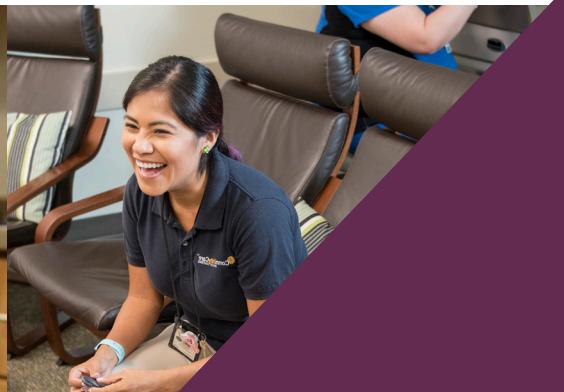




CENTRAL HEALTH

**FY 2018
PROPOSED
BUDGET**



Letter from CEO

It is my pleasure to present the proposed fiscal year 2018 budget for Central Health. Since my start just a few months ago, I have been awed by the work of Central Health as we deliver high quality care to our communities. The commitment to our mission—to improve the health of low-income uninsured families in Travis County—drives our work at Central Health. Our fiscal year 2018 budget is a testament to the vision to create a single system of care that reduces health disparities and creates real health improvements for the people who rely on us for health care. This goal is ambitious, though we will report next year at this time on the considerable progress we will strive to accomplish.

There is a lot of uncertainty swirling right now about health care in America. The news wildly fluctuates within a day. Although Central Health is not immune to both national and state policy changes, through the commitment of Travis County taxpayers, we can ensure health care services to the low-income families in our community. Some of the programs funded through those local tax dollars include well-women exams, back to school physicals, and programs to manage chronic diabetes.

This work is challenging and resource-intensive as resources are limited and the needs of our community are growing. Changing demographics and a shift of the population we serve into the eastern communities of Travis County have increased demands for our services. This budget lays the groundwork to add clinic locations and providers to meet health care needs throughout Travis County. It also adds funding for additional oncology work and early cancer screening; incorporates many of the health care delivery improvements piloted through federal Delivery System Reform Improvement Program projects, and increases the number of people for whom we can assist with hospice services, allowing them to spend their last days in comfort and dignity.

Central Health, and our Enterprise partners CommUnityCare, Sendero, and the Community Care Collaborative, take our commitment to the low-income and uninsured patients we serve very seriously. Central Health and our Enterprise partners continue to collaborate across the community with patients, providers, community groups, and the Dell Medical School to reduce the health disparities in Travis County. Our vision of a single system of care regardless of patients' ability to pay, can only be achieved by working together as a community to find solutions to improve the health of those with the most need and the least financial resources.

Central Health's investment in the Dell Medical School is in its initial stage and will be a key partnership to improve the health of our community into the future. Together, we are committed to working with our partners to put more culturally competent faculty and medical residents into our clinics and hospitals, but also making sure the uninsured patients who rely on Central Health are being treated by highly qualified medical professionals. The challenges of health care are not unique to Travis County, and by empowering providers and patients alike we strive to break the two-tiered system of care endured by many who rely on publicly funded health care systems.

Our fiduciary responsibility to the Travis County taxpayers is taken into account in our budget as we provide direct health care services through our primary care network, offer a high value, community based insurance plan, and help our local hospital operators defray the costs of treating everybody, regardless of ability to pay. The budget that follows is fiscally sound and results-oriented. It allows Central Health to meet its mission providing health care to those who need it most in Travis County, but remains rooted in ensuring affordability for all taxpayers in Travis County.

We are already planning the work for fiscal year 2018, and thank the taxpayers of Travis County for allowing us to build an efficient, effective, and patient-centered system of health care.

Mike Geeslin, Central Health President & CEO



CENTRAL HEALTH

VISION

Central Texas is a model healthy community.

MISSION

Central Health creates access to health care for those who need it most.

VALUES

Central Health will achieve excellence through:

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

Innovation: We create solutions to improve health care 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.

GOALS

Access: Increase access to health care for residents of Travis County.

Technology: Maximize the use of technology community wide to inform health care decisions and delivery.

Quality: Strategically invest in practice designed to improve health care outcomes.

Leadership: Assume a leadership role in convening and planning for the health care needs of our community.

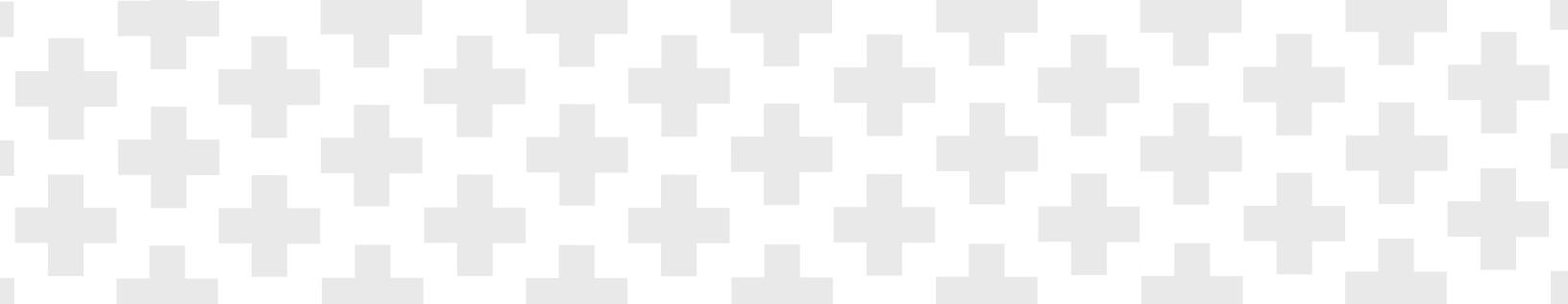
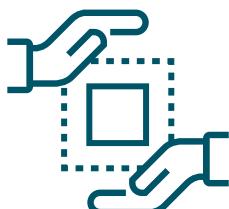


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FY 2017-2019 Strategic Plan

Throughout 2016, the Board of Managers developed a new strategic plan to guide Central Health through the next three years. As Central Health conducted its planning sessions, several key principles emerged that capture the direction toward which Central Health needs to be moving as it operates in the ever-evolving health care environment. In FY 2018, Central Health will focus on three guiding principles: Transformation, Stewardship and Partnership.



TRANSFORMATION

Create a healthy community through the development and implementation of an integrated health care delivery system



STEWARDSHIP

Utilize local tax dollars to leverage other sources, including matching funds and partnerships, for maximum community benefit

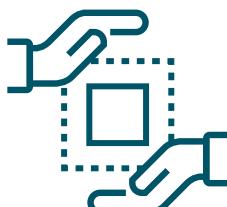


PARTNERSHIP

Increase health equity through innovative collaborations and collective impact

FY 2018 Budget Priorities

In preparing the Fiscal Year 2018 budget, the financial priorities were linked directly to the Strategic Principles:



TRANSFORMATION

- Increase investment in the Community Care Collaborative
- Facility investments
- Planning initiatives (cancer care, women's health, health care workforce development, and brain health planning)



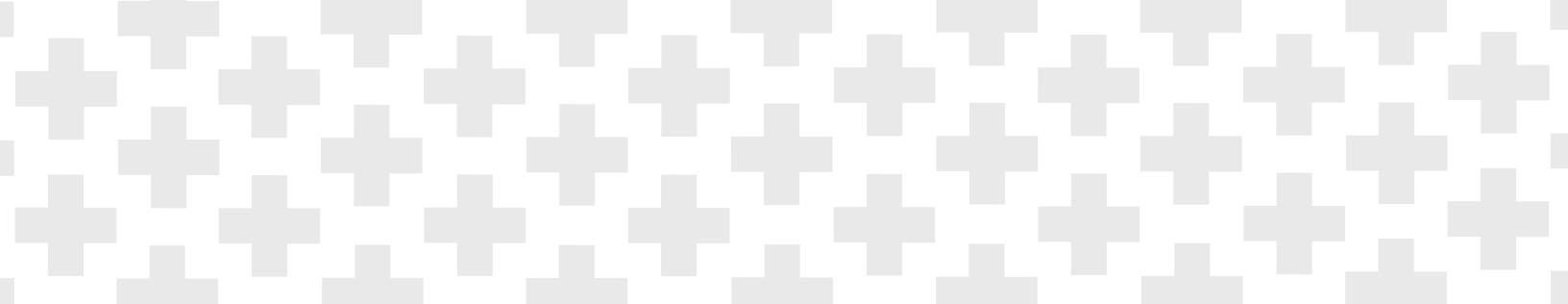
STEWARDSHIP

- Continue to maintain lowest tax rate of major Texas hospital districts
- Maintain sufficient reserves
- Central Health Brackenridge Campus redevelopment



PARTNERSHIP

- East Travis County health care service delivery
- Communications and community engagement



Role of the Healthcare District

The Travis County Healthcare District (doing business as “Central Health”) was created by vote of the Travis County electorate in May 2004. Its purpose is the provision of medical and hospital care to indigent residents of Travis County, a responsibility previously shared by Travis County and the City of Austin prior to Central Health’s creation. Its enabling legislation is Chapter 281 of the Texas Health and Safety Code, which provides most of the statutory framework within which Texas hospital districts operate.

Central Health has the statutory obligation to provide health care to residents who are at or below 21 percent of the federal poverty level (FPL)—currently \$6,457.50 annual household income for a family of four. However, Central Health also provides the Medical Access Program (MAP) with a full benefit package to eligible residents who are at or below 100 percent of the FPL. In addition, Travis County residents earning up to 200 percent of the FPL may receive subsidized health care through Central Health on a sliding fee scale.

The Travis County Commissioners Court approves Central Health’s tax rate and budget appropriations at the program level. Central Health also utilizes the Travis County Attorney’s Office and Treasury Investment Office for legal and investing services. The Travis County Healthcare District’s investment policy guidelines are approved annually by the Central Health Board of Managers. The Central Health Investment Policies are included in Attachment D.

Central Health is unique in that we deliver care to our residents through strong partnerships with key health care partners in the community.

Partnerships for Health Care



a partnership of Central Health and Seton Healthcare Family

BUILDING A BETTER, MORE INTEGRATED HEALTH CARE SYSTEM

MISSION: Create an integrated health care delivery system for identified vulnerable populations in Travis County that considers the whole person, engages patients as part of the care team, focuses on prevention and wellness and utilizes outcome data to improve care delivery.

The Community Care Collaborative (CCC) is a non-profit partnership formed in 2013 between Central Health and Seton Healthcare Family to better manage the care of the shared patient population. The partnership is further enhanced through an affiliation with the Dell Medical School at The University of Texas at Austin, and Austin Travis County Integral Care, the region's largest provider of behavioral health services.



BUILDING BETTER ACCESS TO HEALTH CARE

MISSION: Work with the community as peers with open eyes and a responsive attitude to provide the right care, at the right time, at the right place.

CommUnityCare is Central Health's affiliated Federally Qualified Health Center (FQHC) system. At over 20 separate locations in Travis County, CommUnityCare provides integrated primary care services with pediatrics, women's services, HIV care, behavioral health, dental, nutrition counseling, and clinical pharmacy services. These services are available to Travis County residents who qualify based on income and others who are in need of access to care. CommUnityCare continues to expand its volume of patients and visits, with an 84 percent increase in patients served from 2006 to 2016. As the largest community health center system in Travis County and one of the largest FQHC systems in the nation, CommUnityCare continues to be an essential component of Central Health.

Partnerships for Health Care



BUILDING BETTER LOCAL HEALTH COVERAGE

MISSION: To provide comprehensive health care coverage and to arrange for innovative, high quality and cost-effective medical services for health plan members within Central Texas. At Sendero Health Plans we understand, and we treat our members and their families with compassion and respect. We understand that your family's needs are unique.

Created by Central Health in 2011, Sendero Health Plans serves as Central Texas' local community-based health plan. Through Sendero, Central Health coordinates and manages health care services and enhances the provider network in local communities. Sendero is also a health plan provider for the Travis Service Delivery Area Medicaid STAR and CHIP programs. As a Qualified Health Plan under the Affordable Care Act, Sendero provides its IdealCare individual health insurance plan through the Health Insurance Marketplace.



