

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health

improves the health of our community.

Our Values

Central Health will achieve excellence through:

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

Innovation - We create solutions to improve healthcare access.

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

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

BOARD OF MANAGERS MEETING Wednesday, October 22, 2025, 4:00 p.m. Or immediately following the Budget and Finance Committee Meeting

Videoconference meeting¹

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

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

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

https://us06web.zoom.us/j/86358994379?pwd=4D31o5o0cWvWJwt4zXb11Ck4SqLtch.1

Meeting ID: 863 5899 4379 Passcode: 423356

Links to livestream video are available at the URL below (copy and paste into your web browser):

https://www.youtube.com/@tchealthdistrict/streams

Or to participate by telephone only:
Dial: (346) 248 7799
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A member of the public who wishes to make comments virtually during the Public Communication portion of the meeting must properly register with Central Health **no later than 2:30 p.m. on October 22, 2025**. Registration can be completed in one of three ways:

- Complete the virtual sign-in form at https://www.centralhealth.net/meeting-sign-up/;
- Call 512-978-9190. Please leave a voice message with your full name and your request to comment via telephone at the meeting; with the name of the meeting at which you wish to speak; or
- Sign-in at the front desk on the day of the meeting, prior to the start of the meeting.

Individuals who register to speak on the website or by telephone will receive a confirmation email and/or phone call by staff with instructions on how to join the meeting and participate in the public hearing or public communication.

PUBLIC HEARING

1. Receive public comment on the proposed mandatory payment rate to be assessed on institutional healthcare providers during fiscal year 2026 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. (*Informational Item*)

PUBLIC COMMUNICATION

Public Communication rules for Central Health Board and Committee meetings include setting a fixed amount of time per person to speak and limiting Board and Committee responses to public inquiries, if any, to statements of specific factual information or existing policy. The Public Communication portion of the meeting will begin at approximately 5:30 p.m.

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 Board of Managers September 24, 2025 meeting.
- C2. Receive and ratify Central Health Investments for September 2025
- C3. Approve the acquisition of two properties located in North and East Travis County as recommended by the Budget and Finance Committee.
- C4. Adopt a Resolution approving the issuance of the District's Certificates of Obligation; approving the form of and requesting that the Travis County Commissioners Court approve and adopt order(s) to authorize the issuance of such certificates; and other related actions as approved by the Budget and Finance Committee.
- C5. Approve a resolution expressing intent to finance expenditures to be incurred as recommended by the Budget and Finance Committee.
- C6. Approve the capital project budgets as recommended by the Budget and Finance Committee

- C7. Approve the CommUnityCare CEO Personnel Policy as recommended by the Ad Hoc CommUnityCare Liaison Committee.
- C8. Approve the Annual Joint Staff Planning and Budgeting Methodology Pertaining to Health Center Program Funding as recommended by the CommUnityCare Liaison Committee.
- C9. Take appropriate action on key issues related to the Co-Applicant Agreement between Central Health and Central Texas Community Health Centers d/b/a CommUnityCare as recommended by the CommUnityCare Liaison Committee.

REGULAR AGENDA²

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- 3. Review and provide direction to staff on the prioritization and tentative scheduling of items for consideration at future Central Health Board and Committee meetings. (*Informational Item*).
- 4. Receive and discuss an overview of legislative and regulatory issues impacting the Central Health System.³ (*Informational Item*)
- 5. Receive and discuss a briefing regarding *Travis County Healthcare District d/b/a Central Health v. Ascension Texas f/k/a Seton Healthcare Family*, Cause No. D-1-GN-23-000398.³ (*Informational Item*)
- 6. Receive and discuss a briefing regarding *Birch*, *et al. v. Travis County Healthcare District d/b/a Central Health and Dr. Patrick Lee*, Cause No. D-1-GN-17-005824 in the 345th District Court of Travis County.³ (*Informational Item*)
- 7. Deliberation and possible action on the appointment, employment, evaluation, reassignment, duties, discipline, or dismissal of one or more Central Health employees.^{3,4} (*Action Item*)
- 8. Confirm the next regular Board meeting date, time, and location. (*Informational Item*)

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- Possible closed session discussion under Texas Government Code §551.071 (Consultation with Attorney).
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STAYS IN FILE





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> Dyana Limon-Mercado County Clerk, Travis County, Texas

By _______Deputy

ARIEL HERNANDEZ

FILED AND RECORDED
OFFICIAL PUBLIC RECORDS

Dyana Limon-Mercado, County Clerk Travis County, Texas

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Oct 16, 2025 02:47 PM

Fee: \$0.00 H

HERNANDEZA

Central Health Board of Managers Shared Commitments Agreed adopted on June 30, 2021

Whereas, the Board of Managers of Central Health has come together as a governing body to ensure the Vision of Central Health: Central Texas is a model health Community;

Whereas, the Board of Managers of Central Health bring this vision into reality by enacting the mission of caring for those who need it most and thereby improving the health of our community;

Whereas, the Board of Managers of Central Health achieves excellence toward this vision and mission through the stated values of Stewardship, Innovation, Respect, and Collaboration;

Whereas, the Board of Managers of Central Health further known as we in this document understand that systemic racism is the root of health inequities that emerge from a history of racism in Texas including Travis County that contributes to the social determinants of health that play a primary role in producing inequitable health outcomes;

Whereas, as an organization, Central Health is anti-racist and committed to a diverse and inclusive culture that seeks equity and social justice in the pursuit of its mission:

- 1. We Commit to informing all of our actions as Board Managers with the understanding that we are accountable to recognizing and to interrupting systems of oppression. This includes understanding the power structure in the United States, and Texas, and Travis County, that advantages certain community members and has historically disadvantaged other community members based on the color of their skin, race, ethnicity, language, and/or other characteristics. We further understand that to disrupt this power structure and the health inequities it produces, we must collaborate to collectively respond to the lived realities of all ethnicities, races, and identities disadvantaged within this system and all historically oppressed identities and communities disadvantaged within this system. We Commit to understanding that when disadvantaged communities compete against each other, we all lose in this system, and the only way forward is to work together for the benefit of all oppressed communities collectively.
- 2. We Commit to a model of Generative Leadership which requires us to understand and practice collaboration and accountability demonstrated by following our agreed upon meeting procedures and ensuring all members have the opportunity for comparable speaking time. We further Commit to intentionality prior to speaking including: considering: what is the goal of what I

- want to share; is this the right time to share it; and is this in keeping with our collective goal for this particular moment within this particular meeting?
- 3. We Commit to Generative Conflict which includes engaging in disagreements and differences in perspective in a way that deepens relationships and trust by expanding knowledge and understanding of each other, including expecting our ideas to be expanded and enriched by learning and engaging with other Board Manager ideas, choosing curiosity over competition of ideas, and anchoring our conversations in our common purpose.
- 4. We Commit to practicing emotional intelligence as leaders which includes being aware of our own emotions and reactions and managing them, as well as being aware of our impact on others and managing this impact for the collective good when we are in our role as Board Managers.
- 5. We Commit to being aware of our own privileges and advantages in the sociopolitical and economic structure of the United States, Texas, and Travis County to use these for the benefit of interrupting inequities across historically disadvantaged identities.
- 6. We Commit to preventing the commission of microaggressions through the awareness of the history and oppression of diverse identities and communities. To this end, we Commit to strive to learn the historical context informing the lived realities of all historically oppressed identities and communities, and to use this to prevent use of language and commission of actions that can be harmful given these histories.
- 7. If we inadvertently commit a microaggression, we strive to immediately become aware on our own of the harm we have caused. If another Board Manager generously helps us become aware of a microaggression we have committed we welcome the support in our learning and growing process as a leader and immediately express appreciation for having made us aware, own the mistake we have made, acknowledge the impact of the harm we have caused, and engage repair through apology and the articulation of what we will do to avoid the repetition of such harm in the future.
- 8. If we observe one of our fellow Board Managers commit a microaggression, we Commit to calling them in by letting them know in a respectful and kind manner of the mistake that has been made.
- 9. We understand that many of us, as survivors of historically oppressed identities and communities, carry internalized narratives of oppression, and we can inadvertently express these oppressions against others in ways that cause harm and we Commit to the same process identified in 7 and 8 to engage repair and return to generative collaborative processes.
- 10. We understand that even without the history of oppression potentiating the weight of harm, expressions of prejudice and rudeness can also cause harm to our shared aims, and we Commit to the same process identified in 7 and 8 to engage repair and return to generative collaborative processes.

- 11. We Commit to using our Racial and Social Justice Framework (next page) for decision-making as we work together for the collective good of our communities as we eradicate health inequities and create a model healthy community.
- 12. We understand that we are entrusted with a vital responsibility for our communities and are accountable stewards for the time and resources available to our Board of Managers. We understand that these commitments are entered into to ensure responsible stewardship of this time and resources through generative collaborative processes to reach our vision and mission and we agree that if we do not follow any one of these commitments we welcome our Board Manager colleagues to bring this to our attention through the agreed upon process reflected here and when this occurs, we commit to immediately acknowledging the mistake and engaging in a repair and correction process as indicated in these commitments so that our work to dismantle systemic racism and resulting barriers and achieve health equity can move forward.

Manager as of 6/30/2021 and henceforth forward	as indicated by signature below.	
Board Manager Signature	Date	_

Be it adopted that the above agreements will be honored and acted upon by each Board

Board Manager Printed Name

Calling In and Repairing Harm

Calling In after Harm in Groups with Shared Values and Aims Stance

Hey, this thing you said/did hurt some folks or could hurt some folks.

- A) Here's why that can be hurtful or,
- B) Please do some research to learn the history of why that's hurtful.

Implied message: I know you are good and are on this journey with us and we are all going to make mistakes as we unlearn things.

