



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

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

Our Values

Central Health will achieve excellence through:

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

Innovation - We create solutions to improve healthcare access.

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

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

BOARD OF MANAGERS MEETING

Wednesday, November 18, 2020, 5:30 p.m.

via toll-free videoconference¹

Members of the public may 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/1483568086?pwd=MEZXVDE1bVIML1RuZzMvSzJoYjIQQT09>

Password: 646473

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

Dial: (888) 501-0031

Meeting ID: 148 356 8086

Password: 646473

A member of the public who wishes to make comments during Public Communication must properly register with Central Health ***no later than 4:00 p.m. on November 18, 2020.*** Registration can be completed in one of two ways:

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

PUBLIC COMMUNICATION

Central Health will conduct Public Communication in the same manner as it has been conducted at in-person meetings, including 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 October 28, 2020 meeting.
- C2. Receive and ratify Central Health Investments for October 2020.

REGULAR AGENDA²

- 1. Receive a presentation and discuss coordination and collaboration with CommUnityCare Health Centers, Austin Public Health, and Travis County Health and Human Services on COVID-19 response. (*Informational Item*)
- 2. Discuss and take appropriate action on proposed Calendar Year 2021 meeting dates for the Central Health Board of Managers. (*Action Item*)
- 3. Receive an update on the upcoming legislative session and take appropriate action on proposed Central Health Enterprise Legislative Guiding Principles. (*Action Item*)
- 4. Receive and discuss the following focus reports related to the Strategic Objective in section (ii)1.b. of the Resolution Adopting the Fiscal Year 2021 Budget:
 - a. Current workforce demographics and levels, including new hires and turnover;
 - b. Enterprise EEOC category reports and demographic background; and
 - c. Compensation report. (*Informational Item*)
- 5. Receive and discuss an update on the EPIC Electronic Medical Record system implementation. (*Informational Item*)
- 6. 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 development in Eastern Travis County.³ (*Action Item*)
- 7. Receive and discuss an update on an Interlocal Cooperation Agreement between Central Health and the City of Austin for the realignment of Red River Street from 15th Street to 12th Street.³ (*Informational Item*)
- 8. Receive and discuss the 1115 Medicaid Waiver, Delivery System Reform Incentive Payment (DSRIP) projects, the Community Care Collaborative, and other healthcare delivery partners, programs, projects, and arrangements, including agreements with Ascension Texas.⁴ (*Informational Item*)
- 9. Receive briefing from legal counsel and take appropriate action regarding *Larimen Wallace v. Travis County Healthcare District d/b/a Central Health*, Cause No. D-1-GN-20-006645 (Travis County Dist. Ct.).⁴ (*Action Item*)
- 10. Confirm the next regular Board meeting date, time, and location. (*Informational Item*)

Notes:

- ¹ By Emergency Executive Order of the Governor, issued March 16, 2020, Central Health may hold a videoconference meeting with no Board members present at a physical meeting location.
- ² 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.
- ³ Possible closed session discussion under Texas Government Code §551.072 (Deliberation Regarding Real Property).
- ⁴ Possible closed session discussion under Texas Government Code §551.071 (Consultation with Attorney).

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

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.



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BOARD MEETING

November 18, 2020

AGENDA ITEM C1

Approve the minutes of the Central Health Board of Managers October 28, 2020 meeting.

MINUTES OF MEETING – OCTOBER 28, 2020
CENTRAL HEALTH
BOARD OF MANAGERS

On Wednesday, October 28, 2020, a meeting of the Central Health Board of Managers convened in open session at 5:32 p.m. remotely by toll-free videoconference. Clerk for the meeting was Briana Yanes.

Committee members present via video and audio: Chairperson Greenberg, Vice Chairperson Bell, Manager Jones, Manager Museitif, Manager Zamora, and Manager Zuniga

Board members present via audio only: Secretary Valadez

Absent: Manager Aiken and Treasurer Oliver

PUBLIC HEARING

1. **Receive public comment on the proposed amended mandatory payment rate to be assessed on institutional healthcare providers during fiscal year 2020 under the local healthcare provider participation program (LPPF) in Travis County and how the revenue derived from those payments is to be spent as required by Texas Health & Safety Code §298E.101.**

Clerk's Notes: Discussion on this item began at 5:32 p.m. Ms. Katie Coburn, Director of Regional Healthcare Partnerships, presented on this item. The presentation included a Fiscal Year 2020 LPPF rate action summary. The presentation noted that on January 14, 2020, the initial FY 2020 rate was set at 2.38%; it was increased to 4.17% to include Uniform Hospital Rate Increase Program (UHRIP) on April 29, 2020, and today staff is recommending that it be reduced to 2.72% to account for reduced UHRIP.

Ivan Davila announced that no speakers signed up to speak at the Public Hearing.

Manager Valadez moved that the Board close the Public Hearing.

Manager Bell seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Oliver	Absent
Secretary Cynthia Valadez	For
Manager Abigail Aiken	Absent
Manager Shannon Jones	For
Manager Maram Museitif	For
Manager Guadalupe Zamora	For
Manager Julie Zuniga	For

PUBLIC COMMUNICATION

Clerk's Notes: Public Communication began at 5:37 p.m. Ivan Davila introduced 3 speakers for Public Communication.

Members of the Board heard from: Jill Ramirez, Paul Saldana, and Frank Rodriguez

CONSENT AGENDA

- C1. Approve the minutes of the Central Health Board of Managers September 2, September 9, and September 16, 2020 meetings.**
- C2. Receive and ratify Central Health Investments for September 2020.**
- C3. Adopt the Fiscal Year 2021 Central Health Investment Policy as presented by the Travis County Cash/Investment Management Department.**
- C4. Take appropriate action on revisions to the Central Health Amended and Restated Bylaws as recommended by the ad hoc Policy and Bylaws Committee.**
- C5. Take appropriate action to authorize the President & CEO to enter a contract with Colette Holt & Associates for a Central Health Historically Underutilized Business (HUB) disparity study.**

Clerk's Notes: Discussion on this item began at 5:56 p.m.

Manager Valadez moved that that the Board approve Consent Agenda items C1 through C5.

Manager Bell seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Oliver	Absent
Secretary Cynthia Valadez	For
Manager Abigail Aiken	Absent
Manager Shannon Jones	For
Manager Maram Museitif	For
Manager Guadalupe Zamora	For
Manager Julie Zuniga	For

REGULAR AGENDA

- 1. Discuss and take appropriate action on the proposed amended mandatory payment rate to be assessed on institutional healthcare providers during fiscal year 2020 under the local healthcare provider participation program (LPPF) in Travis County as required by Texas Health & Safety Code §298E.151.**

Clerk's Notes: Discussion on this item began at 5:57 p.m. Ms. Katie Coburn, Director of Regional Healthcare Partnerships, presented on this item. She noted that she did not have any new information from what was presented at the Public Hearing but would be available for questions.

Manager Valadez moved that that the Board amend the FY 2020 mandatory payment rate to be collected from institutional health care providers located in Travis County from 4.17% to 2.72% of these providers' net patient revenue.

Manager Museitif seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Oliver	Absent
Secretary Cynthia Valadez	For

Manager Abigail Aiken	Absent
Manager Shannon Jones	For
Manager Maram Museitif	For
Manager Guadalupe Zamora	For
Manager Julie Zuniga	For

2. **Receive a report on fiscal year-to-date healthcare service expenditures made by, and accept the preliminary September 2020 financial statements for, Central Health and the Community Care Collaborative and review historical average revenues and expenses for Central Health.**

Clerk's Notes: Discussion on this item began at 10:02 p.m. Mr. Lisa Owens, Deputy Chief Financial Officer, briefly presented the fiscal year-to-date healthcare service expenditures made by Central Health and the Community Care Collaborative, as well as the preliminary September 2020 financial statements. The Central Health preliminary September 2020 financial statement presentation included a balance sheet, as well as a sources and uses report. The presentation also included healthcare delivery services, operating costs, and primary and specialty care costs. The Community Care Collaborative preliminary September 2020 financial statement presentation included a balance sheet, a sources and uses report, and a healthcare delivery costs summary. The combined fiscal year-to-date healthcare service expenditures presentation included the Central Health and Community Care Collaborative healthcare service highlights, as well as healthcare specialty care highlights. These included totals of what has been spent year to date and what has been budgeted for. Lastly, Ms. Owens presented a brief review of historical average revenues and expenses for Central Health.

No motion necessary.

3. **Receive and take appropriate action on a proposal from the Health Alliance for Austin Musicians (HAAM) to expand outreach to musicians of color.**

Clerk's Notes: Discussion on this item began at 6:00 p.m. Ms. Kit Abney-Spelce, Senior Director of Eligibility Services; Ms. Reenie Collins, CEO of HAAM; and Ms. Rachel Blair, COO of HAAM, presented on this item. They outlined the HAAM proposal to expand outreach to musicians of color. They reviewed their community-focused, person-focused, and program-focused efforts. Ms. Blair highlighted that they recently completed over 500 personalized outreach phone calls specifically to musicians of color. She also noted that HAAM is launching a new Q&A and webinar series to educate members and musicians on the process through which they sign up for ACA plans and the Premium Assistance Program.

Manager Museitif moved that that the Board accept the plan presented by the Health Alliance for Austin Musicians (HAAM) to expand outreach to musicians of color, which will result in an increase to the Sendero Budget of \$640,000 as previously approved by the Board.

Manager Jones amended the motion to include a report at the February 2021 Board Meeting on HAAM's ability to accomplish enrollment for people of color by various categories.

Manager Museitif accepted the amendment.

Manager Valadez seconded the amended motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Oliver	Absent
Secretary Cynthia Valadez	For
Manager Abigail Aiken	Absent
Manager Shannon Jones	For
Manager Maram Museitif	For

Manager Guadalupe Zamora
Manager Julie Zuniga

For
For

4. Receive and take appropriate action on the President and CEO's performance evaluation tool for May 2020 – April 2021 as recommended by the Executive Committee.

Clerk's Notes: Discussion on this item began at 6:23 p.m. Ms. Susan Willars, Enterprise VP of Human Resources; Chairperson Greenberg; Vice-Chairperson Bell; and Diane McNally, Employee Resource Counsel, presented on this item. They first discussed the three opportunities for the President & CEO for the upcoming year, which include:

1. Continuing to improve coordination with the Board, CommUnityCare, Sendero, stakeholders, and elected officials regarding decision making processes and communications;
2. Devising and communicating appropriate timelines and financial plans for capital improvement projects with status updates; and
3. Outlining the plans and processes for systems-based improvements, including personnel and governance.

Lastly, they discussed whether the 360 evaluation would be part of the CEO's performance evaluation or if it would be kept separately for development purposes. Ms. McNally provided a high-level overview of a 360 evaluation.

Manager Valadez moved that the Board adopt the President and CEO's performance evaluation tool for May 2020 – April 2021 as recommended by the Executive Committee.

Manager Zuniga seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Oliver	Absent
Secretary Cynthia Valadez	For
Manager Abigail Aiken	Absent
Manager Shannon Jones	For
Manager Maram Museitif	For
Manager Guadalupe Zamora	For
Manager Julie Zuniga	For

Manager Zuniga moved that the President and CEO receive a 360-degree evaluation with participation by staff, management, and stakeholders of the Central Health Enterprise, and that the results of the 360-degree evaluation will not become part of the CEO's formal evaluation

Manager Bell seconded the motion.

Manager Zuniga withdrew her motion.

Manager Zuniga moved that the President and CEO receive a 360-degree evaluation with participation by staff, management, and stakeholders of the Central Health Enterprise, and that the 360-degree evaluation will not become part of the CEO formal evaluation, however, any results of the 360 degree evaluation can be used as applicable on other portions of the evaluation.

Manager Bell seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Oliver	Absent
Secretary Cynthia Valadez	Abstain
Manager Abigail Aiken	Absent
Manager Shannon Jones	Against

Manager Maram Museitif	For
Manager Guadalupe Zamora	For
Manager Julie Zuniga	For

5. Receive and take appropriate action on a presentation from Cool River Consulting regarding Central Health's Compensation Philosophy.

Clerk's Notes: Discussion on this item began at 7:05 p.m. Ms. Susan Willars, Enterprise VP of Human Resources, and Mr. Michael Hannah, Owner of Cool River Consulting, presented on this item. They presented the recommended revisions to the Central Health Compensation Philosophy. Ms. Willars noted that this philosophy would be updated every other year.

Manager Bell moved that the Board approve the recommended revisions to Central Health's Compensation Philosophy.

Manager Museitif seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Oliver	Absent
Secretary Cynthia Valadez	For
Manager Abigail Aiken	Absent
Manager Shannon Jones	For
Manager Maram Museitif	For
Manager Guadalupe Zamora	For
Manager Julie Zuniga	For

6. Receive and discuss a presentation on coordination and collaboration with CommUnityCare Health Centers, Austin Public Health, and Travis County Health and Human Services on COVID-19 response.

Clerk's Notes: This item was not discussed and was moved to the November Board of Managers Meeting agenda.

No motion necessary.

7. Receive a briefing and discuss Fiscal Year (FY) 2021 Strategic Objectives, per Board-adopted budget resolution or Board directive, and receive updates on specific items including:

- a. Workforce recruiting and leadership pathway strategies,
- b. Adverse impact study as it relates to a potential affirmative action plan,
- c. HUB vendor workplan, and
- d. HUB vendor contracting data.

Clerk's Notes: Discussion on this item began at 9:13 p.m. Mr. Mike Geeslin, President & CEO, presented a memo on Fiscal Year 2021 strategic objective reporting. Ms. Betsy Good, Enterprise HRIS & Compensation Analyst, and Ms. Susan Willars, Enterprise VP of Human Resources, presented workforce recruiting and leadership pathway strategies and the adverse impact study. Lastly, Ms. Lisa Owens, Deputy Chief Financial Officer, presented the HUB vendor work plan and vendor contracting data.

No motion necessary.

8. 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 development in Eastern Travis County.

Clerk's Notes: Discussion on this item began at 10:12 p.m.

At 10:12 p.m. Chairperson Greenberg announced that the Board was convening in closed session to discuss agenda item 8 and item 9 under Texas Government Code §551.072 Deliberation Regarding Real Property.

At 10:38 p.m. The Board returned to open session.

No motion necessary.

9. Receive and discuss an update on an Interlocal Cooperation Agreement between Central Health and the City of Austin for the realignment of Red River Street from 15th Street to 12th Street.

Clerk's Notes: Discussion on this item began at 10:12 p.m.

At 10:12 p.m. Chairperson Greenberg announced that the Board was convening in closed session to discuss agenda item 8 and item 9 under Texas Government Code §551.072 Deliberation Regarding Real Property.

At 10:38 p.m. The Board returned to open session.

No motion necessary.

10. Receive and discuss the 1115 Medicaid Waiver, Delivery System Reform Incentive Payment (DSRIP) 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 10:12 p.m.

At 10:12 p.m. Chairperson Greenberg announced that the Board was convening in closed session to discuss agenda item 10, 11, and 12 under Texas Government Code §551.071 Consultation with Attorney.

At 10:38 p.m. The Board returned to open session.

No motion necessary.

11. Consider and take appropriate action to authorize the Central Health President and CEO, or other duly authorized board members or personnel, during the pendency of any applicable COVID emergency order affecting operations of Central Health or until June 1, 2021 (whichever is first), to settle any liability claims, lawsuits, or similar matters after consultation with the Board Chair & Vice Chair.

Clerk's Notes: Discussion on this item began at 7:26 p.m.

At 7:26 p.m. Chairperson Greenberg announced that the Board was convening in closed session to discuss agenda item 10, 11, and 12 under Texas Government Code §551.071 Consultation with Attorney.

At 9:10 p.m. The Board returned to open session.

12. Receive briefing from outside counsel and take appropriate action on EEOC Charge No. 451-2020-01440: Wallace, Petitioner v. Central Health, Respondent.

