



# CENTRAL HEALTH

## **Our Vision**

Central Texas is a model healthy community.

## **Our Mission**

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

## **Our Values**

Central Health will achieve excellence through:

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

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

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

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

## **EXECUTIVE COMMITTEE MEETING Wednesday, January 25, 2023, 4:00 p.m.**

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

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

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

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

<https://v.ringcentral.com/join/780169264?pw=b5e50dc6642a7fce5f623c097de86fa1>

Password: 78945

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

Dial: 1- (267) 930-4000

Meeting ID: 780169264

Password: 78945

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. 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 virtually during Public Communication for the Board of Managers meeting or the Executive Committee meeting must properly register with Central Health **no later than 2:30 p.m. on January 25, 2023** Registration can be completed in one of three ways:

- Complete the virtual sign-in form at <https://www.centralhealth.net/meeting-sign-up/>;
- Call 512-978-9190. 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 Committee responses to public inquiries, if any, to statements of specific factual information or existing policy.

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

1. Approve the minutes of the Central Health Executive Committee December 14, 2022 meeting. (*Action Item*)
2. Discuss and take appropriate action on the reappointment of Tom Coopwood, M.D., to the CommUnityCare Health Centers Board of Directors. (*Action item*)
3. Review and take appropriate action on the following:
  - a. the prioritization and tentative scheduling of items for consideration at future Central Health Board and Committee meetings; and
  - b. the tentative reporting schedules for Fiscal Year 2023 activities and programs pursuant to the strategic directions established in the Fiscal Year 2023 Budget Resolution adopted by the Board of Managers. (*Action item*)
4. Receive and take appropriate action on the Central Health President and CEO's performance evaluation tool, including the prioritization of work activities and opportunities for 2023, or other timeframes as may be appropriate. <sup>3</sup> (*Action Item*)
5. Discuss and take appropriate action on the appointment of one member to the governing board of CommunityCare Health Centers. <sup>3</sup> (*Action Item*)
6. Discuss quarterly reporting formats to the Central Health Board of Managers for CommUnityCare Health Centers and Sendero Health Plans, Inc. respective financial positions, services provided, and recent and future major operational activities. (*Informational Item*)

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

Notes:

- <sup>1</sup> This meeting may include one member of the Executive Committee participating by videoconference. It is the intent of the presiding officer to be physically present and preside over the meeting at Central Health Administrative Offices, 1111 E. Cesar Chavez St., Austin, TX 78702, Board Room. 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 Executive Committee may take items in an order that differs from the posted order and may consider any item posted on the agenda in a closed session if the item involves issues that require consideration in a closed session and the Committee announces that the item will be considered during a closed session. A quorum of Central Health's Board of Managers may convene or participate via videoconference to discuss matters on the Committee agenda. However, Board members who are not Committee members will not vote on any Committee agenda items, nor will any full Board action be taken. If a quorum of the Executive Committee is not present, the items on this agenda may be taken up by the full Board of Managers in the meeting posted at the same time and location.
- <sup>3</sup> Possible closed session discussion under Texas Government Code §551.074 (Personnel Matters).

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.

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Board Manager Signature

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Date

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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?





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## **CENTRAL HEALTH BOARD OF MANAGERS EXECUTIVE COMMITTEE**

### **January 25, 2023**

## **AGENDA ITEM 1**

Approve the minutes of the Central Health Executive Committee December 14, 2022 meeting. (*Action Item*)

MINUTES OF MEETING – DECEMBER 14, 2022  
CENTRAL HEALTH  
EXECUTIVE COMMITTEE

On Wednesday, December 14, 2022, a meeting of the Central Health Executive Committee convened in open session at 4:03 p.m. remotely by toll-free videoconference and in person at the Central Health Administrative Offices. Clerk for the meeting was Briana Yanes.

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**Committee members present in-person at Central Health:** Chair Bell, Vice Chair Brinson, and Secretary Valadez

**Board members present in-person at Central Health:** Manager Museitif, Manager Motwani, and Manager Zamora (arrived at 4:38 p.m.)

**Board members present via audio and video:** Manager Jones

**Absent:** Treasurer Zuniga

**PUBLIC COMMUNICATION**

**Clerk's Notes:** Public Communication began at 4:03 p.m. Yesenia Ramos announced that four speakers signed up for Public Communication. Two speakers were not present at the time that they were called. The Board returned to Public Communication at 5:52 p.m. when they speakers were present.

Members of the Committee heard from: Manager Cynthia Valadez and Francisco Ortega at 4:03 p.m. and Rachel Blair and Paul Scott at 5:52 p.m.

**AGENDA**

- 1. Approve the minutes of the Central Health Executive Committee November 16, 2022 meeting.**

**Clerk's Notes:** Discussion on this item began at 4:15 p.m.

At 4:15 p.m. Manager Brinson moved that the Committee approve the minutes of the Central Health Executive Committee November 16, 2022 meeting.

Manager Valadez seconded the motion.

Chairperson Charles Bell	For
Vice Chairperson Cynthia Brinson	For
Treasurer Julie Zuniga	Absent
Secretary Cynthia Valadez	For

- 2. Review and provide direction to staff on the prioritization and tentative scheduling of items for consideration at future Central Health Board and Committee meetings.**

**Clerk's Notes:** Discussion on this item began at 4:16 p.m. Ms. Briana Yanes, Board Governance Manager, and Mr. Mike Geeslin, President & CEO, briefly reviewed all tentative January agenda items.

Ms. Yanes then briefly announced that a memo was provided in the packet regarding an open call for Board Managers to submit nominations to Mike Geeslin and Perla Cavazos for one vacancy on the CommUnityCare Health Centers' Board by January 5, 2023. Lastly, she noted that the Executive Committee would interview nominees at the January 25<sup>th</sup> Executive Committee meeting and make a recommendation to the full Board. Board Managers will vote on appointees at the regular Board meeting on January 25<sup>th</sup>.

**3. Discuss and take appropriate action on the appointment of two members to the governing board of Sendero Health Plans.**

**Clerk's Notes:** Discussion on this item began at 4:22 p.m.

At 4:24 p.m. Chairperson Bell announced that the Committee was convening in closed session to discuss agenda item 3 under Texas Government Code §551. 074 Personnel Matters.

At 5:52 p.m. the Board returned to open session.

At 6:00 p.m. Manager Valadez moved that the Executive Committee recommend that the Board appoint Jerold McDonald and Molly Hahn to the Sendero Health Plans Board of Directors.

Manager Brinson seconded the motion.

Chairperson Charles Bell	For
Vice Chairperson Cynthia Brinson	For
Treasurer Julie Zuniga	Absent
Secretary Cynthia Valadez	For

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

At 6:01 p.m. Manager Brinson moved that the meeting adjourn.

Manager Valadez seconded the motion.

Chairperson Charles Bell	For
Vice Chairperson Cynthia Brinson	For
Treasurer Julie Zuniga	Absent
Secretary Cynthia Valadez	For

The meeting was adjourned at 6:01 p.m.

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Charles Bell, Chairperson  
Central Health Executive Committee

ATTESTED TO BY:

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Cynthia Valadez, Secretary  
Central Health Board of Managers



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## **CENTRAL HEALTH BOARD OF MANAGERS EXECUTIVE COMMITTEE**

### **January 25, 2023**

## **AGENDA ITEM 2**

Discss and take appropriate action on the reappointment of Tom Coopwood, M.D., to the CommUnityCare Health Centers Board of Directors. (*Action item*)



## MEMORANDUM

**To:** Central Health Board of Managers  
**From:** Briana Yanes, Board Governance Manager  
**Cc:** Mike Geeslin, President & CEO  
**Date:** January 19, 2023  
**Re:** Review and take appropriate action on the reappointment of Tom Coopwood, M.D., to the CommUnityCareHealth Centers Board of Directors. *ACTION ITEM*

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### Overview

Central Health appoints two members to the CommUnityCare Board of Directors who serve as compliments to the consumer representatives on the CommUnityCare Board. Central Health staff recommends the reappointment of Dr. Tom Coopwood to the CommUnityCare Board of Directors for an additional term of two years.