Calling In after Harm in Groups with Shared Values and Aims Sample Language

• I know it wasn't your intention, but what you just said minimizes the horror of		
e.g. the history of racism, enslavement, the holocaust, etc.		
 I know it wasn't your intention but what you just said has the impact of implying that 		
are not competent or as intelligent as others.		
 What you just said suggests thatpeople don't belong. 		
 That phrase has been identified as being disrespectful and painful to 		
people and it's important that we not use it.		
 Oh, I have also used that term, but I have now learned that when we use it we are 		
leaving out people who or we are implying thatand the		
word people are learning to use now is		
 The term used now by people living with that identity is 		

Repairing Harm after Microaggressions, Mistakes, and expressions of Prejudice

- Own / Name it
- Recognize the Impact
- Apologize (Do not share context or explanations)
- Make any amends that are possible
- State what you are going to do to learn and do better in the future.

Sample Language: Thank you so much for letting me know. You are right, I used this term or said that phrase and realize that it has the impact of minimizing the experience of ______ or implying that_____. I am deeply sorry and will practice learning the correct language and will research and learn more about this to ensure that I do not make this mistake and cause this harm in the future.



RACIAL and SOCIAL JUSTICE FRAMEWORK

Values and Anti-Racism/Anti-Oppression

- Is this consistent with our values?
- Are we taking steps so we cannot predict outcomes by race and other systemically disadvantaged characteristics?

Intentional and Accountable Storytelling

- What data are we using and has it been disaggregated by race? What is the source of the data? Who is it making visible and invisible? Whose experience is being centralized and whose is being marginalized in the data? Does the way we are using the data reflect the complexity of the issues and reflect the issues accurately?
- What are the stories and narratives we are telling? What is the purpose? Who is interpreting the meaning? Who's it meant for? Who's impacted and how?
- Are we refusing to be ahistorical? Are we fully considering history and the impacts of the historical context?

Power Analysis

- What are the power dynamics in this situation? What are the intersecting spheres of oppression at work in this situation?
- What are the cultural norms of white supremacy at work in this situation?
- Who would benefit and who would be harmed by this action/decision?
- Does this interrupt/disrupt or collude with/reinforce oppressive systems/power structures?
- If this is attempting a solution, where are we locating the problem?
- Does the solution/strategy we are proposing change the system or the individual?
- Who are we asking to change and why?

Relationships

- Who is in the room and who isn't and why? Who is sharing and who is not and why?
- Whose perspective is represented/who is left out? And who is doing the representing? Who do we believe, who do we find credible? Why? Why not?
- Whose experience is being centralized and whose experience is being marginalized?
 Who is gazing and who is being gazed upon?
- Are we boldly leading toward our racial justice aim by building a broad coalition of support?
- Are we operating from a similar/shared understanding of anti-racism work? Do we have a shared anti-racist understanding of where the problem is located and a shared anti-racist theory of change to generate a solution? Have we agreed upon a shared goal?





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PUBLIC HEARING

October 22, 2025

PUBLIC HEARING ITEM 1

Receive public comment on the proposed mandatory payment rate to be assessed on institutional healthcare providers during fiscal year 2026 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. (*Informational Item*)



MEMORANDUM

To: Central Health Board of Managers

From: Katie Coburn

CC: Patrick Lee, President & CEO

Date: October 22, 2025

Re: Setting the Local Provider Participation Fund (LPPF) mandatory payment rate for FY 26

- ACTION ITEM

Overview:

Central Health staff request the board take action to set the FY 2026 Local Provider Participation Fund (LPPF) mandatory payment rate at 6.00% of net patient revenue of Travis County inpatient hospitals.

Synopsis:

Under Chapter 298E of the Texas Health & Safety Code, the Central Health Board is authorized to set an LPPF mandatory payment rate for hospitals that provide inpatient services in Travis County. Funds generated by the payment must be used to provide intergovernmental transfer (IGT) payments on behalf of nonpublic hospitals to draw down Federal matching funds available in certain Medicaid supplemental payment programs. The Travis LPPF program is not authorized to fund Delivery System Reform Incentive Payments (DSRIP) and Disproportionate Share (DSH) Program payments per its enabling legislation. The LPPF program is a critical financing tool to support hospitals that serve people with low income who have Medicaid or are uninsured.

By state law and federal regulation, the mandatory fee must be uniform and broad based. This is accomplished by assessing the same (uniform) percentage of the net patient revenue of all inpatient hospitals (broad-based) within Central Health's jurisdiction.

The proposed payment rate of 6.00% will generate approximately \$305 million annually. It is intended to provide the local funding portion for the Comprehensive Hospital Increased Reimbursement Program (CHIRP), the Uncompensated Care (UC) Pool, Graduate Medical Education (GME) for private hospitals, the Hospital Augmented Reimbursement Program (HARP), and the Aligning Technology by Linking Interoperable Systems (ATLIS) program.



Statute requires the Board to hold a public hearing for the initial rate setting for a fiscal year. The hearing will be held October 22, 2025. Notice of the hearing was published in a local newspaper and emailed directly to LPPF hospitals and other stakeholders five days before the date of the hearing, as required by law.

Central Health staff evaluated the rate and recommend the board adopt the proposed amended rate of 6.00%.

Fiscal Impact:

There is no impact on Central Health funds. LPPF funds are kept in a separate account and used only for legislatively defined purposes described above.

Action Requested:

Central Health staff request the board take action to set the FY 2026 Local Provider Participation Fund (LPPF) mandatory payment rate at 6.00% of net patient revenue of Travis County inpatient hospitals.



Travis County LPPF

Consider and Set the FY 26 Mandatory Payment Rate

October 22, 2025



Local Provider Participation Fund (LPPF) Mandatory Payment Rate

- Assessed as a uniform percentage of net patient revenue of Travis County inpatient hospitals
- Set by the Board of Managers
- Central Health, as LPPF Administrator, collects funds to be held in fiduciary capacity and completes intergovernmental transfers (IGTs) for hospital inpatient facilities to receive matching federal funds
- Use of Funds

Limited to legislatively defined purpose of accessing federal supplemental payments with local funds; DSH and DSRIP are prohibited

Central Health collaborates with hospital representatives on uses of funds for

IGT

- \$150,000 paid annually to Central Health for administrative expenses
- Requested Rate for FY 26: 6.00% (maximum allowed by law)

FY 25 Rate Proposal

BOM Action Date	Rate	Use	Estimated Annual Amount
October 2025	6.00%	Comprehensive Hospital Increased Reimbursement Program (CHIRP) Uncompensated Care Pool (UC) Graduate Medical Education (GME) Hospital Augmented Reimbursement Program (HARP) Aligning Technology by Linking Interoperable Systems (ATLIS)	\$305 million

Board Action Request

Set the FY 26 Travis County Local Provider Participation Fund (LPPF) rate to 6.00%, the maximum allowed by the LPPF statute.



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BOARD MEETING

October 22, 2025

AGENDA ITEM C1

Approve the minutes of the Board of Managers September 24, 2025 meeting.

MINUTES OF MEETING – SEPTEMBER 24, 2025 CENTRAL HEALTH BOARD OF MANAGERS

On Wednesday, September 24, 2025, a meeting of the Central Health Board of Managers convened in open session at 6:15 p.m. in person at the Central Health Administrative Offices. Clerk for the meeting was Valerie Guerra.

Board members present at Central Health: Chairperson Kitchen, Treasurer Museitif, Manager May, Manager Motwani, Manager Rodriguez, and Manager Valadez.

Absent: Vice Chairperson Brinson, Secretary Martin, and Manager Jones

PUBLIC COMMUNICATION

Clerk's Notes: Public Communication began at 6:15 p.m. Yesenia Ramos introduced 2 speakers for Public Communication.

Members of the Board heard from:

Dr. Schalscha from Central Health Yesenia Ramos from Central Health

CONSENT AGENDA

- C1. Approve the minutes of the Public Hearing and Board of Managers September 10, 2025 meeting.
- C2. Receive and ratify Central Health Investments for August 2025.
- C3. Approve the reappointment of Patricia Young Brown to the Integral Care Board of Directors as recommended by the Ad Hoc Appointments Committee.
- C4. Approve the CommUnityCare CEO Employment agreement as recommended by the CUC Liaison Committee.
- C5. Approve the acquisition of two properties located in North and East Travis County as recommended by the Budget and Finance Committee.
- C6. Adopt a Resolution approving the issuance of the District's Certificates of Obligation; approving the form of and requesting that the Travis County Commissioners Court approve and adopt order(s) to authorize the issuance of such certificates; and other related actions as approved by the Budget and Finance Committee.
- C7. Approve a resolution expressing intent to finance expenditures to be incurred as recommended by the Budget and Finance Committee.
- C8. Approve the capital project budgets as recommended by the Budget and Finance Committee.
- C9. Authorize the President and CEO to negotiate and execute a contract with Hall Benefits Law for legal services related to employee retirement and health plan issues under ERISA as recommended by the Budget and Finance Committee.

Manager Valadez moved that the Board approve items C1 through C4 and C9.

Manager Museitif seconded the motion.

For Chairperson Ann Kitchen Vice Chairperson Cynthia Brinson Absent Treasurer Maram Museitif For Secretary Manuel Martin Absent Manager Shannon Jones Absent Manager Eliza May For Manager Amit Motwani For Manager Geronimo Rodriguez For Manager Cynthia Valadez For

REGULAR AGENDA

1. Receive an update on Central Health Communications and listening sessions, including efforts regarding the FY 2026 Budget.

Clerk's Notes: Discussion on this item began at 6:20 p.m. Ted Burton, Chief Communications Officer, briefly reviewed and discussed community listening sessions from August 2025 to assess awareness and perception of Central Health's strategic direction.

2. Discuss Board of Managers' strategic planning framework to develop a long-term future vision for Central Health.

Clerk's Notes: Discussion on this item began at 6:23 p.m.

At 6:23 p.m. Chairperson Kitchen announced that the Board was convening in closed session to discuss agenda item 2 under Texas Government Code §551.071 (Consultation with Attorney); Texas Government Code §551.072 (Deliberation Regarding Real Property); and Texas Government Code §551.085 (Governing Board of Certain Providers of Health Care Services).

At 8:02 p.m. the Board returned to open session.

3. Receive and discuss a briefing regarding *The O'Haver Company, Ltd. d/b/a O'Haver Contractors v. Travis County Healthcare Dist. d/b/a Central Health, Cause No. D-1-GN-25-007941.*

Clerk's Notes: Discussion on this item began at 8:02 p.m.