Clerk's Notes: Discussion on this item began at 7:26 p.m.

At 7:26 p.m. Chairperson Greenberg announced that the Board was convening in closed session to discuss agenda item 10, 11, and 12 under Texas Government Code §551.071 Consultation with Attorney.

At 9:10 p.m. The Board returned to open session.

Manager Valadez moved that the Board authorize the Chair, the Vice-Chair, and Ms. Willars to continue settlement discussions with Mr. Wallace and return to the Board for approval of any negotiated resolution of claims.

Manager Zuniga seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Oliver	Absent
Secretary Cynthia Valadez	For
Manager Abigail Aiken	Absent
Manager Shannon Jones	Abstain
Manager Maram Museitif	Abstain
Manager Guadalupe Zamora	For
Manager Julie Zuniga	For

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

At 10:40 p.m. Manager Bell moved that meeting adjourn.

Manager Jones seconded the motion.

Chairperson Sherri Greenberg	For
Vice Chairperson Charles Bell	For
Treasurer Julie Oliver	Absent
Secretary Cynthia Valadez	Absent
Manager Abigail Aiken	Absent
Manager Shannon Jones	For
Manager Maram Museitif	Absent
Manager Guadalupe Zamora	For
Manager Julie Zuniga	For

The meeting was adjourned at 10:40 p.m.

Sherri Greenberg, Chairperson
Central Health Board of Managers

ATTESTED TO BY:

Cynthia Valadez, Secretary
Central Health Board of Managers



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BOARD MEETING

November 18, 2020

AGENDA ITEM C2

Receive and ratify Central Health Investments for October 2020.

AGENDA ITEM # _____

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 \$42,586,250.00 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 11 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: November 18, 2020

CHAIR, BOARD OF MANAGERS

VICE CHAIR, BOARD OF MANAGERS

MANAGER

MANAGER

MANAGER

MANAGER

MANAGER

MANAGER

MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/1/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexStar	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	46,700.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1159%
PRINCIPAL:	46,700.00	PURCHASED THRU:	TexStar
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	46,700.00	CUSIP #:	N/A
TRADE DATE:	10/1/2020	SETTLEMENT DATE:	10/1/2020

AUTHORIZED BY:

Reagan Grimes

CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/1/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexStar	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	20,300.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1159%
PRINCIPAL:	20,300.00	PURCHASED THRU:	TexStar
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	20,300.00	CUSIP #:	N/A
TRADE DATE:	10/1/2020	SETTLEMENT DATE:	10/1/2020

AUTHORIZED BY: Reagan Grimes
CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/1/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexStar	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	829,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1159%
PRINCIPAL:	829,000.00	PURCHASED THRU:	TexStar
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	829,000.00	CUSIP #:	N/A
TRADE DATE:	10/1/2020	SETTLEMENT DATE:	10/1/2020

AUTHORIZED BY:

Reagan Grimes
CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/7/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	17,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1416%
PRINCIPAL:	17,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	17,000.00	CUSIP #:	N/A
TRADE DATE:	10/7/2020	SETTLEMENT DATE:	10/7/2020

AUTHORIZED BY:

Deborah A. Lauder milk
CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM


DATE: 10/9/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	6,000,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1372%
PRINCIPAL:	6,000,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	6,000,000.00	CUSIP #:	N/A
TRADE DATE:	10/9/2020	SETTLEMENT DATE:	10/9/2020

AUTHORIZED BY:



CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

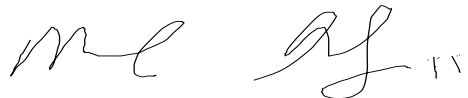
DATE: 10/13/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	5,000,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1357%
PRINCIPAL:	5,000,000.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	5,000,000.00	CUSIP #:	N/A
TRADE DATE:	10/13/2020	SETTLEMENT DATE:	10/13/2020

AUTHORIZED BY:



CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/7/2020

TIME: 9:30 AM

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	FFCB Callable	FUND NAME:	CENTRAL HEALTH OPERATING
PAR VALUE:	\$ 10,000,000.00	SAFEKEEPING NO:	P 31317
COUPON / DISCOUNT RATE	0.4300%	PRICE:	100.0000000
MATURITY DATE:	10/15/2024	US TREASURY CONVENTION YLD	0.4300%
PRINCIPAL:	\$ 10,000,000.00	PURCHASED THROUGH:	IULTIBANK SECURITIES
ACCRUED INT:	\$ 0.00	BROKER:	CAROL MACKOFF
TOTAL DUE:	\$ 10,000,000.00	CUSIP #:	3133EMCY6
TRADE DATE:	10/7/2020	SETTLEMENT DATE:	10/15/2020

AUTHORIZED BY:

Deborah A. Lauder milk

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/21/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	508,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE	N/A	PRICE:	100%
MATURITY DAT	N/A	BOND EQ. YIELD:	0.1306%
PRINCIPAL:	508,000.00	PURCHASED THRU:	TexPool
ACCRUED INT	N/A	BROKER:	N/A
TOTAL DUE:	508,000.00	CUSIP #:	N/A
TRADE DATE:	10/21/2020	SETTLEMENT DATE:	10/21/2020

AUTHORIZED BY:

Deborah A. Laudermilk
CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/27/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	10,037,500.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1324%
PRINCIPAL:	10,037,500.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	10,037,500.00	CUSIP #:	N/A
TRADE DATE:	10/27/2020	SETTLEMENT DATE:	10/27/2020

AUTHORIZED BY:

CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

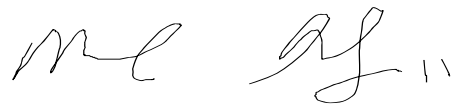
DATE: 10/30/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	31,250.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1309%
PRINCIPAL:	31,250.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	31,250.00	CUSIP #:	N/A
TRADE DATE:	10/30/2020	SETTLEMENT DATE:	10/30/2020

AUTHORIZED BY:



CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/30/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TexPool	FUND NAME:	CENTRAL HEALTH
PAR VALUE:	10,096,500.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1309%
PRINCIPAL:	10,096,500.00	PURCHASED THRU:	TexPool
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	10,096,500.00	CUSIP #:	N/A
TRADE DATE:	10/30/2020	SETTLEMENT DATE:	10/30/2020

AUTHORIZED BY:



CASH/INVESTMENT MANAGER

CENTRAL HEALTH MONTHLY INVESTMENT REPORT
PORTFOLIO STATISTICS

DATE: October 31, 2020

By Fund Type

Operating	\$	183,162,143.15	88.67%
LPPF		23,393,762.63	11.33%
Bond Proceeds		-	0.00%
Other		-	0.00%
Total Portfolio	\$	206,555,905.78	100.00%

By Security Type

Operating-

TexasDAILY	\$	28,369,781.18	15.49%
TexPool	\$	69,587,153.23	37.99%
TexSTAR	\$	7,665,239.54	4.18%
TexasTERM CP		5,000,000.00	2.73%
Non-Int Bearing Bank Account		1,190,000.00	0.65%
Certificates of Deposit		-	0.00%
Treasury Securities		-	0.00%
Government Agencies		49,995,000.00	27.30%
Commercial Paper		-	0.00%
Municipal Bonds		21,354,969.20	11.66%
Total	\$	183,162,143.15	100.00%

LPPF-

TexPool		23,393,762.63	100.00%
Total	\$	23,393,762.63	100.00%

Bond Proceeds-

TexPool	\$	-	#DIV/0!
Total	\$	-	#DIV/0!

Compared to Policy Limits

		Actual %	Guidelines
TexasDAILY	28,369,781.18	15.59%	30.00%
TexPool	69,587,153.23	38.24%	50.00%
TexSTAR	7,665,239.54	4.21%	30.00%
TexasTERM CP	5,000,000.00	2.75%	30.00%
Total LGIPS	\$ 110,622,173.95	60.79%	70.00%
Certificates of Deposit	-	0.00%	50.00%
Treasury Securities	-	0.00%	100.00%
Government Agencies	49,995,000.00	27.47%	75.00%
Commercial Paper	-	0.00%	20.00%
Municipal Bonds	21,354,969.20	11.74%	20.00%
	\$ 181,972,143.15	100.00%	

Commercial Paper by Entity as a Percentage of Portfolio

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

Municipal Bonds by Entity as a Percentage of Portfolio

Chippewa Valley School Go Bonds	\$ 2,022,800.00	1.10%	5.00%
Florida St Board Admin Fin Corp Rev	\$ 5,871,068.00	3.21%	5.00%
San Bernardino COPS	\$ 2,027,420.00	1.11%	5.00%
Harris County TX Transit	\$ 1,090,843.20	0.60%	5.00%
Oklahoma County OK ISD	\$ 4,662,698.00	2.55%	5.00%
Texas Tech Univ	\$ 525,840.00	0.29%	5.00%
City of Dallas Waterworks	\$ 5,154,300.00	2.81%	5.00%
	<u>\$ 21,354,969.20</u>	<u>11.66%</u>	<u>25.00%</u>

Investment Revenue & Accrued Interest	October-20	Fiscal YTD
Interest/Dividends-		
TexasDAILY	\$ 2,935.61	\$ 2,935.61
TexPool	5,934.50	\$ 5,934.50
TexSTAR	943.77	\$ 943.77
TexasTERM CP	0.00	\$ -
Certificates of Deposit	0.00	\$ -
Treasury Securities	0.00	\$ -
Government Agencies	165,250.00	\$ 165,250.00
Commercial Paper	0.00	\$ -
Municipal Bonds	67,000.00	\$ 67,000.00
	<u>\$ 242,063.88</u>	<u>\$ 242,063.88</u>
Discounts, Premiums, & Accrued Interest		
TexasTERM CP	\$ -	\$ -
-less previous accruals	0.00	\$ -
Certificates of Deposit	0.00	\$ -
-less previous accruals	0.00	\$ -
Treasury Securities	0.00	\$ -
-less previous accruals	0.00	\$ -
Government Agencies	13,642.20	\$ 13,642.20
-less previous accruals	(138,333.34)	\$ (138,333.34)
Commercial Paper	5,826.31	\$ 5,826.31
-less previous accruals	0.00	\$ -
Municipal Bonds	24,986.08	\$ 24,986.08
-less previous accruals	(76,172.66)	\$ (76,172.66)
	<u>\$ (170,051.41)</u>	<u>\$ (170,051.41)</u>
Total Investment Revenue & Accrued Interest	<u>\$ 72,012.47</u>	<u>\$ 72,012.47</u>

AGENDA ITEM # _____

STATE OF TEXAS

COUNTY OF TRAVIS

CENTRAL HEALTH - LPPF

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 LPPF demand,

Now, Therefore, the Board of Managers hereby orders

- 1.) that the County Treasurer of Travis County, Texas, acting on behalf of Central Health LPPF, execute the investment of these funds in the total amount of \$18,966,000.00 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 6 pages.
- 2.) that the County Treasurer, acting on behalf of Central Health LPPF, 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: November 18, 2020

CHAIR, BOARD OF MANAGERS

VICE CHAIR, BOARD OF MANAGERS

MANAGER

MANAGER

MANAGER

MANAGER

MANAGER

MANAGER

MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM



DATE: 10/13/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TEXPOOL	FUND NAME:	CENTRAL HEALTH LPPF
PAR VALUE:	8,779,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1357%
PRINCIPAL:	8,779,000.00	PURCHASED THRU:	TEXPOOL
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	8,779,000.00	CUSIP #:	N/A
TRADE DATE:	10/13/2020	SETTLEMENT DATE:	10/13/2020

AUTHORIZED BY:

CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/16/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION	TEXPOOL	FUND NAME:	CENTRAL HEALTH LPPF
PAR VALUE:	128,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE	N/A	PRICE:	100%
MATURITY DAT	N/A	BOND EQ. YIELD:	0.1352%
PRINCIPAL:	128,000.00	PURCHASED THRU:	TEXPOOL
ACCRUED INT	N/A	BROKER:	N/A
TOTAL DUE:	128,000.00	CUSIP #:	N/A
TRADE DATE:	10/16/2020	SETTLEMENT DATE:	10/16/2020

AUTHORIZED BY:

CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

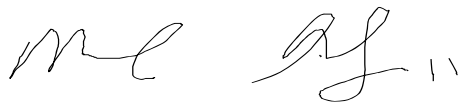
DATE: 10/19/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TEXPOOL	FUND NAME:	CENTRAL HEALTH LPPF
PAR VALUE:	55,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1347%
PRINCIPAL:	55,000.00	PURCHASED THRU:	TEXPOOL
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	55,000.00	CUSIP #:	N/A
TRADE DATE:	10/19/2020	SETTLEMENT DATE:	10/19/2020

AUTHORIZED BY:



CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/29/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TEXPOOL	FUND NAME:	CENTRAL HEALTH LPPF
PAR VALUE:	196,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1061%
PRINCIPAL:	196,000.00	PURCHASED THRU:	TEXPOOL
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	196,000.00	CUSIP #:	N/A
TRADE DATE:	10/29/2020	SETTLEMENT DATE:	10/29/2020

AUTHORIZED BY:

Reagan Grimes

CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/30/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TEXPOOL	FUND NAME:	CENTRAL HEALTH LPPF
PAR VALUE:	84,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1309%
PRINCIPAL:	84,000.00	PURCHASED THRU:	TEXPOOL
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	84,000.00	CUSIP #:	N/A
TRADE DATE:	10/30/2020	SETTLEMENT DATE:	10/30/2020

AUTHORIZED BY:



CASH/INVESTMENT MANAGER

CENTRAL HEALTH
INVESTMENT DEPARTMENT
SECURITY TRANSACTION FORM

DATE: 10/30/2020

TIME: 10:30

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	TEXPOOL	FUND NAME:	CENTRAL HEALTH LPPF
PAR VALUE:	9,724,000.00	SAFEKEEPING NO:	N/A
CPN/DISC RATE:	N/A	PRICE:	100%
MATURITY DATE	N/A	BOND EQ. YIELD:	0.1309%
PRINCIPAL:	9,724,000.00	PURCHASED THRU:	TEXPOOL
ACCRUED INT:	N/A	BROKER:	N/A
TOTAL DUE:	9,724,000.00	CUSIP #:	N/A
TRADE DATE:	10/30/2020	SETTLEMENT DATE:	10/30/2020

AUTHORIZED BY:

Reagan Grimes

CASH/INVESTMENT MANAGER

CENTRAL HEALTH - LPPF INVESTMENT REPORT
PORTFOLIO STATISTICS

DATE: October 31, 2020

By Fund Type

LPPF	\$	23,393,762.63	100.00%
Total Portfolio	\$	<u>23,393,762.63</u>	<u>100.00%</u>

By Security Type

LPPF-

TexasDAILY	\$	-	0.00%
TexPool		23,393,762.63	100.00%
TexSTAR	\$	-	0.00%
TexasTERM CP	\$	-	0.00%
Non-Int Bearing Bank Account	\$	-	0.00%
Certificates of Deposit	\$	-	0.00%
Treasury Securities	\$	-	0.00%
Government Agencies	\$	-	0.00%
Commercial Paper	\$	-	0.00%
Municipal Bonds	\$	-	0.00%
Total	\$	<u>23,393,762.63</u>	<u>100.00%</u>

LPPF Investment Revenue & Accrued Interest

October-20

Fiscal YTD

Interest/Dividends-

TexasDAILY	0.00	\$	-
TexPool	1,210.36	\$	1,210.36
TexSTAR	0.00	\$	-
TexasTERM CP	0.00	\$	-
Certificates of Deposit	0.00	\$	-
Treasury Securities	0.00	\$	-
Government Agencies	0.00	\$	-
Commercial Paper	0.00	\$	-
Municipal Bonds	0.00	\$	-

LPPF Total Investment Revenue & Accrued Interest

\$ 1,210.36

\$ 1,210.36



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

November 18, 2020

REGULAR AGENDA ITEM 1

Receive a presentation and discuss coordination and collaboration with CommUnityCare Health Centers, Austin Public Health, and Travis County Health and Human Services on COVID-19 response.