### Synopsis

Dr. Tom Coopwood has served on the CommUnityCare Board of Directors since January 2016 and was elected Chair in February of 2020.

### Biographical Information

#### Thomas B. Coopwood, MD

Dr. Coopwood was born and raised in Lockhart, Texas and is a 1956 graduate of Lockhart High School. Dr. Coopwood attended UT Austin from 1956 to 1959 for a pre-medical degree and received a BA in Plan 2. After graduating from Baylor College of Medicine in 1963 and completing an internship, Dr. Coopwood spent 2 years in the US Air Force before returning to Baylor to complete a General Surgery residency in 1970.

He practiced General and Trauma Surgery in Austin from 1970-2003, and was on the staff of both Seton and St. David's hospital systems. He was Chief of Surgery at Brackenridge for 4 years (1980-85) and the Chief of Medical Staff (1986). He also was President of the Travis County Medical Society (1995).

Dr. Coopwood was Physician of the Year at Brackenridge (1988) and the Travis County Medical Society (2004). He was named by Austin Business Journal as a Healthcare Hero (2011).

Dr. Coopwood has been active in the community. He served on the Northwest Austin Civic Association Board as Vice President from 2009-2013. He served as a Member of the Board of Managers of Central Health from 2004-2015, including Board Chair for 3 years, and also served on the Mayor's Taskforce on Aging and the Commission for Aging for one year.

**Fiscal Impact:**

No fiscal impact anticipated.

**Recommendation**

Staff recommends that the Board of Managers approve the reappointment of Dr. Tom Coopwood to the CommUnityCare Board of Directors.





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## **CENTRAL HEALTH BOARD OF MANAGERS EXECUTIVE COMMITTEE**

### **January 25, 2023**

## **AGENDA ITEM 3**

Review and take appropriate action on the following:

- a. the prioritization and tentative scheduling of items for consideration at future Central Health Board and Committee meetings; and
- b. the tentative reporting schedules for Fiscal Year 2023 activities and programs pursuant to the strategic directions established in the Fiscal Year 2023 Budget Resolution adopted by the Board of Managers. (*Action item*)



MEMORANDUM

**To:** Members of the Central Health Board of Managers Executive Committee  
**From:** Briana Yanes, Board Governance Manager  
**Cc:** Mike Geeslin, President & CEO  
**Date:** January 19, 2023  
**Re:** Review prioritization and tentative scheduling of items for consideration at future Central Health Board and Committee meetings. (Informational Item)

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**Overview:**

Attached are Quarter two (February) tentative agenda items for your review. To assist with planning of future Board meeting and committee agendas, we will review and discuss these items in Executive Committee.

**Action Requested:**

This is an informational item and requires no action.

## Quarter Two Agenda Items

JANUARY	FEBRUARY	MARCH
<p><b><u>Strategic Planning Committee- January 18, 2023:</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• Healthcare Equity Operational Implementation and Financial Sustainability update</li> <li>• Receive a year-end update on communications, community engagement and community outreach</li> <li>• Demographic Report</li> <li>• Review tentative reporting schedules for FY23</li> </ul>	<p><b><u>Strategic Planning Committee- February 8, 2023:</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> </ul>	<p><b><u>Eastern Crescent and Strategic Planning Committee- March 8, 2023 :</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• SPC- FY23 Service Delivery budget priority update (tentative)</li> <li>• CHIF update</li> <li>• Update on the CH annual Quality of Life and Patient Experience (Access to care) surveys</li> <li>• Close out DSRIP (memo only)</li> </ul>
<p><b><u>Budget and Finance Committee- January 18, 2023:</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• FY22 audit</li> <li>• Discuss scheduling of upcoming B&amp;F meetings</li> </ul>	<p><b><u>Budget and Finance Committee- February 22, 2023:</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• December and January financials</li> </ul>	<p><b><u>Budget and Finance Committee- March 8, 2023:</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• February Financials</li> </ul>
<p><b><u>Executive Committee- January 25, 2023:</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• Review tentative schedules and tentative reporting schedules for FY23</li> <li>• CH CEO Evaluation Tool for FY23</li> <li>• CUC board appointments – interviews; consider reappointment of Dr. Tom Coopwood</li> </ul>	<p><b><u>Executive Committee- February 22, 2023:</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• Tentative schedules</li> </ul>	<p><b><u>Executive Committee- March 29, 2023:</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• Tentative schedules</li> </ul>
<p><b><u>Board of Managers- January 25, 2023:</u></b></p> <p><b><u>Consent</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• December Investments</li> <li>• Reappoint Dr. Tom Coopwood to CUC Board; Appointment of 2<sup>nd</sup> CUC board member</li> </ul> <p><b><u>Financial</u></b></p> <ul style="list-style-type: none"> <li>• Approve FY22 audit</li> <li>• October and November financials</li> </ul> <p><b><u>Committee report outs as needed:</u></b></p> <p><b><u>Other</u></b></p> <ul style="list-style-type: none"> <li>• Sendero business items</li> </ul>	<p><b><u>Board of Managers- February 22, 2023:</u></b></p> <p><b><u>Consent</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• January Investments</li> </ul> <p><b><u>Financial</u></b></p> <p><b><u>Committee report outs as needed:</u></b></p> <p><b><u>Other</u></b></p> <ul style="list-style-type: none"> <li>• Operational and Financial Sustainability Planning Update</li> <li>• Memo on the CHAP-MAP program enrollment</li> <li>• Sendero ACA enrollment update</li> <li>• Open Government training</li> <li>• Conflict of Interest training</li> </ul>	<p><b><u>Board of Managers- March 29, 2023:</u></b></p> <p><b><u>Consent</u></b></p> <ul style="list-style-type: none"> <li>• Minutes</li> <li>• Investments</li> </ul> <p><b><u>Financial</u></b></p> <ul style="list-style-type: none"> <li>• Fiscal and related operational updates from CUC and Sendero (packet only)</li> </ul> <p><b><u>Committee report outs as needed:</u></b></p> <p><b><u>Other</u></b></p> <ul style="list-style-type: none"> <li>• Annual HUB report</li> </ul>

Quarter Two Agenda Items

<ul style="list-style-type: none"><li>• Announce appointments to Central Health Board committees</li><li>• CEO Evaluation Tool for FY23</li><li>• Legislative priorities</li><li>• UT Dell Medical School review of reporting matrix</li><li>• Partnership update</li></ul>	<ul style="list-style-type: none"><li>• Report from staff on Dell Medical School reporting</li><li>• Legislative update</li><li>• Budget resolution report outs</li><li>• Partnership update</li><li>• Real estate update</li></ul>	



**AGENDA ITEM SUBMISSION FORM**

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Agenda Item Meeting Date January 25, 2023

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

General Item Description Review the tentative reporting schedules for Fiscal Year 2023.