At 6:23 p.m. Chairperson Kitchen announced that the Board was convening in closed session to discuss agenda item 3 under Texas Government Code §551.071 (Consultation with Attorney).

At 8:02 p.m. the Board returned to open session.

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

Manager Museitif moved that the meeting adjourn.

Manager Valadez seconded the motion.

Chairperson Ann Kitchen For Vice Chairperson Cynthia Brinson Absent

	Treasurer Maram Museitif Secretary Manuel Martin Manager Shannon Jones Manager Eliza May Manager Amit Motwani Manager Geronimo Rodriguez Manager Cynthia Valadez	For Absent Absent For For For
The meeting wa	as adjourned at 8:02 p.m.	
		ATTESTED TO BY:
	 	 W. C. O
Ann Kitchen, C Central Health	nairperson Board of Managers	Martin, Secretary Health Board of Managers



Our Vision

Central Texas is a model healthy community.

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

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Central Health will achieve excellence through:

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Innovation - We create solutions to improve healthcare access.

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

BOARD MEETING

October 22, 2025

AGENDA ITEM C2

Receive and ratify Central Health Investments for September 2025

AGENDA ITEM #

STATE OF TEXAS

Date:

MANAGER

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

October 22, 2025

- 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 \$913.33 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 1 page(s).
- 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.

CHAIR, BOARD OF MAN	NAGERS
VICE CHAIR, BOARD OF MANAGERS	MANAGER
MANAGER	MANAGER
MANAGER	MANAGER

MANAGER



Date:	9/22/2025
Time:	10:30

The following transaction was executed on behalf of Central Health:

Description:	TCHD TexPool OP to TCHD TexPool LPPF	Fund Name:	Central Health
Par Value:	\$913.33	Safekeeping No.:	N/A
	N/A		100%
	N/A		
	\$913.33	,	TCHD TexPool OP to TCHD TexPool LPPF
Accured Int:	N/A	Broker:	N/A
Total Due:	\$913.33	CUSIP #:	N/A
Trade Date:	9/22/2025	Settlement Date:	9/22/2025
		10	

Authorized by: Keagan Cash / Investment Manager

CENTRAL HEALTH - LPPF INVESTMENT REPORT

PORTFOLIO STATISTICS

DATE: September 30, 2025

By Fund Type LPPF	\$	7,610,201.70	100.00%
Total Portfolio	\$	7,610,201.70	100.00%
By Security Type LPPF-			
TexasDAILY	\$		0.00%
TexPool	φ \$	- 7,610,201.70	100.00%
TexSTAR	\$	-	0.00%
TexasTERM CP	\$	<u>-</u>	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	\$	7,610,201.70	100.00%

LPPF Investment Revenue & Accrued Interest	September-25	Fiscal YTD
Interest/Dividends-		
TexasDAILY	0.00	0.00
TexPool	30,695.04	2,729,575.00
TexSTAR	0.00	0.00
TexasTERM CP	0.00	0.00
Certificates of Deposit	0.00	0.00
Treasury Securities	0.00	0.00
Government Agencies	0.00	0.00
Commercial Paper	0.00	0.00
Municipal Bonds	0.00	0.00
LPPF Total Investment Revenue & Accrued Interest	\$ 30,695.04	\$ 2,729,575.00

AGENDA ITE	M #

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

- 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 \$17,779,325.76 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 8 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: <u>October 22, 2025</u>

CHAIR, BOARD OF MANAGERS

VICE CHAIR, BOARD OF MANAGERS	MANAGER
MANAGER	MANAGER
MANAGER	MANAGER
MANAGER	MANAGER



			Date:	9/2/2025
			Time:	10:30
The following transaction was executed on behalf of Central Health:				
Description:	TexPool	Fund Name:	Central	Health
Par Value:	\$732,000.00	Safekeeping No.:	N/	/A
CPN/DISC Rate:	N/A	Price:	100)%
Maturity Date:	N/A	Bond Eq Yield:	4.30	96%
Principal:	\$732,000.00	Purchased Thru:	TexF	Pool
Accured Int:	N/A	Broker:	N/	Ά
Total Due:	\$732,000.00	CUSIP #:	N/	<u>A</u>
Trade Date:	9/2/2025	Settlement Date:	9/2/2	2025

Authorized by: Reagan Scime Cash / Investment Manager



			Date: 9/12/2025	
			Time: 10:30	
The following transaction was executed on behalf of Central Health:				
Description:	Texas Daily Select	Fund Name:	Central Health	
Par Value:	\$189,000.00	Safekeeping No.:	N/A	
CPN/DISC Rate:	N/A	Price:	100%	
Maturity Date:	N/A	Bond Eq Yield:	4.4400%	
Principal:	\$189,000.00	Purchased Thru:	Texas Daily Select	
Accured Int:	N/A	Broker:	N/A	
Total Due:	\$189,000.00	CUSIP #:	N/A	
Trade Date:	9/12/2025	Settlement Date:	9/12/2025	
Authorized by: Deborah Laudermilk				
Cash / Investment Manager				



			Date: 9/18/2025	
			Time: 10:30	
The following transaction was executed on behalf of Central Health:				
Description:	Texas Daily Select	Fund Name:	Central Health	
Par Value:	\$240,000.00	Safekeeping No.:	N/A	
CPN/DISC Rate:	N/A	Price:	100%	
Maturity Date:	N/A	Bond Eq Yield:	4.4400%	
Principal:	\$240,000.00	Purchased Thru:	Texas Daily Select	
Accured Int:	N/A	Broker:	N/A	
Total Due:	\$240,000.00	CUSIP#:	N/A	
Trade Date:	9/18/2025	Settlement Date:	9/18/2025	
Authorized by: Reagan Hammes Cash / Investment Manager				



			Date: 9/19/2025	
			Time: 10:30	
The following transaction was executed on behalf of Central Health:				
Description:	Texas Daily Select	Fund Name:	Central Health	
	\$279,000.00		N/A	
CPN/DISC Rate:	N/A	Price:	100%	
Maturity Date:	N/A	Bond Eq Yield:	4.3600%	
Principal:	\$279,000.00	Purchased Thru:	Texas Daily Select	
Accured Int:	N/A	Broker:	N/A	
Total Due:	\$279,000.00	CUSIP #:	N/A	
Trade Date:	9/19/2025	Settlement Date:	9/19/2025	
Authorized by: Deborah Laudermilk				
Cash / Investment Manager				



Date: 9/22/2025 Time: 10:30

The following transaction was executed on behalf of Central Health:			
Description:	Texas Daily Select	Fund Name:	Central Health
Par Value:	\$267,000.00	Safekeeping No.:	N/A
CPN/DISC Rate:	N/A	Price:	100%
		111001	20070
Maturity Date:	N/A	Bond Eq Yield:	4.3200%
Principal:	\$267,000.00	Purchased Thru:	Texas Daily Select
Accured Int:	N/A	Broker:	N/A
Total Due:	\$267,000.00	CUSIP #:	N/A
		•	

Authorized by: Cash / Investment Manager

Settlement Date:

9/22/2025

Trade Date: 9/22/2025



Date: 9/24/2025 Time: 10:30

The following transaction was executed on behalf of Central Health:

Description:	Texpool Operating to TexPool Bond Proceeds	Fund Name:	Central Health
Par Value:	\$5,380,409.09	Safekeeping No.:	N/A
CPN/DISC Rate:	N/A	Price:	100%
Maturity Date:	N/A	Bond Eq Yield:	4.1800%
Principal:	\$5,380,409.09	Purchased Thru:	Texpool Operating to TexPool Bond Proceeds
Accured Int:	N/A	Broker:	N/A
Total Due:	\$5,380,409.09	CUSIP#:	N/A
Trade Date:	9/24/2025	Settlement Date:	9/24/2025

Authorized by: Cash / Investment Manager



Date:	9/29/2025
Time:	10:30

The following transaction was executed on behalf of Central Health: Description: Texas Daily Select Fund Name: Central Health Par Value: \$10,312,916.67 Safekeeping No.: N/A

CPN/DISC Rate: N/A	Price:	100%
--------------------	--------	------

Maturity Date: N/A Bond Eq Yield: 4.2900%

Principal: \$10,312,916.67 Purchased Thru: Texas Daily Select

Accured Int: ______ N/A _____ Broker: _____ N/A ____

Total Due: \$10,312,916.67 CUSIP #: N/A

Trade Date: ______9/29/2025 Settlement Date: ______9/29/2025

Authorized by: Cash / Investment Manager



Central Health Investment Department Security Transaction Form

			Date: 9/30/2025		
			Time: 10:30		
The following transaction was executed on behalf of Central Health:					
Description: _	Texas Daily Select	Fund Name:	Central Health		
Par Value:	\$379,000.00	Safekeeping No.:	N/A		
CPN/DISC Rate:	N/A	Price:	100%		
Maturity Date:	N/A	Bond Eq Yield:	4.2800%		
Principal:	\$379,000.00	Purchased Thru:	Texas Daily Select		
Accured Int:	N/A	Broker:	N/A		
Total Due:	\$379,000.00	CUSIP#:	N/A		
Trade Date:	9/30/2025	Settlement Date:	9/30/2025		
Authorized by: Regan Home Cash / Investment Manager					