THE DELL MEDICAL SCHOOL AT THE UNIVERSITY OF TEXAS AT AUSTIN

In 2012, Travis County voters approved a ballot referendum to invest additional funds in a health system transformation that would better meet the needs of the population. Less than four years later, the central catalyst for that transformation—a community-founded medical school at UT Austin—has validated the public's vision by opening its doors, welcoming its first students, and beginning the work of transformation.

The medical school is supported in part by a \$35 million annual payment from the Community Care Collaborative. By providing funding to the Dell Medical School today, Central Health is keeping our promise to the taxpayers by making a long-term investment in the health of all Travis County residents. The Dell Medical School is an essential partner in Central Health's mission to provide health care services to the low-income and uninsured populations who need them most in Travis County.

- **More Community Physicians:** Through Dell Med's expanding graduate medical education program, the number of medical residents and fellows providing care in Travis County clinics and hospitals grew from 218 in 2012 to 287 today.
- **Medical Students Working in the Community:** All 50 of the medical students in the first class are working in safety-net hospitals and clinics. Several of the students lead volunteer efforts to improve health across the community, especially among the underserved. The second class of 50 medical students, chosen from more than 4,800 applications, has begun its studies.
- **More Access to Prenatal Care:** Dell Med's Department of Women's Health is redesigning perinatal care for women with low incomes or without insurance. Through the redesign, every patient needing prenatal care receives an ultrasound and an examination from a physician, regardless of their ability to pay; every woman is scheduled for a post-partum follow-up appointment with a physician, and 79 percent of women have kept those appointments.
- **Disease Treatment and Research:** Dell Med recruited academic leaders specializing in cancer, neurological disease, and mental health — all areas of need in our region. These individuals will help further Central Health's mission and improve the health of our community.



A summary of services supported and provided by Central Health and its Enterprise partners; the Community Care Collaborative, CommUnityCare and Sendero Health Plans

In 2016 Central Health funded care for more than **143,000** Travis County residents:

THROUGH THE COMMUNITY CARE COLLABORATIVE

41,654

people enrolled in the
Medical Access Program (MAP)

180,044

primary care
encounters

40,078

dental
encounters

53,272

emergency department
encounters

23,447

specialty care
encounters

THROUGH COMMUNITYCARE

265,866

medical
encounters

46,044

dental
encounters

16,472

behavioral health
encounters

THROUGH SENDERO HEALTH PLANS

20,000

people enrolled in
IdealCare

13,068

people enrolled in
STAR (Medicaid)

1,978

people
enrolled in CHIP



IMPROVING HEALTH

- Central Health funded health care services for more than 143,000 people
- Central Health provided Health Insurance Marketplace premium assistance funding for 842 people, allowing them to enroll in IdealCare insurance coverage through Sendero Health Plans
- Specialty care encounters for Medical Access Program (MAP) patients increased by 4,295 visits—22 percent—over the previous year



STRENGTHENING PARTNERSHIPS

- The Dell Medical School at The University of Texas at Austin welcomed its second class
- Central Health partnered with Integral Care to open the new Judge Guy Herman Center for Mental Health Crisis
- Central Health launched the Community Health Champions, a diverse group of volunteer community members interested in learning about Central Health and creating community engagement on local health care issues



BUILDING ACCESS

- Central Health completed the Central Health Southeast Health & Wellness Center and began providing services to the community
- CommUnityCare opened the Sandra Joy Anderson Health and Wellness Center on the campus of Huston-Tillotson University
- People's Community Clinic, a primary care provider for Medical Access Program patients, added a new clinic location in Northeast Austin



CONTINUING STEWARDSHIP

- Central Health maintained the lowest tax rate of any major hospital district in Texas
- Central Health funded 33 Delivery System Reform Incentive Payment (DSRIP) projects, which achieved 92 percent of their goals and earned more than \$118 million in local and federal matching funds to support innovations in health care
- The Board of Managers approved the Central Health Brackenridge Campus Master Plan, creating an outline to deliver continued financial support for safety-net health care

Health Care Environmental Overview and Budget Considerations

From its inception in 2004, Central Health has worked to increase access to healthcare for the uninsured. During that time, Central Health has steadily increased the provision of primary care services to its covered population and has worked with a variety of health care providers and stakeholders to augment and improve the health care safety net in Travis County. In recognition of the evolving strategy of Central Health and its vision of transforming Travis County into a model healthy community, Central Health's mission statement has been updated for fiscal year 2017 to state: By caring for those who need it most, Central Health improves the health of our community.

In order to improve the health of our community and increase access Central Health must also keep up with the rapidly changing health care industry. While preparing the Fiscal Year 2018 budget, several key health care issues were considered.

VALUE-BASED CARE: Across the country, there is agreement that the way we currently pay for health care—primarily by paying a fee for each service a health care provider gives—does not incentivize improvements in the health of our communities and the overall quality of care, nor does it allow us to contain unsustainable growth in health care spending. Nationally, the federal government and many major health care plans are making the shift to value-based care, which focuses on creating incentives for better results in cost, quality and health outcomes, rather than rewarding volume.

Central Health, as a steward of Travis County residents' tax dollars, sees the importance of the movement toward value-based care, and has begun work with affiliated organizations to implement payment methodologies that effectively support clinical outcomes.

INTEGRATED DELIVERY SYSTEMS: Part of the effort to incentivize value over volume includes work to build health systems that allow patients to access the care they need seamlessly across a network of primary care, hospital and social service providers. The Community Care Collaborative (CCC) was created with the goal of integrating care across a local network of primary care, specialty care, hospital and social service providers to better manage the care of patients. Through these collaborative partnerships, the CCC is laying the groundwork for an integrated delivery system—a centralized resource of services to provide more and better health care for Travis County's low income and uninsured population.

POPULATION HEALTH AND SOCIAL DETERMINANTS OF HEALTH: Accessing health care is often difficult for low income or uninsured community members. Social determinants of health include issues such as transportation barriers, housing status, crime rates in a community, and education. These issues may come into play when someone tries to access care or address a health issue. Many communities are finding new ways to promote health and prevent disease throughout populations by taking into account the many factors that impact health.

Although Central Health's role is centered on the delivery of health care services, working with key partners to determine our role in managing population health and influencing social determinants of health will remain an area of attention. Two key partners in this effort are the Austin Public Health and the Dell Medical School Department of Population Health. Central Health will continue to work with collaborative health planning groups to address and influence critical issues that reduce health disparities for its covered population.

INTEGRATING BEHAVIORAL AND PHYSICAL HEALTH CARE: An environmental scan of key demographics and health indicators for Travis County shows rates of depression in the county are comparatively high. Throughout the behavioral health and medical communities, there is recognition that many primary care patients suffer from unrecognized and unaddressed behavioral health issues, just as those in the behavioral health system often suffer from chronic medical illnesses. Across the country, the increasing focus on population health has drawn attention to the integration of behavioral health—mental health and substance use disorders—with physical health as an important way to reduce costs and improve the quality of care. Central Health continues to work with its partners to improve and expand the integration of behavioral health services toward a holistic approach to health.

Local Environmental Overview and Budget Considerations

THE CENTRAL HEALTH BRACKENRIDGE CAMPUS:

In May 2017, the Dell Seton Medical Center at The University of Texas opened and began serving as the primary teaching hospital for the Dell Medical School. As a result, University Medical Center Brackenridge hospital relocated operations to the new facility across 15th Street, and 14.3 acres—the Central Health Brackenridge Campus—are now available for phased redevelopment. Central Health has worked extensively with consultants, stakeholders and the community to prepare the Central Health Brackenridge Campus Master Plan to inform development opportunities on the site.

In preparing the budget for Fiscal Year 2018, the cost of operating the Central Health Brackenridge Campus and possible investments in infrastructure have been incorporated. The planning for decreased revenue from the lease on the old University Medical Center Brackenridge hospital has been underway for several years, in Fiscal Year 2018 the Central Health budget accounts for a decrease in rent as a result of the hospital transition.

1115 MEDICAID TRANSFORMATION WAIVER:

The 1115 Medicaid Waiver has allowed for the most significant transformations of health care ever undertaken in Central Texas. The waiver uses funding from local entities—including Central Health—to draw down federal matching funds to reimburse hospitals for cost of care provided to uninsured and Medicaid patients and to incentivize hospitals and other provider to transform the delivery of health care to these populations.

The Waiver was initially approved as a 5-year demonstration program ending September 2016 and an extension was granted by the Centers for Medicare and Medicaid Services to take the program through December 2017. The State of Texas has requested an additional 21-month extension to continue the program at level-funding for period of January 2018 until September 2019. Texas is currently awaiting CMS's decision. Upon CMS approval to fund the extension request, Texas and CMS will move to negotiating the terms of the program. Texas has proposed that DSRIP funds be shifted toward system-wide transformation and significantly increase the portion of incentives tied to health outcomes.

History of How we Fund Health Care

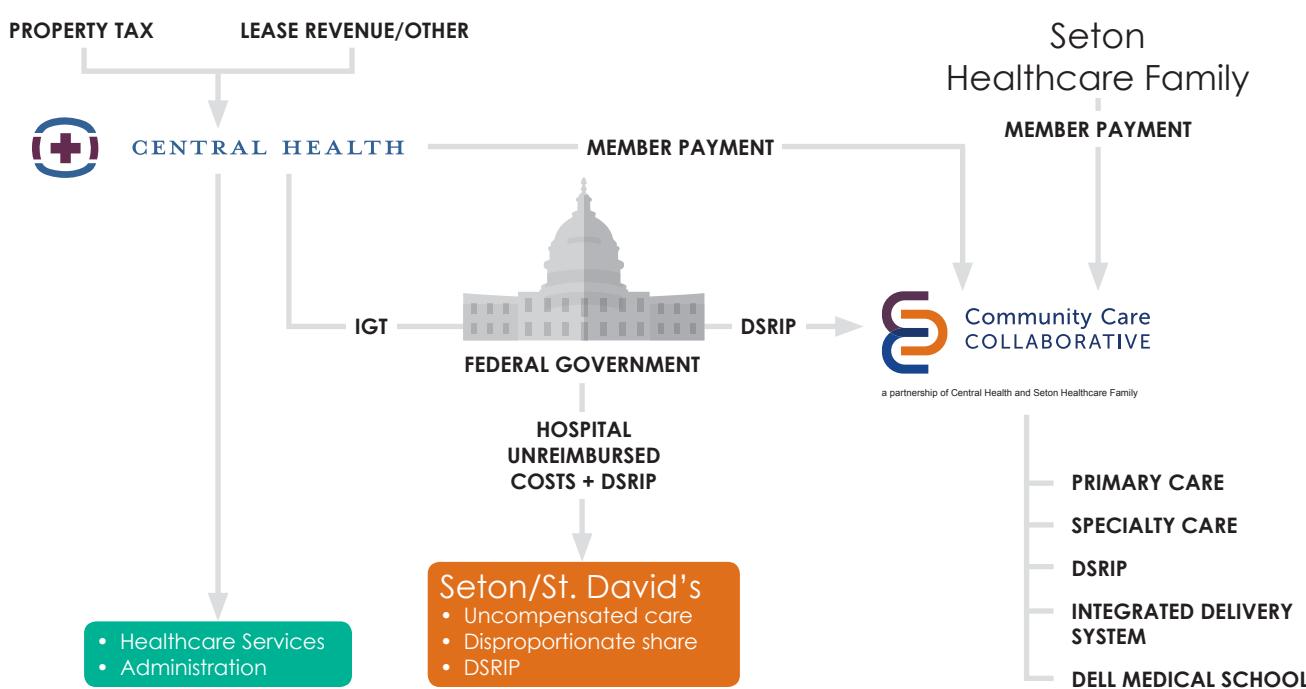
Central Health owns the University Medical Center Brackenridge (UMCB) facility, which until May 2017 was operated by the Seton Healthcare Family under a long-term lease arrangement, initially begun with the City of Austin in 1995 and continuing with Central Health. In 2017, hospital services at UMCB were transferred to the new Dell Seton Medical Center at the University of Texas. Historically, UMCB served as the safety-net hospital in Travis County that provides acute and specialty care to our MAP and charity care population, as well as trauma services to all residents in an 11-county region.