MEMORANDUM

To: Central Health Board of Managers
CC: Perla Cavazos; Megan Cermak
From: Mike Geeslin
Date: October 22, 2020
Re: Agenda Item 1- Report on coordination and collaboration on COVID-19 response
Informational Item

Overview

The pandemic caused by COVID-19 prompted a community-wide response in Travis County that involves several government and non-government organizations. The discussion pursuant to Agenda Item 5 is in response to the Board's request for additional information about how Central Health coordinates with other partners and their respective roles in the pandemic response.

Details

The Board established the following strategic objective in the Fiscal Year 2021 Budget Resolution:

Support ongoing COVID-19 response efforts for the benefit of Central Health funded patients, including support of clinical partners' testing operations, contact tracing, vaccination efforts to reduce seasonal flu spread and utilization of critical care resources, outreach and education in high-risk zip codes and communities, and other mitigation efforts.

At its October 2020 meeting, the Board will hear from Central Health staff, CommUnityCare, Austin Public Health, and Travis County Health and Human Services. The conversation will provide insight into the following:

1. Each organization's role and responsibility in the pandemic response
2. Highlights and/or major accomplishments
3. Lessons learned

This presentation is designed to provide a better understanding of how we work together as part of the response efforts coordinated through local emergency authority.

Recommendation or Action

None at this time.

###



CENTRAL HEALTH



Community COVID Response

Mike Geeslin, Stephanie Hayden, Sherri Fleming & Jaeson
Fournier

October 27, 2020



@CentralHealthTX

Central Health's Role and Alignment

- Remote Work Environment, with limited exception
- All Operations Functional: As a health care district and joint operations shared with CommUnity Care and Sendero (e.g., Joint Tech, HR, Facilities)
- Community Support
 - **Communications** - High risk zip codes, multi-lingual; flu
 - **Contact Tracing** - Support of CUC
 - **Testing Site** - Logistical support for CUC
 - **PPE Campaign** - Community Partnerships



CENTRAL HEALTH



CommUnityCare



SENDERO
HEALTH PLANS



@CentralHealthTX

Central Health's Role and Alignment

- Continued management and operation of Medical Access Program + Call Center; mission fulfillment



- Health care districts have somewhat undefined role in a public health emergency
- We aligned our strengths with local Emergency Operations Command as a government agency
- ...for the benefit of the safety net population



CENTRAL HEALTH



CommUnityCare



SENDERO
HEALTH PLANS



@CentralHealthTX



COVID-19 Update

Central Health Board Meeting

STEPHANIE Y. HAYDEN, LMSW

DIRECTOR

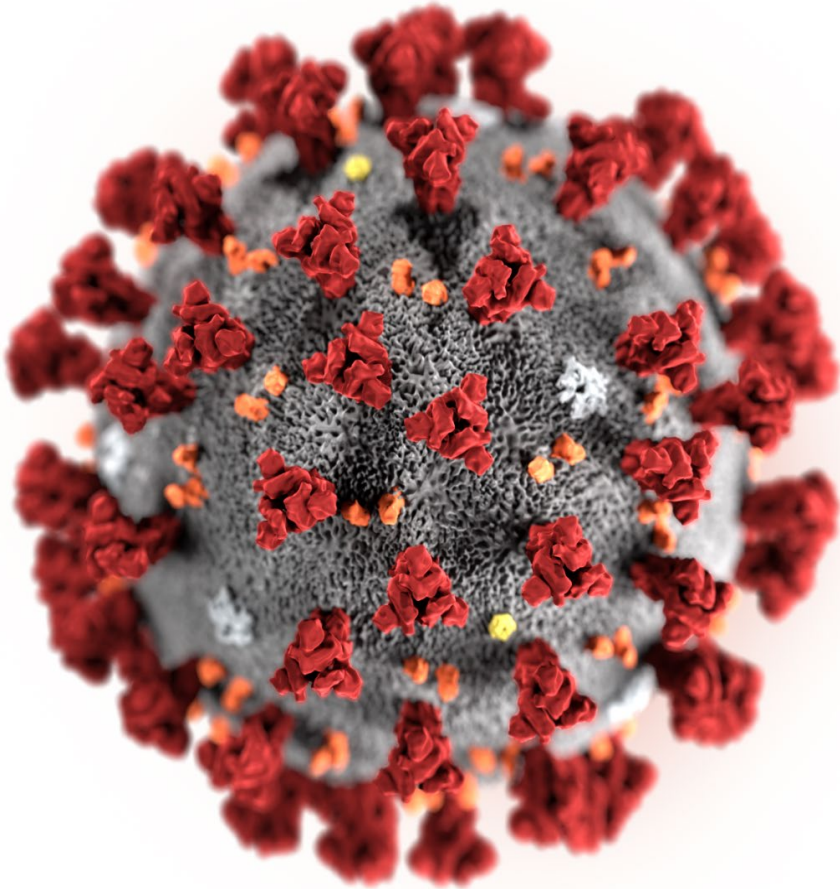
NOVEMBER 17, 2020



Presentation Overview

- Public Health Response
- Social Services Branch
- COVID-19 Data
- COVID-19 Vaccine Distribution
- Texas Department of State Health Services COVID-19 Vaccine Plan

COVID-19 Response



- ❖ Department Operations Center
- ❖ Emergency Operations Center
 - ❖ Formation of strike teams and task forces through the EOC
- ❖ Epidemiology and Surveillance are conducting contact tracing for all positive cases within Travis county.
- ❖ Partnering with healthcare providers
- ❖ Testing platform
- ❖ Medical Hotline

Social Services Branch

- EOC – COVID-19



Outreach, Financial and Supportive Services

- Food Access
- Increase behavioral health services and counseling opportunities
- Partner Agencies
- Outreach Efforts
 - Email information to social services distribution list
 - Certified Minority- & Women-Owned construction businesses
 - Emailed construction business owners registered and/or certified within local database
 - Mailing information to community
 - Flyers provided directly to clients
 - Phone calls made to contacts
- Website
 - Dashboards for desktop and mobile
- Financial Assistance
 - Business Owners
 - High Risk Workers
 - RISE 1.0
 - RISE 2.0
 - RENT
 - Austin Energy program
- Targeted Efforts
- Television and Radio marketing

The next four slides
will be data slides.
This is a holding
space for the four
slides.

COVID-19: Risk-Based Guidelines

Recommended thresholds 7-day average hospital admits		Practice Good Hygiene	Maintain Social Distancing	Wear Facial Coverings	Higher Risk Individuals Aged 65+, diabetes, high blood pressure, heart, lung and kidney disease, immunocompromised, obesity			Avoid Gatherings	Avoid Non-Essential Travel	Avoid Dining/ Shopping	Workplaces Open
		Stay Home If Sick			Avoid Gatherings	Avoid Non-Essential Travel	Avoid Dining/ Shopping				
		Avoid Sick People									
0	Stage 1	●			Greater than 25		Except with precautions	Gathering size TBD			All businesses
< 10	Stage 2	●	●	●	Greater than 10		Except as essential	Greater than 25			Essential and reopened businesses
10 - 39	Stage 3	●	●	●	Social and greater than 10	●	Except as essential	Social and greater than 10			Essential and reopened businesses
40 - (70 to 123)*	Stage 4	●	●	●	Social and greater than 2	●	Except as essential	Social and Greater than 10	●	Except expanded essential businesses	Expanded essential businesses
> (70 - 123)* (depending on rate of increase)	Stage 5	●	●	●	Outside of household	●	Except as essential	Outside of household	●	Except as essential	Essential businesses only

* The exact hospitalization average trigger will depend on the rate of increase. A faster increase in the daily average will trigger stage 5 risk recommendations when the number reaches the lower end of this range.

Use this color-coded alert system to understand the stages of risk. This chart provides recommendations on what people should do to stay safe during the pandemic. Individual risk categories identified pertain to known risks of complication and death from COVID-19. This chart is subject to change as the situation evolves.



BIOPHARMA

LEADER'S PLEDGE

- Leaders sign pledge - according to a press release dated September 8, 2020.
- The pledge was signed by the chief executives of American drug makers Johnson & Johnson, Merck, Moderna, Novavax and Pfizer, and European companies AstraZeneca, BioNTech, GlaxoSmithKline and Sanofi.
- “Pledge to make the safety and well-being of vaccinated individual’s top priority”.
- “Continue to adhere to high scientific and ethical standards regarding the conduct of clinical trials and the rigor of manufacturing processes”.
- “Only submit for approval or emergency use authorization after demonstrating safety and efficacy through a Phase 3 clinical study that is designed and conducted to meet requirements of expert regulatory authorities such as FDA”.
- “Work to ensure a sufficient supply and range of vaccine options, including those suitable for global access”.
- Food and Drug Administration (FDA) approval.

Vaccine Distribution Coalition

Austin and Travis
County

This effort will have an equity framework to reach target populations.

- Key partners:
 - City, County and other Governmental staff
 - Chief Equity Officer
 - Community Organizations
 - Local Mental Health Authority
 - Community Support and Advocates
 - Health-care Providers
- Goals:
 - Develop plans and strategies to reach the desired level of vaccination coverage for our community
 - Identify Priority Populations
 - Community Messaging and Engagement

COVID-19 Vaccination Plan

Texas

- Texas Department of State Health Services released their plan last week.
- They are encouraging providers (public and private) to sign up to administer vaccine to the public.
- Phase Approach
 - Phase 1: Potentially limited vaccine available (November-December)
 - Phase 2: Large Number of Doses available (January – July)
 - Phase 3 Likely Sufficient supply (July- October)
 - Phase 4: Sufficient supply (October onward)
- The department will utilize Austin Salesforce for vaccine management.
- Vaccine will be free



Questions?

STEPHANIE Y. HAYDEN, LMSW
DIRECTOR

TRAVIS COUNTY HEALTH AND HUMAN SERVICES UPDATE



CENTRAL HEALTH BOARD OF MANAGERS

October 28, 2020



COVID-19 SUPPORT

Partnered with APH in response

Co-Lead on Social Services Branch

County Community Centers remained operational, serving virtually

Home-Visiting Programs continued to support families virtually

COVID-19 SUPPORT



- Virtual Summer Employment Program
- Support to Seniors through Coming Of Age
(Virtual Volunteer Appreciation Event)
- Expansion Of Basic Needs/Emergency Food

Travis County CRF Allocations

- Received a total of \$61,147,507.20
- Allocated across the following:
 - ▣ \$10,000,000 TCTX Thrive Small Business Grant Program (April 28)
 - ▣ \$10,000,000 TC HHS Rental Assistance (May 12)
 - ▣ \$7,333,920 Allocation to Small Cities (June 29)
 - ▣ \$5,000,000 - *Food Access, Workforce Development, Outreach, Child Care and TCTX Serve (August 25)*
 - ▣ \$8,813,587.20 County Joint Response
 - ▣ \$20,000,000 County Direct Response

TCTX SERVE

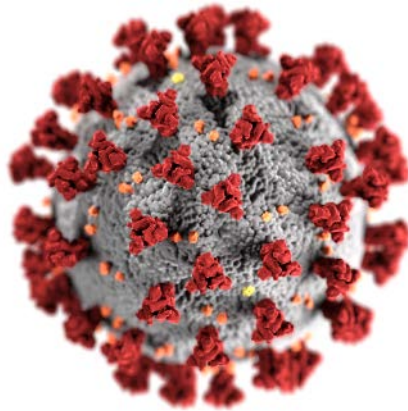


- Grant program to provide relief to non-profit social service providers in response to COVID-19
 - ▣ Funded by Coronavirus Relief Fund (CRF) -
 - ▣ Building on EDSI – TCTX Thrive
 - ▣ Partner with BCL of Texas
 - ▣ As of 10-28-20, the total for all requests is \$2,715,648.76. Of those, \$250,000 is associated with applicants that have been deemed ineligible, pending any appeals.
 - ▣ Potentially 30 agencies, up to \$50,000.