CENTRAL HEALTH MONTHLY INVESTMENT REPORT PORTFOLIO STATISTICS

DATE: September 30, 2025

By Fund Type				
Operating		\$ 631,621,611.35	86.52%	
LPPF		7,610,201.70	1.04%	
Bond Proceeds		90,787,691.00	12.44%	
Other		 <u> </u>	0.00%	
	Total Portfolio	\$ 730,019,504.05	100.00%	
By Security Type				
Operating-				
TexasDAIL`	Υ	\$ 2,584,484.90	0.41%	
TexasDAIL'	Y Select	\$ 184,186,043.32	29.16%	
TexPool		\$ 31,926,099.00	5.05%	
TexSTAR		\$ 1,093,529.52	0.17%	
TexasTERN	И СР	-	0.00%	
Non-Int Bea	aring Bank Account	438,284.01	0.07%	
Certificates	of Deposit	-	0.00%	
Treasury Se	ecurities	-	0.00%	
Governmen	it Agencies	374,787,770.00	59.34%	
Commercia	l Paper	-	0.00%	
Municipal B	onds	 36,605,400.60	5.80%	
	Total	\$ 631,621,611.35	100.00%	
LPPF-				
TexPool		7,610,201.70	100.00%	
	Total	\$ 7,610,201.70	100.00%	
Bond Proceeds-				
TexPool		\$ 90,787,691.00	100.00%	
	Total	\$ 90,787,691.00	100.00%	
Compared to Policy Lin	nits		Actual %	Guidelines
TexasDAIL`		2,584,484.90	0.35%	30.00%
TexasDAIL	Y Select	184,186,043.32	25.25%	30.00%
TexPool		130,323,991.70	17.86%	50.00%
TexSTAR		1,093,529.52	0.15%	30.00%
TexasTERN		 0.00	0.00%	30.00%
	Total LGIPS	\$ 318,188,049.44	43.61%	70.00%
Certificates	of Deposit	-	0.00%	50.00%
Treasury Se	ecurities	-	0.00%	100.00%
Government Agencies		374,787,770.00	51.37%	75.00%
Commercia		-	0.00%	20.00%
Municipal B		36,605,400.60	5.02%	20.00%
		\$ 729,581,220.04	100.00%	

CENTRAL HEALTH MONTHLY INVESTMENT REPORT

Commercial Paper by Entity as a Percentage of Portfolio

	\$		0.00%	20.00%
Municipal Bonds by Entity as a Percentage	ge of Portfolio	0		
City of Lafavotta LA Litility Day	¢.	E 970 449 00	16.04%	E 00%
City of Lafayette LA Utility - Rev State of Hawaii - GO	\$ ¢	5,870,448.00 2,812,170.00	7.68%	5.00% 5.00%
State of Mississippi CP	\$		8.20%	5.00%
	\$	3,000,000.00 8,840,872.60	24.15%	
State of Washington - GO Tulsa OK ISD - GO	\$, ,	13.66%	5.00%
LA Unified SD - GO	\$	5,000,000.00	16.50%	5.00%
TX Pub Fin Auth	\$	6,039,360.00		5.00%
IX Pub Fin Auth	<u>\$</u> \$	5,042,550.00 36,605,400.60	<u>13.78%</u> 100.00%	5.00%
	<u> </u>	30,003,400.00	100.00%	<u>25.00%</u>
Investment Revenue & Accrued Interest		September-25	Fiscal YTD	
Interest/Dividends-	Φ.	10 107 05	. 4 005 040 40	
TexasDAILY	\$	12,467.65	\$ 1,095,046.49	
TexasDAILY Select	\$	622,781.96	\$ 10,595,337.98	
TexPool		518,255.96	\$ 11,437,586.05	
TexSTAR		4,251.17	\$ 2,798,415.83	
TexasTERM CP		0.00	\$ 370,808.74	
Certificates of Deposit		0.00	\$ -	
Treasury Securities		0.00	\$ -	
Government Agencies		1,061,400.00	\$ 9,459,625.41	
Commercial Paper		0.00	\$ -	
Municipal Bonds		0.00	\$ 1,136,917.18	
	\$	2,219,156.74	\$ 36,893,737.68	
Discounts, Premiums, & Accrued Interest				
TexasTERM CP	\$	-	\$ -	
-less previous accruals		0.00	\$ (330,721.31)	
Certificates of Deposit		0.00	\$ -	
-less previous accruals		0.00	\$ -	
Treasury Securities		0.00	\$ -	
-less previous accruals		0.00	\$ -	
Government Agencies		1,141,111.00	\$ 10,986,843.76	
-less previous accruals		(894,088.33)	\$ (8,816,148.18)	
Commercial Paper		0.00	\$ -	
-less previous accruals		0.00	\$ -	
Municipal Bonds		106,219.72	\$ 1,005,039.46	
-less previous accruals		(4,051.87)	\$ (1,094,981.98)	
	\$	349,190.52	\$ 1,750,031.75	
Total Investment Revenue & Accrued Interest	\$	2,568,347.26	\$ 38,643,769.43	
		_,	+,,-	



Central Texas is a model healthy community.

Our Mission

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

Our Values

Central Health will achieve excellence through:

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

Innovation - We create solutions to improve healthcare access.

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

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BOARD MEETING

October 22, 2025

AGENDA ITEM C3

Approve the acquisition of two properties located in North and East Travis County as recommended by the Budget and Finance Committee.



MEMORANDUM

To: Central Health Board of Managers

From: Nicki Riley, Deputy CFO

CC: Jeff Knodel, CFO

Perla Cavazos, Chief Governance and Government Affairs Officer

Date: September 19, 2025

Re: Proposed Debt Issuance and Reimbursement Resolutions

The purpose of this memorandum is to present for the Board of Managers' consideration two resolutions related to the District's financing of capital projects:

1. Resolution to Issue Debt; and

2. Reimbursement Resolution

Resolution to Issue Debt

The Resolution to Issue Debt authorizes the District to proceed with the issuance of debt to finance approved capital projects. This action will provide the necessary resources to advance key initiatives while maintaining adequate reserves and liquidity. The resolution sets forth the maximum amount of debt to be issued, the form of the obligations, and the process for final approval of pricing and terms.

Reimbursement Resolution

The Reimbursement Resolution allows the District to reimburse itself with bond proceeds for eligible capital expenditures incurred prior to the issuance of debt. Adoption of this resolution is required under IRS regulations in order to maintain the ability to use bond proceeds to reimburse expenditures made from available cash. This resolution ensures the District has the flexibility to begin or continue project work immediately without waiting for bond proceeds to be received.

Recommendation

Staff recommends approval of both resolutions. Together, these actions provide Central Health with the financial flexibility to:

- Initiate and sustain progress on critical capital projects;
- Preserve liquidity through the reimbursement mechanism; and
- Align financing with long-term capital and financial planning objectives.



MEMORANDUM

To: Central Health Board of Managers

From: Monica Crowley, Chief Strategy and Planning Officer/Senior Counsel

CC: Pat Lee, President and CEO

Date: 10/17/25

Re: North Austin Integrated Strategic Operations Financial Plan

presentation

Background:

We would like to provide a brief update regarding the North Austin Integrated Strategic Operations Financial Plan. We have heard your questions and concerns regarding capital planning for ambulatory care and support services in North Austin. Central Health staff is preparing a presentation which will be shared with you early next week. The presentation will include:

- Background and strategic context for the proposed investments;
- The methodology for how we calculate demand;
- The results of our calculations;
- The opportunities for long-term strategic investments, and;
- How we plan to fund these investments and what that means for our reserves.

Action Requested:

In addition to providing you the above information, we are recommending the board take the following actions:

- Approve real estate acquisition of two properties for healthcare services and clinical support purposes;
- Approve capital budget for acquisition and renovation of proposed properties listed above;



- Approve debt issuance for an amount not-to-exceed \$290 million for properties listed above in addition to the debt financing of Colony Park and Hancock Phase 2, and;
- Approve reimbursement resolution.

We look forward to Wednesday's presentation and discussion. Please do not hesitate to reach out with any questions.



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BOARD MEETING

October 22, 2025

AGENDA ITEM C4

Adopt a Resolution approving the issuance of the District's Certificates of Obligation; approving the form of and requesting that the Travis County Commissioners Court approve and adopt order(s) to authorize the issuance of such certificates; and other related actions as approved by the Budget and Finance Committee.

RESOLUTION OF THE BOARD OF MANAGERS OF TRAVIS COUNTY HEALTHCARE DISTRICT APPROVING THE ISSUANCE OF THE DISTRICT'S CERTIFICATES OF OBLIGATION; APPROVING THE FORM OF AND REQUESTING THAT THE TRAVIS COUNTY COMMISSIONERS COURT APPROVE AND ADOPT ORDER(S) TO AUTHORIZE THE ISSUANCE OF SUCH CERTIFICATES; AND OTHER RELATED ACTIONS

WHEREAS, pursuant to Subchapter C of Chapter 271, Texas Local Government Code, as amended (the "Act"), and Subchapter F, Chapter 281, Texas Health and Safety Code, as amended ("Chapter 281"), Travis County Healthcare District (doing business as "Central Health") (the "District"), is authorized to issue certificates of obligation for the purpose of (i) the acquisition, construction, expansion, improvement, renovation, rehabilitation and equipping of District facilities for medical, clinical, and other health care services, and administration, support, training, and parking facilities related thereto, (ii) the acquisition, construction, improvement, renovation, rehabilitation and equipping of buildings and land to be used for District purposes and to be located in central, east and north Travis County, including facilities for medical, clinical, and other health care services, and administration, support, training, and parking facilities related thereto, (iii) the purchase of materials, supplies, equipment and machinery to be used for District purposes, (iv) related professional services, including legal, fiscal, engineering and design fees, and costs of issuance (collectively, the "Project"); and

WHEREAS, in accordance with the provisions of the Act and Chapter 281, the Board of Managers (the "Board") of the District has found and determined that the Projects should be financed with the proceeds derived from the issuance and sale of certificates of obligation to be sold and delivered, in one or more series, from time to time in accordance with the provisions of the Act, Chapter 281 or other applicable law; and

WHEREAS, pursuant to the request of the Board, the Commissioners Court (the "Commissioners Court") of Travis County, Texas (the "County"), authorized the publication of a notice of intention to issue certificates of obligation in a principal amount not to exceed \$290,000,000, at the times and in the manner required by the Act and such notice has been published in accordance with the Act; and

WHEREAS, pursuant to the provisions of Chapter 281, the Commissioners Court, in the name and on behalf of the District, is authorized to issue certificates of obligation and to levy the District's ad valorem tax to provide for the payment thereof, and to further pledge to the payment of such certificates of obligation surplus revenues, limited to \$1,000, of the District's revenues received in connection with the operation of the District's healthcare facilities; and

WHEREAS, the Board now desires to request that the Commissioners Court adopt order(s) authorizing the issuance of the District's certificates of obligation (the "Order") for the purposes and on the terms and conditions specified in such Order(s); and

WHEREAS, the District is an "Issuer" within the meaning of Chapter 1371, Texas Government Code ("Chapter 1371"), as amended, specifically, Section 1371.001(4)(P), and the Board desires to delegate, pursuant to Chapter 1371, to certain District officers authority to act on behalf of the District in selling and delivering the certificates of obligation and setting the

procedures relating to the certificates of obligation, as specified in this Resolution and the Order(s) and to execute any document or certificate that is necessary or favorable to allow the District to comply with any requirements relating to the issuance of the certificates of obligation and to facilitate the offering, sale, and issuance of the certificates of obligation in accordance with the terms of the Act and Chapter 1371;

NOW THEREFORE, BE IT RESOLVED BY THE BOARD OF MANAGERS OF THE TRAVIS COUNTY HEALTHCARE DISTRICT:

<u>Section 1.</u> The recitals contained in the preamble hereof are hereby found to be true, and such recitals are hereby made a part of this Resolution for all purposes and are adopted as a part of the determinations and findings of the Board.