Is this an informational or action item? Action Item

Fiscal Impact N/A

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

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

- Review the tentative reporting schedules for Fiscal Year 2023 activities and programs pursuant to the strategic directions established in the Fiscal Year 2023 budget resolution adopted by the Board of Managers.
- 1) Board of Managers.
- 2)

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

Estimated time needed for presentation & questions? 5 minutes

Is closed session recommended? (Consult with attorneys.) No

Form Prepared By/Date Submitted: Briana Yanes/January 11, 2023

**FY23 Central Health Adopted Budget Resolution**

<b>Strategic Objectives</b>	<b>Report Out Month(s)</b>
<b>Increase Access and Capacity</b>	
Continue site expansions with new health centers in Hornsby Bend, Del Valle and Colony Park areas	March/May, as needed
Expansion of Specialty Care services, both contracted and direct	February
Develop multispecialty clinic at Rosewood-Zaragosa site	April/May
Enhance Behavioral Health & Substance Use Treatment with Methadone Services	February
Continue implementation of Direct Practice of Medicine	February
Increase healthcare services purchased through contracted services as appropriate	April/May
<b>Strategic Objectives</b>	<b>Report Out Month(s)</b>
<b>Enhance Care Coordination with a Focus on Transitions of Care and Enabling Meaningful Information Sharing</b>	
Implement Epic electronic health record for Central Health	May
Expand transitions of care program within Central Health’s practice of medicine	February
<b>Strategic Objectives</b>	<b>Report Out Month(s)</b>
<b>Enhance Member Enrollment and Engagement</b>	
Implement MyChart patient portal	May
Focus enhanced engagement in high-need planning and assessment regions and improve effectuation of care in the primary care setting.	April/May
Within the CommUnityCare agreement for services, allocate \$290,000 for personnel costs to conduct outreach and patient engagement among men of color, and any concurrent opportunities for at-risk persons of affinity or proximity, who are low-income or residing in assessment regions with the highest social vulnerability scores as outlined in the Healthcare Equity Plan. Further, the funding of personnel costs will be concurrent with agreements between CommUnityCare and the Black Mens’ Clinic as detailed in a prospective engagement plan presented to the Central Health Board of Managers by CommUnityCare by the end of the First Quarter of Fiscal Year 2023, if not sooner.	December (Complete)  July/August



Strategic Objectives	Report Out Month(s)
<b>Continue to Develop System of Care Infrastructure</b>	
Complete development and adoption of service delivery operational implementation and financial sustainability plans, alignment, and accountability.	Monthly
Continue to develop and implement a hospital care and services funding model that is transparent and structured such that any funding commitments and assumptions of risk ensure optimum use of local tax dollars and other public funds to improve health of population to be served.	At least quarterly but up to monthly
Continue development of direct clinical practice infrastructure	April/May
Include cancer screening, diagnosis, and treatment services as service lines are developed for staging of priorities within the Healthcare Equity Plan, and further provide a descriptive summary of the landscape for cancer prevention and care in Travis County.	July/August
<p>Central Health staff will present to the Central Health Board of Managers a defined reporting matrix, in collaboration with UT-Austin and the Dell Medical School and consistent with all terms of the Affiliation Agreement, that will include details on the clear reporting of the expenditures from the Permitted Investment Payment (\$35,000,000 per year) related to each of the six categories of Permitted Investments and other obligations within the Affiliation Agreement.</p> <ol style="list-style-type: none"> <li>1. The reporting matrix shall include, but is not limited to, the information requested by the Central Health Board of Managers in advance of the July 27, 2022 Board Meeting, and to the extent possible any subsequent requests.</li> <li>2. This matrix shall be developed by December 1, 2022 and presented at the following Board of Managers meeting.</li> <li>3. The reporting information shall be provided to the Central Health Board of Managers on a schedule beginning January 31, 2023 and continuing through January 31, 2024, with specific reporting elements and intervals in accordance with the agendas for the Board of Managers' meetings.</li> <li>4. Concurrently, the Board and CEO, and other staff as designated, shall continue to optimize all the provisions, including the enforcement remedies, in the affiliation agreement for the benefit of the patients served by or eligible for the Medical Access Program.</li> </ol>	January

Strategic Objectives	Report Out Month(s)
<b>Support Operations</b>	
Increase support for active and future facilities construction and maintenance	<ul style="list-style-type: none"> <li>▪Part of FY 2024 budget development and any new business cases.</li> <li>▪Memo with update August 2023</li> </ul>
Expand human resources department to support growing organization and new practice of medicine	Quarterly, reflecting the most current month of information.
Evaluate and implement CLAS (Culturally and linguistically appropriate services) standards	Preliminary findings by May; Report August
Centralize and develop a visible and robust risk management program	July/August
Enhance records management program	March
Expand resources to support new eastern Travis County Health and Wellness operations	July/August
Expand joint technology to support additional technology and security systems	April/August
Utilize health system resources to leverage healthcare infrastructure	TBD
Develop HUB policy recommendations and finalize planning to implement program	<p>Reported overview of new program in November to Board; Proceeding with implementation.</p> <p>Report out schedule:</p> <ul style="list-style-type: none"> <li>-February: FY22 HUB report presentation and verbal update on HUB implementation</li> <li>-July/August: Written update on HUB program implementation progress</li> <li>-September: Written update on HUB program implementation progress</li> </ul>
Staff will procure services necessary to conduct the five-year performance review. Further, as part of the performance review, staff will present information on the major past events, conditions, and circumstances that have influenced the strategic direction of the Travis County Health Care District. This information will also be shared for the benefit of developing the Healthcare Equity - Operational and Financial Sustainability Plan pursuant to Section B.	TBD



# CENTRAL HEALTH

## **Our Vision**

Central Texas is a model healthy community.

## **Our Mission**

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

## **Our Values**

Central Health will achieve excellence through:

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

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

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

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

## **CENTRAL HEALTH BOARD OF MANAGERS EXECUTIVE COMMITTEE**

### **January 25, 2023**

## **AGENDA ITEM 4**

Receive and take appropriate action on the Central Health President and CEO's performance evaluation tool, including the prioritization of work activities and opportunities for 2023, or other timeframes as may be appropriate.<sup>3</sup> (*Action Item*)



AGENDA ITEM SUBMISSION FORM

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Agenda Item Meeting Date 01/25/2023

Who will present the agenda item? (Name, Title) Jeannie Virden, Enterprise CHRO & Dr. Charles Bell, Chairperson

General Item Description Performance Evaluation Tool for FY2023

Is this an informational or action item? Action

Fiscal Impact Non

Recommended Motion (if needed – action item) Approve the performance evaluation tool for FY2023

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)
3)
4)
5)

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) No backup – Jeannie will share the proposed 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: Jeannie Virden – January 17, 2023



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## **CENTRAL HEALTH BOARD OF MANAGERS EXECUTIVE COMMITTEE**

### **January 25, 2023**

## **AGENDA ITEM 5**

Discuss and take appropriate action on the appointment of one member to the governing board of CommunityCare Health Centers.<sup>3</sup> (*Action Item*)



**AGENDA ITEM SUBMISSION FORM**

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Agenda Item Meeting Date January 25, 2023

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

General Item Description Discuss and take appropriate action on the appointment of one member to the governing board of CommUnityCare Health Centers.

Is this an informational or action item? Action Item

Fiscal Impact N/A

Recommended Motion (if needed – action item) Recommend CommUnityCare appointment to the full Board.

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

- 1) The Executive Committee will interview candidates for the CommUnityCare Board and make a recommendation to the full Board.
- 2) Attached are the candidate interview questions to be asked.
- 3) The biographical information is also attached.

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Interview questions and biographical information

Estimated time needed for presentation & questions? 1 hour

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

Form Prepared By/Date Submitted: Briana Yanes/ January 19, 2023





# CENTRAL HEALTH

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## **CENTRAL HEALTH BOARD OF MANAGERS EXECUTIVE COMMITTEE**

### **January 25, 2023**

## **AGENDA ITEM 6**

Discuss quarterly reporting formats to the Central Health Board of Managers for CommUnityCare Health Centers and Sendero Health Plans, Inc. respective financial positions, services provided, and recent and future major operational activities .  
*(Informational Item)*



**AGENDA ITEM SUBMISSION FORM**

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Agenda Item Meeting Date January 25, 2023

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

General Item Description Discuss quarterly reporting formats to the Central Health Board of Managers for CommUnityCare Health Centers and Sendero Health Plans, Inc. respective financial positions, services provided, and recent and future major operational activities.