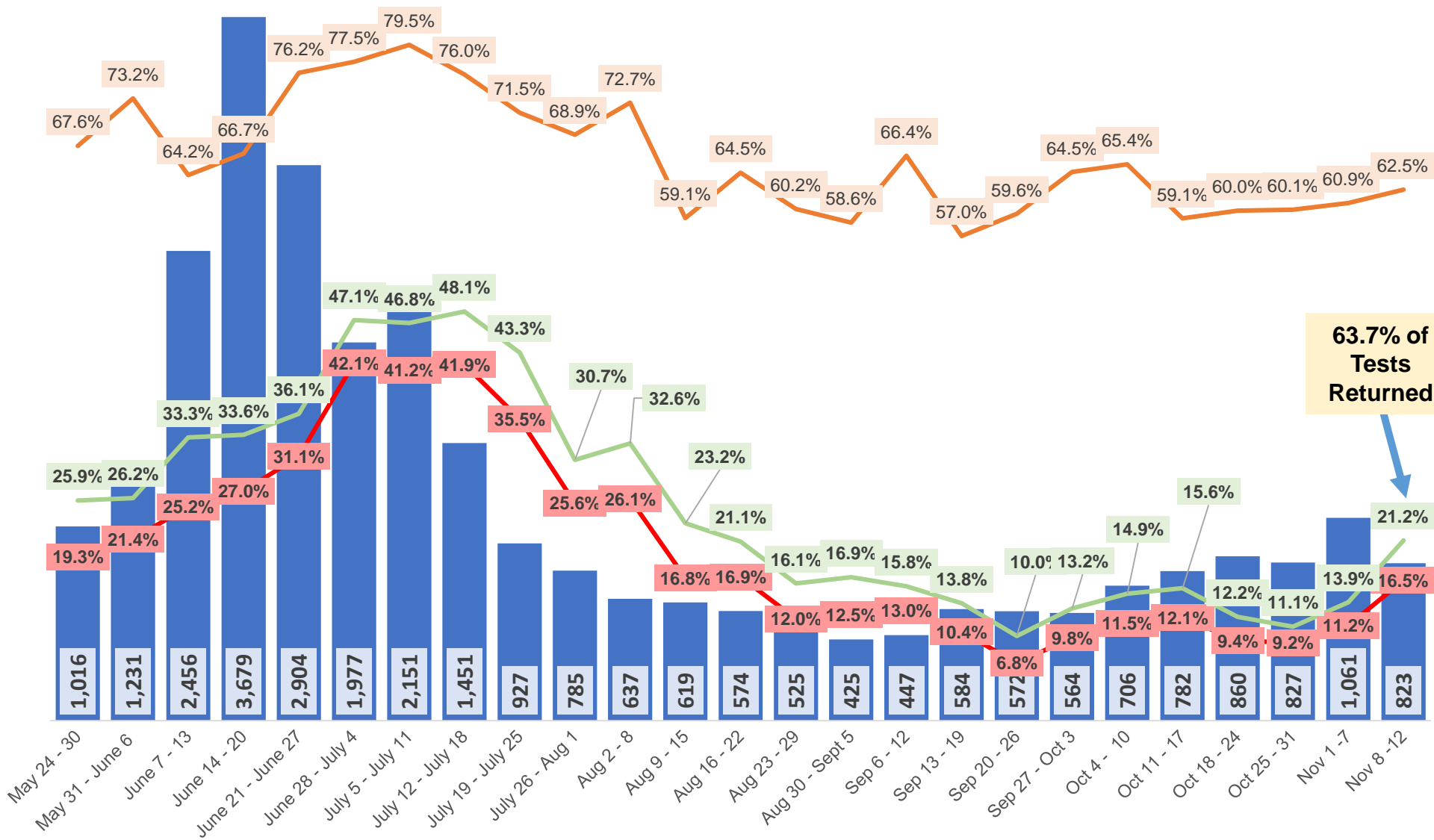


Coronavirus Response Update

November 18th, 2020

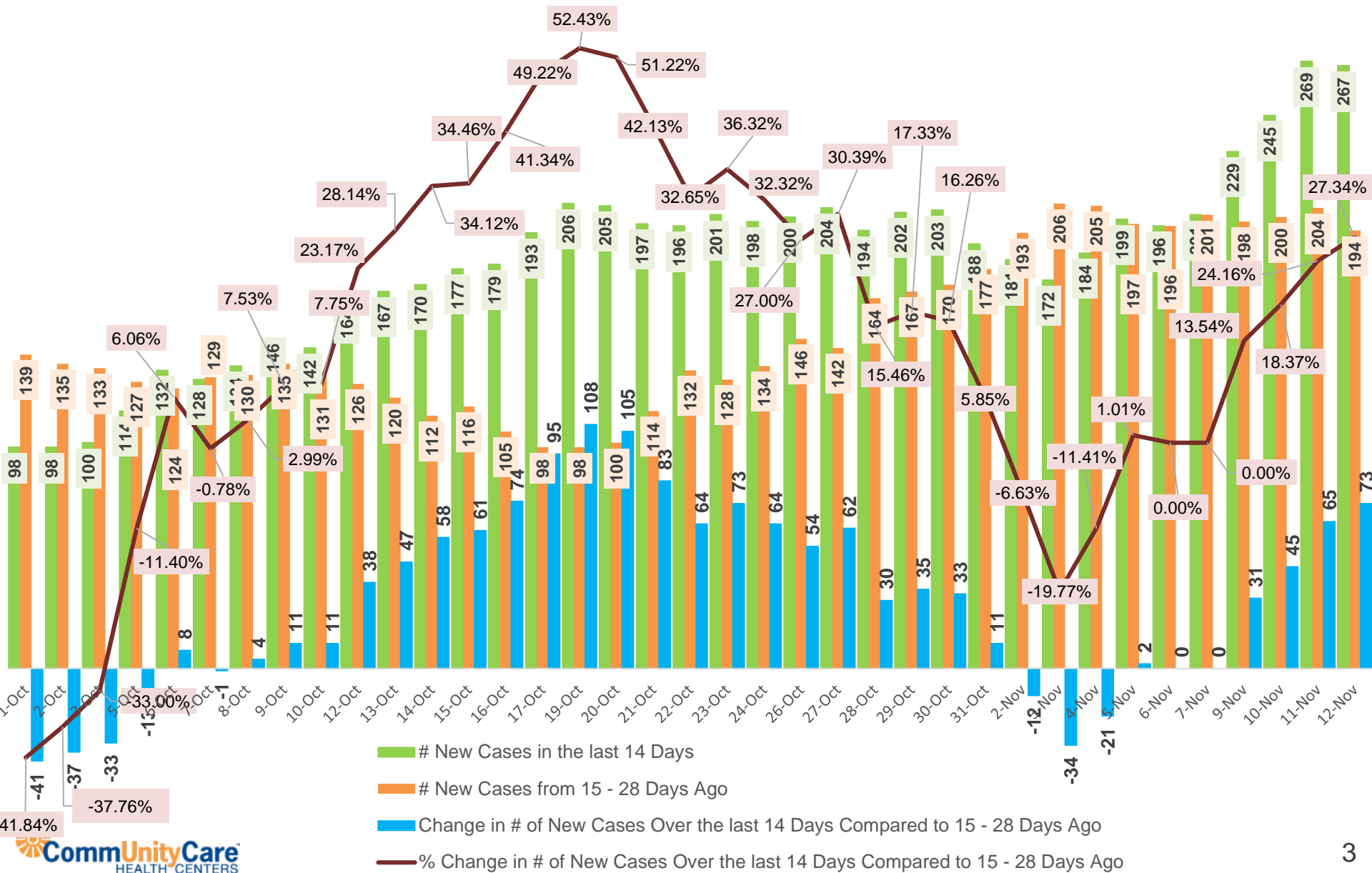


Coronavirus Testing and Positivity Rate by Week Through November 14, 2020



**63.7% of
Tests
Returned**

Change in # of New Cases Over the last 14 Days Compared to 15 - 28 Days Ago



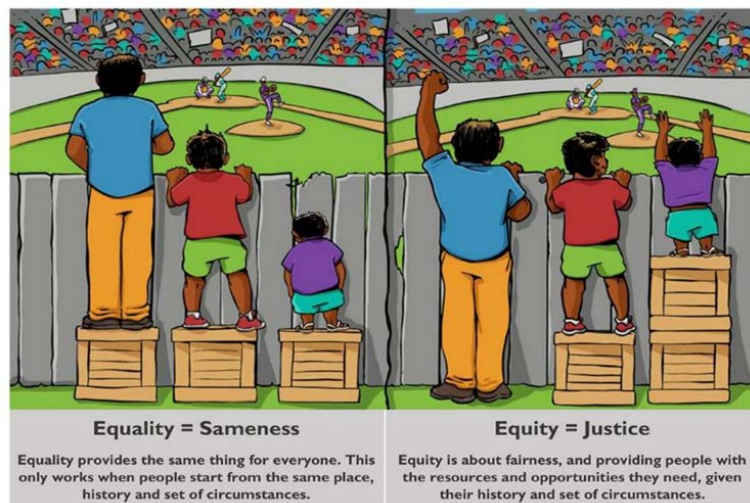
CommUnityCare Response to COVID

To date:

CommUnityCare has provided over 36,000 coronavirus PCR Tests since mid-March.

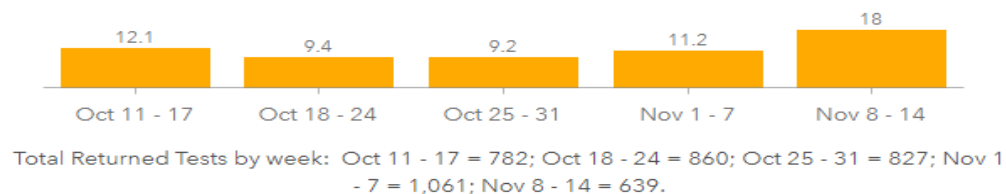
- ❖ African Americans represent 7.6% of tests provided with a positivity rate of 11%.
- ❖ Asians represent 1.7% of tests provided with a positivity rate of 12.3%.
- ❖ Latinos represent 67.1% of tests provided with a positivity rate of 30.1%.
- ❖ Native Americans represent 0.6% of tests provided with a positivity rate 17.4%.
- ❖ Native Hawaiian/Pacific Islanders represent 0.5% of tests provided with a positivity rate of 20.4%.
- ❖ White non-Latinos represent 14.6% of tests provided with a positivity rate of 8.0%.
- ❖ Over 13,000 or 38.5% of tests provided have been provided to CommUnityCare patients with a positivity rate of 24.3%. African Americans represent the highest proportion of CUC patients vs non-CUC individuals tested (i.e. 40.3% vs. 39.7%).
- ❖ Travis County residents represent 83.6% of tests provided with a positivity rate of 24.1%. Of note, 84.8% of Travis County residents tested were uninsured and had a higher positivity rate of 25.3% compared to a positivity rate of 17.4% for insured Travis County residents tested.
- ❖ Uninsured individuals represent 85.1% of all tests provided with a positivity rate of 24.8%.

Health Equity First and Foremost

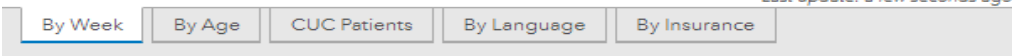


Coronavirus Dashboard

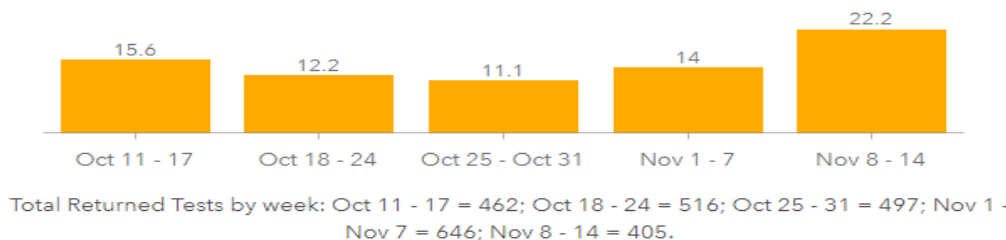
% Positivity Rate for the last 5 Weeks For All Races/Ethnicities



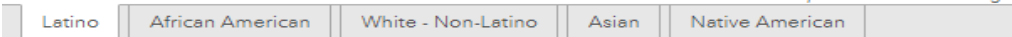
Last update: a few seconds ago



% Positive Tests for the last 5 Weeks Latino Ethnicity - All Races



Last update: a few seconds ago



Other COVID-19 Related Initiatives

- ❖ Influenza vaccine campaign
 - Have capacity to provide 55,000 plus flu vaccines through our health centers.
 - Thanks to support from Central Health we have capacity to provide another 10,000 flu vaccines through our COVID drive-thru locations to Travis County uninsured residents.
- ❖ COVID-19 Vaccine
 - Registering sites / providers to provide COVID-19 vaccines.
- ❖ PPE Distribution Campaign through our health centers in partnership with Central Health.
- ❖ Provided weekly COVID-19 Community Updates on our COVID-19 related initiatives.
- ❖ Recently initiated on-site COVID-19 Antigen tests.
- ❖ Maintained access to care throughout the pandemic thanks to rapid implementation of telehealth initiatives. Only 5.5% less patients served for the 12-month period ending September 30, 2020 compared to the same prior period despite the local COVID-19 shutdown.

Special Thanks to Our Team!





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.

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BOARD MEETING

November 18, 2020

REGULAR AGENDA ITEM 2

Discuss and take appropriate action on proposed Calendar Year 2021 meeting dates for Central Health Board of Managers.



CENTRAL HEALTH

MEMORANDUM

To: Central Health Board of Managers
From: Perla Cavazos, Deputy Administrator, and Briana Yanes, Board Governance Manager
Cc: Mike Geeslin, President and CEO
Date: November 9, 2020
Re: Discuss and take appropriate action on proposed Calendar Year 2021 meeting dates for Central Health Board of Managers. ACTION ITEM

Overview:

With 2021 approaching the Board of Managers will need to discuss and set Calendar Year 2021 meeting dates. A proposed 2021 calendar has been created for the Board of Managers' regular meetings, Budget and Finance Committee, Strategic Planning Committee, and Executive Committee meetings following the same pattern as previous years. We would also like to ensure these dates and times continue to work for your schedules.

Action Requested:

Staff requests approval of the proposed Calendar Year 2021 meeting dates for Central Health Board of Managers at the November 18, 2019 Board Meeting.

2021 Central Health Board of Managers Meeting Schedule- *subject to revision*

Strategic Planning Committee- 2:00pm, Budget and Finance Committee- 5:30pm, Executive Committee- 4:30pm, BOM- 5:30pm

January 2021	
Strategic Planning Committee	January 13, 2021
Budget and Finance Committee	January 20, 2021
Board of Managers	January 27, 2021
Executive Committee	January 27, 2021

February 2021	
Strategic Planning Committee	February 10, 2021
Budget and Finance Committee	February 17, 2021
Board of Managers	February 24, 2021
Executive Committee	February 24, 2021

March 2021	
Strategic Planning Committee	March 10, 2021
Budget and Finance Committee	March 24, 2021
Board of Managers	March 31, 2021
Executive Committee	March 31, 2021

April 2021	
Strategic Planning Committee	April 14, 2021
Budget and Finance Committee	April 21, 2021
Board of Managers	April 28, 2021
Executive Committee	April 28, 2021

Spring break for AISD & UT Austin: March 15-19

May 2021	
Strategic Planning Committee	May 12, 2021
Budget and Finance Committee	May 19, 2021
Board of Managers	May 26, 2021
Executive Committee	May 26, 2021

June 2021	
Strategic Planning Committee	June 9, 2021
Budget and Finance Committee	June 16, 2021
Board of Managers	June 23, 2021
Executive Committee	June 23, 2021

July 2021- No meetings unless necessary

August 2021	
Strategic Planning Committee	August 4, 2021
Budget and Finance Committee	August 11, 2021
Board of Managers	August 25, 2021
Executive Committee	August 25, 2021

September 2021	
Public Hearing #1	September 8, 2021
Board of Managers	September 15, 2021
Executive Committee	September 15, 2021

October 2021	
Strategic Planning Committee	October 13, 2021
Budget and Finance Committee	October 20, 2021
Board of Managers	October 27, 2021
Executive Committee	October 27, 2021

November 2021	
Strategic Planning Committee	November 10, 2021
Budget and Finance Committee	November 17, 2021
Board of Managers	November 17, 2021
Executive Committee	November 17, 2021

December 2021	
Strategic Planning Committee	December 8, 2021
Budget and Finance Committee	December 15, 2021
Board of Managers	December 15, 2021
Executive Committee	December 15, 2021



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BOARD MEETING

November 18, 2020

REGULAR AGENDA ITEM 3

Receive an update and take appropriate action on proposed Central Health Enterprise Legislative Guiding Principles for the upcoming legislative session.

DRAFT
Legislative Guiding Principles for the
87th Regular Session of the Texas Legislature (2021)

Central Health was created by the taxpayers of Travis County in 2004 to ensure the availability of quality health care to low-income uninsured residents. Central Health is an Enterprise and as such has affiliated organizations – CommUnityCare Health Centers (CUC) and Sendero Health Plans, Inc. (Sendero) – to help us build and maintain the fabric of our publicly accountable safety-net health system. As partners, we all operate with a common objective to create access to care for those in our community who need it most, and we also share a common vision of improved health outcomes, enhanced patient experience, advancement of population health, and reductions to the cost of care.

To help ensure we carry out our mission and vision, we support many of the legislative priorities of several statewide advocacy organizations, including the Teaching Hospitals of Texas (THOT), the Texas Hospital Association (THA), the Texas Association of Community Health Centers (TACHC), and the Texas Association of Community-Based Health Plans (TACHP). We also adhere to the following legislative guiding principles as we embark on the 87th Regular Legislative Session.

Guiding Principles:

- **COVID-19 Response** – Ensure local health systems have the resources needed to respond to the COVID-19 pandemic.
- **Health Care Financing** – Protect health care financing streams that support vulnerable populations, including Medicaid, 1115 Waiver funds, Medicaid directed payments and supplemental hospital funding programs. Ensure any health care system redesign or financial policy reforms do not harm the District’s patient population. Seek new revenue to help fund care for the District’s population and strategic priorities.
- **Behavioral and Mental Health** – Ensure appropriate access to, and funding for, a comprehensive array of behavioral and mental health care services.
- **Coverage Gap** – Close the Affordable Care Act-related health care access coverage gap for individuals below the federal poverty level. Support broadening coverage programs, such as postpartum Medicaid coverage, and expanding eligibility and continuity of coverage.
- **Health Care Innovations** – Support health care programs, services, initiatives, and technologies that will improve patient experiences, advance population health, increase access to care and reduce costs of care.
- **Health Information Technology** – Support initiatives to enhance operations and funding.
- **Integrated Health Care** – Integrate physical and mental health care delivery to provide a comprehensive array of “person-centered” health care services.
- **Local Control** – Retain local control of health care delivery, tax rates, tax appraisals, debt issuance and revenue caps.
- **Managed Care** – Support efforts to effectively manage patient care. Also, ensure that managed care rates are appropriate, actuarially sound, and developed through a transparent regulatory process.
- **Reimbursement Rates** – Improve health care services reimbursement rates to adequately compensate providers for the services they provide to patients and encourage more providers to participate in programs like Medicaid and CHIP. Also ensure that managed care rates are appropriate, actuarially sound, and developed through a transparent regulatory process.
- **Operational Needs** – Address operational issues as necessary.
- **Prevention and Wellness** – Encourage health care prevention and health wellness among Travis County residents.
- **Women’s Health and Family Planning Programs** – Ensure Travis County residents have access to necessary women’s health care and family planning services.