Since Central Health began operations in 2004, Seton and Central Health have collaborated to provide a continuum of health care services, with Central Health focusing on the support of primary, specialty and behavioral health care. While Seton and Central Health have made significant progress in efforts to integrate the healthcare delivery system, there is still much to be done to ensure the right level of care is delivered at the right time and right place.

In July 2011, the Texas Health and Human Services Commission (HHSC) announced the implementation of the Texas Healthcare Transformation and Quality Improvement Program, also referred to as the 1115 Medicaid Waiver (Waiver). The Waiver is designed to accomplish two things: one, to preserve federal funding for Uncompensated Care, the prior Upper Payment Limit program; and two, to provide additional federal funds for transformative projects that enhance health care delivery through the Delivery System Reform and Incentive Payment (DSRIP) program.

Around the same time, in September 2011, a number of public and private sector entities began collaboration on a “10 goals in 10 years” initiative. The purpose of the initiative is to transform health care to benefit the residents of Travis County and Central Texas including: implementing an integrated delivery system to provide enhanced primary care, specialty care, behavioral health services and women’s health services; developing a medical school; and building a modern teaching hospital. To take advantage of the momentum created by this initiative and to maximize the additional federal funding available through the Waiver, the Central Health Board of Managers authorized a tax ratification election to increase Central Health’s property tax rate by five cents. The voters approved this increase on Nov. 6, 2012. The majority of the added tax revenue is used as a local match for the 1115 waiver, which provides funding for the Community Care Collaborative — the 501(c)(3) corporation formed by Central Health and Seton to develop and jointly manage the health care safety net delivery system, and for funding other health care needs. To that end, Central Health and Seton have entered into a Master Agreement to fund and operate the CCC.

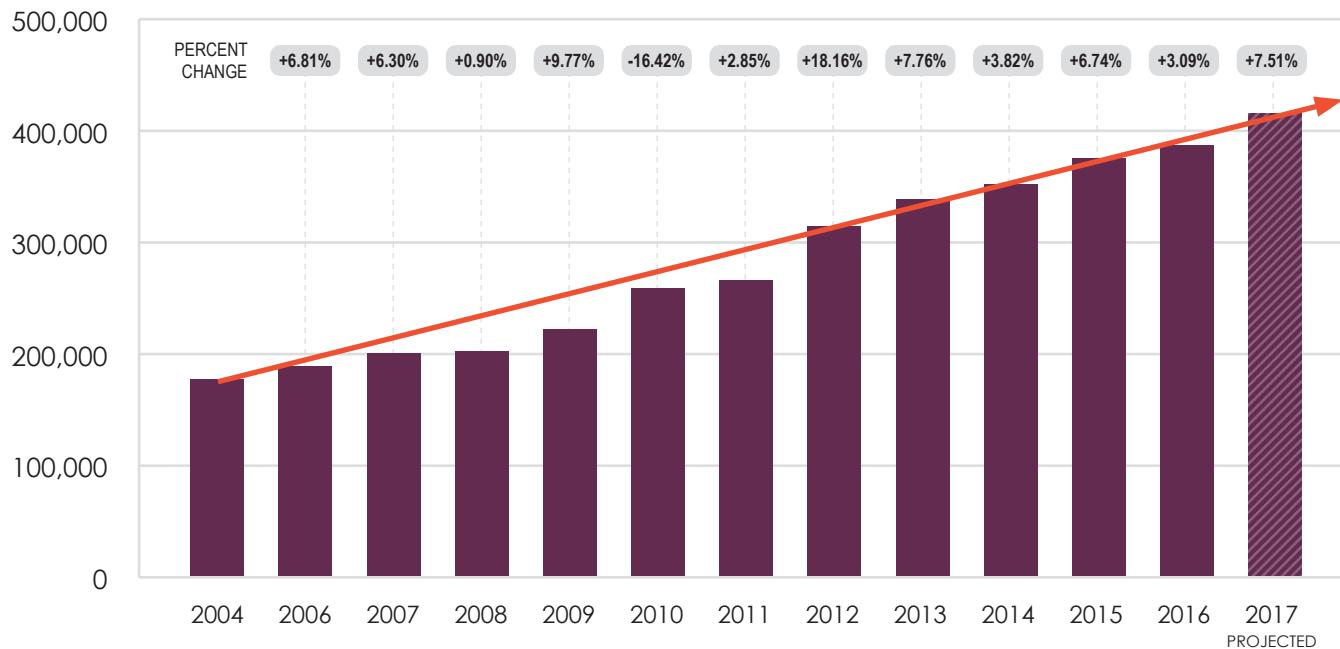
The Master Agreement includes provisions under which Seton would construct and operate a safety-net teaching hospital. In May 2017, Seton opened the Dell Seton Medical Center at the University of Texas and hospital operations moved into a new state of the art facility. In preparation for Seton vacating the UMCB facility, Central Health developed a master plan for the reuse and redevelopment of the site, now referred to as the Central Health Brackenridge Campus.



Progress in Central Texas Through Health Care Investments

PRIMARY CARE

Primary Care is the backbone of a healthy community. Central Health relies on a number of key partners to provide this essential care to the community. Since inception, the chart below shows the significant growth in primary care visits provided through our partners:



FY 2018 Operating Budget

Central Health provides for the health care of more than the statutorily indigent in Travis County. A large portion of the tax revenue collected by the District is used to draw down matching federal funds through intergovernmental transfers. These funds are used for unreimbursed care provided by hospitals or the funding of Delivery System Reform Incentive Payment Program projects to improve access to care and transform how health care is delivered to the community.

Hospital unreimbursed indigent patient costs are the result of under- or uninsured patients receiving care without the ability or financial means to pay for the services received. These costs are generally known as charity care. Central Health provides local funds for two programs to help assist in the costs. The Uncompensated Care program, a part of the 1115 Waiver, and the Disproportionate Share program both utilize local funds to draw additional federal funds to help offset costs incurred by hospital providers. These funds only assist to defray the cost of health care provided to the uninsured in Travis County.

Supplemental Payment Schedule for Unreimbursed Care—State Fiscal Year 2016

Gross Unreimbursed Costs		Supplemental Payments								Remaining Unreimbursed Costs	
		Local Funding				Federal Funding			Total Supplemental Funding		
		DSH (IGT)	UC (IGT)	Total IGT	Charity Care Payment	DSH	UC	Total			
St. David's Central	\$36,340,408	-	\$5,038,931	\$5,038,931	-	\$8,658,905	\$6,716,895	\$15,386,182	\$20,425,113	\$15,915,294	
St. David's North	16,664,679	-	1,875,495	1,875,495	-	6,361,594	2,500,035	8,884,795	10,760,291	5,904,388	
St. David's South	26,948,161	-	4,905,439	4,905,439	-	-	6,538,951	6,538,951	11,444,390	15,503,770	
University Medical Center Brackenridge	139,920,443	31,029,653	19,590,823	50,620,477	4,251,733	6,739,871	26,114,568	32,854,439	83,474,917	56,445,525	
Seton Medical Center	40,751,199	-	7,418,040	7,418,040	-	-	9,888,247	9,888,247	21,558,021	19,193,177	
Seton Southwest	4,224,910	-	769,070	769,070	-	-	1,025,171	1,025,171	1,794,242	2,430,668	
Seton Northwest	17,435,143	-	3,173,761	3,173,761	-	-	4,230,624	4,230,624	7,404,386	10,030,757	
Seton Shoal Creek	1,164,951	-	162,825	162,825	-	270,465	217,046	487,511	650,336	514,615	
Dell Children's	(8,646,547)	-	-	-	-	-	-	-	-	(8,646,547)	
Total	274,803,349	31,029,653	42,934,389	73,964,043	4,251,733	23,495,432	57,231,541	80,726,974	158,942,750	115,860,599	

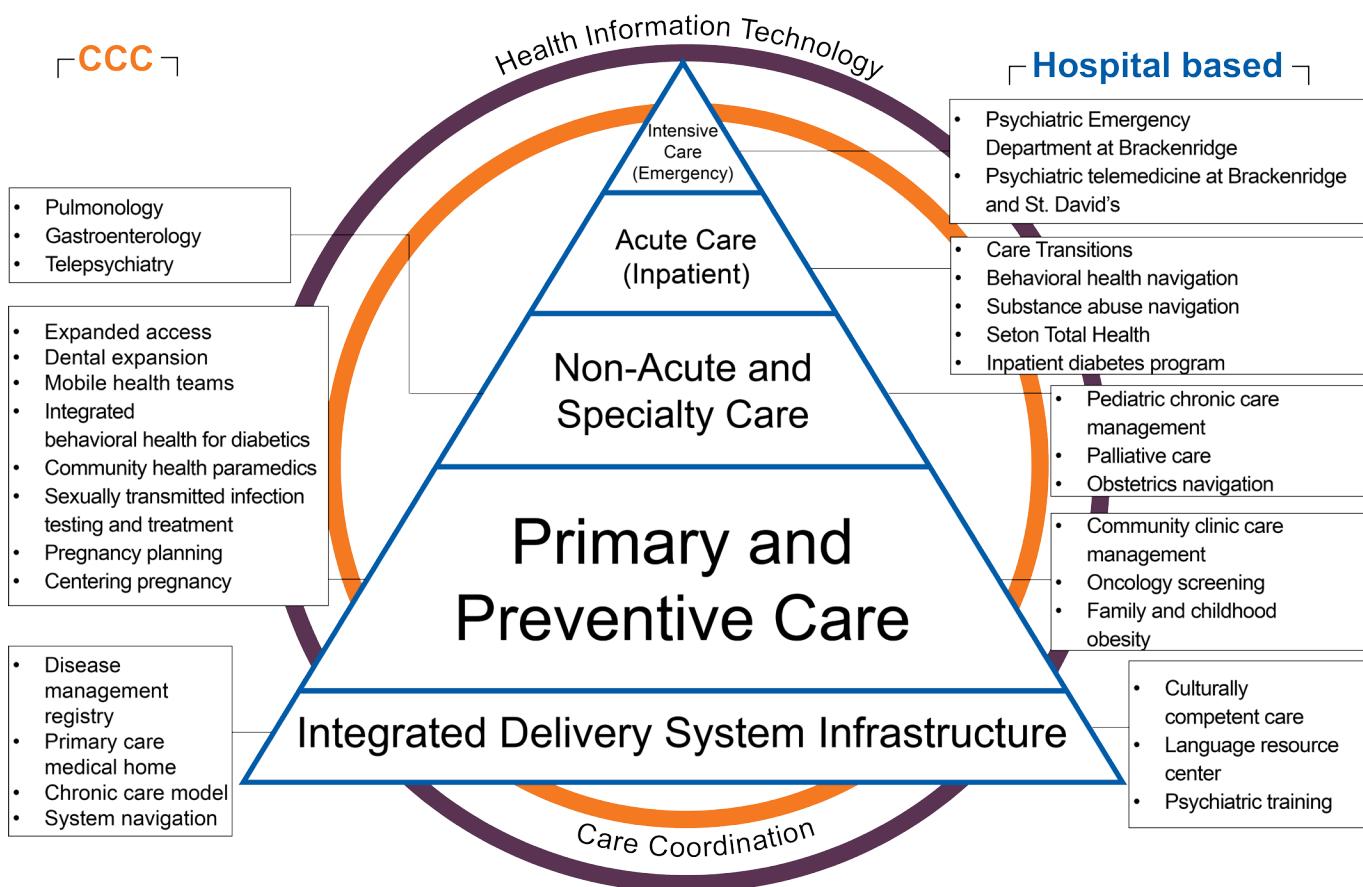
The table shows that our two major hospital systems provide approximately \$275 million of gross unreimbursed care. Even with the intergovernmental transfers and supplemental funding of nearly \$159 million in State Fiscal Year 2016, it still leaves approximately \$116 million in remaining unreimbursed costs.

1115 Delivery System Reform Incentive Payment Program

Central Health invests in 33 projects that are transforming care in Travis County through the 1115 Texas Medicaid Waiver DSRIP pool. The scope of the projects range from developing health care infrastructure to the most intensive hospital care. These pilot projects emphasize delivering better care in a more appropriate setting with a goal of care in the right place at the right time with a good patient experience.