Is this an informational or action item? Informational

Fiscal Impact N/A

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

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

- 1) Will review prior quarterly reports for CommUnityCare Health Centers and Sendero Plans.
- 2) Prompt discussion on the format of future reports.
- 3) \_\_\_\_\_

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

Estimated time needed for presentation & questions? 10 minutes

Is closed session recommended? (Consult with attorneys.) No

Form Prepared By/Date Submitted: Briana Yanes/ January 19, 2023



**SENDERO  
HEALTH PLANS**

**CENTRAL HEALTH  
BOARD OF MANAGERS  
EXECUTIVE COMMITTEE**

September 7th, 2022

**BOARD PACKET MATERIALS**







# Sendero Update

- Sendero filed statutory Q2 results of a \$4.7m net income, of which approximately \$2.5m is from final 2021 reconciliations.
- This leaves Sendero with a surplus net worth of \$20m, and on track for the highest year-end surplus in its history.
- Work continues with Guidehouse on strategy to best support Central Health's mission.
- Preliminary data analysis indicates Sendero improved on Quality measures over 2021.
- Following are the next upcoming Sendero Outreach Events in the community:

9/6/2022 Back to School Night with Covington Middle School

9/9/2022 Dove Springs Movie Night

9/12/2022 Community Resource Fair @Blackwell Thurman Criminal Justice Ctr.

9/13/2022 AISD Parent Support Specialist Professional Development Meeting

9/13/2022 HAAM Day

9/16/2022 Diez y Seis De Septiembre Celebrations

9/17/2022 Parents Night Out Movie Night @ YMCA/COA Rundberg

9/23/2022 HAAM LOVES YOU!

9/23/2022 Family Movie Night @Gus Garcia Recreation Center

**FISCAL YEAR 2021 – 22 THIRD QUARTERLY REPORT TO CENTRAL BOARD OF MANAGERS****OCTOBER 1<sup>ST</sup>, 2021 – JUNE 30<sup>TH</sup>, 2022**

From April 1<sup>st</sup> to June 30<sup>th</sup>, 2022 CommUnityCare (CUC) provided 107,954 face-to-face encounters\* to 62,710 unique patients. With this quarter considered, CUC has provided 317,671 face-to-face encounters\* to 111,081 unique patients since October 1, 2021. However, CUC's overall service level was higher at 393,160 billed visits through June 30, 2022 with 115,637 unique individuals served and a total of 1,836,269 charges. The higher year-to-date (YTD) total of 115,637 individuals includes those had non-provider visits such as vaccine only visits. Below is a break-out of relevant service delivery information presented by quarter and YTD.

	Quarter 1 Oct-Dec 2021	Quarter 2 Jan-Mar 2022	Quarter 3 Apr-June 2022	YTD Oct 2021 – June 2022
Unduplicated Patients	61,578	60,648	62,710	111,081
Face-to-Face Encounters*	105,177	104,540	107,954	317,671
% 100% and below FPL**	55.8%	56.8%	57.1%	53.2%
% below 200% FPL**	96.8%	97.4%	97.4%	97.0%
% Assigned Female at Birth	56.6%	56.8%	57.2%	55.6%
% Assigned Male at Birth	43.4%	43.2%	42.8%	44.4%
% Under 18 years of age	40.2%	37.6%	37.1%	40.3%
% 18 - 64 Years of Age	53.9%	55.8%	56.2%	54.4%
% 65 Years and Older	6.0%	6.6%	6.6%	5.4%
% self reporting as minority**	87.8%	88.1%	88.2%	87.5%
% Latino	73.1%	74.1%	74.1%	73.0%
% African American including Latinos	10.2%	9.8%	9.9%	10.2%
% AAPI including Latinos	3.3%	3.0%	3.0%	3.1%
% Native American Including Latinos	0.2%	0.2%	0.2%	0.2%
% White Non-Latino	12.2%	11.9%	11.8%	12.5%
% best served in Language Other than English	56.8%	58.0%	58.7%	56.7%
% CHIP	2.6%	2.4%	2.4%	2.4%
% Dual Eligible	1.5%	1.8%	1.9%	1.4%
% Medicaid	36.9%	36.9%	35.9%	36.7%
% Medicare	3.5%	3.5%	3.6%	3.1%
% Private Insurance	7.4%	7.7%	7.8%	8.1%
% Uninsured	48.0%	47.7%	48.5%	48.3%

YTD, almost 60% of the 111,081 unique patients with a face-to face encounter were drawn from the following 10 Travis County zip codes: (1) 11,622 from 78753 ; (2) 8,804 from 78744; (3) 8,376 from 78741; (4) 7,880 from 78724; (5) 7,276 from 78758; (6) 5,638 from 78617; (7) 5,551 from 78660; (8) 3,815 from 78723; (9) 3,755 from 78745; and, (10) 3,553 from 78653.

Of note, while 48.4% of unique patients YTD were uninsured, 49.4% of all face-to-face encounters were provided to uninsured individuals.

\*Face-to-face encounters are Health Resources and Services Administration countable visits that occur between a patient and a licensed or credentialed provider who exercises independent professional judgment in providing services that are documented, individual, and provided in-person or virtually.

\*\* Those not reporting income or race are excluded.

OCTOBER 1<sup>ST</sup>, 2021 – JUNE 30, 2022

<b>Financial Performance From October 1<sup>st</sup>, 2021 to June 30<sup>th</sup>, 2022 compared to Budget and FY2021 Actual</b>					
<b>REVENUES</b>	<b>FY2022 Actual</b>	<b>FY2022 Budget</b>	<b>FY2022 Variance</b>	<b>FY2022 % Variance</b>	<b>FY2021 Actual</b>
Sliding fee scale / self pay patients	2,314,968	3,638,283	(1,323,316)	-36.37%	354,421
Commercial	2,730,848	1,737,635	992,213	57.16%	2,408,697
Medicare	2,135,288	1,839,651	295,637	16.07%	1,702,700
Medicaid	31,690,669	33,189,737	(1,499,068)	-4.52%	26,416,542
CHIP	3,171,642	3,112,439	59,202	1.90%	2,879,849
Family planning	650,152	712,974	(62,822)	-8.81%	728,357
Central Health primary care / specialty care Fee-For-Service (FFS)	26,442,174	27,616,278	(1,174,104)	-4.25%	21,111,617
Total patient services revenue	69,135,740	71,846,998	(2,711,258)	-3.77%	55,602,183
Other pat svc revenue	1,861,882	41,176	1,820,706	4421.73%	1,342,302
Bad debt	(1,592,037)	(3,552,957)	1,960,920	-55.19%	(4,350,961)
Third party revenue	69,405,585	68,335,217	1,070,368	1.57%	52,593,524
Pharmacy revenue	33,653,727	23,851,669	9,802,058	41.10%	23,034,820
Net patient revenue	103,059,313	92,186,886	10,872,427	11.79%	75,628,344
Total grant revenue	15,041,382	20,302,197	(5,260,815)	-25.91%	17,319,801
Delivery System Reform Incentive Payments Earned	2,325,768	2,992,126	(666,358)	-22.27%	5,483,247
Central Health non contract revenue	12,313,478	13,109,390	(795,912)	-6.07%	13,387,808
<b>TOTAL OPERATING REVENUE</b>	<b>132,739,941</b>	<b>128,590,598</b>	<b>4,149,343</b>	<b>3.23%</b>	<b>111,819,200</b>
<b>EXPENSES</b>	<b>FY2022 Actual</b>	<b>FY2022 Budget</b>	<b>FY2022 Variance</b>	<b>FY2022 % Variance</b>	<b>FY2021 Actual</b>
WAGES	62,527,798	68,567,987	(6,040,190)	-8.81%	58,022,618
BENEFITS	16,375,124	17,411,719	(1,036,595)	-5.95%	14,787,491
TOTAL WAGES AND BENEFITS	78,902,922	85,979,707	(7,076,785)	-8.23%	72,810,109
CONTRACT LABOR	4,779,762	3,764,251	1,015,510	26.98%	4,365,374
DIRECT CARE EXPENSES	26,055,136	20,619,368	5,435,768	26.36%	16,832,411
TOTAL INDIRECT EXPENSE	9,795,255	11,912,130	(2,116,874)	-17.77%	8,829,492
TOTAL OCCUPANCY EXPENSES	6,193,539	6,681,565	(488,026)	-7.30%	5,901,696
DEPRECIATION EXPENSE	232,868	249,349	(16,480)	-6.61%	249,366
<b>TOTAL EXPENSES</b>	<b>125,959,482</b>	<b>129,206,370</b>	<b>(3,246,888)</b>	<b>-2.51%</b>	<b>108,988,447</b>
TOTAL NON-OPERATING REVENUE/ EXPENSE	179,381	(43,520)	222,902	-512.18%	220,815
<b>NET SURPLUS/(DEFICIT)</b>	<b>6,959,841</b>	<b>(659,292)</b>	<b>7,619,132</b>	<b>-1155.65%</b>	<b>3,051,568</b>