Section 2. The Board hereby approves the issuance and sale of the District's certificates of obligation (the "Certificates") in one or more series, on the same or more favorable terms and provisions than those set forth in the Order(s) presented herewith to be adopted by the Commissioners Court authorizing the issuance of the Certificates, the levy of the District's annual ad valorem tax in payment thereof, and a further pledge of surplus revenues received by the District in connection with the operation of the District's healthcare facilities in an amount not to exceed \$1,000.

<u>Section 3.</u> The Board hereby respectfully requests the Commissioners Court to approve and adopt the Order(s) authorizing the issuance of the Certificates on the parameters set forth therein and approved in this Resolution.

Each of the President and Chief Executive Officer and the Chief Financial Section 4. Officer of the District, acting individually and not jointly (the "Pricing Officer"), are hereby authorized to approve, in the name and on behalf of the District, in connection with the sale of each series of Certificates, the preparation and distribution of (a) a preliminary official statement (the "Preliminary Official Statement") and a final official statement (the "Official Statement") relating to the Certificates of such series to be used by the Purchaser in connection with the marketing and public offering of the Certificates of such series or (b) such other informational materials as shall be determined by the Pricing Officer to be necessary and appropriate in connection with the private placement of the Certificates with one or more qualified institutional buyers, accredited investors or financial institutions. In addition, the Pricing Officer is authorized to deem the Preliminary Official Statement "final" for purposes of paragraph (b)(1) of Rule 15c2-12 under the Securities Exchange Act of 1934, as amended. In the event the Certificates are sold pursuant to a public sale, the Pricing Officer is hereby authorized to approve, in the name and on behalf of the District, in connection with the sale of the Certificates, the preparation and distribution of a Notice of Sale. The Pricing Officer and other appropriate officials of the District are hereby authorized to sign such Official Statement and/or to deliver a certificate pertaining to such Official Statement as prescribed therein, dated as of the date of payment for and delivery of the Certificates of such series.

Section 5. The Board hereby approves the execution and delivery of the Paying Agent/Registrar Agreement(s) in substantially the form(s) presented with this Resolution. The

Pricing Officer is hereby authorized and directed to designate a Paying Agent/Registrar and execute and deliver the Paying Agent/Registrar Agreement(s) on behalf of the District.

Section 6. The Board hereby approves the execution and delivery of the winning bid, contracts, agreements, investment letters and/or other instruments between the District and the Purchaser relating to the purchase and sale of the Certificates (collectively, the "Purchase Contract(s)") in the form and on the terms approved by the Pricing Officer. The Pricing Officer is hereby authorized and directed to execute and deliver the Purchase Contract(s) on behalf of the District.

Section 7. All officers of the District are authorized to execute and deliver such agreements, certificates and other instruments as they may deem appropriate in order to consummate the delivery of the Certificates in accordance with the terms of, and to carry out the purposes of, the Order(s) and this Resolution. The Board hereby authorizes the payment of the fees, costs and expenses in connection with the issuance of the Certificates to the persons entitled to receive payment of such fees, costs and expenses. The District's bond counsel is hereby authorized to make non-substantive changes to the terms of this Resolution if necessary or desirable to carry out the purposes hereof or in connection with the approval of the issuance of the Certificates by the Attorney General of Texas.

<u>Section 8.</u> It is officially found, determined, and declared that the meeting at which this Resolution is adopted was open to the public and public notice of the time, place, and subject matter of the public business to be considered at such meeting, including this Resolution, was given, all as required by Chapter 551, as amended, Texas Government Code.

Section 9. This Resolution shall be in force and effect from and after the date of its adoption, and it is so resolved.

PASSED AND APPROVED this 22nd day of October, 2025.

BOARD OF MANAGERS
TRAVIS COUNTY HEALTHCARE DISTRICT



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Our Values

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BOARD MEETING

October 22, 2025

AGENDA ITEM C5

Approve a resolution expressing intent to finance expenditures to be incurred as recommended by the Budget and Finance Committee.

RESOLUTION EXPRESSING INTENT TO FINANCE EXPENDITURES

WHEREAS, the Travis County Healthcare District d/b/a Central Health (the "District"), is a hospital district created and operating under Chapter 281, Texas Health and Safety Code, as amended, and is authorized to finance its activities by issuing or incurring obligations, including obligations the interest on which is excludable from gross income for federal income tax purposes, pursuant to Section 103 of the Internal Revenue of 1986, as amended; and

WHERAS, the District is authorized to finance the property listed in **Exhibit A** attached hereto (the "Financed Property"); and

WHEREAS, the District has made, within the last 60 days, and/or will continue to make payments with respect to the Financed Property; and

WHEREAS, the District desires to reimburse itself for the costs associated with the Financed Property from the proceeds of obligations to be issued subsequent to the date hereof.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF MANAGERS OF TRAVIS COUNTY HEALTHCARE DISTRICT D/B/A CENTRAL HEALTH:

- Section 1. The District hereby declares its intent to reimburse itself for all costs paid within the last 60 days and that will be paid subsequent to the date hereof in connection with the acquisition of the Financed Property from the proceeds of obligations to be issued or incurred subsequent to the date hereof.
- <u>Section 2</u>. The District reasonably expects that the maximum principal amount of obligations issued to reimburse the District for the costs associated with the Financed Property will not exceed \$290,000,000.
- <u>Section 3.</u> This Resolution will be kept in the books and records maintained by the District with respect to the obligations.
- <u>Section 4.</u> This Resolution does not and will not bind the District to make any expenditure, incur any indebtedness, or proceed with the acquisition of the Financed Property.

[Signature page follows]

PASSED AND APPROVED this 22nd day of October 2025, by the Board of Managers of the District.

TRAVIS COUNTY HEALTHCARE DISTRICT

	By:Chairperson, Board of Managers
ATTEST:	
By:Secretary, Board of Managers	

EXHIBIT A

DESCRIPTION OF FINANCED PROPERTY

<u>Description</u>: Payment of costs incurred for: (i) the acquisition, construction, expansion, improvement, renovation, rehabilitation and equipping of District facilities for medical, clinical, and other health care services, and administration, support, training, and parking facilities related thereto, (ii) the acquisition, construction, improvement, renovation, rehabilitation and equipping of buildings and land to be used for District purposes and to be located in central, east and north Travis County, including facilities for medical, clinical, and other health care services, and administration, support, training, and parking facilities related thereto, (iii) the purchase of materials, supplies, equipment and machinery to be used for District purposes, and (iv) related professional services, including legal, fiscal, engineering and design fees.



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BOARD MEETING

October 22, 2025

AGENDA ITEM C6

Approve the capital project budgets as recommended by the Budget and Finance Committee

Central Health System - Hancock

Total Budget: \$150,700,000 PH 1 - \$62,755,000 PH 2 - \$88,112,855

Clinical Services: Primary, Specialty, Dental Lab Pharmacy

System Administration: System Leadership Center Public Meeting Auditorium



Colony Park Health & Wellness Center

Total Project Budget: \$37,296,705

Total Debt Issuance: \$35,295,428

Clinical Services:

Primary Care

Dental

Drive-Thru Pharmacy

Laboratory

Wellness Space
Health & Wellness Services



Proposed Acquisitions

Property A

- 98,357 total sq ft
- Strategic location good transit
- Transition from leased building
- Office space
- Other support functions
- Debt Issue Amount-\$49.2M

Property B

- 260,393 sq ft
- Priority Need area
- Transitioning from leased clinical buildings
- Clinical office space- Adult/Pediatrics
- Clinical support
- Tenant leased through 2029 ~ 70,000 sq ft
- Debt Issue Amount \$93.5M



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BOARD MEETING

October 22, 2025

AGENDA ITEM C7

Approve the CommUnityCare CEO Personnel Policy as recommended by the Ad Hoc CommUnityCare Liaison Committee

Policy Title: Oversight of Co-Applicant CEO Performance

Policy #: HR2-XXX

Effective Date: April 2025

Revision Dates:

Review Dates:

Policy Owner: Chief People Officer

Executive Sponsor: Central Health President & CEO

Attachments:

I. PURPOSE

The purpose of this policy is to outline the process regarding the oversight of the CommUnityCare Project Director.

II. SCOPE

This policy applies to the Central Health Board of Managers, the Co-Applicant Board of Directors, the Grantee, and the CommUnityCare Project Director.

III. DEFINITIONS

- Co-Applicant Board of Directors refers to the CommUnityCare Board of Directors.
- CommUnityCare Project Director refers to the CommUnityCare Chief Executive Officer (CEO).
- **Grantee** refers to Travis County Healthcare District, dba Central Health as the recipient of federal health center funding.
- **HRSA** refers to the Health Resources and Services Administration of the U.S. Department of Health and Human Services, which administers the federal health center program.

IV. POLICY

It is the policy of Central Health to address performance or code of conduct concerns related to the CommUnityCare Project Director in a manner consistent with the terms of the current Co-Applicant Agreement, federal, local and state law, and all applicable Central Health personnel policies.