- **Workforce Expansion** - Expand the health care workforce team to care for a growing population of vulnerable Travis County residents. Ensure the workforce is diverse and culturally competent to reflect our diverse community.



State Government Update

Central Health Board

November 2020

Texas Voter Turnout and Presidential Race

Total voter turnout statewide grew by 2.25 million voters

- 2016 - 8.97 million
- 2020 - 11.22 million

Despite significantly increased turnout the partisan split remained similar

- 2016 - Trump 52.23% ; Clinton 43.24%
- 2020 - Trump 52.18% ; Biden 46.39%

However Democrats increased their raw votes by a larger margin than Republicans

- Republicans gains – 1.17 million
- Democrat gains – 1.33 million

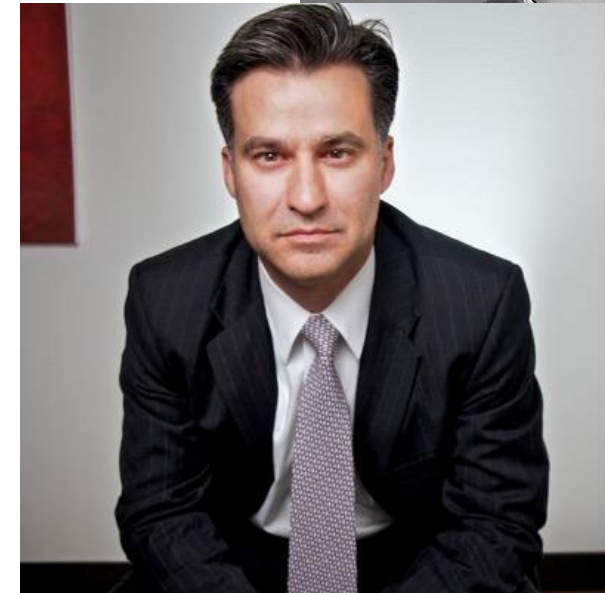
Texas Senate

With only one seat in play there wasn't much focus on state Senate races and one seat was expected to flip

- Rep. Roland Gutierrez was successful in returning a traditionally Democratic seat to the Ds
- Sen. Pete Flores flipped the seat from R to D in a special election

This flip moves the needle for Senate Democrats

- Senate makeup – 18 R / 13 D (D + 1)



Texas House

All eyes were on House Democrats who were expected to flip the House majority with a Democratic net gain between 9-12 seats

Democrats who had never seen more than a few hundred thousand in contributions were raising money in the millions

Despite all this the House partisan makeup remains exactly the same – 83 R / 67 D

However one incumbent from each party was unseated, both from Harris County



HD 134 – Houston



HD 132 – Katy



Texas House Speaker's Race

A House Speaker's race with 9 filed candidates and high expectations of a new party in power came to a close days after the elections with Rep. Dade Phelan (R-Beaumont) announcing he had requisite support to become the new speaker

Several challengers attempted to continue the fight, but it was all over the Thursday after election day

Phelan's speakership follows on the heels of Dennis Bonnen's and includes many of the same members who put Bonnen in power two years ago



Speaker Dade Phelan

Phelan first came to the Capitol in 1994 as a staffer during his time at the University of Texas ('98)

Phelan worked for Rep. Mark Stiles, Sen. Tommy Williams, and Congressman Dick Armey before moving back to SE TX to become a senior partner and broker at family-owned Phelan Investments

As one of the top lieutenants to former Speaker Dennis Bonnen, Phelan served one term as State Affairs Chairman

He has proven to be a talented legislator and has been involved in passing key legislation since his election to the House in 2015; he begins his 4th term in January



A Look at Session

If the current COVID spike continues, the 87th Legislative Session will take place during the worst period of the pandemic

Phelan has named a working group of members to “review and make recommendations on legislative operations during COVID” with the goal of protecting health and safety of those involved while providing “meaningful public participation”

Safety protocols such as temperature screenings, social distancing, limited capacity and masks will be implemented

The committee process is likely to be a bottleneck due to safety protocols in effect for hearings which means fewer bills are likely to be given hearings

All signs point to some degree of limited access as well as fewer in-person meetings and more virtual

Legislators are likely to point their focus to three priority issues: the budget, redistricting and COVID/healthcare

Legislative Priorities

Budget

- With a \$4.5B deficit in the current budget and a conservatively estimated \$8-10B shortfall in the next budget expected, budget writers have a difficult task at hand next session
- Leadership has asked each agency to start their appropriations request with 5% cuts; HHSC has identified cuts without affecting client service

Redistricting

- Census data is expected to be sent to states in March or later, depending on legal challenges; legislators are unsure how much time they'll have to draw maps
- Some anticipate a special session dedicated to redistricting

COVID Response/Healthcare

- Broad coalition working to make COVID telemedicine flexibilities permanent
- Healthcare liability reforms are anticipated
- Medicaid expansion is an even bigger discussion amidst a pandemic and economic recession

Medicaid Expansion

While some form of Medicaid expansion has been discussed every session since passage of the ACA, because of increased uninsured and the pandemic, calls for expansion have grown

The Episcopal Health Foundation released two studies:

- One shows that expanding to the ACA population would cost \$6B in GR per year, but by including existing benefits under a 90/10 federal match this cost would be offset creating a net positive \$54M per year in Texas and bring in \$5.4B in new federal dollars to Texas each year
- The second study shows projected county level impacts which include: 30,400 new Travis County residents enrolled in Medicaid of 40,000 newly eligible residents and \$172M to Travis County in new federal funding

Expectations that the House could pass an expansion bill have diminished with Democrats not making inroads toward a majority, but chances are still higher such a bill could pass the House than is expected in the Senate

Regardless, conservative legislators are beginning to see the groundswell of support amongst constituents for expanding health care coverage; particularly in “unsafe” urban and suburban districts



Marsha Jones & Kyle Mauro
512-480-8962
mjones@hillcopartners.com
kmauro@hillcopartners.com



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BOARD MEETING

November 18, 2020

REGULAR AGENDA ITEM 4

Receive and discuss the following focus reports related to the Strategic Objective in section (ii)1.b. of the Resolution Adopting the Fiscal Year 2021 Budget:

- a. Current workforce demographics and levels, including new hires and turnover;
- b. Enterprise EEOC category reports and demographic background; and
- c. Compensation report.



MEMORANDUM

To: Central Health Board of Managers
From: Susan Willars, Enterprise Vice President of Human Resources
CC: Mike Geeslin, President and CEO
Date: 11/11/2020
Re: Workforce Demographic Reporting: Fiscal Year End 2020

Background

For the past year, Central Health has been providing the Board of Managers with information regarding workforce demographic data, including turnover, gender distribution, and racial/ethnic makeup of current, new and terminated employees. We recently conducted an evaluation to determine the efficacy of the data and the method of reporting.

Information

After exploring various alternatives, we have selected a dashboard-format to allow for more concise reporting, but more importantly to expound upon the data we are able to present.

Below is a data chart comparing the current and new formats for your review:

Current Format Type of data shared in FY2020	New Format Type of data that will be shared in FY2021
<i>Central Health Proper</i> <ul style="list-style-type: none">- Turnover by Race & Ethnicity: Quarterly- New Hire by Race/Ethnicity: Quarterly- Termination by Race/Ethnicity: Quarterly- Gender/Gender Identity Distribution: Quarterly- Management Category Breakdown: Biannual	<i>Enterprise Data:</i> Dashboard 1 – Headcount: Quarterly <ul style="list-style-type: none">- Headcount by entity- Tenure of staff by entity- Generation Information by entity <i>Enterprise Data:</i> Dashboard 2 – Turnover Data: Quarterly <ul style="list-style-type: none">- T/O Enterprise total and by entity.- Voluntary termination reasons – Enterprise & Central Health proper- Enterprise and Central Health tenure of existing employees

	<p><i>Central Health Proper</i> Dashboard 3 - Diversity Data: Quarterly</p> <ul style="list-style-type: none"> - Gender distribution - Hires by gender - Terms by gender - Hires by Race/Ethnicity - Termination by Race/Ethnicity - Snapshot of the population served by Race/Ethnicity <p><i>Central Health Proper</i> Dashboard 4 – EEO-4 Racial/Ethnic Distribution by EEO-4 Categories: Biannual</p>
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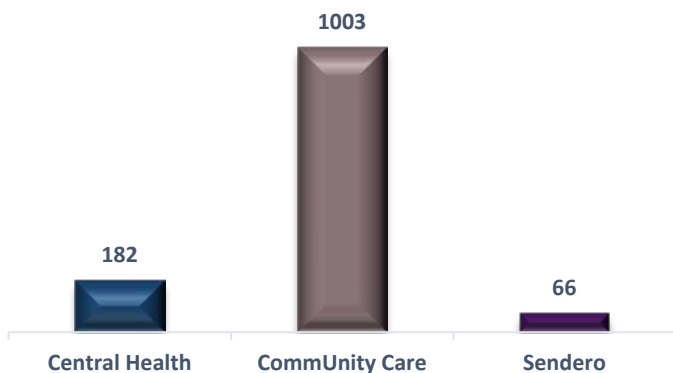
The enclosed dashboards provide an overview of the fiscal year end 2020. For fiscal year 2021, the dashboards 1-3 (Headcount, Turnover, Diversity) will be shared with the Managers on a quarterly basis, and dashboard 4 (EEO-4) will be shared on a biannual basis.

Enclosures

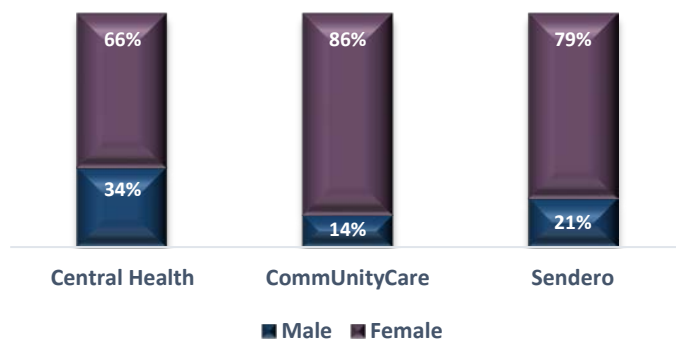
Workforce demographic dashboards for Fiscal Year 2020 end-of-year reporting.

Headcount Demographics FY20 = 1,251 Employees

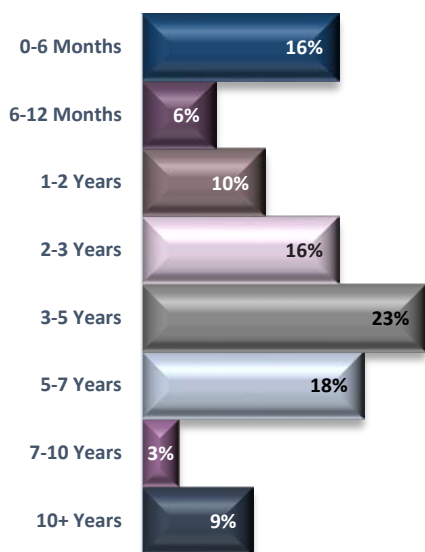
Headcount by Entity



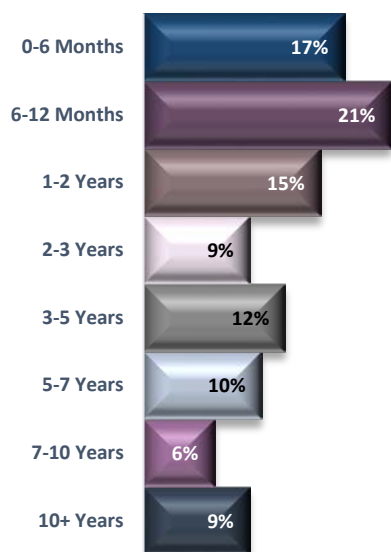
Male/Female Ratio by Entity



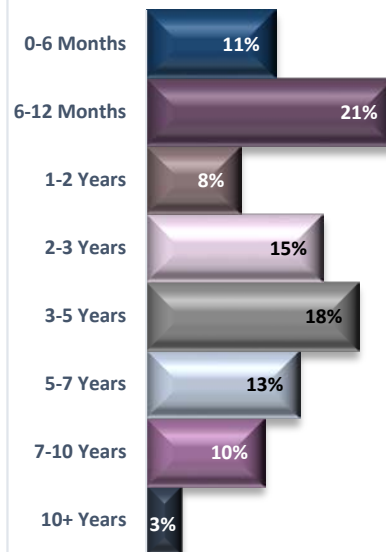
Tenure - Central Health



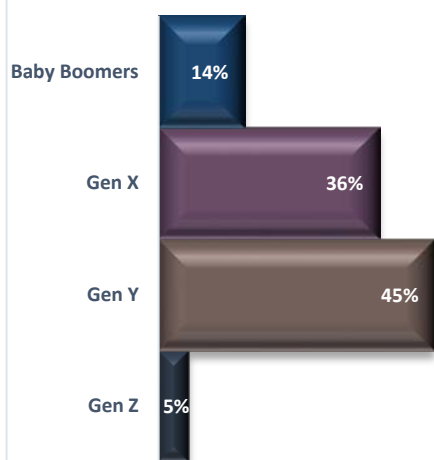
Tenure - CommUnity Care



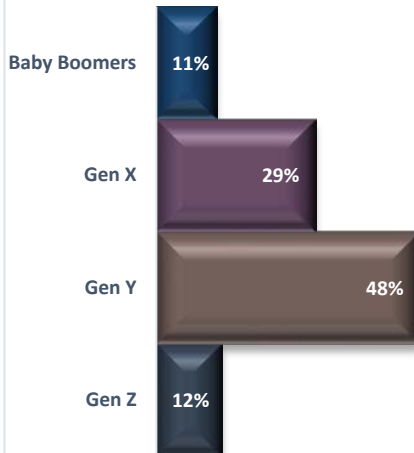
Tenure - Sendero



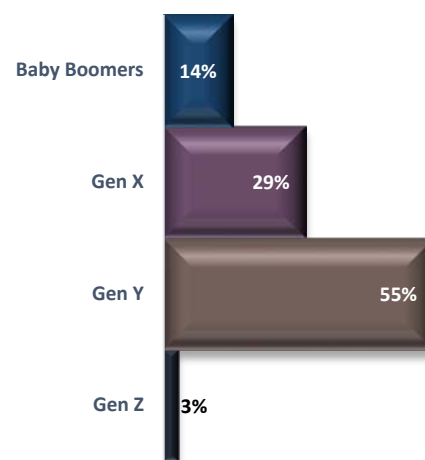
Generation Info - Central Health



Generation Info - CommUnity Care

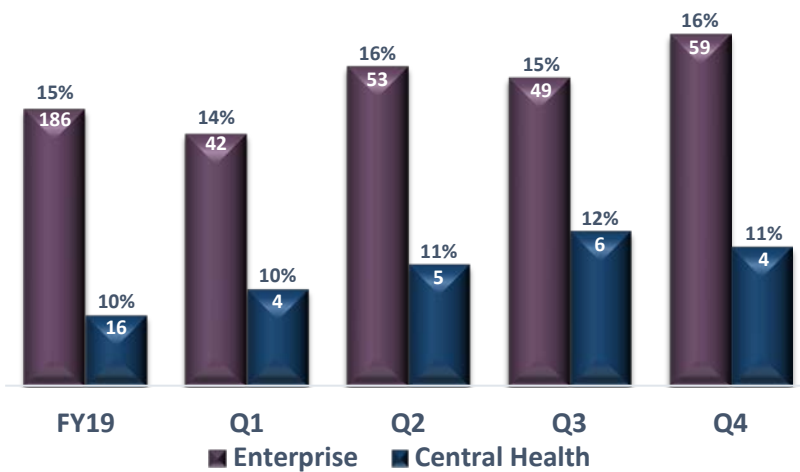


Generation Info - Sendero



Enterprise & Central Health Voluntary Turnover

FY19 & Q1-EOY Voluntary Turnover Rate



Enterprise Voluntary Turnover Rate

FY 2019 = 15%

FY 2020 = 16%

Central Health Voluntary Turnover Rate

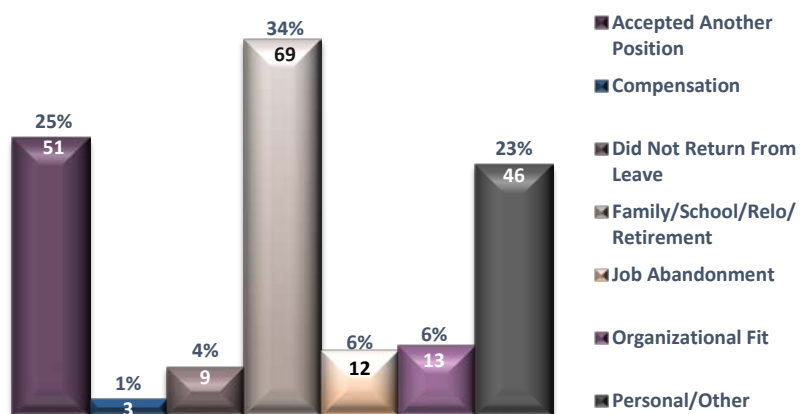
FY 2019 = 10%

FY 2020 = 11%

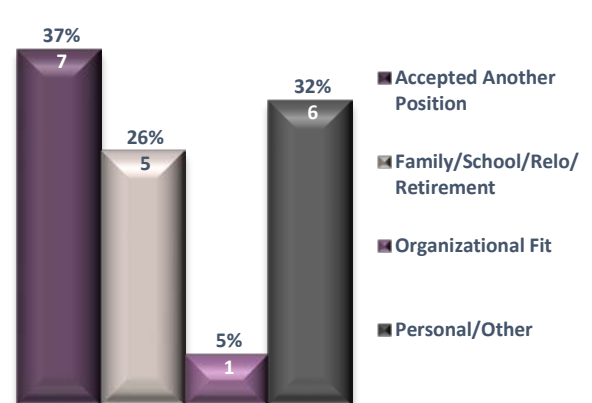
CUC and Sendero Voluntary Turnover for FY 2020 by Quarter