The 1115 Waiver has impacted the health of Central Texan's significantly over the past several years. Central Health funds the Intergovernmental Transfer funding for hospital projects and the Community Care Collaborative DSRIP projects. The projects are risk-based and do not result in payment unless the specific project performance metrics or outcome is achieved. Our last complete reporting period was for projects performed in Demonstration Year 5 (which is Fiscal Year 2016): Hospitals provided over 7,700 navigation services; 1,800 telepsychiatry consultations in emergency rooms, 2,500 mammograms and cervical cancer screenings and navigation services for 2,600 patients with chronic disease who were transitioning from the hospital. In the CCC, 3,000 telepsychiatry consultations were provided in the community, 35,000 hours of after-hours primary care visits were provided, more than 500 patients were cured of Hepatitis-C, and 6,000 patients with chronic disease received dental services.

Central Health Investment in DSRIP Programs





Roughly a third of the intergovernmental transfer is dedicated to providing the local match for the Delivery System Reform Incentive Payment Program of the 1115 Medicaid Waiver. Central Health's local funds support health care delivery transformation for over 33 projects performed by a variety of partners including fifteen projects performed by the Community Care Collaborative.

During the course of the 1115 Waiver, payments for intergovernmental transfers have not occurred in a manner that coincides with the budget cycle of Central Health. The timing of the intergovernmental transfers are determined by the State of Texas and Central Health is not able to influence the required timing of these payments. As a result of these timing differences, Central Health has had to accommodate these timing differences into its budgeting processes. At times, Central Health keeps these funds in its contingency reserve account until they are required to be submitted. The Fiscal Year 2018 budget does not anticipate any reserves specifically appropriated for historical timing differences.

The remaining uses of funds in the Central Health budget are primarily dedicated to health care delivery through our member contribution to the Community Care Collaborative and risk-based capital requirements for Sendero. The amounts of risk-based capital is determined by the Texas Health and Human Services Commission (HHSC). These funds provide for the provision of primary care and limited specialty care for patients enrolled in our Medical Access Program or participate in a sliding fee scale program. Sendero provides health coverage under the Medicaid program and the Affordable Care Act.

See the attached budget summary (Attachment A) for a list of sources and of uses by program, as well as expected reserve balances at the end of the 2018 fiscal year.

Following is a more detailed discussion of Central Health's 2018 expenditure budget, shown by program and activity, which can be seen on Attachment B.

Sources of Funds

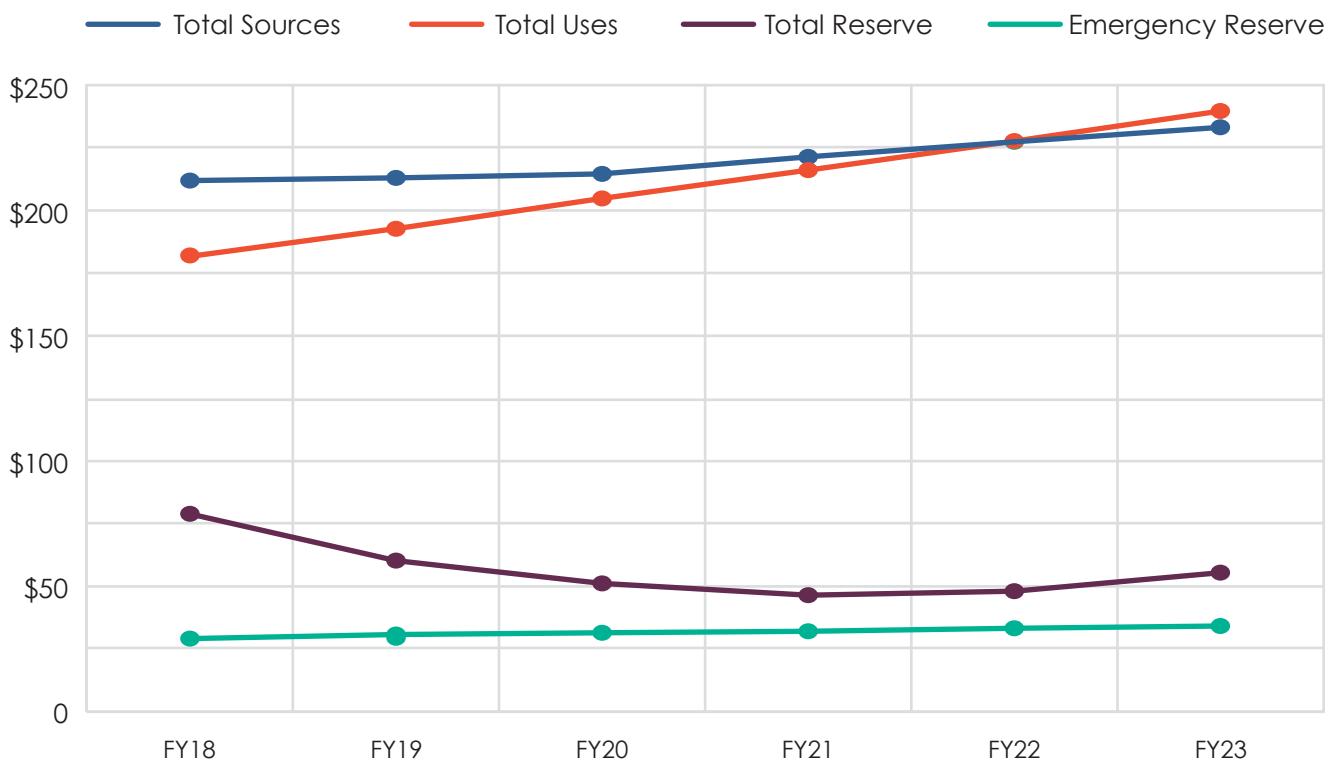
Central Health's operating budget has several sources of funds, with total property tax revenue accounting for the majority at \$181.8 million. Although Central Health is lowering its tax rate, increases in assessed value have produced \$12 million in additional revenue. The other sources of revenue include lease revenue for buildings located on the Central Health Brackenridge Campus, budgeted this year at \$10.3 million and other revenue of \$2.2 million.

TAX RATE AND TAX REVENUE

Central Health's current tax rate (fiscal year 2017) is 11.0541 cents per \$100 of assessed value. The 2018 budget has been prepared at a lower tax rate of 10.7385 cents per \$100 of assessed value. The total rate includes an operating tax rate of 10.6583 cents and a debt service rate of 0.0802 cents. The debt service tax rate will provide funds to satisfy certificates of obligation that funded the purchase and partial renovation of the Central Health Southeast Health & Wellness Center and a portion of the construction cost of Central Health's North Central Community Health Center, the remainder of which was funded with federal grant dollars.

Central Health uses a five year financial forecast model to draft and develop its budget. This method has been utilized to incorporate known events with broad assumptions to estimate the tax revenue required to provide and maintain the necessary level of services for our community. At the May 24th Board of Managers Meeting, the board recommended preparation of the 2018 budget using a 4.5 percent over effective tax rate.

4.5% Over effective property tax rate year-over-year*

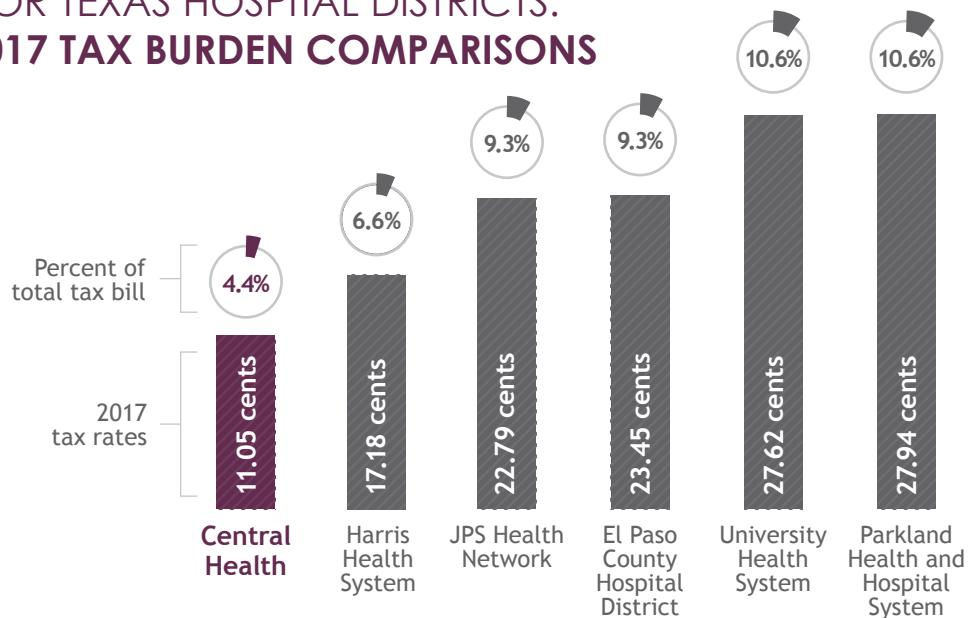


*Sources and uses exclude the contingency reserve and any funds appropriated through the contingency reserve.

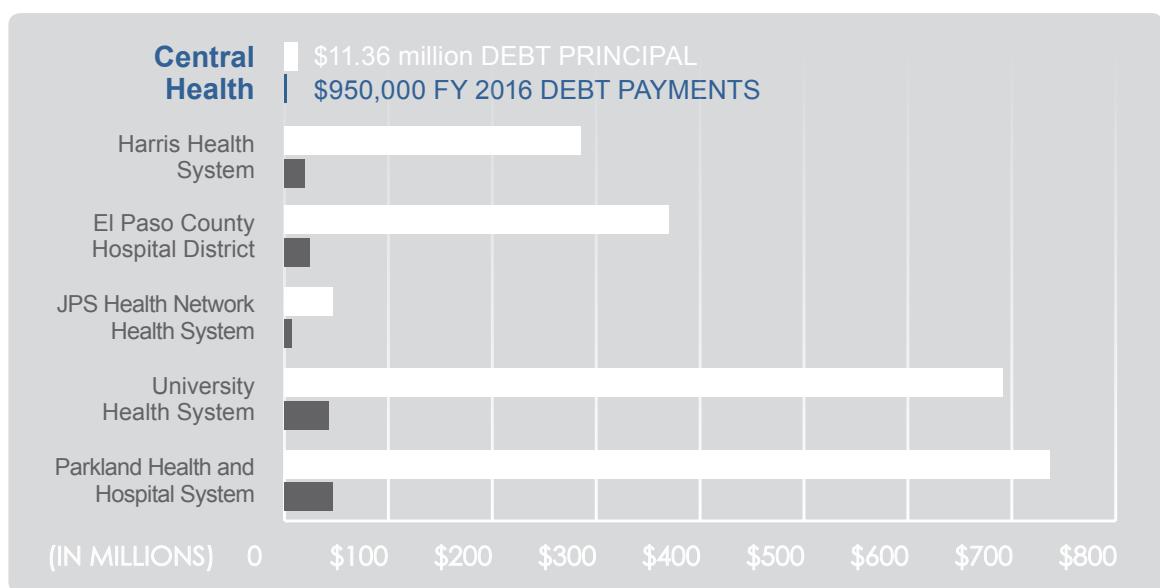
Sources of Funds

Central Health also looks at other major hospital districts throughout Texas to benchmark certain financial metrics. Central Health utilizes a partnership with the Seton Healthcare Family for inpatient hospital and limited specialty care services. The partnership requires Seton to maintain operational responsibility for both of these areas rather than Central Health. As a result of this partnership, Central Health maintains the lowest property tax rate, debt level and per capita obligation of major urban hospital districts in the state.