V. RELEVANT STATUTES, REGULATIONS OR GUIDANCE

- Co-Applicant Agreement Between Travis County Healthcare District and Central Texas Community Health Centers.
- Federal law, regulations, and guidance governing the health center program

VI. RELATED POLICIES AND PROCEDURES

Not Applicable

VII. PROCESS

The Grantee and Co-Applicant Board agree to the following parameters and processes related to the oversight of the CommUnityCare Project Director. All bracketed "Section" references are to the Co-Applicant Agreement.

- Commit to the following concepts for oversight of the Project Director by the Grantee and the Co-Applicant Board, consistent with the terms of the current Co-Applicant Agreement, including:
 - i. CommUnityCare Project Director reports to the Co-Applicant Board [Section 7.B.(i)];
 - ii. The process for Performance Evaluations of the CommUnityCare Project Director as set forth in the Co-Applicant Agreement [Section 7.B.(iv)]; and,
 - iii. The CommUnityCare Project Director is also employed by and accountable to the Grantee and both entities share responsibilities related to the CommUnityCare Project Director, pursuant to applicable law and HRSA policy.
 - iv. Grantee may appoint the CommUnityCare Project Director as a member of Grantee's senior leadership team for bilateral information sharing, business planning, and collaboration consistent with the agreements between the two entities; however, this management connection cannot supplant or override the primary reporting relationship that the CommUnityCare Project Director has with the Co-Applicant Board.
 - v. The CommUnityCare Project Director is responsible for the hiring, supervision, and termination of CommUnityCare staff, in accordance with Grantee's personnel policies. [Section 7.B.(iii)(b)].
- b. The process for the Grantee to raise concerns regarding the behavior or performance of the CommUnityCare Project Director that Grantee believes requires formal investigation, disciplinary action, or any other change in employment status, including termination is as follows:
 - i. The Grantee will notify the Co-Applicant Board Chairperson in writing about the concerns regarding the CommUnityCare Project Director. If Grantee's administration has not notified Grantee's Board Chair previously, Grantee's Board Chair will be informed concurrently;
 - The written notice to the Co-Applicant Board Chairperson will state the concern, any personnel policy Grantee believes was or may have been violated, and any proposed disciplinary action (if applicable);
 - iii. Grantee may request to meet with representatives of the Co-Applicant Board to discuss the concerns, which will be scheduled as soon as possible;
 - iv. The Co-Applicant Board will review the information provided and determine whether any action is necessary or appropriate, and if so, what action should be taken within ninety (90) days. If the incident is deemed "urgent" by the Grantee, the Grantee will explain its reasoning to the Co-Applicant Board Chairperson and indicate what harm may be suffered to either the Grantee, CommUnityCare, or the public regarding the incident or issue and why the urgency exists.

Then, the Co-Applicant Board may place the CommUnityCare Project Director on paid administrative leave for a period of no more than 90 days while the issue is being investigated.

- v. The Co-Applicant Board is responsible for determining appropriate disciplinary action, if any, and will follow the Co-Applicant Agreement and applicable Grantee personnel policies that are consistent with the Co-Applicant Agreement. The Co-Applicant Board will be responsible for determining disciplinary action and implementing same.
- vi. If the Co-Applicant Board fails to act or takes action the Grantee does not agree with within the timeframes referenced herein, the Grantee's Board of Managers can authorize disciplinary action, up to and including termination of the CommUnityCare Project Director, provided that such possible action may only be taken or ratified by the Grantee Board of Managers if it is specifically noticed as an agenda item at a public meeting, with specific written notice to the Co-Applicant Board Chairperson and provision for reasonable input of no less than one hour from the Co-Applicant Board members at such meeting, whether in open or closed session (subject to any appropriate Open Meetings Act exceptions for closed deliberations).



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BOARD MEETING

October 22, 2025

AGENDA ITEM C8

Approve the Annual Joint Staff Planning and Budgeting Methodology Pertaining to Health Center Program Funding as recommended by the CommUnityCare Liaison Committee.



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date	10/22/25	
Who will present the		
agenda item? (Name, Title)	Jon Morgan, COO, and Jeff Knodel, CFO – if there are questions	
General Item Description	Approve document summarizing Annual Joint Staff Planning and Budgeting Methodology Pertaining to Health Center Program Funding	
Is this an informational or action item?	Action	
Fiscal Impact	No	
Recommended Motion (if needed – action item)	Approve the document summarizing the annual joint staff planning and budgeting methodology pertaining to health center program funding.	
Key takeaways about agenda	item, and/or feedback sought from the Board of Managers:	
The document or	utlines the annual process, in accordance with the Co-applicant agreement,	
· · · · · · · · · · · · · · · · · · ·	Os of CommUnityCare Health Centers (CommUnityCare [CUC] or Health Center) (Central Health) will meet to develop the annual budget and service delivery	
1) <u>objectives.</u>		
2)		
3)		
4)		
5)		
What backup will be		
provided, or will this be a verbal update? (Backup is		
due one week before the		
meeting.)	Two page document outlines the process	
Estimated time needed for		
presentation & questions?	5 minutes	
Is closed session		
recommended? (Consult		
with attorneys.) No		



Form Prepared	By/	'Date
Submitted:		

Perla Cavazos 10/17/25



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BOARD MEETING

October 22, 2025

AGENDA ITEM C9

Take appropriate action on key issues related to the Co-Applicant Agreement between Central Health and Central Texas Community Health Centers d/b/a CommUnityCare as recommended by the CommUnityCare Liaison Committee.



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BOARD MEETING

October 22, 2025

REGULAR AGENDA ITEM 1

Discuss and take appropriate action on the proposed mandatory payment rate to be assessed on institutional healthcare providers during Fiscal Year 2026 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.151. (*Action Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date	October 22, 2025	
Who will present the		
agenda item? (Name, Title)	Katie Coburn, Healthcare Finance Policy Director	
General Item Description	Set the FY 2026 LPPF mandatory payment rate	
Is this an informational or action item?	Action	
Fiscal Impact	None	
Recommended Motion (if needed – action item)	Approve the FY 26 LPPF mandatory payment rate at 6.00% of Travis County inpatient hospital net patient revenue, as recommended by staff.	
Key takeaways about agenda	item, and/or feedback sought from the Board of Managers:	
1) Staff recommend	d the board adopt a 6.00% LPPF payment rate for FY 26.	
2) 6.00% is the max	kimum amount allowable by law.	
Uncompensated (CHIRP), the new Reimbursement	ue for the LPPF account is \$305 million and covers IGTs during FY 26 for Care pool payments, the Comprehensive Hospital Rate Increase Program and retroactive and current payments for the Hospital Augmented Program (HARP), the Graduate Medical Education (GME) program, and the ogy by Linking Interoperable Systems (ATLIS) program.	
4)		
<u> </u>		
What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.)	Memo, ppt slides	
meeting.)	Wello, ppt sides	
Estimated time needed for presentation & questions?	Ten minutes	
Is closed session recommended? (Consult with attorneys.)	no	



Form Prepared By/Date Submitted:

Katie Coburn, October 15, 2025



MEMORANDUM

To: Central Health Board of Managers

From: Katie Coburn

CC: Patrick Lee, President & CEO

Date: October 22, 2025

Re: Setting the Local Provider Participation Fund (LPPF) mandatory payment rate for FY 26

- ACTION ITEM

Overview:

Central Health staff request the board take action to set the FY 2026 Local Provider Participation Fund (LPPF) mandatory payment rate at 6.00% of net patient revenue of Travis County inpatient hospitals.

Synopsis:

Under Chapter 298E of the Texas Health & Safety Code, the Central Health Board is authorized to set an LPPF mandatory payment rate for hospitals that provide inpatient services in Travis County. Funds generated by the payment must be used to provide intergovernmental transfer (IGT) payments on behalf of nonpublic hospitals to draw down Federal matching funds available in certain Medicaid supplemental payment programs. The Travis LPPF program is not authorized to fund Delivery System Reform Incentive Payments (DSRIP) and Disproportionate Share (DSH) Program payments per its enabling legislation. The LPPF program is a critical financing tool to support hospitals that serve people with low income who have Medicaid or are uninsured.

By state law and federal regulation, the mandatory fee must be uniform and broad based. This is accomplished by assessing the same (uniform) percentage of the net patient revenue of all inpatient hospitals (broad-based) within Central Health's jurisdiction.

The proposed payment rate of 6.00% will generate approximately \$305 million annually. It is intended to provide the local funding portion for the Comprehensive Hospital Increased Reimbursement Program (CHIRP), the Uncompensated Care (UC) Pool, Graduate Medical Education (GME) for private hospitals, the Hospital Augmented Reimbursement Program (HARP), and the Aligning Technology by Linking Interoperable Systems (ATLIS) program.



Statute requires the Board to hold a public hearing for the initial rate setting for a fiscal year. The hearing will be held October 22, 2025. Notice of the hearing was published in a local newspaper and emailed directly to LPPF hospitals and other stakeholders five days before the date of the hearing, as required by law.

Central Health staff evaluated the rate and recommend the board adopt the proposed amended rate of 6.00%.

Fiscal Impact:

There is no impact on Central Health funds. LPPF funds are kept in a separate account and used only for legislatively defined purposes described above.

Action Requested:

Central Health staff request the board take action to set the FY 2026 Local Provider Participation Fund (LPPF) mandatory payment rate at 6.00% of net patient revenue of Travis County inpatient hospitals.