Organization	Q1	Q2	Q3	Q4
CommUnity Care	15%	17%	17%	18%
Sendero	0%	7%	4%	3%

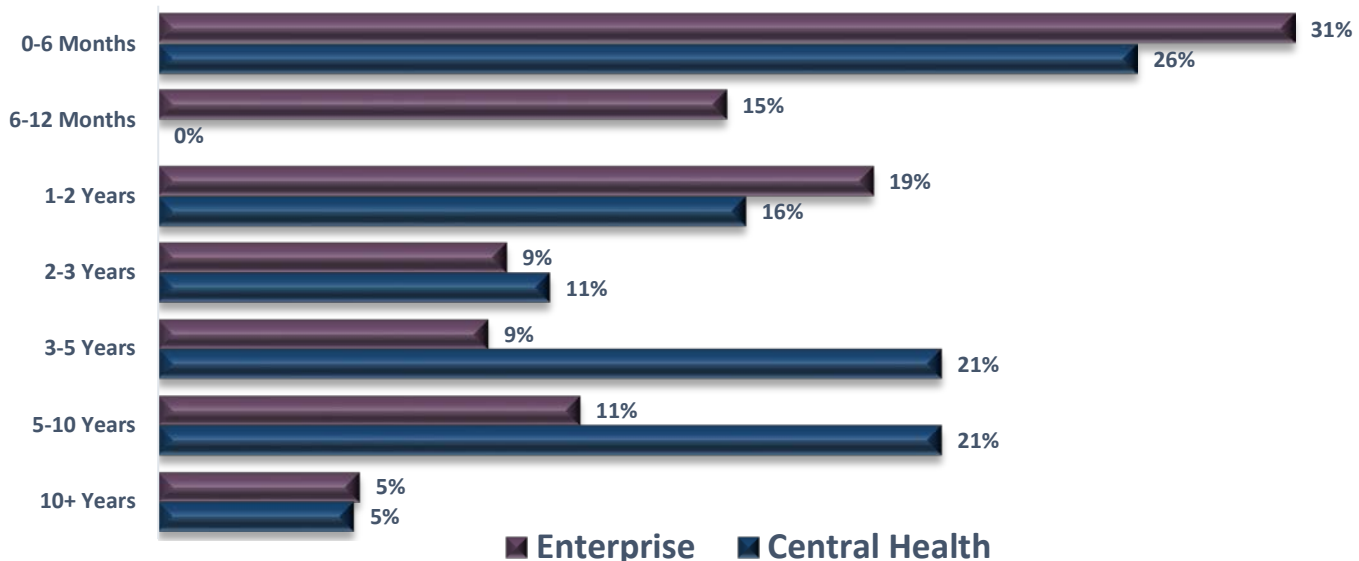
Enterprise Voluntary Turnover Reasons (203 Employees)



Central Health Voluntary Turnover Reasons (19 Employees)

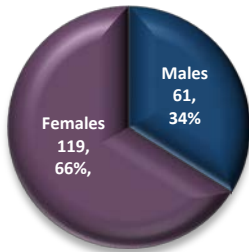


Tenure of Exiting Employees

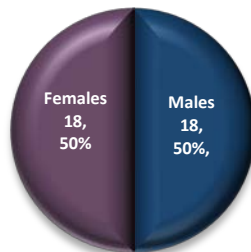


Central Health Diversity for FY 2020

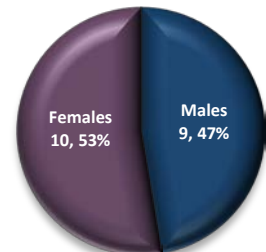
Gender Distribution



Hires by Gender



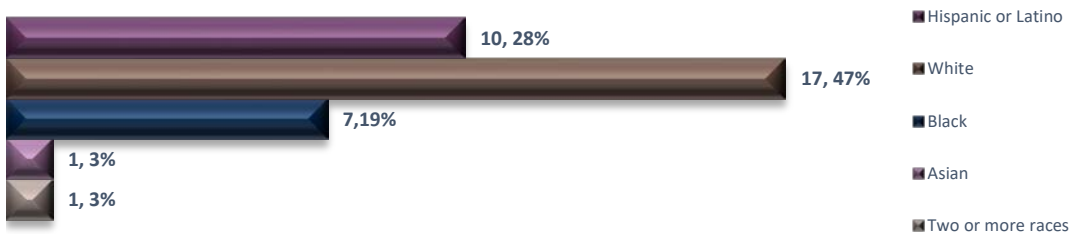
Terms by Gender



Racial/Ethnic Distribution



Hires by Race/Ethnicity



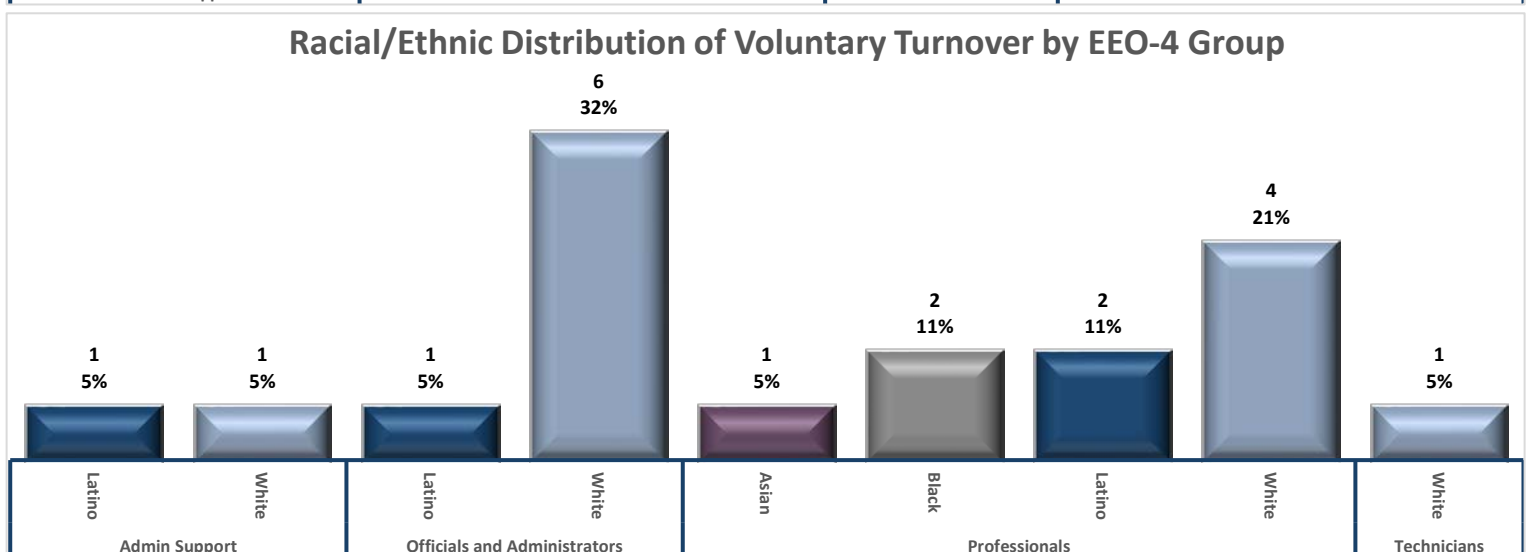
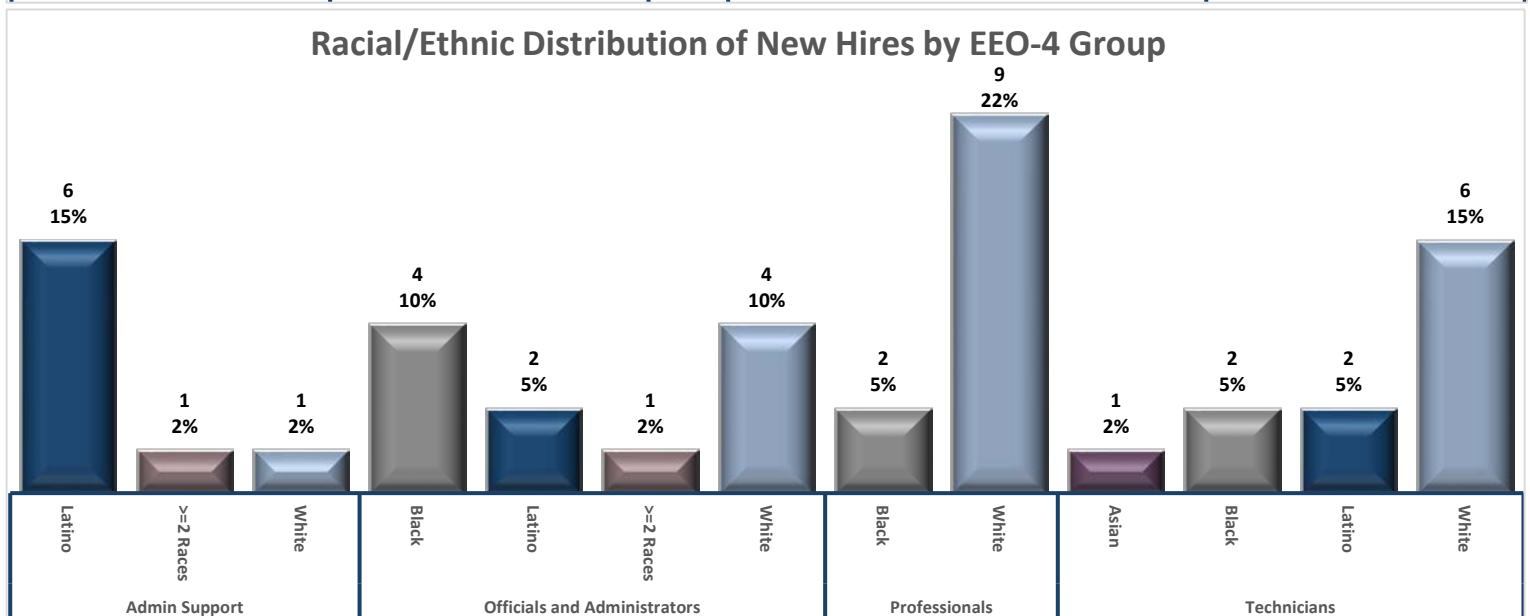
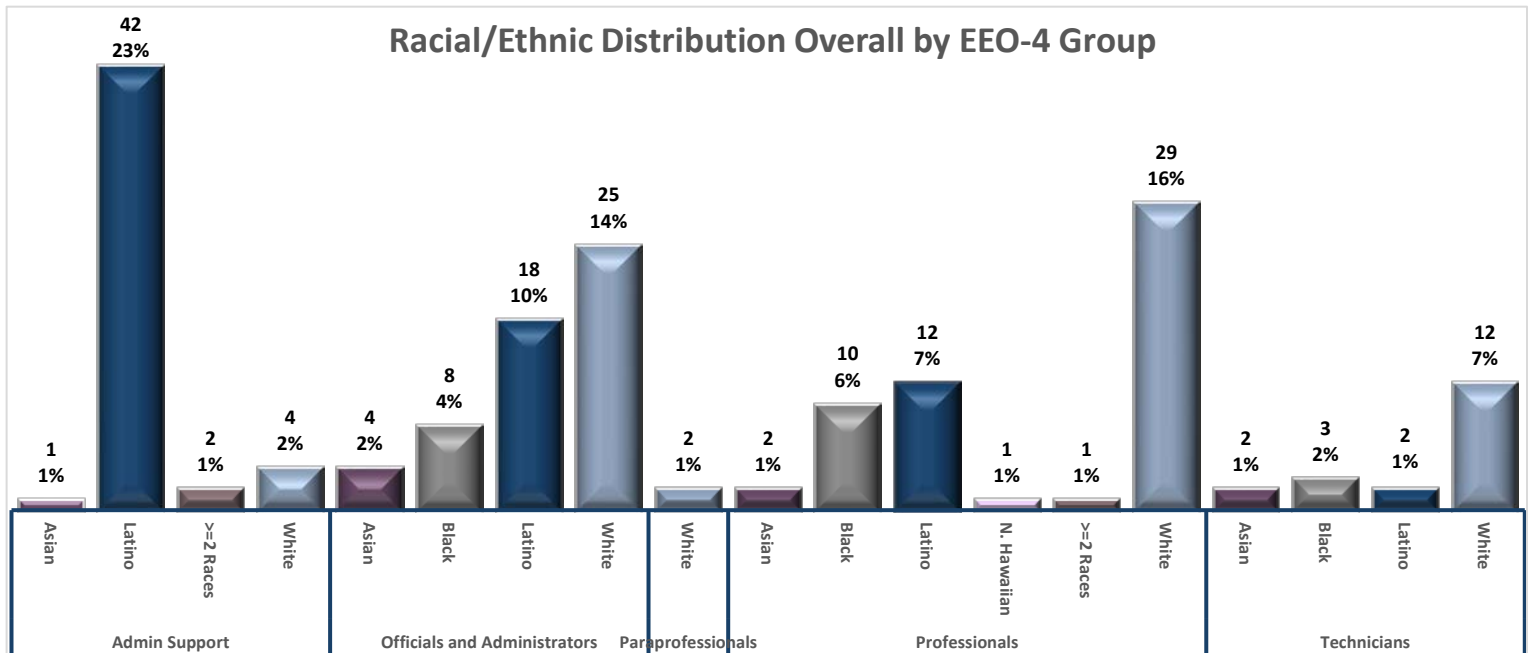
Terms by Race/Ethnicity



Population Served by Race/Ethnicity



Central Health Staff Diversity Distribution for FY 2020





MEMORANDUM

To: Central Health Board of Managers
From: Susan Willars, Enterprise Vice President of Human Resources
CC: Mike Geeslin, President and CEO
Date: 11/17/2020
Re: Compensation Program

Compensation Program Updates

In the past few months, several positive enhancements have been made to Central Health's Compensation Program:

- In the Spring of 2020, the Central Health Enterprise changed its minimum wage from \$13.64 to \$15.04 to match the City of Austin's Living Wage of \$15.00.
- In September 2020, Central Health purchased a compensation software that will:
 - Automate the surveying of positions
 - Be able to price positions to multiple survey sources at one time
 - Facilitate an equity assessment based on race/ethnicity and gender/gender identity
- In October 2020, the Central Health Board of Manager's approved the compensation philosophy that will allow the Enterprise to price direct patient care and *hard to fill* positions at the 62.5% percentile of the labor markets compared to the former 50% percentile.