MAJOR TEXAS HOSPITAL DISTRICTS: FY 2017 TAX BURDEN COMPARISONS



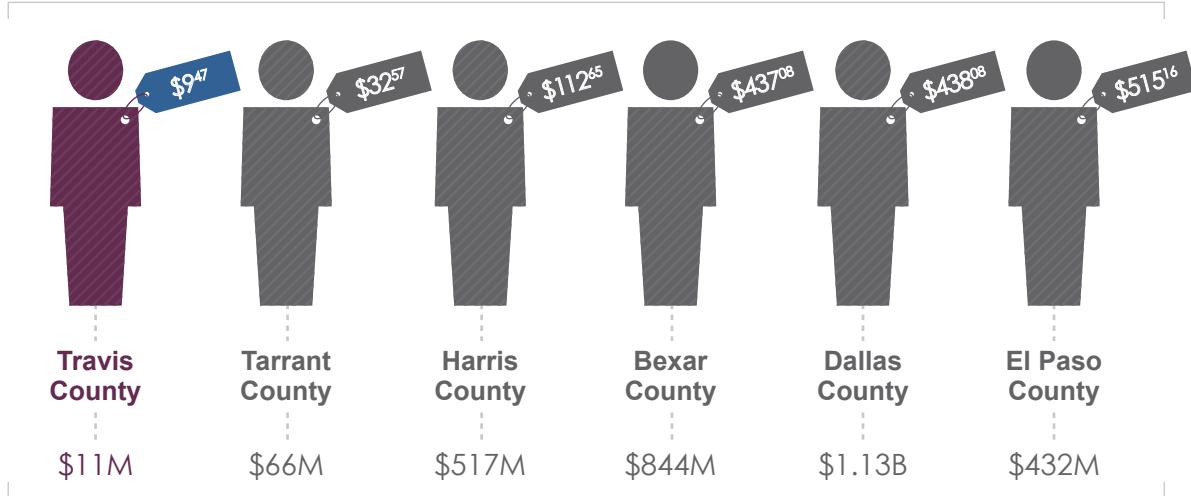
MAJOR TEXAS HOSPITAL DISTRICTS: DEBT AND PAYMENTS COMPARISONS



Sources of Funds

MAJOR TEXAS HOSPITAL DISTRICTS: PER CAPITA DEBT AND PENSION COMPARISONS

OBLIGATION PER RESIDENT



TOTAL FY2016 DISTRICT DEBT AND PENSION OBLIGATIONS

Sources of Funds

TAXABLE ASSESSED VALUES with Percent Change Year-Over-Year (in billions)

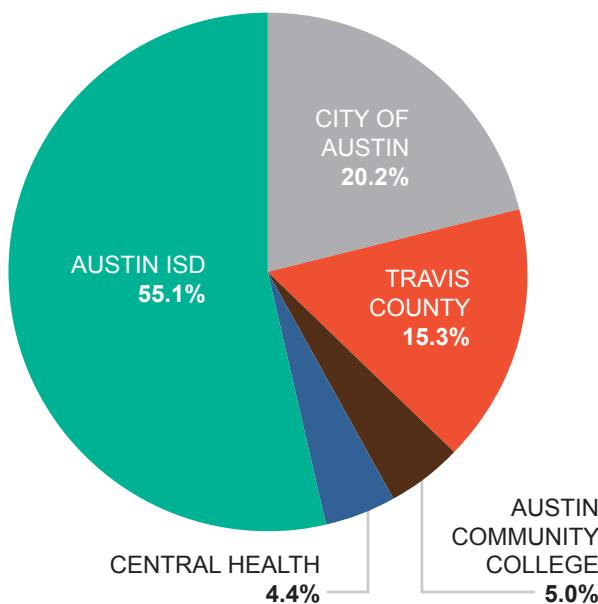
Travis County has seen considerable growth in taxable assessed values and new construction growth over the past five years. In Fiscal Year 2018 we continue to see growth in taxable assessed values with a slight decrease in year over year growth, or a slowing in the pace of growth.



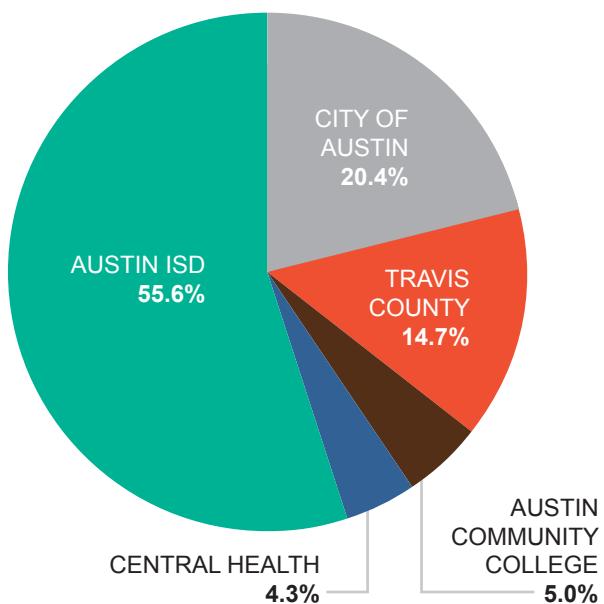
Sources of Funds

Central Health is a minor piece of the total property taxes for an average Travis County resident who lives in the jurisdictions outlined below. This shows that year-over-year we maintain the smallest portion of the total tax bill. In Fiscal Year 2017 this was approximately 4.4 percent of the total tax paid. Based on preliminary tax rates, Central Health will continue to maintain the smallest portion of tax bills in FY 2018.

FY 2017 Travis County Tax Entity Percentages



Preliminary FY 2018 Travis County Tax Entity Percentages



ESTIMATED Fiscal Year 2018 Property Tax Bill for Average Homestead Assessed Value

Jurisdiction	Proposed Tax Rate (cents per \$100 of valuation)	Value Before Exemptions	Reduction in Taxable Value from Homestead Exemption	Average Taxable Value after Homestead Exemption	FY 17 Property Tax Bill	Percentage of Total	Exemption
Travis County	0.369000	381,466	76,293	305,173	\$1,126	14.7%	20%
Central Health	0.107385	381,466	76,293	305,173	\$328	4.3%	20%
City of Austin	0.445100	381,466	30,517	350,949	\$1,562	20.4%	8%
Austin ISD	1.192000	381,466	25,000	356,466	\$4,249	55.6%	25,000
Austin Community College	0.101000	381,466	5,000	376,466	\$380	5.0%	5,000
	2.214485				\$7,645	100.0%	

Sources of Funds

In preparing the budget for Fiscal Year 2018, Central Health also considers how the tax rate will impact our residents. While our tax rate is going down, the chart below outlines that an average taxpayer will pay an additional \$10-13 dollars for the year, primarily due to the positive growth in taxable assessed values.

Travis County Healthcare District offers a 20% homestead exemption, the maximum allowed by law. The average Travis County Healthcare District taxable homestead value increased 7.02 percent from \$285,152 last year to \$305,173 this year. The proposed tax rate of 10.7385 cents per \$100 of taxable value results in a \$12.50 increase in the Travis County Healthcare District property taxes for the average taxable homestead for FY 2018 compared to the FY 2017 property tax bill. The estimated FY 2018 Travis County Healthcare property taxes for other valued homesteads shown below as examples are based on assessed values appreciating 7.02 percent from the previous year. The actual impact for FY 2018 for each property will vary depending on the taxable value, types of exemptions and appreciation.

Taxpayer Impact Statement

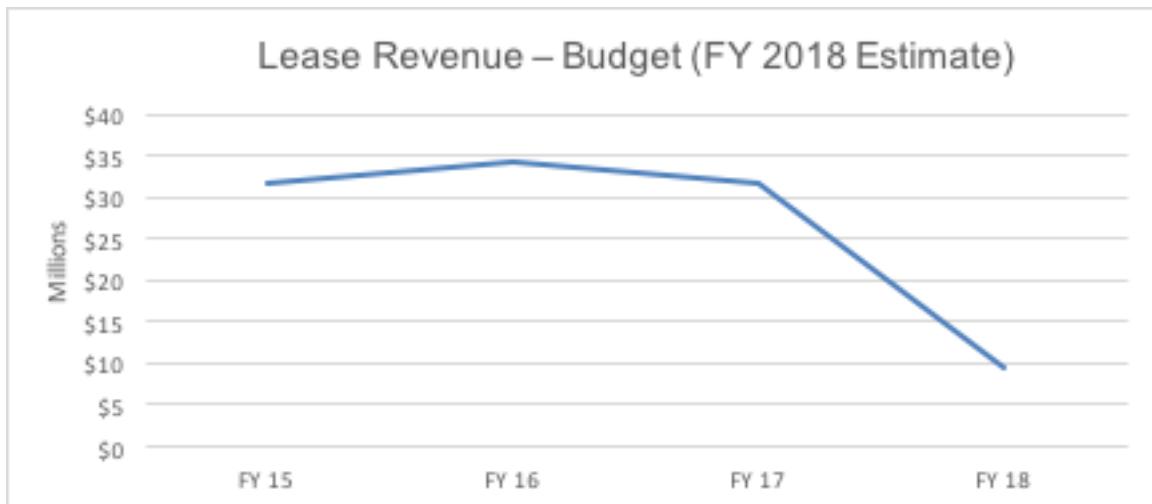
FY 2017 Home Value	FY 2017 Taxable Home-stead Value*	FY 2017 Tax Rate	FY 2017 Tax Bill	Average Home Value Appreciation	FY 2018 Home Value	FY 2018 Taxable Home Value*	FY 2018 Tax Rate (4.5% over effective)	FY 2018 Tax Bill	Annual Increase	Percent Increase
\$200,000	\$160,000	11.0541¢	\$177	9.00%	\$218,000	\$174,400	10.7385¢	\$187	\$10	5.9%
\$300,000	\$240,000	11.0541¢	\$265	7.60%	\$322,800	\$258,240	10.7385¢	\$277	\$12	4.5%
\$400,000	\$320,000	11.0541¢	\$354	6.30%	\$425,200	\$340,160	10.7385¢	\$365	\$12	3.3%
\$500,000	\$400,000	11.0541¢	\$442	6.00%	\$530,000	\$424,000	10.7385¢	\$455	\$13	3.0%

*Includes 20% homestead exemption

Other Revenue

The other sources of revenue in the Central Health Fiscal Year 2018 budget include lease revenue, interest revenue and revenue received from the tobacco litigation settlement.

Since 2012, Central Health and its partners have been preparing for the opening of the Dell Medical School and Dell Seton Medical Center, which serves as the teaching hospital. As a result of the hospital operations moving into the new facility, the lease revenue will decline in Fiscal Year 2018 to approximately \$10.3 million.



Central Health participates in the tobacco litigation settlement funds, in Fiscal Year 2018 it is anticipated that Central Health will collect approximately \$1.8 million in revenue.

Uses of Funds

Central Health budgets expenditures in two programs, the larger one being Healthcare Delivery (95.7 percent of total appropriations) and a smaller program of Administration (3.6 percent of total appropriations). The remaining 0.7 percent is tax collection expense.

Healthcare Delivery Program

This program consists of the following sub-programs or activities:

Intergovernmental Transfers (IGTs)

This activity funds the local match for the following federal supplemental hospital payment programs:

1. Uncompensated Care (UC) – reimburses public and private hospitals for unreimbursed care. Central Health makes uncompensated care IGTs for St. David's and Seton hospitals.
2. Disproportionate Share (DSH) – similar to Uncompensated Care, this program reimburses public and private hospitals that treat a disproportionate share of Medicaid or uninsured patients. Six hospital districts—including Central Health—comprise most of the local match for all Texas hospitals, both public and private, that participate in this program across the state.
3. Delivery System Reform Incentive Payment (DSRIP) – provides federal funding for projects that transform the health care delivery system by making it more accessible, more integrated and less costly. This funding is provided through the 1115 Medicaid Waiver, which began September 1, 2011. Central Health makes an IGT for the hospital-based DSRIP programs carried out by Seton, the CCC and St. David's.

Central Health is committed to using its health care delivery funds to make IGTs that will leverage additional federal funds and pursue opportunities to enhance service delivery. Central Health may use funds in other health care delivery activities for IGT if there are additional opportunities to do so. Overall we estimate that our IGT activity will be \$146 million in fiscal year 2018.

