraging the unique opportunity to plan at a district scale of 14 acres. Promote the use of district-scale systems to supply green energy, chilled and hot water, reclaimed water, solar energy, geothermal energy, etc.

**S-3.4:** Design the campus streets and public spaces to maximize the delivery of “ecosystem services,” such as stormwater management, heat island mitigation, water conservation and reuse, soil and landscape restoration, wildlife habitat, as well as those that improve human health and happiness through contact with nature.



## **PARTNERSHIP:** Strengthen and expand relationships with health and wellness providers, collaborate with other public-sector entities, and help advance the goals of the larger community.

### **P-1: STAKEHOLDERS**

Ensure that the low-income, uninsured and underinsured individuals and communities whom Central Health serves continue to receive access to quality health care.

**P-1.1:** Continue with ongoing community engagement activities that keep neighbors, partners and elected officials informed about the ongoing planning and implementation of the Brackenridge Campus project.

**P-1.2:** Maintain and expand Central Health's partnerships with health care providers to ensure access to high-quality wellness and health care services, programs and education.

### **P-2: NEIGHBORS**

Confer with East Austin residents and support downtown initiatives, including the University of Texas Medical District, the IH-35 Corridor Improvement Project, the Waller Creek and Waterloo Park projects, the proposed Innovation Zone, the State Capitol Complex Master Plan, and others.

**P-2.1:** Maximize accessibility – physically, socially and economically – to this new neighborhood, through building a community defined by landscaped, walkable streets and a central gathering space and a public market. Develop design guidelines to ensure that buildings and streetscapes are inviting, hospitable and beautiful.

**P-2.2:** Identify positive benefits that should be maximized during the Brackenridge Campus redevelopment – such as contributing to healthy air quality, clean water, active lifestyle, healthy food, low carbon, etc. – mitigate environmental and human health stressors associated with conventional development practices.

**P-2.3:** Work with TxDOT to enhance multi-modal connectivity across I-35 to East Austin, and to create frontage roads that look and feel like “urban boulevards” – with street side trees and wide sidewalks – consistent with the City of Austin’s Downtown Great Streets Program and Complete Streets Policy.

**P-2.4:** Create a complementary and compatible edge along Waterloo Park that creates vital open space connections between Waller Creek and the Brackenridge Campus.

**P-2.5:** Promote a mix of uses that nurtures local economic development, enhances creativity and innovation, promotes a “culture of health,” and creates a vibrant sense of place.

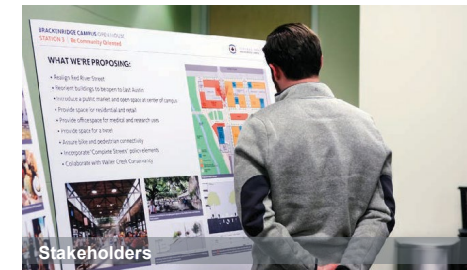
### **P-3: COLLABORATORS**

Work with the Seton Healthcare Family, Dell Medical School, health care entities, wellness advocates, business partners and civic and public entities, including Travis County and the City of Austin.

**P-3.1:** Collaborate with the public, non-profit, and private sectors to attract, finance, and operate supportive and complementary uses within the Brackenridge Campus.

**P-3.2:** Collaborate with public, non-profit and private partners to support the proposed Innovation Zone by creating the kind of place that nurtures innovation focused on wellness and health care. Explore ways in which the uses in and around the public market can support wellness innovation.

**P-3.3:** Collaborate with the private sector to implement the Brackenridge Campus Master Plan by launching a developer solicitation(s) that articulates Central Health’s vision for the property, its goals, its “must-haves,” and respective roles and responsibilities in what will become a public-private partnership.



Stakeholders



Neighbors



Collaborators



# CENTRAL HEALTH

## **Our Vision**

Central Texas is a model healthy community.

## **Our Mission**

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

## **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **REGULAR AGENDA ITEM 6**

Discuss and take appropriate action to authorize the Central Health President and CEO to execute amendments to the contract with JR Ramon and other professional services contracts to increase overall contract spending authority related to the Brackenridge project.<sup>3</sup> (*Action 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 December 20, 2021 Board of Managers Meeting

Who will present the agenda item? (Name, Title) Stephanie Lee McDonald, VP Enterprise Alignment & Coordination  
Jeff Knodel, Chief Financial Officer

General Item Description Request to authorize the Central Health President and CEO to execute amendments to the contract with JR Ramon and other professional services contracts to increase overall contract spending authority for the Brackenridge project.

Is this an informational or action item? Action

Fiscal Impact \$2,500,000 available in FY 2022 budget

Recommended Motion (if needed – action item) Move to authorize Central Health President and CEO to execute amendments to the contract JR Ramon and other professional services contracts to increase overall contract spending authority not to exceed \$2.5 M.

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

- 1) Update on demolition project and contractual obligations
- 2) Presentation on necessary contract amendments required to close out demolition project
- 3) Action to authorize requested contract amendments

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Presentation. Pictures attached

Estimated time needed for presentation & questions? 10 minutes

Is closed session recommended? (Consult with attorneys.) Yes; Action in open session

Form Prepared By/Date Submitted: Stephanie Lee McDonald 12/14/2021

# Central Health Brackenridge Campus Demolition Project Update

December 20, 2021





Brackenridge Campus, December 2021



Brackenridge Campus, Pre-Demolition



View facing North towards  
Dell Medical School of new  
Red River Street



View looking East towards Interstate 35

## Request for Board Action

Approve contract amendment with J.R. Ramon	\$2,106,872.68
Additional professional services and project contingency	393,127.32
ECM – project management	
MWM – civil engineering	
Total Requested Contract Amendments Not-to-Exceed	<b>\$2,500,000.00</b>



## CENTRAL HEALTH

### **Our Vision**

Central Texas is a model healthy community.

### **Our Mission**

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

### **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **REGULAR AGENDA ITEM 7**

Receive and discuss updates on the 1115 Medicaid Waiver, Delivery System Reform Incentive Payment (DSRIP) program and associated projects, the Community Care Collaborative, and other healthcare delivery partners, programs, projects, and arrangements, including agreements with Ascension Texas.<sup>3</sup> (*Informational Item*)



## CENTRAL HEALTH

### **Our Vision**

Central Texas is a model healthy community.

### **Our Mission**

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

### **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **REGULAR AGENDA ITEM 8**

Receive and take appropriate action on the President and CEO's performance evaluation tool for May 2021 - April 2022, or other timeframe as might be appropriate. <sup>3, 5</sup> (*Action 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 12/20/2021

Who will present the agenda item? (Name, Title) Susan Lara Willars & Sherri Greenberg

General Item Description Performance Evaluation Tool for FY2022

Is this an informational or action item? Action

Fiscal Impact None

Recommended Motion (if needed – action item) Approve the performance evaluation tool for FY2022.

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

- 1) The Board will review and approve the FY2022 Performance Evaluation tool.
- 2) \_\_\_\_\_

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) No backup – Susan will share the tool with the Board during the meeting.

Estimated time needed for presentation & questions? 30 minutes to review and discuss the tool.

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

Form Prepared By/Date Submitted: Susan Lara Willars / 10/20/2021



## CENTRAL HEALTH

### **Our Vision**

Central Texas is a model healthy community.

### **Our Mission**

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

### **Our Values**

Central Health will achieve excellence through:

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

*Innovation* - We create solutions to improve healthcare access.

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

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

## **BOARD MEETING**

**December 20, 2021**

## **REGULAR AGENDA ITEM 9**

Confirm the next regular Board meeting date, time, and location. (*Informational Item*)