**SENDERO  
HEALTH PLANS**

**CENTRAL HEALTH  
BOARD OF MANAGERS  
EXECUTIVE COMMITTEE**

JUNE 15th, 2022

**OPEN SESSION**





# Sendero Update

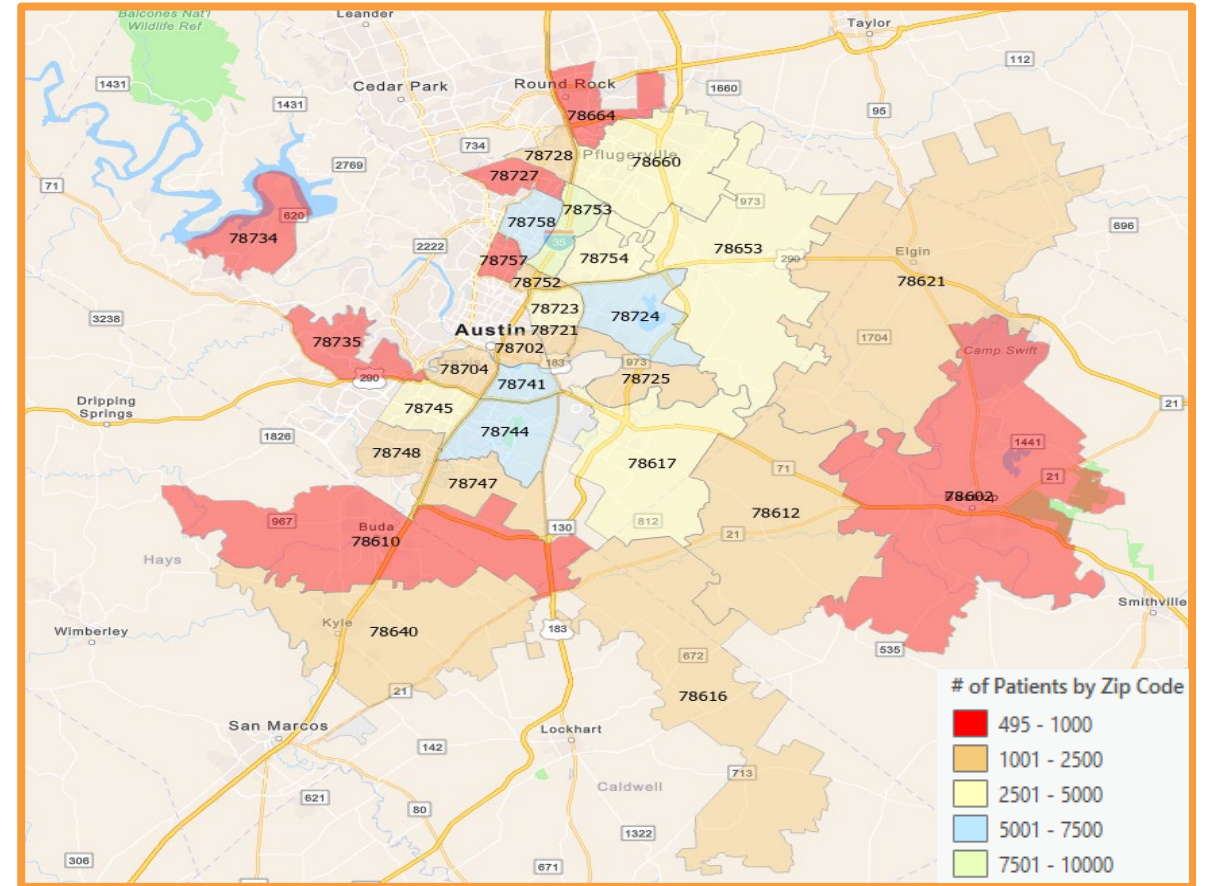
- CMS is to announce this month that Sendero will receive over \$30 million from the ACA Risk Adjustment program for care delivered in 2021 to high-risk members including CHAP
- Finalizing our application for 2023 ACA Marketplace plans
- Submitted a response to the Texas Medicaid STAR+PLUS RFP
- Launching this year's 'Passport to Health' initiative: our annual outreach campaign to every member to encourage and incent them to get needed health care services, including HEDIS (Health Effectiveness Data and Information Set) and USPTF (US Preventative Services Task Force) recommendations. Includes outreach targeted specifically to address racial and ethnic disparities.
- Implementing new transportation vendor with improved capabilities for those with limited mobility ("SafeRide")
- Following are the next upcoming Sendero Outreach Events in the community:
  - 6/8 – 'My Montopolis' Meeting
  - 6/9 – Child Booster Vaccine Event at JD's Supermercado
  - 6/11 – Blackland Neigh Center 24<sup>th</sup> Annual Pre-Juneteenth Event
  - 6/17-18 – Juneteenth Celebrations (multiple events)
  - 6/26 – Sunday Kickback at Chicano Park
  - 7/2 – Star Spangled Independence Event at Pioneer Farms



# SERVICES PROVIDED FROM 10/01/2021 TO 03/31/2022

- 215,058 Federally Qualified Health Center (FQHC) encounters YTD have been provided by a medical, dental or therapy provider to 91,457 unique patients, including:
  - 179,323 medical visits provided to 85,200 medical patients by a physician, advanced practice provider or resident physician.
  - 27,073 dental visits provided to 15,852 dental patients by a dentist or hygienist.
  - 8,662 mental health visits provided to 3,786 mental health patients by mental health professionals excluding psychiatrists and mental health nurse practitioners which are counted above under medical visits.
- 88.6% of the 91,457 unduplicated patients served since October 1<sup>st</sup>, 2021 are drawn from the top 30 zip codes as shown on the image to the right.
- Top issue for this Quarter: Workforce recruitment & retention. CommUnityCare’s (CUC) Board authorized market adjustments for team members in the annualized amount of @ \$4 million this quarter. These market adjustments were based on 2021 Board Approved Compensation Plan & Philosophy.