Enclosure

Enclosed is the annual review of the Central Health proper salary scales, which includes the average salary, average years of experience, and the breakdown of the workforce demographics within each grade.

Our goal is to complete a review of the market based on the revisions made to the compensation philosophy, and to perform an internal equity assessment of all positions within each grade by the end of December. We hope to present our finding to the Board of Managers in January.



CENTRAL HEALTH

Central Health Compensation Program



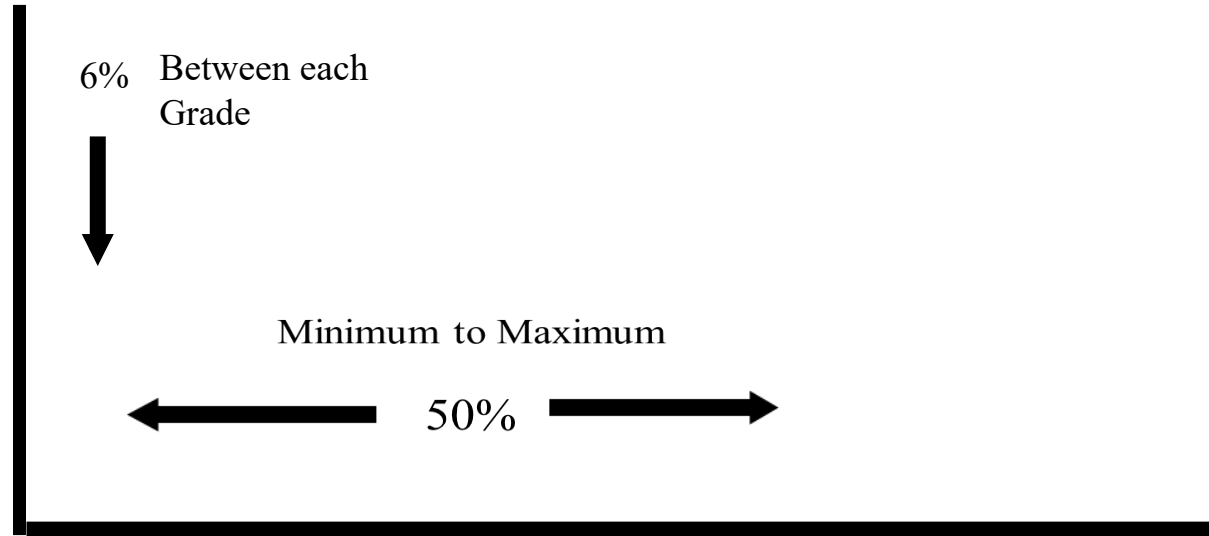
@CentralHealthTX

Compensation Parameters:

- 3 Consistent Structures
 - Non-Exempt
 - Exempt: Non-Management
 - Exempt: Leadership & Executives
- The Enterprise Minimum Wage was raised to \$15.04
- New Compensation Philosophy: Approved October 2020
- Market review of positions will be completed in December



Salary Structure Non-Exempt



Grade NEH008								
<div> <div>Minimum</div> <div>\$15.04</div> </div> <div> <div>Midpoint</div> <div>\$18.80</div> </div> <div> <div>Maximum</div> <div>\$22.55</div> </div>								
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	0	0	0	0	0
Females:	4	0	0	0	0	0	0	4
Avg. Rate:	\$19.43							\$19.43
Avg. Yrs. Exp:	9.2							9.2

Grade NEH009								
<div> <div>Minimum</div> <div>\$15.94</div> </div> <div> <div>Midpoint</div> <div>\$19.92</div> </div> <div> <div>Maximum</div> <div>\$23.91</div> </div>								
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	1	0	0	0	0	0	0	1
Avg Rate:	\$18.80							\$18.80
Avg Yrs Exp:	10.7							10.7
Females:	3	0	0	0	0	0	0	3
Avg. Rate:	\$20.16							\$20.16
Avg. Yrs. Exp:	11.9							11.9



Grade NEH011								
Minimum \$17.91		Midpoint \$22.39		Maximum \$26.86				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	0	0	0	0	0
Females:	4	0	0	0	0	0	0	4
Avg. Rate:	\$22.80							\$22.80
Avg. Yrs. Exp:	9.25							9.25

Grade NEH012								
Minimum \$18.98		Midpoint \$23.73		Maximum \$28.47				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	1	0	0	1	0	0	0	2
Avg. Rate:	\$21.83			\$25.01				\$23.42
Avg. Yrs. Exp:	5.25			12.3				8.775
Females:	13	0	0	0	0	0	1	14
Avg. Rate:	\$22.47						\$24.39	\$23.43
Avg. Yrs. Exp:	7.3						10.4	8.85

Grade NEH013								
Minimum \$20.12		Midpoint \$25.15		Maximum \$30.18				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	3	0	0	0	0	0	0	3
Avg. Rate:	\$27.86							\$27.86
Avg. Yrs. Exp:	12.8							12.8
Females:	4	0	0	2	0	0	0	6
Avg. Rate:	\$25.06			\$26.95				\$26.01
Avg. Yrs. Exp:	9.1			9.5				9.3

Grade NEH014								
Minimum \$21.33		Midpoint \$26.66		Maximum \$31.99				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	2	0	0	2	1	0	0	5
Avg. Rate:	\$25.65			\$25.27	\$26.66			\$25.86
Avg. Yrs. Exp:	8.9			9.75	8			8.9
Females:	3	0	0	1	0	0	0	4
Avg. Rate:	\$28.87			\$31.20				\$30.04
Avg. Yrs. Exp:	8.8			14.4				11.6



Grade NEH015								
Minimum \$22.61		Midpoint \$28.26		Maximum \$33.91				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	1	0	0	0	0	0	1	2
Avg. Rate:	\$30.04						\$27.50	\$28.77
Avg. Yrs. Exp:	11.8						7.5	9.65
Females:	1	0	0	0	0	0	0	1
Avg. Rate:	\$26.68							\$26.68
Avg. Yrs. Exp:	7.8							7.8

Grade NEH016								
Minimum \$23.97		Midpoint \$29.96		Maximum \$35.95				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	0	0	0	0	0
Females:	1	0	0	1	0	0	0	2
Avg. Rate:	\$28.77			\$30.45				\$29.61
Avg. Yrs. Exp:	8.7			9.6				9.15



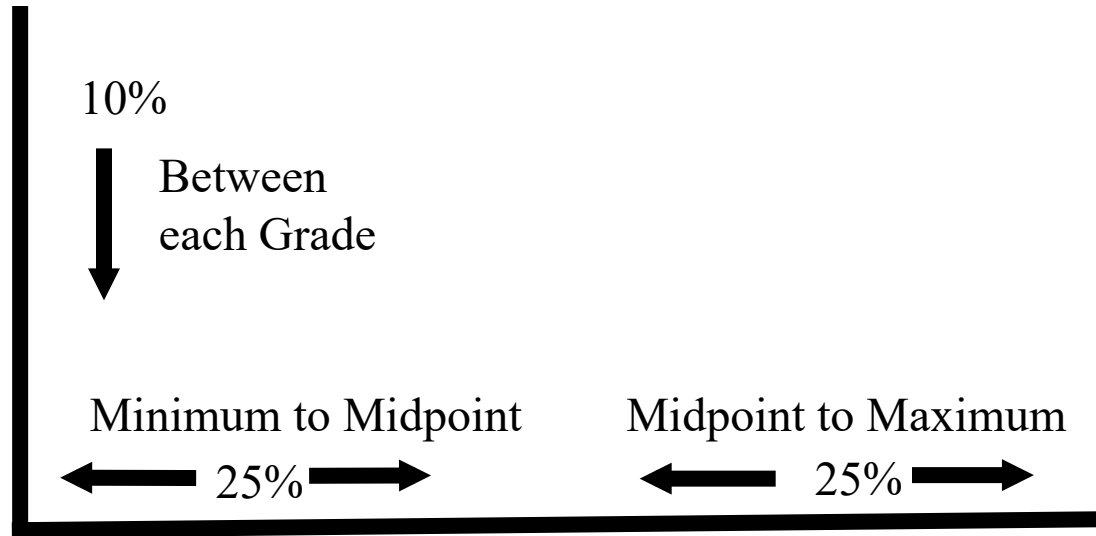
Grade NEH017								
		Minimum \$25.40	Midpoint \$31.75		Maximum \$38.11			
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	1	0	0	0	0	0	1
Avg. Rate:		\$27.77						\$27.77
Avg. Yrs. Exp:		12.3						12.3
Females:	0	1	0	0	0	0	0	1
Avg. Rate:		\$29.08						\$29.08
Avg. Yrs. Exp:		6.4						6.4

Grade NEH018								
		Minimum \$26.93	Midpoint \$33.66		Maximum \$40.39			
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	1	0	1	2	0	0	0	4
Avg. Rate:	\$38.11		\$35.12	\$32.35				\$35.19
Avg. Yrs. Exp:	17		15	10				14.0
Females:	1	1	0	3	0	0	0	5
Avg. Rate:	\$33.66	\$39.54		\$32.60				\$35.27
Avg. Yrs. Exp:	8	18		11.5 ⁶				12.5



Grade NEH020								
<div> <div>Minimum</div> <div>Midpoint</div> <div>Maximum</div> </div> <div> <div>\$30.26</div> <div>\$37.82</div> <div>\$45.38</div> </div>								
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	2	0	0	0	0	0	2
Avg. Rate:		\$37.22						\$37.22
Avg. Yrs. Exp:		7.8						7.8
Females:	1	0	0	1	0	0	0	2
Avg. Rate:	\$37.82			\$33.66				\$35.74
Avg. Yrs. Exp:	8			2.8				5.4

Salary Structure Exempt Exempt Non-Management



Grade NME019								
Minimum		Midpoint		Maximum				
\$47,788.22		\$59,735.28		\$71,682.34				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	0	0	0	0	0
Females:	0	1	0	0	0	0	0	1
Avg. Salary:	\$61,825.92							\$61,825.92
Avg. Yrs. Exp:	10.3							10.3

Grade NME020								
Minimum		Midpoint		Maximum				
\$52,567.05		\$65,708.81		\$78,850.57				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	0	0	0	0	0
Females:	2	2	0	3	0	0	0	7
Avg. Salary:	\$66,203.02	\$64,534.99	\$64,008.01					\$64,915.34
Avg. Yrs. Exp:	8.0	8.6	9.1					8.6

Grade NME021								
Minimum \$57,823.75		Midpoint \$72,279.69		Maximum \$86,735.63				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	0	0	1	0	1
Avg. Salary:						\$79,472.90		\$79,472.90
Avg. Yrs. Exp:						7.6		7.6
Females:	5	0	0	1	0	0	0	6
Avg. Salary:	\$76,616.54			\$74,118.98				\$75,367.76
Avg. Yrs. Exp:	8.6			4				6.3

Grade NME022								
Minimum \$63,606.13		Midpoint \$79,507.66		Maximum \$95,409.19				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	0	0	0	0	0
Females:	1	1	0	1	0	0	0	3
Avg. Salary:	\$75,977.98	\$66,000.22		\$80,000.18				\$73,992.79
Avg. Yrs. Exp:	5	1.3		12.1				6.1

Grade NME023								
Minimum \$69,966.74		Midpoint \$87,458.42		Maximum \$104,950.11				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	1	0	0	6	0	0	1	8
Avg. Salary:	\$89,907.48			\$80,619.85			\$99,999.90	\$90,175.74
Avg. Yrs. Exp:	10.9			6.9			12.8	10.2
Females:	3	3	0	10	0	0	0	16
Avg. Salary:	\$85,401.16	\$89,090.73		\$82,254.30				\$85,582.06
Avg. Yrs. Exp:	8.9	9.6		7.3				8.6

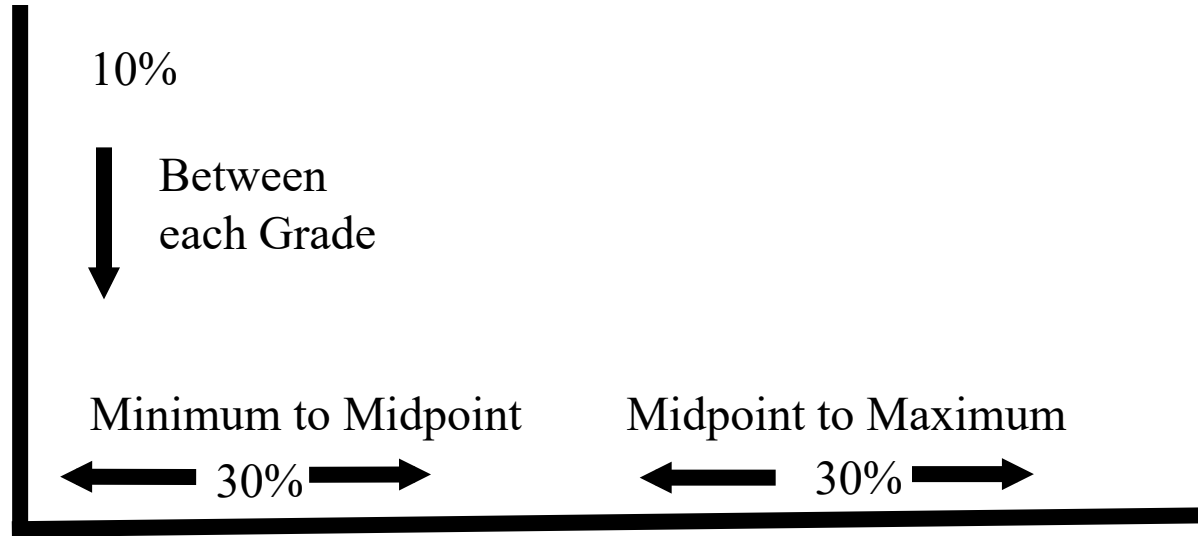
Grade NME024								
Minimum \$76,963.41		Midpoint \$96,204.27		Maximum \$115,445.12				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	1	1	0	6	0	0	0	8
Avg. Salary:	\$100,000.16	\$100,000.16		\$93,184.00				\$96,592.08
Avg. Yrs. Exp:	9.000	8.25		8.7				8.650
Females:	1	2	2	2	0	0	0	7
Avg. Salary:	\$88,507.64	\$94,255.81	\$95,255.81	\$96,933.46	10			\$93,738.18
Avg. Yrs. Exp:	5.6	7.5	9.6	11.2				8.475

Grade NME025								
	Minimum \$84,659.75		Midpoint \$105,824.69		Maximum \$126,989.63			
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	1	0	0	0	1
Avg. Salary:				\$108,787.90				\$108,787.90
Avg. Yrs. Exp:				5.3				5.3
Females:	0	0	0	1	0	0	0	1
Avg. Salary:				\$102,000.08				\$102,000.08
Avg. Yrs. Exp:				8.6				8.6

Grade NME026								
	Minimum \$93,125.73		Midpoint \$116,407.16		Maximum \$139,688.59			
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	1	1	0	1	0	0	0	3
Avg. Salary:	\$119,550.08	\$116,407.20		\$116,407.20				\$117,454.83
Avg. Yrs. Exp:	11	8.5		8.1				9.2
Females:	0	0	0	1	0	0	0	1
Avg. Salary:				\$126,043.06				\$126,043.06
Avg. Yrs. Exp:				18				18