Travis County LPPF

Consider and Set the FY 26 Mandatory Payment Rate

October 22, 2025



Local Provider Participation Fund (LPPF) Mandatory Payment Rate

- Assessed as a uniform percentage of net patient revenue of Travis County inpatient hospitals
- Set by the Board of Managers
- Central Health, as LPPF Administrator, collects funds to be held in fiduciary capacity and completes intergovernmental transfers (IGTs) for hospital inpatient facilities to receive matching federal funds
- Use of Funds

Limited to legislatively defined purpose of accessing federal supplemental payments with local funds; DSH and DSRIP are prohibited

Central Health collaborates with hospital representatives on uses of funds for

IGT

- \$150,000 paid annually to Central Health for administrative expenses
- Requested Rate for FY 26: 6.00% (maximum allowed by law)

FY 25 Rate Proposal

BOM Action Date	Rate	Use	Estimated Annual Amount
October 2025	6.00%	Comprehensive Hospital Increased Reimbursement Program (CHIRP) Uncompensated Care Pool (UC) Graduate Medical Education (GME) Hospital Augmented Reimbursement Program (HARP) Aligning Technology by Linking Interoperable Systems (ATLIS)	\$305 million

Board Action Request

Set the FY 26 Travis County Local Provider Participation Fund (LPPF) rate to 6.00%, the maximum allowed by the LPPF statute.



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BOARD MEETING

October 22, 2025

REGULAR AGENDA ITEM 2

Receive and discuss a report from the President & CEO on Fiscal Year 2025 Accomplishments, Priorities and Key Results. (*Informational Item*)



MEMORANDUM

To: Central Health Board of Managers

From: Dr. Pat Lee, Central Health President and CEO

Date: October 22, 2025

Re: Preview of Priority Agenda Items – Upcoming Board and Committee Meetings

Dear Managers,

In preparation for next week's board meeting, I am providing an overview of key items requiring your review and action, as well as notice of a follow-up discussion related to ongoing litigation.

Key Agenda Items

The Budget and Finance Committee will receive follow-up materials from staff addressing questions raised during last month's discussion. The committee will also consider approval of the following action items:

- Acquisition of two properties located in North and East Travis County
- Authorization to issue certificates of obligation
- Approval of a reimbursement resolution related to acquisitions and renovations
- Approval of associated capital project budgets.

Central Health staff will distribute a presentation early next week to support your review of these items. The presentation will include:

- Background and strategic context for the proposed investments
- The methodology used to calculate demand
- Findings from our demand analysis
- Opportunities for long-term strategic investments
- Funding plans and the impact on financial reserves.

A robust discussion is anticipated.

Consent Agenda and Liaison Committee Items

At the regular board meeting, the consent agenda will include several items reflecting continued integration and alignment with CommUnityCare. These matters will also be reviewed at the CUC Liaison Committee meeting scheduled for October 21 and include:

- Approval of the CUC CEO Personnel Policy
- Approval of the Annual Joint Staff Planning and Budgeting Methodology for CUC
- Consideration of key issues related to the Co-Applicant Agreement between Central Health and CUC, as recommended by the CUC Liaison Committee.

CEO Report and Litigation Update

In lieu of the regular CEO report, I will dedicate 15 minutes to share highlights from Fiscal Year 2025, including major departmental achievements and a summary of progress on our FY25 Objectives and Key Results.

Additionally, an executive session will be reserved for approximately 90 minutes to provide critical updates on current litigation.

Thank you for your continued leadership and commitment to Central Health. We have accomplished much together in FY25, and I look forward to building on this momentum in FY26.

With appreciation,

Pat Lee, MD
President & Chief Executive Officer
Central Health



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda item ivieeting Date	October 22, 2025
Who will present the agenda item? (Name, Title)	Dr. Pat Lee, CEO
General Item Description	CEO Update
Is this an informational or action item?	Informational
Fiscal Impact	None
Recommended Motion (if needed – action item)	None
	item, and/or feedback sought from the Board of Managers:
1) Update on Share	ed System FY 25 Priorities and Key Results and Budget Resolution Items
2) Update on FY25	Key Accomplishments
3)	
4)	
What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.)	Verbal report out
Estimated time needed for presentation & questions?	15 Min
Is closed session recommended? (Consult with attorneys.)	No
Form Prepared By/Date Submitted:	Lucas Bustelo 10/17/2025



Fiscal Year 2025
CEO Performance Review

Prepared for the Board of Directors

October 13, 2025

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Fiscal Year 2025 Accomplishments	.5
Fiscal Year 2025 Budget Resolution	.10
Fiscal Year 2025 Objectives and Key Results	.14



October 13, 2025

Dear Members of the Board,

As we close Fiscal Year 2025, I want to take a moment to reflect on what we've accomplished together, what we've learned along the way, and where I hope to continue growing as a leader in the year ahead.

I remain deeply humbled by the privilege of serving as President and CEO of Central Health—an organization whose mission and people inspire me every single day. Each of you has played an important role in my growth and in shaping how I lead. Your guidance, candor, and partnership have made me a better leader, and for that, I am profoundly grateful.

Our Accomplishments in FY25

This year was one of remarkable progress for Central Health. Guided by your vision and rooted in our mission, we took measurable steps to expand access, improve outcomes, and build trust with our community. Among the highlights:

- 1. Direct Care Expansion: We delivered over 500,000 primary care visits in partnership with CommUnityCare and opened a beautiful, long-awaited health center in Del Valle. We stood up new specialty services—including nephrology, cardiology, podiatry, wound care, palliative care, dialysis, and nutrition—directly delivered by Central Health physicians and care teams, bringing our total to an astounding 30 new specialty, diagnostic, and high-risk service lines over the past 2 years. These services closed painful gaps for patients who otherwise would have gone without timely care.
- 2. Bridge Program & Respite Care: Through our Bridge Clinic and mobile teams, we extended care to people experiencing homelessness, in partnership with EMS and other community organizations. We also opened the doors on a 50-bed respite center allowing those without housing to heal and connect with resources including stable housing. By meeting people where they are, we provide both health services and pathways to stability.
- 3. **System Integration:** We are becoming one integrated health system—Central Health, CommUnityCare, and Sendero—three organizations, one team, one mission. In our new integrated system, roles will be defined by function, scope,



- and alignment—not just by organizational boundaries. Together we are bringing "The Year of Access" to life, with shared goals, integrated leadership, and a clearer path to a seamless care journey.
- 4. Mental Health System of Care: Under the guidance of the Central Health and Integral Care boards, staff from Central Health, Integral Care, and CommUnityCare collaborated to assess national best practices and propose an integrated local model to reduce fragmentation and strengthen Travis County's mental health system.
- 5. Community Engagement: We strengthened trust by showing up in new ways—
 through Community Conversations, CEO Roundtables, and our first-ever *Vivir*Con Ganas Spanish-language health expo attended by nearly 700 total
 participants (465 in person and ~200 virtual. These touchpoints created dialogue
 and visibility that will be carried into FY26.
- 6. **Strengthening Partnerships:** We continued to strengthen community partnerships by building trust and identifying shared goals and mutually beneficial opportunities including Dell Medical School, Austin Public Health, Integral Care, ECHO, Black Men's Health Clinic, Hungry Hill Foundation, HAAM and many others.
- 7. **Financial Stewardship:** We delivered a balanced budget, maintained healthy reserves, and secured unanimous approval from the Travis County Commissioners Court—demonstrating both fiscal responsibility and community trust. Additionally, the newly established Board Philanthropy Committee advanced a framework to generate substantial philanthropic revenue in support of Central Health's long-term financial sustainability.
- 8. **Future Strategic Vision:** We engaged the Board of Managers in comprehensive analysis and dialogue to define the long-term strategic direction and closed-loop care continuum for the Central Health System, including planning for adequate financial reserves to fulfill the commitments outlined in the Healthcare Equity Plan.

OKR Performance in FY25

FY25 was also the first full year of aligning our work with system-wide Objectives and Key Results. While not every key result was met, the framework gave us discipline, alignment, and measurable traction.



- We advanced toward reducing appointment wait times to under two weeks in pilot sites—a moonshot goal that will remain central in FY26.
- We launched new data dashboards to track patient access, quality outcomes, and community sentiment, establishing baselines that will allow us to measure yearover-year progress.
- We improved coordination across departments and system partners, increasing alignment, and reducing duplication.

These results confirm that OKRs can anchor us in shared priorities while creating transparency and accountability across the system.

Key Learnings and My Own Growth

As much as I am proud of what we accomplished, I know this work is never finished. Several lessons stand out for me this year:

- Trust is our core business. Every success we had—whether opening a new service line or engaging the community—was built on trust we earned by listening and delivering.
- We must turn data into dignity. Data must illuminate patient experience and equity, not just volume. The OKR framework gives us this discipline, but I know I need to model sharper use of these metrics in strategic planning and decisionmaking.

Leadership requires presence. The most important moments of trust came not in presentations or reports, but in the time spent with staff, patients, and partners. I want to be more intentional next year about where and how I show up.

I took to heart your feedback recommending I continue to focus on strengthening my leadership by listening more deeply before acting, communicating with greater clarity and consistency, and delegating more effectively so our entire leadership team can flourish. These remain critical areas of growth, and I am committed to making sustained progress.

With your support and guidance, I believe I've made meaningful progress on the professional development plan we set in motion together. Our structured weekly



briefings with the Chair and Vice Chair and stronger communication practices have deepened trust and transparency between the administration and the Board.

On the strategic and financial front, we are advancing both our one-year priorities and the longer-term vision that will sustain this system for years to come. Milestones such as unanimous budget approvals for FY25 and FY26, strengthened community engagement, and focused work in areas like cancer care reflect the collective progress of our team and the confidence of our partners.

At the same time, the GUIDE with Love principles are taking root across the organization—through initiatives like The Big Listen, Lean process improvements, and enhanced recognition and communication efforts. These efforts are helping us build a culture grounded in empathy, accountability, and continuous learning—one that connects our people to purpose and drives improvement every day.

Together, these actions are building a high-trust culture, sharpening strategic clarity, and reinforcing Board and community partnership while positioning the organization for sustainable growth and team member development and well-being.

Looking Ahead

The path forward will not be easy, but I believe FY25 has laid a strong foundation for our Year of Access in FY26. Together we are building a health care system that is more integrated, more equitable, and more trusted—one that reflects the will and values of the people of Travis County.

Thank you for your steadfast guidance and partnership. It is a privilege to serve alongside you in this work.