Top 30 Zip Codes served by number of Unduplicated Patients



# FINANCIAL PERFORMANCE FROM 10/01/21 – 03/31/22

REVENUES	FY2022 Actual	FY2022 Budget	FY2022 Variance	FY2022 % Variance	FY2021
SLIDING FEE SCALE / SELF PAY PATIENTS	1,658,436	2,370,492	(712,056)	-30.04%	(2,450,855)
COMMERCIAL	1,844,645	1,132,141	712,504	62.93%	1,590,162
MEDICARE	1,431,774	1,198,608	233,166	19.45%	1,134,661
MEDICAID	21,215,575	21,624,483	(408,909)	-1.89%	18,207,698
CHIP	2,095,570	2,027,883	67,687	3.34%	1,803,385
FAMILY PLANNING	467,906	464,532	3,374	0.73%	199,198
CENTRAL HEALTH REIMURSEMENT FOR PRIMARY / SPECIALTY CARE	16,210,782	17,993,145	(1,782,363)	-9.91%	15,122,795
<b>TOTAL PATIENT SERVICES REVENUE</b>	<b>44,924,686</b>	<b>46,811,283</b>	<b>(1,886,598)</b>	<b>-4.03%</b>	<b>35,607,045</b>
OTHER PAT SVC REVENUE	489,054	27,306	461,747	1690.99%	1,413,564
BAD DEBT	(942,530)	(2,356,172)	1,413,642	-60.00%	(1,743,808)
THIRD PARTY REVENUE	44,471,209	44,482,418	(11,209)	-0.03%	35,276,800
PHARMACY REVENUE	21,584,239	15,817,423	5,766,816	36.46%	14,572,108
<b>NET PATIENT REVENUE</b>	<b>66,055,448</b>	<b>60,299,841</b>	<b>5,755,607</b>	<b>9.54%</b>	<b>49,848,908</b>
TOTAL GRANT REVENUE	10,131,967	12,011,377	(1,879,410)	-15.65%	12,842,459
DSRIP REVENUE	1,787,501	1,984,252	(196,751)	-9.92%	3,081,272
CENTRAL HEALTH CONTRACT REVENUE	8,437,728	8,693,595	(255,867)	-2.94%	8,561,709
<b>TOTAL OPERATING REVENUE</b>	<b>86,412,644</b>	<b>82,989,065</b>	<b>3,423,579</b>	<b>4.13%</b>	<b>74,323,927</b>
EXPENSES	FY2022 Actual	FY2022 Budget	FY2022 Variance	FY2022 % Variance	FY2021
WAGES	40,683,223	44,737,629	(4,054,406)	-9.06%	37,752,585
BENEFITS	10,736,157	11,594,328	(858,171)	-7.40%	9,248,983
<b>TOTAL WAGES AND BENEFITS</b>	<b>51,419,380</b>	<b>56,331,957</b>	<b>(4,912,577)</b>	<b>-8.72%</b>	<b>47,001,568</b>
CONTRACT LABOR	2,923,225	2,483,052	440,173	17.73%	2,936,587
DIRECT CARE EXPENSES	16,779,605	13,660,799	3,118,806	22.83%	10,859,365
TOTAL INDIRECT EXPENSE	6,513,598	7,954,066	(1,440,468)	-18.11%	5,739,246
TOTAL OCCUPANCY EXPENSES	4,161,330	4,425,368	(264,037)	-5.97%	4,051,907
DEPRECIATION EXPENSE	150,093	165,358	(15,265)	-9.23%	166,648
<b>TOTAL EXPENSES</b>	<b>81,947,231</b>	<b>85,020,599</b>	<b>(3,073,368)</b>	<b>-3.61%</b>	<b>70,755,321</b>
TOTAL NON-OPERATING REVENUE/ EXPENSE	64,556	(28,861)	93,417	-323.68%	23,830
<b>NET SURPLUS/(DEFICIT)</b>	<b>4,529,969</b>	<b>(2,060,396)</b>	<b>6,590,365</b>	<b>-319.86%</b>	<b>3,592,435</b>





**SENDERO  
HEALTH PLANS**

**CENTRAL HEALTH  
BOARD OF MANAGERS**

March 30th, 2022

**OPEN SESSION**





# Sendero Update

- CHAP Expansion member engagement: of the 759 CHAP members, only 35 to date have not yet had claims submitted for care.
- Five abstracts from Sendero were accepted for presentation at the Academy Health conference in Washington DC in June. Academy Health is the leading global conference on evidence-based health improvement through care delivery.
- Sendero reported 2021 ending capital of \$15m and a regulatory Risk Based Capital position of 525% (300% minimum target)
- CMS announced a Special Enrollment Period enacted throughout year for all residents eligible for premium subsidies and between 100% to 150% FPL. Sendero is deploying targeted messaging to reach potentially eligible populations.
- Following are the next upcoming Outreach Events in the community:
  - 3/26 - Hornsby Bend Health & Wellness Center Groundbreaking, Austin 78725
  - 3/30 - Emancipet Mobile Clinic @ Gus Garcia Recreation Center, Austin 78753
  - 3/31 - IDEA Bluff Springs Spring Fest, Austin 78744
  - 3/31 - CATCH Night at Gilbert Elementary (Del Valle ISD), Austin 78724
  - 4/9 - Easter Spring Fling at Dittmar Recreation Center, Austin 78745
  - 4/9 – Gus Garcia Easter, Austin 78753





# Sendero Update: Demographics

- Sendero matches or exceeds the Travis County averages for minorities except Asians:

<u>Source</u>	<u>Year</u>	<u>Hispanic, Latino or Spanish Origin</u>	<u>American Indian or Alaskan Native</u>	<u>Asian</u>	<u>Black</u>	<u>Native Hawaiian and Other Pacific Islanders</u>	<u>Other</u>
TX ACA	2021	25.0%	0.0%	11.0%	4.7%	0%	4%
Travis ACA	2021	34.3%	0.3%	11.1%	3.1%	0.0%	2.6%
Sendero ACA	2022	34.4%	1.7%	6.3%	4.1%	0.1%	19.2%
CHAP Expansion	2022	60.2%	0.0%	0.8%	7.0%	0.0%	8.5%

*All figures below exclude the CHAP Expansion program members:*

- Percent of members receiving federal premium subsidies (<400% FPL) increased each year since 2019
- Percent of members who are male has been slightly increasing since 2019
- Percent by zip indicates slight growth in Sunset Valley, South Austin, Manchaca and Montopolis

<b>FPL</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>
FPL<150%	15%	26%	25%	17%
FPL150%_400%	64%	52%	57%	68%
FPL>400%	21%	22%	18%	15%

<b>Sex</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>
F	52%	51%	50%	49%
M	48%	49%	50%	51%

<b>Zip</b>	<b>Neighborhood</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>
<b>78745</b>	Sunset Valley	10%	10%	13%	14%
<b>78660</b>	Pflugerville	9%	9%	7%	8%
<b>78704</b>	Austin	7%	8%	8%	9%
<b>78748</b>	Manchaca	7%	7%	8%	8%
<b>78613</b>	Cedar Park	8%	7%	6%	5%
<b>78641</b>	Leander	7%	6%	6%	5%
<b>78749</b>	Austin	5%	5%	5%	5%
<b>78681</b>	Round Rock	5%	5%	4%	4%
<b>78741</b>	Montopolis	4%	5%	5%	6%
<b>78640</b>	Kyle	4%	4%	5%	6%