Salary Structure Exempt Leadership & Executive Management



Grade LEX033								
Minimum \$67,760.00		Midpoint \$88,088.00		Maximum \$108,416.00				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	0	0	0	0	0
Females:	2	1	0	0	0	0	0	3
Avg. Salary:	\$87,389.77	\$77,703.60						\$82,546.69
Avg. Yrs. Exp:	13.7	14.8						14.25

Grade LEX034								
Minimum \$74,536.00		Midpoint \$96,896.80		Maximum \$119,257.60				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	2	0	0	0	2
Avg. Salary:				\$102,424.53				\$102,424.53
Avg. Yrs. Exp:				7.5				7.5
Females:	6	3	1	1	0	0	0	11
Avg. Salary:	\$106,123.12	\$101,666.85	\$108,045.34	\$109,600.92				\$106,359.06
Avg. Yrs. Exp:	14.9	9.2	2.3	10.6				9.25



Grade LEX035								
Minimum \$81,989.60		Midpoint \$106,586.48		Maximum \$131,183.36				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	1	1	1	1	0	0	0	4
Avg. Salary:	\$110,000.02	\$106,586.48	\$110,000.02	\$108,678.18				\$108,816.18
Avg. Yrs. Exp:	8.5	8.3	5.6	11.4				8.45
Females:	0	1	0	1	0	0	0	2
Avg. Salary:		\$113,189.96		\$106,586.48				\$109,888.22
Avg. Yrs. Exp:		9.8		10.6				10.2

Grade LEX036								
Minimum \$90,188.56		Midpoint \$117,245.13		Maximum \$144,301.70				
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	0	0	0	2	0	0	0	2
Avg. Salary:				\$118,886.56				\$118,886.56
Avg. Yrs. Exp:				11.3				11.3
Females:	0	1	0	2	0	0	0	3
Avg. Salary:		\$117,245.18		\$112,718.45				\$114,981.82
Avg. Yrs. Exp:		8.3		12.4	13			10.35



Grade LEX037								
		Minimum \$99,207.42		Midpoint \$128,969.64		Maximum \$158,731.87		
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	1	0	0	1	0	0	0	2
Avg. Salary:	\$128,036.48			\$146,531.32				\$137,283.90
Avg. Yrs. Exp:	20.5			12.0				16.3
Females:	2	0	1	0	0	0	0	3
Avg. Salary:	\$131,885.00		\$133,770.00					\$132,827.50
Avg. Yrs. Exp:	7.4		10.0					8.7

Grade LEX038								
		Minimum \$109,128.16		Midpoint \$141,866.60		Maximum \$174,605.05		
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:	1	0	0	1	0	0	0	2
Avg. Salary:	\$125,064.42			\$139,199.84				\$132,132.13
Avg. Yrs. Exp:	12.8			21.4				17.1
Females:	0	0	0	4	0	0	0	4
Avg. Salary:				\$141,747.13				\$141,747.13
Avg. Yrs. Exp:				10.1				10.1



All Executives								
		Minimum \$120,040.97		Midpoint \$156,053.27		Maximum \$309,323.00		
	Hispanic or Latino	Black or African American	Asian	White	American Indian/ Alaska Native	Native Hawaiian/ Other Pacific Islander	Two or More Races	Total
Males:		1	0	4	0	0	0	5
Avg. Salary:								215,515
Avg. Yrs. Exp:								20
Females:	2		1	2	0	0	0	5
Avg. Salary:								\$202,211.33
Avg. Yrs. Exp:								14.3
Breakdown:	Females 5 (2 White, 2 Hispanic or Latino & 1 Asian)				Males: 5 (4 White & 1 Black or African American)			





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.

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BOARD MEETING

November 18, 2020

REGULAR AGENDA ITEM 5

Receive and discuss an update on the EPIC Electronic Medical Record system implementation.



CENTRAL HEALTH

EPIC – EMR/EPM Board Update

John Clark, MBA

Chief Information Officer



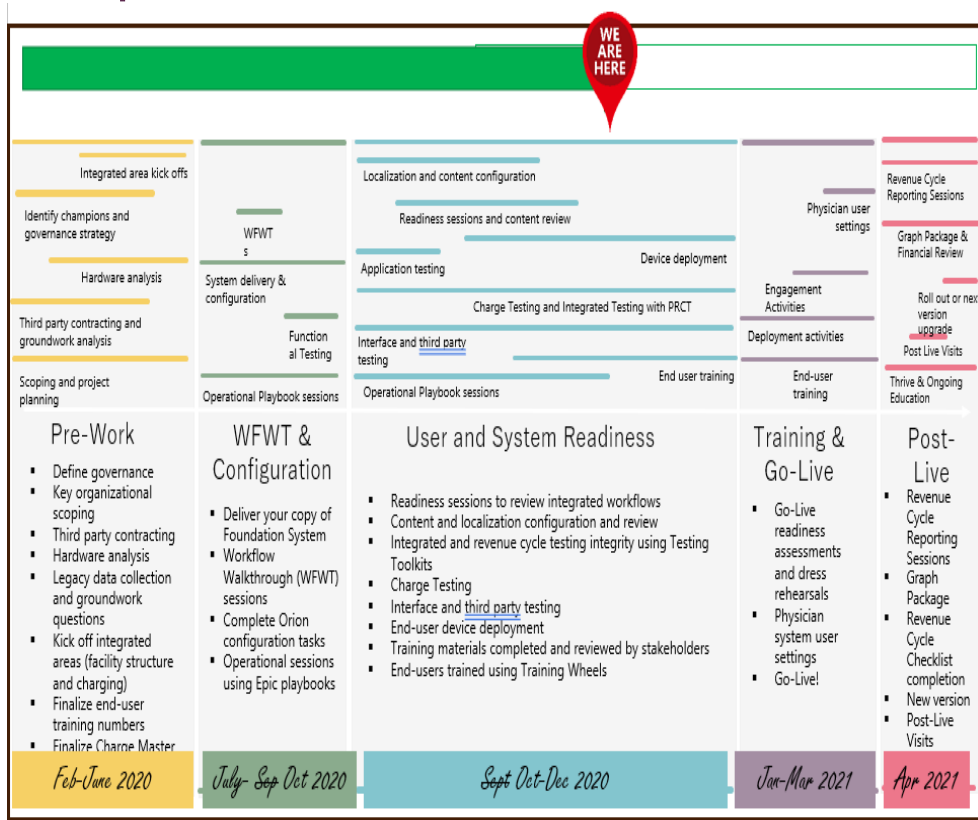
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The Beginning

- It is amazing that we have been engaged in discussions around the EMR/EPM change for well over two years.
- We are almost there!
- Selection of EPIC occurred late in the 3rd quarter early 4th quarter of FY2019
- January 2020 – The EPIC Project was kicked off
 - A number of leadership and staff from Joint Tech and CUC went to Madison, WI.
 - EPIC came to CUC for some very specific discussion to outline the goals and principles of the project.
- The work of the project really began in February of 2020.



Implementation Overview



- Currently in user and system readiness phase.
- Testing of the system build.
- Prepping and deploying equipment.
- Third party application interface/integration testing.
- Testing conversion files.



CENTRAL HEALTH



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Training registration began at the end of October

Pilot Training is underway

Currently working at many physical locations to identify training space.

Logistics planning around hardware necessary for training is underway

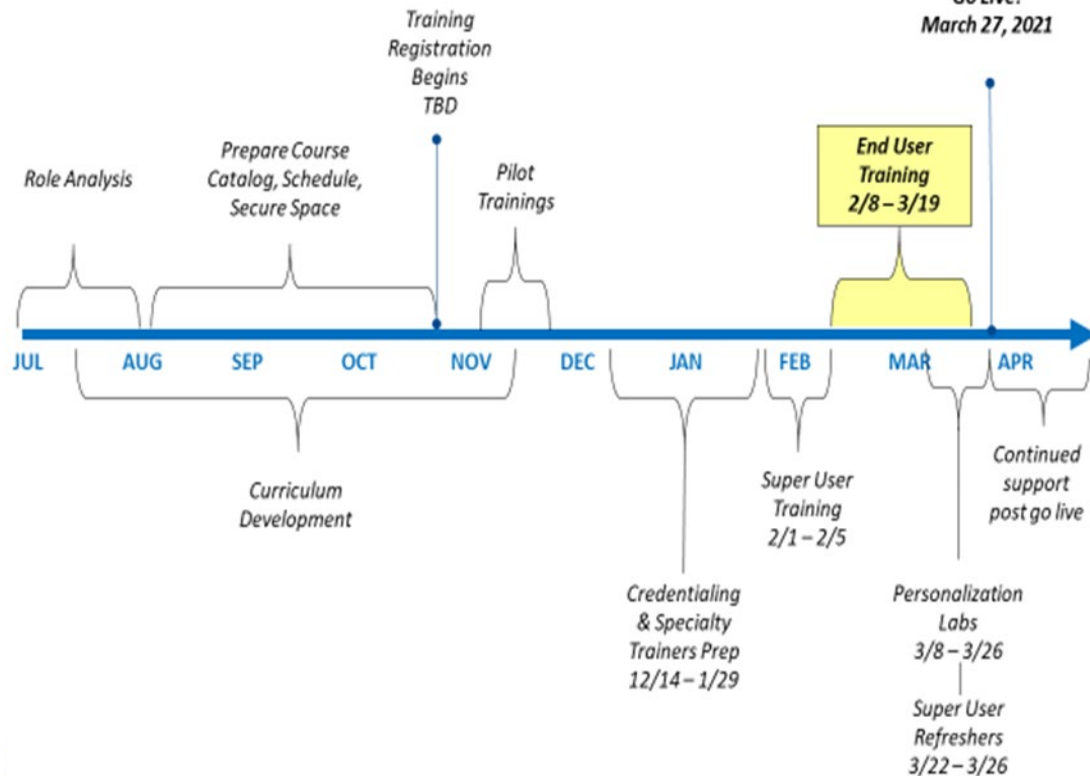
There is still effort to find additional resources at CUC to act as credentialed trainers

End User training begins the first week of February

Training Timeline

Please note this timeline is on based on estimated dates

Epic
Go Live!
March 27, 2021



CENTRAL HEALTH



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Challenges and Mitigations

- **Decisions around staffing and certifying staff on the build elements**

- There was a slow start do to hiring of appropriate staff.
- Covid pandemic presented struggles for EPIC's typical certification process.
- The team was fully staffed during February and March

- **Third party application contracting**

- There are several systems that CUC will need to have in place.
- Some contracting for 3rd Party systems has been delayed.
- The project team has made necessary adjustments to prevent delays.

- **Unanticipated changes to the project scope**

- Additional Interfaces and systems that were not planned as part of the original scope.
- Exam room technology was added to the scope far after the project started.
- The team has made all necessary adjustments to accommodate these changes.





Anticipated Go-Live Date Is March 27, 2021



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QUESTIONS?



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BOARD MEETING

November 18, 2020

REGULAR AGENDA ITEM 6

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 development in Eastern Travis County.⁴



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BOARD MEETING

November 18, 2020

REGULAR AGENDA ITEM 7

Receive and discuss an update on an Interlocal Cooperation Agreement between Central Health and the City of Austin for the realignment of Red River Street from 15th Street to 12th Street.⁴



MEMORANDUM

To: Central Health Board of Managers
From: Jeff Knodel, Chief Financial Officer
cc: Mike Geeslin, President, & CEO
Date: November 12, 2020
Re: Agenda item 7: Discuss and take appropriate action on Central Health Interlocal Agreement with the City of Austin for the Re-Alignment of Red River Street.
ACTION ITEM

Overview & Background:

Red River Realignment (Realignment) is a City of Austin transportation initiative and has become an entitlement issue for rezoning and subsequent development of Central Health's Downtown Property. An Interlocal Agreement (ILA) between Central Health and the City of Austin is under negotiation and provides a means to realign Red River Street from 15th to 12th Streets. Although the intent of Central Health is to obtain rezoning of its Downtown Property in conjunction with the Red River realignment project, it may not be an accompanying item at the City Council meeting scheduled to approve the Red River ILA on December 3, 2020. The rezoning is critical to the financial outcome of the Downtown Property, and enables a single zoning change that will apply to the entire property and all future developments.

Synopsis:

The Red River ILA consists of three (3) parts:

- Central Health Segment (CH Segment) – New Red River Street on and through Central Health property extending from 15th Street (northern limit) to vacated 13th Street (southern limit).
- City Segment – New Red River Street on City property from vacated 13th Street (northern limit) to 12th Street (southern limit).
- Red River Right of Way (ROW) – *Existing* Red River Street extending from 15th Street (northern limit) to vacated 14th Street (southern limit).

The discussion of this agenda item with the Board of Managers will cover the current ILA terms, including construction responsibilities, costs, reimbursements or make whole arrangements for Central Health, and right of way swaps or conveyances. Due to the nature of the ongoing negotiations, this agenda item will be discussed in executive session per legal counsel guidance.

Action Requested:

Approval of the Red River Street ILA with the City of Austin to re-align Red River Street through existing Central Health property extending from 15th Street to 13th Street

Fiscal Impact:

Funding in the amount of \$5,000,000 is available in the Approved Fiscal Year 2021 Central Health Capital Budget;

CENTRAL HEALTH DOWNTOWN PROPERTY

Re-Zoning

Interlocal Agreement

Central Health Downtown Property

A. Re-Zoning

1. Change from Public (P) to Central Business District (CBD)
 2. Increase Floor Area Ratio (FAR) from 8:1 to 25:1
 3. Create Planned Unit Development (PUD)
- 
- Several white lines of varying lengths and thicknesses are positioned in the bottom right corner of the slide, creating a modern, abstract graphic element.

Central Health Downtown Property

A. Re-Zoning

B. Red River Street Realignment – Entitlement to Obtain Re-Zoning

Central Health Downtown Property

A. Re-Zoning

B. Red River Street Realignment – Entitlement to Obtain Re-Zoning

1. Central Health conveys land (Hospital Drive) to City for New Red River Street.
2. Central Health funds pro-rata share (via 2033) of New Red River project costs through Central Health property.

Considered a significant community benefit supporting Re-Zoning and increased FAR.

3. Central Health fronts (via 2033) New Red River project costs on City land. Reimbursed via existing Red River Street Right of Way (ROW) Transfer
4. Central Health grants City utility easements in ROW.
5. Central Health and City coordinate future utility infrastructure.
6. City facilitates review of future Downtown Property development.
7. City reimburses Central Health for Health South utilities OPEX (~\$75,000).
8. Additional technical / performance terms.

Central Health Downtown Property

Regulatory Actions Required:

A. City of Austin (03 December 2020 ?)

1. Re-Zoning – PUD Approval
2. ILA Elements:
 1. Existing Red River Street Vacation (ROW)
 2. Approve ROW Valuation – Conveyance to Central Health
 3. Approve New Red River Project Fees Waiver
 4. Approve Utility Easements

Central Health Downtown Property

Regulatory Actions Required:

- A. City of Austin (03 December 2020 ?)
- B. Travis County Commissioners Court



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BOARD MEETING

November 18, 2020

REGULAR AGENDA ITEM 8

Receive and discuss the 1115 Medicaid Waiver, Delivery System Reform Incentive Payment (DSRIP) projects, the Community Care Collaborative, and other healthcare delivery partners, programs, projects, and arrangements, including agreements with Ascension Texas.⁵



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BOARD MEETING

November 18, 2020

REGULAR AGENDA ITEM 9

Receive briefing from legal counsel and take appropriate action regarding *Larimen Wallace v. Travis County Healthcare District d/b/a Central Health*, Cause No. D-1-GN-20-006645 (Travis County Dist. Ct.).⁴



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BOARD MEETING

November 18, 2020

REGULAR AGENDA ITEM 10

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