Intergovernmental transfers:	FY 2018 Proposed Budget
IGT - Private UC	\$27,900,000
IGT - Public UC	25,000,000
IGT - Disproportionate Share	35,000,000
IGT - CCC DSRIP	29,300,000
IGT - Seton DSRIP	29,000,000
IGT - St. David's DSRIP	620,000
Total	\$146,820,000

Uses of Funds

Payment to the Community Care Collaborative (CCC)

This Central Health partially funds primary, specialty and other services for the MAP program and CCC covered population, primarily through contracts with a number of safety-net providers. These contracts were previously administered by Central Health, but in 2014 most were moved to the CCC so Central Health and Seton could manage them jointly.

These contracts are also funded by the CCC's other revenue sources; centralizing them in the CCC provides for an integrated delivery system through which all providers can be better coordinated. This payment from Central Health to the CCC has increased in 2018 by \$3 million to provide funding for further development of the integrated delivery system and priority health care initiatives.

CCC History of Accomplishments, 2013-17

Innovation in Behavioral Health

Telepsychiatry services made available at 11 CommUnityCare clinics

- Increased the number of psychiatrists serving the safety net by three.
- 3,500 patients received over 5,500 encounters since 2014.
- Behavioral health counselor available at walk-in clinic setting
- El Buen Samaritano added as an additional telepsychiatry provider in FY17.

Expansion of Primary, Convenient and Urgent Care

- Primary care services added at the Central Health Southeast Health & Wellness Center
- System capacity increased by 50,000 annual encounters from 2013 to 2016
- All local FQHCs became Primary Care Medical Home (PCMH) certified; 13 sites are Level 3
- Critically needed dental services have increased by over 7,000 encounters since 2012
- Since January, the CCC has added 19 convenient or urgent care locations including RediClinic and FastMed

Women's Health

- Added three OB intermediate and high risk sites in CommUnityCare health center settings
- Centralized deliveries at Seton Medical Center Austin – creating a center of excellence for deliveries and high risk OB care
- Developed risk-based referral protocols and normal interval OB care protocols
- Implemented centering pregnancy programs for low-income women at CommUnityCare locations with reported 98 percent patient satisfaction

Reducing Unnecessary, Expensive or Duplicate Services

- Added a care coordinator in the emergency room at UMCB—aided over 800 patients in FY17. Included notification to the health management team of a visit to the ED by one of our patients.
- Developed a legal structure (Organized Health Care Arrangement or OHCA) that facilitates data sharing across safety net providers
- Require contracted providers transmit patient information to the CCC's data warehouse
- CCC Health Management aggressively manages medical and community services for approximately 160 high needs, high utilizing patients with multiple chronic conditions. As of April 2017:

Uses of Funds

- Expanded post-acute care transition process including authorizations and concurrent reviews to ensure appropriate and effective treatments. Graduates of post acute program assigned a CCC case manager to connect to outpatient medical home and any additional care, education or services:
 - Patients served: 21 (approximately seven per month)
 - Average cost per patient: \$7,406
 - Average rate per diem: \$411
 - Average daily savings vs. acute care: \$901
- Created centralized call center for CUC to manage referral management, nurse triage and scheduling

Improved Health Indicators for CCC Patient Population

- 94% of patients with high body mass index have received a follow-up appointment
- 98% of patients who use tobacco are referred to counseling services.
- Set standards for the care for diabetic, [and 5 others] patients; now approximately 48,000 patients managed through Disease Management Registry
- Retinal eye exam increased 42% to 54%
- Comprehensive foot exams increased from 74% to 90%
- 90% of diabetic patients received a nephropathy screening
- 90% of diabetic patients received comprehensive foot exams
- Added value based and performance based contracting with largest primary care provider
- Paying for visits with alternate providers such as clinical pharmacists and nurse visits

Improved Financial Transparency and Understanding of Patient Population

- 2015 - Transition third party administrator (TPA) to more efficient, cost-effective TPA
- 2017 – Transition to new TPA providing additional services such as advanced analytics and population health reporting for the total safety net population (not just MAP)

Improvements to the CCC Patient Population Medical Plans (Medical Access Program and Charity Care Programs)

- Expanded eligibility to all residents under 50% federal poverty level (FPL)
- Expanded eligibility up to 100% FPL for patients with two or more chronic conditions
- In the first seven months of the expansion, 1,635 newly eligible patients have enrolled into MAP.

Specialty Care Expansion and Enhancements

- Pulmonology DSRIP project added capacity within community clinics, from 136 to approximately 3,000 encounters per year
- Pulmonology wait times reduced from four months to less than two weeks.
- Gastroenterology DSRIP project treated 966 patients for Hepatitis C and cured 90% who completed treatment
- In February, added four specialty care clinics to the Central Health Southeast Health & Wellness Center

Uses of Funds

- Funded additional staff to manage specialty care waitlists and referrals

Orthopedics specialty care pilot program begun in 2016 with the Dell Medical School

- Reduced the wait times for acute patients from 14 months to less than one month
- Improved patients' health by treating them more promptly and increasing the use of services like physical therapy in the most appropriate settings

GI Colonoscopy pilot

- Increased the availability of GI specialist by using two additional mid-level providers
- Since implementation, approximately 10 additional colonoscopies are performed each week
- Wait times for a colonoscopy screening procedure have decreased from four months to less than two weeks

Specialty care e-consults for primary care physicians

- Currently available for Cardiology and Endocrinology
- Supports a phone or secure messaging exchange between primary care providers and cardiology specialists
- Allows for specialist response time of less than 24 hours
- Referrals are appropriately triaged and unnecessary referrals are avoided
- Connects primary care providers with Seton specialists

Hospice and advance care planning

- In 2017, CCC reimbursed Austin Hospice up to \$322,592 for hospice services
- New CCC service line initiative, which also includes palliative care services and advanced care planning/end-of-life planning
- Ensures the continuation of Hospice Austin home-based hospice, services delivered at Christopher House and other physician services for Travis County's low-income and uninsured residents

DSRIP Project Successes

Implemented initial performance-based contracts

Measurement of performance baseline and improvement data

CCC 1115 Medicaid Waiver DSRIP projects have generated \$227.5 million in total payments to date.

- DY2: \$53.3m (100% of total incentive possible)
- DY3: \$57.2m (99.5% of total incentive possible)
- DY4: \$61.7m (99.35% of total incentive possible)
- DY5: \$55.3m (83% of total incentive to date)

Category 3 outcome achievements

- From 2013 to 2016, the percentage of diabetic MAP patients who received a retinal eye exam increased from 42% to 54%

Uses of Funds

- From 2013 to 2016 the percentage of diabetic MAP patients who received a comprehensive foot exam increased from 74% to 90%
- From 2014 – 2016, the MAP population Hepatitis C cure rate increased from 20% to 90% for patients who received the full 12-week course of treatment.
- From 2013-2016 percentage of patients who had a BMI outside of normal parameters who received a follow-up appointment to address this health concern increased from 68% to 94%, which put us in the 90th percentile High Performance Level for this measure.
- From 2013-2016 the percentage of patients who identified as tobacco users who received tobacco cessation counseling intervention increased from 79% to 98%, which put us in the 90th percentile High Performance Level for this measure.
- In DY4 and DY5, percentage of diabetic patients who received a nephropathy screening test or had evidence of nephropathy during the measurement year were in the 90th percentile at 90% and 88% respectively.

Expanded hours

- Providing service during evening and weekend hours at targeted clinic locations.
- Provides about 20,500 encounters per month
- About 250,000 visits in FY17
- Increase of about 50,000 visits since the baseline period, October 2011-September 2012.

Patient centered medical homes (PCMH)

- Developed PCMH model to allow for better data exchange between medical homes, specialists and patients
- Since inception of the project, thirteen primary care sites have been recognized as Level III PCMH
- Patient portal has been implemented
- Project has served over 198,000 patients since its inception in 2013

STI test and treat

- Project has provided STI testing and/or treatment to over 10,100 patients from October 2013 to January 2017

Dental expansion

- Increased dental care access for uninsured and underinsured Travis County residents who are pregnant or have one or more chronic condition.
- Served about 22,000 patients since 2014 and currently serves about 3,600 patients per month.
- Projected to provide 43,000 dental visits from October 2016-September 2017. This is 7,000 more visits than were available during the baseline period, which was 36,000 visits from October 2011-September 2012.

Chronic care management/disease management registry

- Functionality to alert and inform care teams when patients with two or more chronic diseases require intervention and follow-up.
- Project team developed six clinical protocols to standardize care for the chronic care population.
- 47,964 patients were enrolled and treated under chronic care model protocols (CDM program) from FY14-FY16

Uses of Funds

Pulmonology expansion

- Increased access for the safety net population by contracting with and/or hiring pulmonologists and support staff to serve in community-based primary care settings as part of the CCC's provider network.
- Project increased annual pulmonology encounters from 136 during the baseline period to about 3,000 encounters per year, providing 10,234 encounters since 2013.
- In 2013, the wait time for pulmonology services was approximately four months; currently, there is no wait time for this service and same day appointments are available.

System navigation

- Increased number of MAP patients given an appointment to new or established primary care providers within 72 hours of ED discharge by 20% over 2013 baseline (166 newly established patients and 644 reconnected patients in FY17).
- DSRIP care coordinators also provided screening for basic need barriers and transportation assistance, scheduled ancillary services such as with nutritionists or pharmacists, connected patients to dental providers, notified the patient's care team about the patient's status, and educated patients about appropriate available resources to help avoid preventable ED visits in the future.

Paramedic Navigation (CHP)

- Short-term care management and patient navigation services through EMS.
- Over 500 patients served in 2016.

Mobile Health Teams

- Basic primary care provided across Travis County in rural and underserved areas – over 4,000 people served in 2016.
- Launched innovative backpack medicine program to bring screening to homeless encampments and refer into primary care health homes.

Other Health Care Delivery Activities

Other activities in the 2018 health care delivery program are as follows:

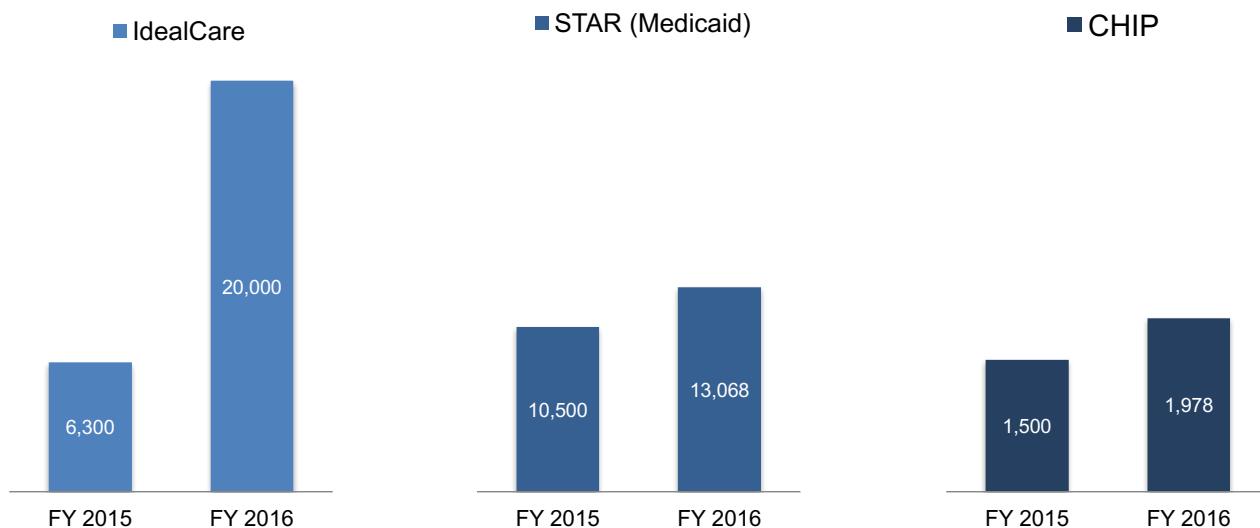
- Payments to Planned Parenthood and the Integrated Care Collaboration;
- Seton charity care payment;
- Service expansion for additional needs that may arise during fiscal year 2018;
- Transfer to the capital reserve, primarily for information technology, facilities improvements and equipment enhancement;
- Additional eligibility staff and operating costs;
- Funding risk-based capital needs for Central Health's Medicaid HMO—Sendero;
- Debt service; and
- New initiatives, which include:
 - Redevelopment of the Central Health Brackenridge Campus
 - New strategy development in the areas of women's health, cancer care and healthcare workforce development

Uses of Funds

An additional activity in the health care delivery program is an appropriation of Central Health's estimated 2018 contingency reserve of \$29.8 million. This appropriation provides flexibility for Central Health to accommodate any unanticipated expense or revenue issues that may occur unexpectedly. In previous years, significant IGT timing differences occurred which resulted in carrying forward the previous year budget into the next fiscal year. In fiscal year 2018, these IGT timing differences do not exist and result in a significant decrease in the contingency reserve.