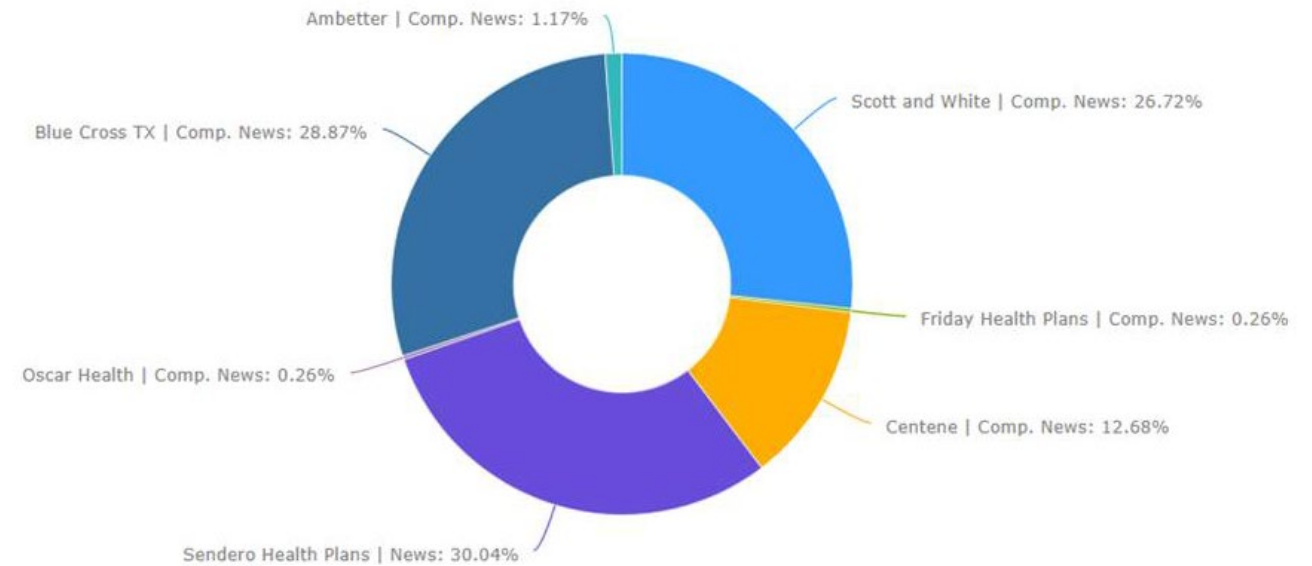


# Sendero: Community Response

*Sendero is excited to continue earning positive press:*

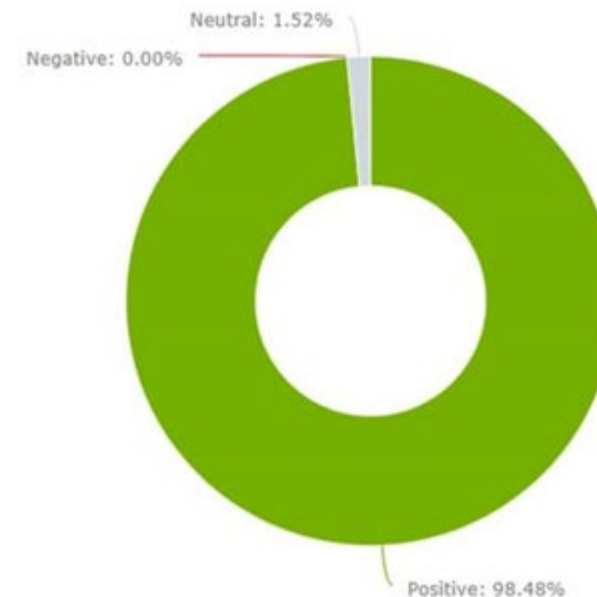
## Share of Voice (SOV)

- SOV represents percent of media mentions
- 2020-2021 Sendero earns greatest local SOV



## Sentiment

- 2019 12.50% of stories were positive
- 2020 77.17% of stories were positive
- 2021 98.48% of stories were positive

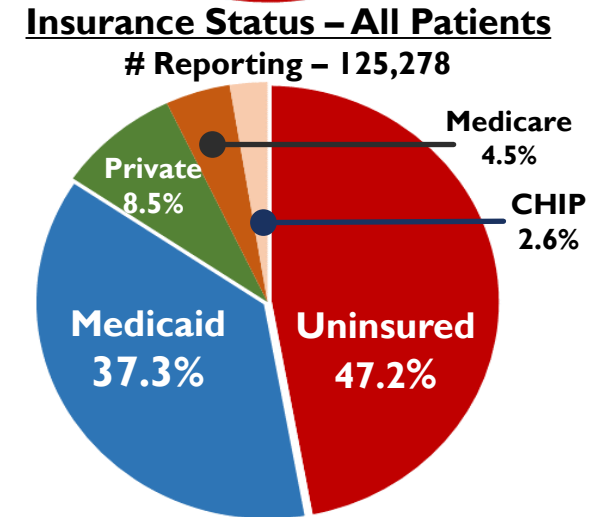
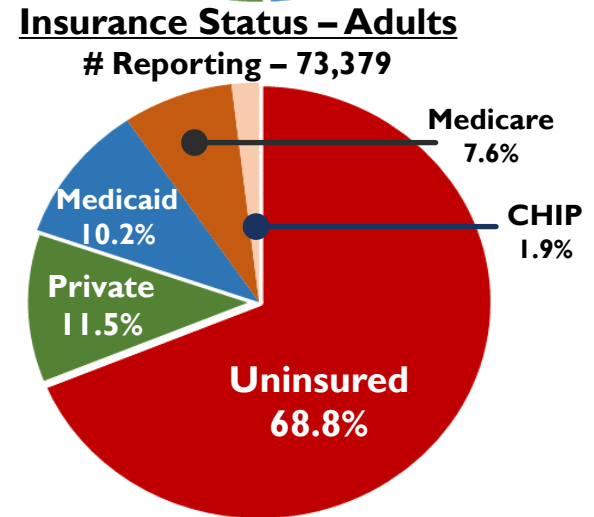
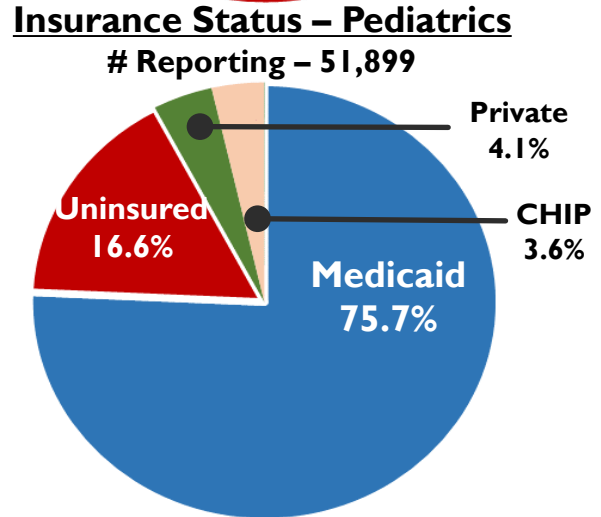
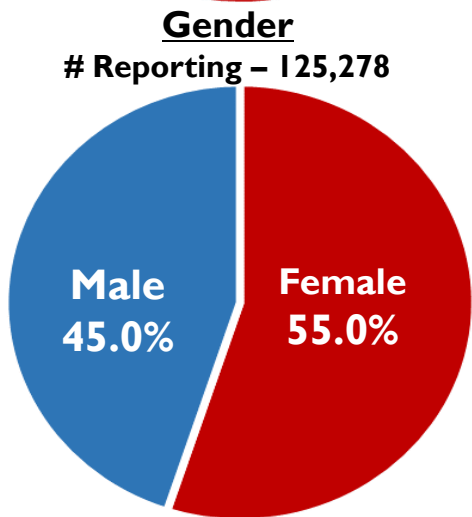
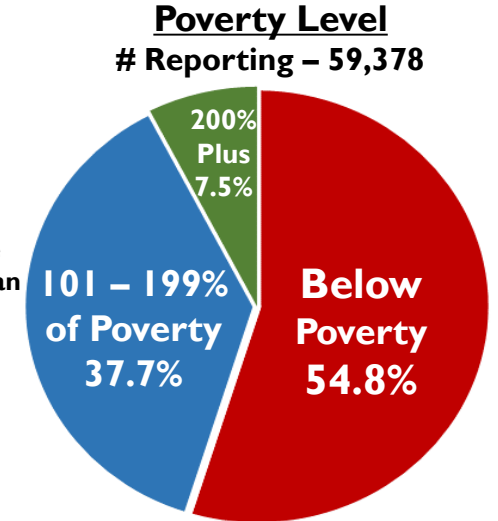
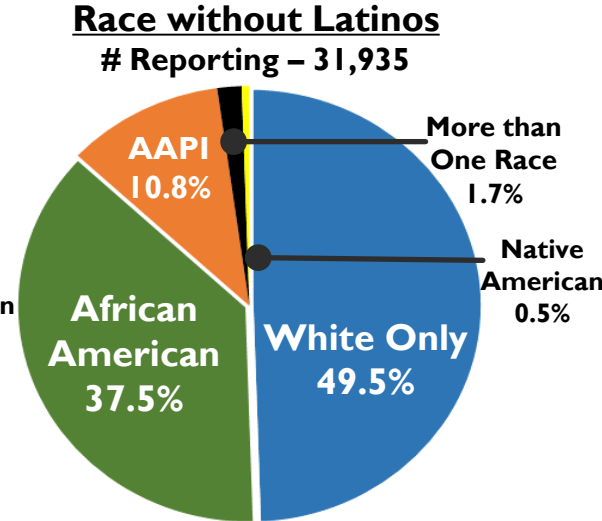
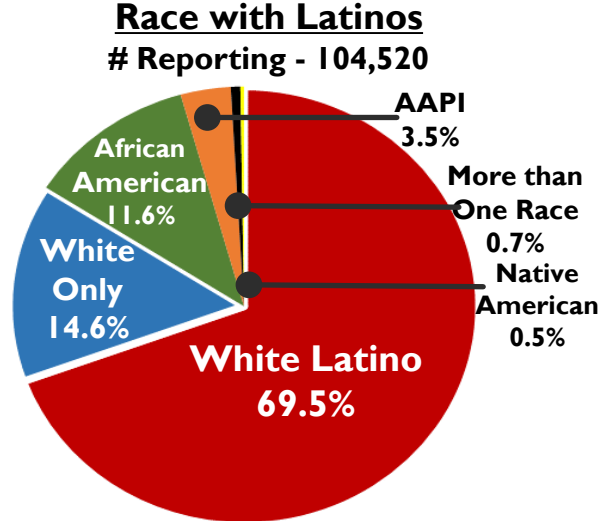
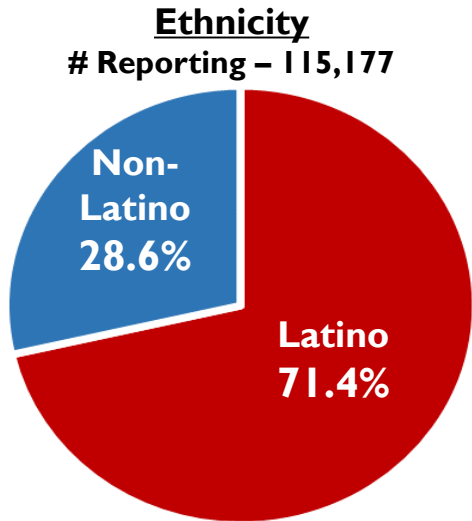


# QUARTERLY UPDATE

CommUnityCare recently submitted the Uniform Data System (UDS) Report to the federal government for its service delivery for Calendar Year 2021. The UDS Report is a core set of information that must be submitted annually to the Health Resources and Services Administration (HRSA) that allows it to assess the performance of Health Center Program grantees on key operational, financial, and clinical performance metrics. More specifically, the report details: patient demographics, services provided, staffing, clinical indicators/outcomes, utilization rates, costs, and revenues. Below are some of the highlights as reported to HRSA with demographic summaries provided on the next slide.

- 125,278 unique patients served in 2021 compared to 123,946 in 2020. Our highest number of patients served ever despite fluctuations in patient demand as a result of the coronavirus pandemic, the loss of 6 days of operations due to Sno-vid, and loss clinical time related to Epic go-live training and reduced schedules post Epic go live.
- We served our most diverse patient population ever –almost 84.9% self-reported as representative of minority population up from 82.5% last year.
- More of our patients were best served by a language other than English – almost 46.2% of our patients up from 39.8% last year – highest level ever.
- We served our highest number of children ever – 51,899 or 41.4% of our patients were 17 and younger.
- We served our lowest number of prenatal patients in 5 years – 3,117 with 703 fewer prenatal patients served in 2021 compared to 2020 or 18.4% fewer prenatal patients than last year.
- We saw significantly less mental health patients with about 30% fewer individuals getting mental health services through us in 2021 compared to 2020.
- We reported \$26,535,705 in donated goods – pharmaceuticals and COVID-19 vaccines.
- We finished calendar year 2021 with excess revenue (on a cash basis) over expenses of \$6.895 million.

# 125,278 PATIENTS SERVED IN 2021



**39.8% best served in a language other than English**



# FINANCIAL PERFORMANCE FROM 10/01/21 – 01/31/22

REVENUES	FY2022 Actual	FY2022 Budget	FY2022 Variance	FY2022 % Variance	FY2021
SFS/MAP BASIC/SP NET	2,061,241	6,338,564	(4,277,323)	-67.48%	878,404
MAP	862,558	6,593,425	(5,730,866)	-86.92%	331,987
COMMERCIAL	1,292,116	718,969	573,146	79.72%	906,361
MEDICARE	911,026	761,180	149,846	19.69%	972,336
MEDICAID	14,044,809	13,732,693	312,116	2.27%	12,780,029
CHIP	1,447,065	1,287,813	159,252	12.37%	1,298,323
FAMILY PLANNING	288,768	295,002	(6,235)	-2.11%	65,195
CENTRAL HEALTH REIMURSEMENT FOR PRIMARY / SPECIALTY CARE	9,558,300	0	9,558,300	0.00%	7,454,000
<b>TOTAL PATIENT SERVICES REVENUE</b>	<b>30,465,882</b>	<b>29,727,646</b>	<b>738,237</b>	<b>2.48%</b>	<b>24,686,634</b>
OTHER PAT SVC REVENUE	258,005	17,988	240,018	1334.35%	1,195,576
BAD DEBT	(1,031,358)	(1,552,081)	520,724	-33.55%	(1,043,257)
THIRD PARTY REVENUE	29,692,530	28,193,552	1,498,978	5.32%	24,838,953
PHARMACY REVENUE	13,958,975	10,419,414	3,539,562	33.97%	9,691,700
NET PATIENT REVENUE	43,651,505	38,612,965	5,038,540	13.05%	34,530,653
TOTAL GRANT REVENUE	5,676,988	7,679,985	(2,002,997)	-26.08%	8,695,156
DSRIP REVENUE	1,787,501	1,307,087	480,414	36.75%	1,615,976
CENTRAL HEALTH CONTRACT REVENUE	5,827,985	5,726,733	101,251	1.77%	5,724,992
<b>TOTAL OPERATING REVENUE</b>	<b>56,943,978</b>	<b>53,326,770</b>	<b>3,617,208</b>	<b>6.78%</b>	<b>50,566,778</b>
EXPENSES	FY2022 Actual	FY2022 Budget	FY2022 Variance	FY2022 % Variance	FY2021
WAGES	26,978,769	29,234,023	(2,255,254)	-7.71%	25,367,648
BENEFITS	7,334,683	7,776,936	(442,254)	-5.69%	6,403,348
<b>TOTAL WAGES AND BENEFITS</b>	<b>34,313,452</b>	<b>37,010,959</b>	<b>(2,697,507)</b>	<b>-7.29%</b>	<b>31,770,995</b>
CONTRACT LABOR	1,853,830	1,635,695	218,136	13.34%	2,000,231
DIRECT CARE EXPENSES	11,054,239	8,999,752	2,054,487	22.83%	7,056,425
TOTAL INDIRECT EXPENSE	4,257,355	5,293,162	(1,035,806)	-19.57%	3,558,002
TOTAL OCCUPANCY EXPENSES	2,685,365	2,910,175	(224,810)	-7.72%	2,695,721
DEPRECIATION EXPENSE	101,869	108,926	(7,058)	-6.48%	108,255
<b>TOTAL EXPENSES</b>	<b>54,266,109</b>	<b>55,958,667</b>	<b>(1,692,558)</b>	<b>-3.02%</b>	<b>47,189,628</b>
TOTAL NON-OPERATING REVENUE/ EXPENSE	(8,530)	(19,012)	10,482	-55.13%	27,332
<b>NET SURPLUS/(DEFICIT)</b>	<b>2,669,339</b>	<b>(2,650,909)</b>	<b>5,320,248</b>	<b>-200.70%</b>	<b>3,404,482</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.

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

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

## **CENTRAL HEALTH BOARD OF MANAGERS EXECUTIVE COMMITTEE**

### **January 25, 2023**

## **AGENDA ITEM 7**

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