Sendero Health Plans

Sendero Health Plans is a community-based health insurance provider owned by Central Health. Sendero provides coverage in both Medicaid and the federal Marketplace. In FY 2018, Central Health is budgeting \$4 million to provide capital funding levels that are determined by the Texas Department of Insurance. In FY 2016, Sendero provided approximately \$56.5 million in health care coverage for its enrolled members.



Uses of Funds

Capital Projects and Reserves

In the upcoming Fiscal Year 2018 there is an estimated \$5.6 million appropriated to capital reserves. This appropriation is higher than previous years in order to address several key projects in the upcoming year. Planning has been underway and construction will begin on the redesign and facilities upgrades at the CommUnityCare Rosewood-Zaragosa Health Center in East Austin. In addition, two key projects in eastern Travis County are anticipated to result in capital expenditures for facilities built in collaboration with key partners such as the city of Austin and Travis County. Finally, with the transition of hospital services from the Central Health Brackenridge Campus, we anticipate there could be capital expenditures to prepare for the redevelopment of the property or investments for the operations and management during the transition. The chart below outlines the projects estimates that support the appropriation to the reserves and if all are realized would ensure a \$2 million fund balance for unplanned capital expenses.

Rosewood Zaragosa Clinic	\$4.7 million
Central Health Brackenridge Campus	\$2.6 million
Eastern Travis County Facilities	\$1.5 million
Facilities Maintenance	\$350,000
Information Technology	\$250,000

Uses of Funds

Administration Program

This program funds the activities that allow Central Health to function as a governmental entity and a health care financing entity, e.g.; financial, legal, human resources, facility management, and planning and communications activities. Overall, administrative costs have increased from fiscal year 2017. Additional personnel costs related to compliance and policy have been included in fiscal year 2018. Consulting costs have also increased, as well as lease, security and maintenance expenses, which are necessary to support the ongoing operations of facilities.

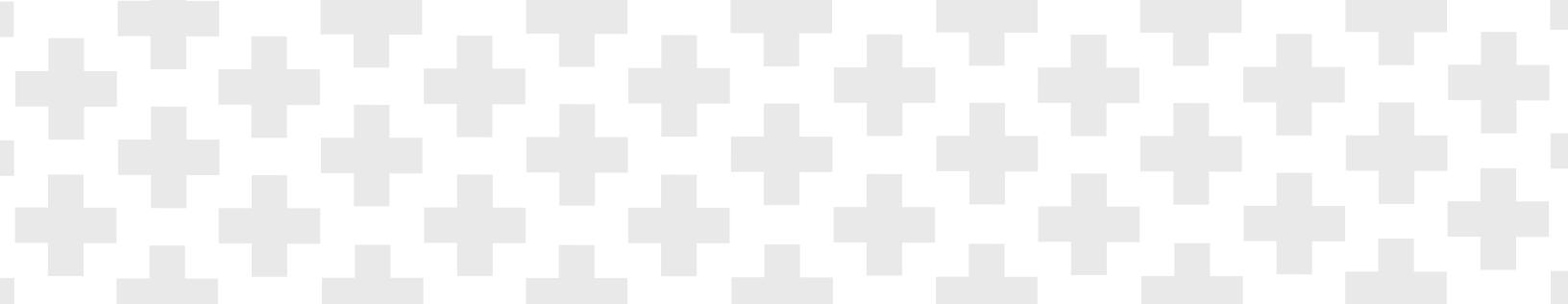
Tax Collection

Central Health incurs expenses payable to the Travis Central Appraisal District and tax collection office annually. In Fiscal Year 2018 we estimate these expenses to be approximately \$1.65 million.

Investing in the Workforce

Central Health invests in the local workforce through employment of over 73 full time equivalents in our Fiscal Year 2018 budget. We offer a robust benefits package, including healthcare coverage, retirement plan matching, life insurance and short- and long-term disability insurance. Furthermore, our health plan offers a wellness benefits, and employees have access to legal services and backup caretaker services. Included in our Fiscal Year 2018 budget is approximately a 3 percent merit increase in wages. There are 3.4 new full time equivalent positions were included in the Fiscal Year 2018 budget to support the healthcare delivery and administration programs.

Program	FTE	Proposed Title
Health care delivery	1.00	Program Specialists - RHP7 Anchor Team
Administration	1.00	Federal Policy Coordinator
Administration	1.00	Administrative Records Specialist
Administration	0.40	Benefits Specialist
Total	3.40	



Get Involved in Central Health

We encourage Travis County residents to keep up with our budget development process, ongoing financial updates and Board of Managers Budget and Finance Committee (held monthly and webcast live).

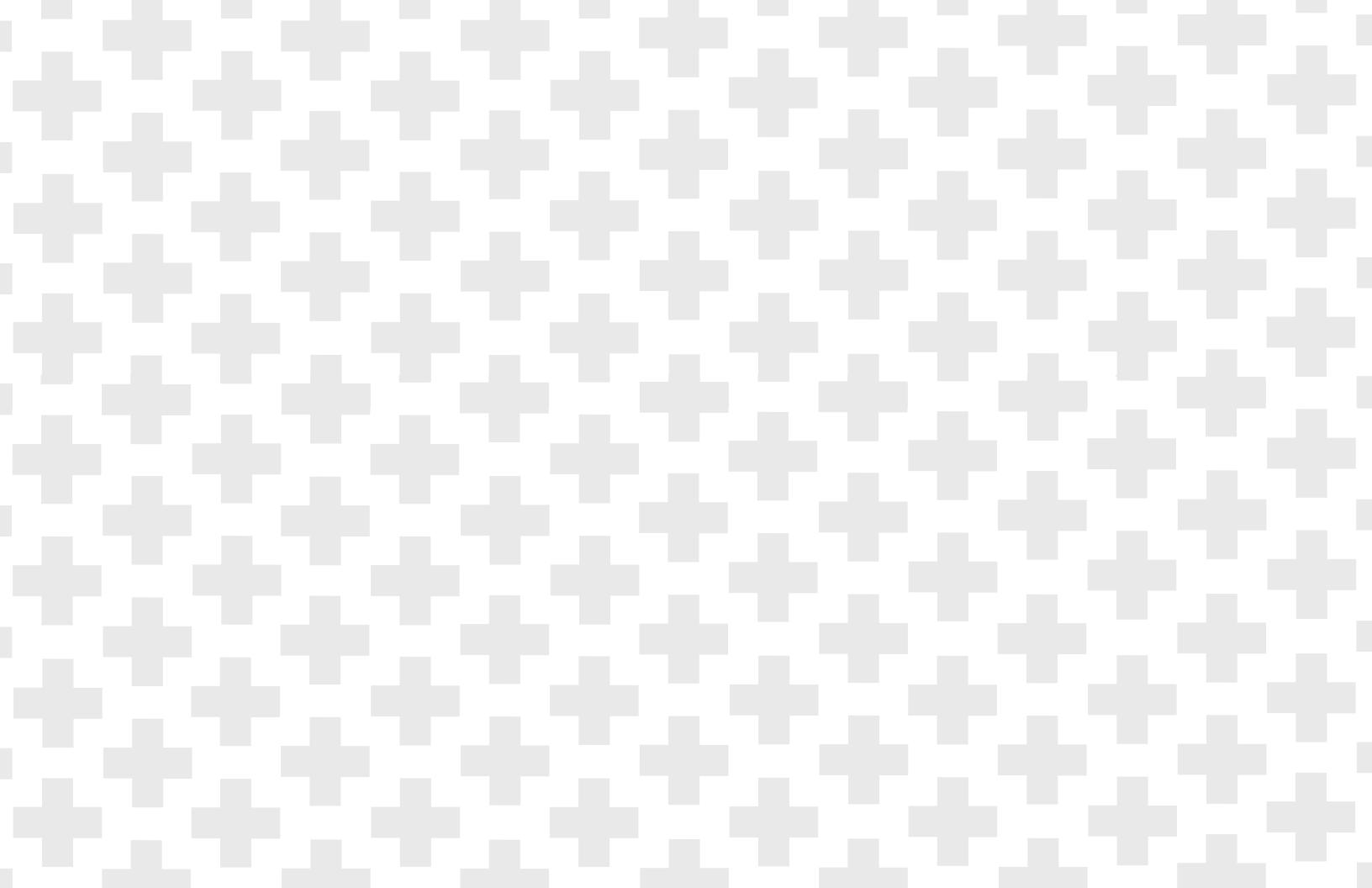
Central Health budget and finance information including monthly financial statements, annual financial audit reports, and current and previous fiscal year budgets are available at: <http://www.centralhealth.net/finance/>.

Central Health's Board of Managers meetings and the Board's Budget and Finance Committee meetings are both available by livestream and archived. Links to the meetings with agenda items, supporting materials, and presentations are available at: <http://www.centralhealth.net/meetings/>.

Central Health does a variety of community engagement activities including soliciting feedback from patients, community members, and concerned citizens. To connect with us please visit <http://www.centralhealth.net/> and sign up for our email list.

FY 2018 Budget Calendar

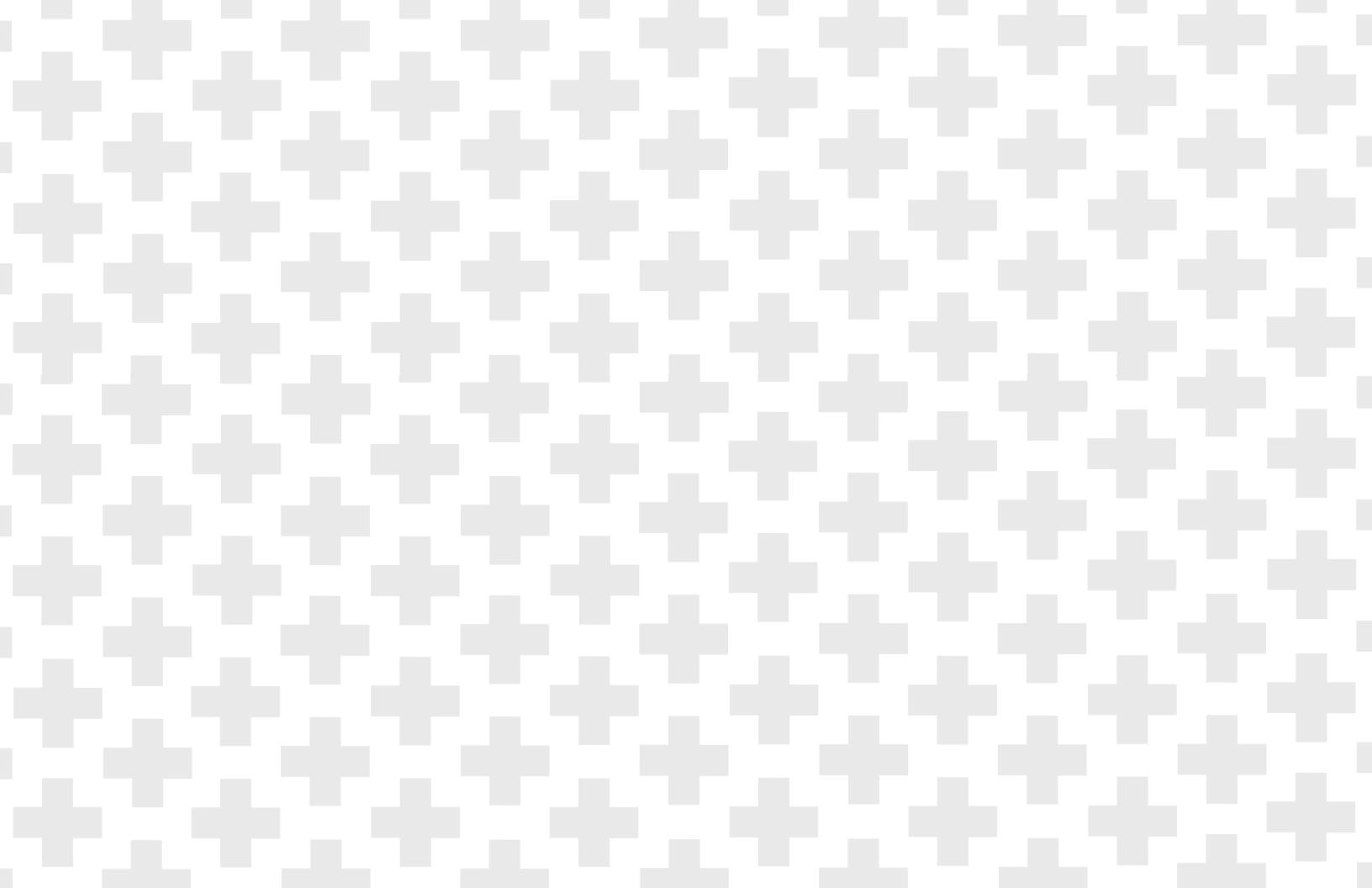
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| May 24 | Central Health Board of Managers (5-year forecast) |
| May 30 | Travis County Commissioners Court (FY 2017 update and FY 2018 budget guidelines) |
| June 21 | Central Health Budget and Finance Committee (budget update) |
| June 28 | Central Health Board of Managers (proposed budget) |
| June 19 | Central Health Budget and Finance Committee (FY 2018 CCC proposed budget) |
| July 26 | Central Health Board of Managers (FY 2018 CCC proposed budget and Central Health budget update) |
| Aug. 9 | Central Health Budget and Finance Committee (FY 2018 Central Health proposed budget and property tax rate) |
| Aug. 16 | Central Health Board of Managers (FY 2018 Central Health proposed budget and property tax rate) |
| Aug. 22 | Travis County Commissioners Court (Central Health proposed budget and property tax rate) |
| Aug. 30 | First public hearing |
| Sept. 6 | Second public hearing |
| Sept. 13 | Central Health Board of Managers (FY 2018 budget adopted) |
| Sept. 19 | Travis County Commissioners Court (FY 2018 Central Health proposed budget and property tax rate) |



Budget Attachment A



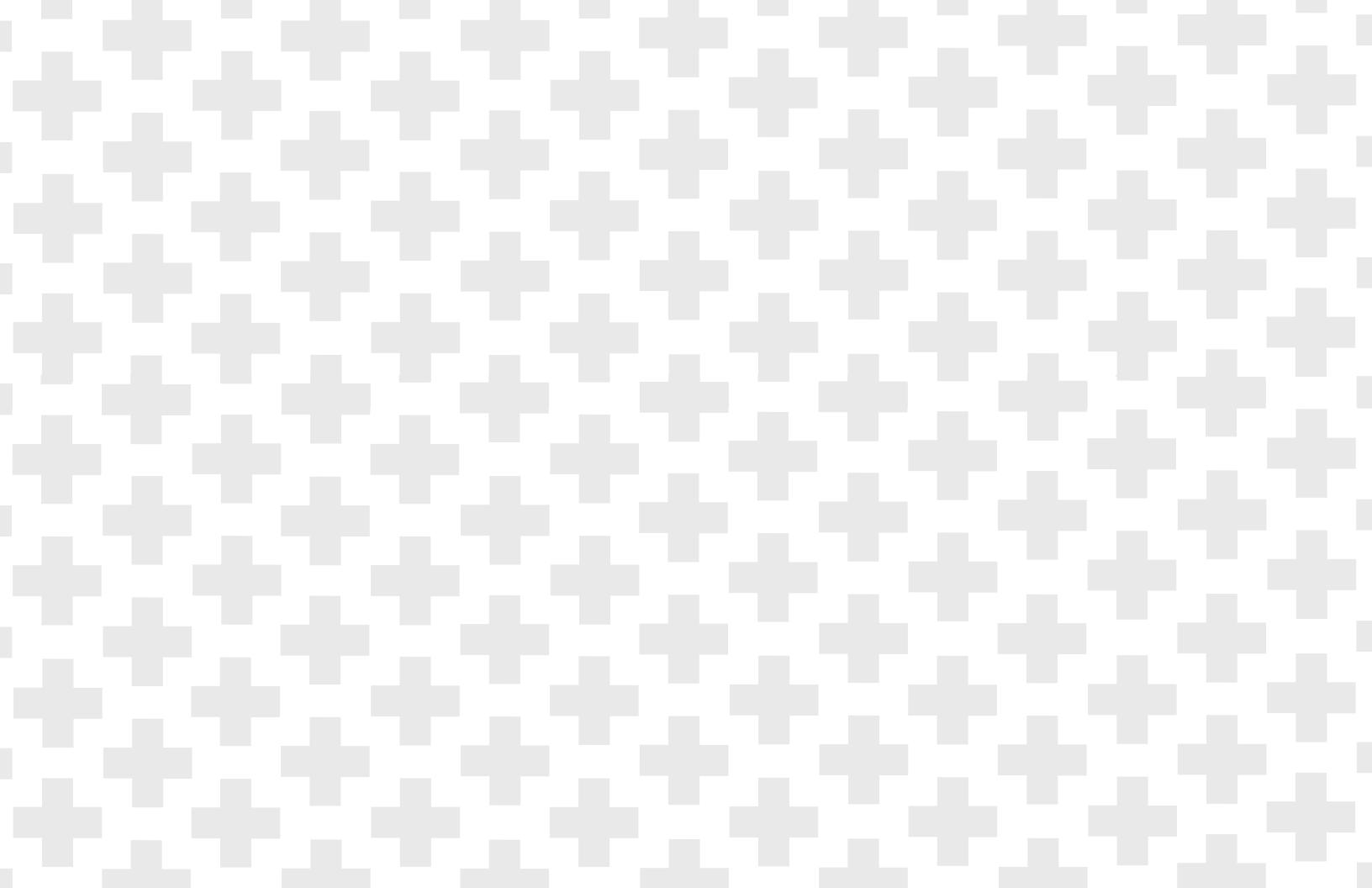
CENTRAL HEALTH



Budget Attachment B



CENTRAL HEALTH

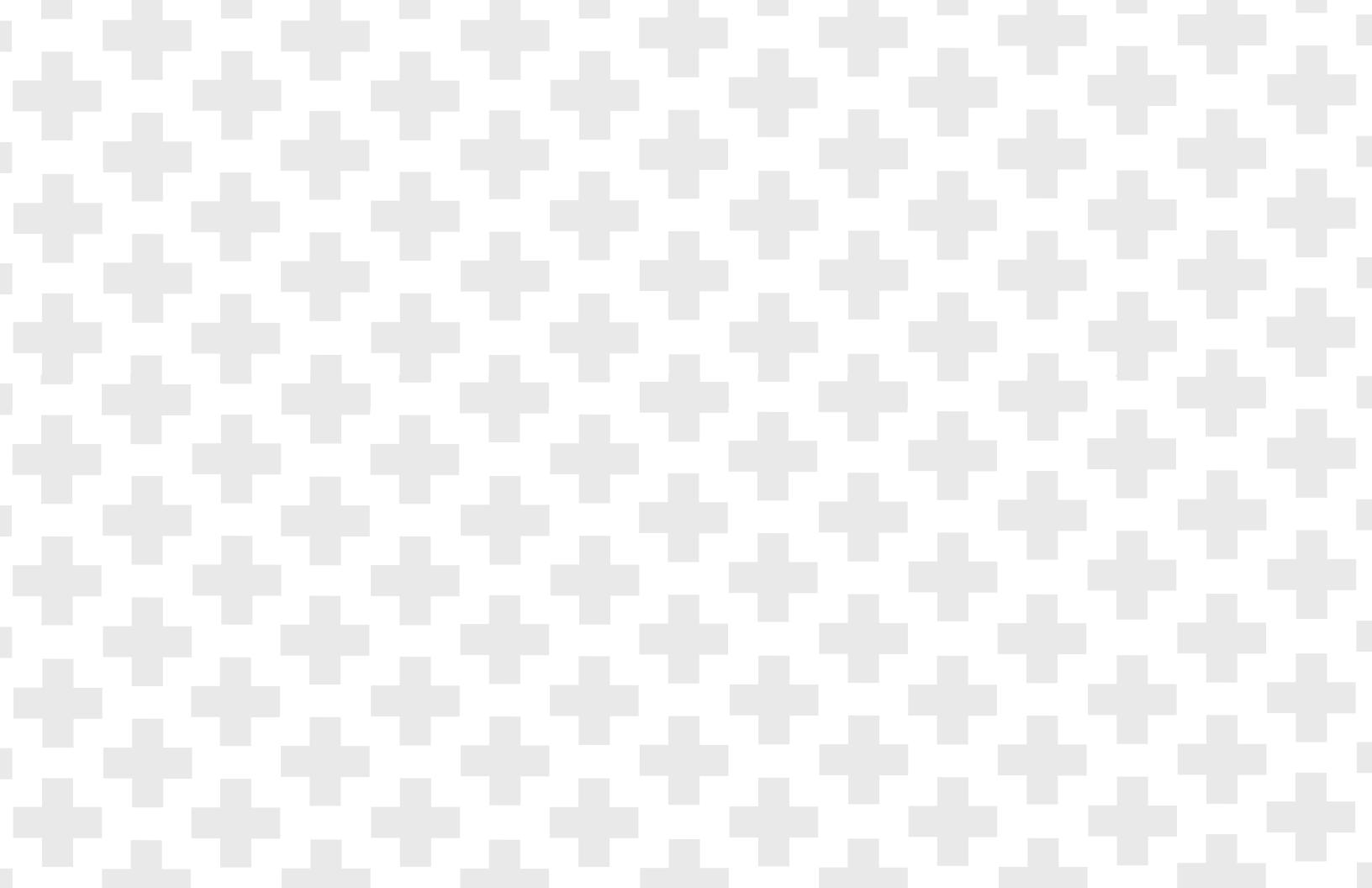


Attachment C



CENTRAL HEALTH

Reserve Policies



Attachment D



CENTRAL HEALTH

Fiscal Year 2016 Audited Financial
Statements with Component Units

For more information, visit any of Central Health's web sites:

www.CentralHealth.net

Central Health's primary web site. Find information about our history, our Board of Managers and Executive Leadership team, upcoming meeting schedules, budget and financial documents, links to health care resources, health care planning updates and data, news and press releases, job openings, and more.

www.CCC-IDS.org

The home for information about the Community Care Collaborative—the Central Health and Seton Healthcare Family non-profit partnership—including meetings, financing, current projects and careers.

www.CommUnityCareTX.org

The site is a resource for locations, services and contact information to any of CommUnity- Care's 20-plus health centers. Visitors may also access links to a patient portal, eligibility and career resources.

www.SenderoHealth.com

Sendero Health Plans is an Austin-based nonprofit organization providing a locally based health maintenance organization (HMO) tailored to the needs of Central Texas communities.

Visit the site to learn more about Sendero's health coverage options.

www.MedicalAccessProgram.net

This site provides information about the Medical Access Program (MAP), Central Health's own health coverage program for Travis County residents at or below 100 percent of federal poverty level. Learn about the benefits, where to seek care, and more.

www.CHEligibility.net

Find out if you might qualify for MAP, or any of the other health plans offered by the State of Texas, including Medicaid and CHIP. You can also learn about the process for enrolling and details about information necessary to begin.

www.TexasRHP7.org

The home for 1115 Medicaid Waiver-related information, specific to Region 7, the region anchored by Central Health. The latest news and updates for participants, as well as essential information, forms and data is all available here.

www.HealthyATC.org

This web portal brings unbiased data, local resources and a wealth of information to one, accessible, user-friendly location. The intent is to give our community the tools we need to read and understand the public health indicators that affect the quality of our residents' lives.



CENTRAL HEALTH

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