With gratitude, Pat



FY 2025 Accomplishments: One System, Many Firsts

Health Care Delivery

- Surpassed FY25 Budget Resolution goals in specialty care visits, medical respite days, hospital and SNF episodes, MAP enrollment (including an all-time record of 99,045 enrollees), and workforce programs such as the Medical Assistant apprenticeship (92% graduation, 21 hires) and Community Health Worker training (launching October 2025).
- Introduced multiple new direct-care services including psychiatry, weight loss, rheumatology, endocrinology, ENT, general surgery, PM&R, supportive housing collaboration, Bridge mobile services, and expanded medical respite.
- Strengthened system integration with a new matrixed executive structure, inclusion of CommUnityCare and Sendero CEOs on the Central Health executive team, and adoption of a common bottom-line budgeting methodology.

CommUnityCare

- Delivered care to 143,000 patients, a record, surpassing 500,000 visits across the CommUnityCare health centers.
- Completed most successful accreditation visit to date by The Joint Commission (TJC), demonstrating sustained quality and safety standards.
- Earned HRSA Quality Awards for quality and patient access with measurable improvement across key performance measures.
- Implemented a matrixed clinic reorganization, aligning clinical operations and support functions to improve patient flow and staff efficiency.
- Launched BEAST 2.0 and Access Pilot programs, showing early positive results in improving access, throughput, and care experience, especially in women's health and dental.

Secured adoption by the patient-led board of the CommUnityCare Strategic Plan, establishing a clear roadmap for the organization's next phase of growth and integration.

Sendero Health Plans

- Improved claims processing by bringing services in-house for both Central Health and Sendero, resulting in stronger control of portals and reporting.
- Advanced integration across the system by centralizing credentialing with a single software platform, coordinating transportation services with one vendor



- (SafeRide) to increase volume and lower costs, and sharing utilization management between Central Health and Sendero to maximize resources.
- Carefully introduced Al tools—first in Sendero's call center and then used to draft approved utilization review letters—introducing this evolving resource into the broader Central Health system.

Government Affairs & Governance

- Received a unanimous 5-0 budget approval vote from Travis County Commissioners.
- Organized five presentations and 12 individual briefings for Commissioners Court, in partnership with Communications co-hosted five Community Conversations with 242 attendees and engaged directly with 15 legislative offices to successfully stop harmful legislation.
- Supported 81 board meetings, retreats, and committees—including 38 unplanned meetings—and planned five retreats to strengthen alignment with CommUnityCare.
- Expanded board engagement with community events and strengthened governance processes, including agenda deadlines and follow-through on weekly touchpoints between the Chair, Vice Chair, and CEO.
- Increased capacity with a new Governance Specialist, supported administrative services (7,300 incoming calls, 634 MAP enrollees at the Cesar Chavez office), coordinated Sendero relocations, and launched the first Administrative Professionals Day Celebration.

Communications

- Established a metrics framework aligned with system-wide OKRs, setting baselines for awareness, perception, and community support.
- Generated 232 million impressions across outreach, digital, and earned media, with nearly 260,000 community interactions.
- Engaged 2,351 community members—a 20% increase—through the Health
 Champions program, five Community Conversations with County Commissioners
 and Judge Brown, three CEO Roundtables, and three major events: the Del Valle
 Grand Opening, Hancock Groundbreaking, and Medical Respite Center
 Tour. Travis County Commissioners approved Central Health's tax rate and
 budget unanimously for a second consecutive year.
- Launched *Vivir Con Ganas*, the system's first Spanish-language community health expo, creating a new platform for engagement. Nearly 470 people



- attended in person, and more than 100 watched the live broadcast on YouTube, generating 117 MAP leads, 120 vision screenings and 91 health screenings.
- Rolled out system integration communications—including the first joint All-Staff CEO Huddle and a new cascade model—laying the groundwork for quarterly system-wide huddles in FY26.

Human Resources (People Department)

- Launched the **GUIDE with Love Leadership Development Program** after more than a year of design, establishing a system-wide leadership competency model rooted in Central Health's mission and culture.
- A pilot group of executives and leaders completed the first training cohort, describing the experience as "worth every hour" and praising its ability to build alignment and partnership across entities.
- The overwhelmingly positive pilot feedback set the stage for full rollout to all leaders in January 2026.

Transformation

- Implemented a transformation framework for the system using the five-choice strategy cascade.
- Aligned transformation initiatives directly to organizational strategy through OKRs and the Daily Management System (DMS).

Strategy

- Completed a five-year evaluation of the CHEP Council HIV Screening Campaign, showing MAP patients were screened at rates 64% higher than Texas and 84% higher than the national average, with significant cost-effectiveness.
- Launched the Mobile Food Pharmacy with the Central Texas Food Bank at four pilot sites, distributing an average of 7,550 pounds of nutritious food monthly to support chronic disease management.
- Expanded revenue sources beyond the tax base, securing a \$2.1 million multiyear ECHO contract for Permanent Supportive Housing, funding for a cancer care market analysis, and creating an internal process to manage opioid settlement funds. These funds support Naloxone distribution, MAT, wraparound services, and the new Capital Plaza MAT Clinic.



- Redesigned the business case process using Lean principles, achieving 90% adoption of the A3 format, and facilitating joint budget planning with CommUnityCare to reduce duplication.
- Released the 2024 Demographic Report, the most comprehensive to date, highlighting new insights including potential underdiagnosis of cancer—leading to a partnership with the Shivers Cancer Foundation to assess regional cancer needs.

Finance

- Earned a clean FY24 financial audit opinion with no deficiencies or findings.
- Completed a smooth transition to the new UKG payroll system.
- Secured a second consecutive unanimous tax rate and budget approval from the Travis County Commissioners Court.

Infrastructure

- Coordinated the opening of the Clinical Education Center, including relocation of the People Department, renovations for the Medical Respite Clinic, and upgrades to facility systems.
- Broke ground on the Central Health Hancock project while advancing construction rapidly.
- Expanded wellness services at Hornsby Bend and Del Valle Health and Wellness Centers, incorporating the Community Health Worker career pathway.
- Partnered across departments to open and relocate clinics, expand access at Capital Plaza and Del Valle, and complete designs for Colony Park Health and Wellness Center.

Joint Technology

- Applications Support: Expanded cybersecurity awareness training with new optional modules, drawing participation from more than 400 employees.
- **Project Management Office:** Reduced duplication and costs by migrating project management software from Adaptive Works to ServiceNow.
- **Data Engineering:** Implemented the Snowflake Data Cloud and began migration of all existing data.
- Analytics & Reporting: Delivered vital dashboards and reports—including quality, performance improvement, business intelligence, population health, prevalence, and geographic analysis—supporting clinical operations and strategic decision—making. Authored the 2024 Demographic Report and a cancer underdiagnosis



- analysis to inform a regional CHNA, risk-stratified member and patient populations, and contributed data and design for the Annual Report.
- Technology Infrastructure: Strengthened security by advancing network access control and identity-based policy enforcement across all business units with Cisco Identity Services Engine (ISE).



Final FY25 Budget Resolution Report Out

	Legend				
Color	Label	Definition			
	Completed	Met all project milestones			
	Partially Completed Major project milestones achieved				
	with some items pending				
	Incomplete	Critical deliverables not met			

Updated 10/13/2025

01	Increase Access and Capacity	OWNER	Notes	Completion to Date	STATUS
KR	Expand Access to Specialty Care				
	Subject to and in accordance with any policy or budgetary changes approved by the Board of Managers, expand specialty care access to new service areas while growing existing service lines and clinical programs, aiming to provide 13,500 annual visits/encounters/procedures.	Jon Morgan and Dr. Alan Schalscha	20,461 encounters through year-end FY2025	152% of goal	
KR	Healthcare for the Homeless				
	Expand initiatives to support unhoused patients by operationalizing Respite Care at the CEC with a target of 450 bed days.	Jon Morgan and Dr. Alan Schalscha	CEC respite facility opened 7.28.2025 932 patient bed days through year-end FY2025	207% of goal	

O2	Care Coordination	OWNER	Notes	Completion to Date	STATUS
KR	Program Alignment and Augmentation				
	Improve care coordination between CH providers and hospital case managers to reduce readmissions, ensure effective discharge planning, and provide high quality post-acute services targeting 1,400 episodes of care	Jon Morgan and Dr. Alan Schalscha	2,032 care episodes through year-end FY2025: 1,633 inpatient hospital care transitions 399 skilled nursing direct care patient episodes	145% of goal	



KR	Social Determinants of Health				
	Establish agreements with Community Based Organizations (CBOs) to address food insecurity by launching a tailored meal delivery service for high-risk Central Health patients and weekly mobile food pantries at designated CUC and Central Health clinics.	Monica Crowley and Megan Cermak	The mobile food farmacy program is well underway, distributing an average of over 7,000 lbs. of food each month to CH and CUC patients. The Medically Tailored Meal delivery program has launched, and patients will receive their first meals in mid-November. A vendor has been selected for the Workforce Development program, and contract negotiations are underway.	95%	
KR	Budget Expenditures				
	Demonstrate to the Commissioner's Court budget dollars were expended in accordance with the Board of Managers & Commissioner's Court approved budget resolution.	Jeff Knodel	Conducted 5/5 Community Conversations and 4 County Commissioner Workshops. We are also working to follow the TCCC Financial Policies to present our Budget in upcoming sessions, scheduled quarterly with TCCC	100%	

О3	Member Enrollment and	OWNER	Notes	Completion	STATUS
	Engagement			to Date	
KR	Enrollment and Eligibility				
	Increase MAP and MAP Basic program enrollment by 5%, including a targeted 4% increase in enrollment of individuals experiencing homelessness. Complete analysis of resource and other factors impacting the capacity to increase enrollment and consider	Jon Morgan and Dr. Alan Schalscha	Total MAP + MAP Basic: Average monthly enrollment 99,333 YTD compared to 87,666 in FY24 *Monitoring emerging	99,333/ 92,049 = 107.9% of goal 13.3% enrollment increase	
	approaches to expand capacity		trends of decreases in new enrollments Homeless individuals: 11,1527 enrollments YTD compared to 8,336 at this time last year	over FY24 (Monthly Rolling AVG) 11,527/11,4 76=100.4% of goal	



KR	Coverage Programs, Benefits, & Structures				
	Increase the number of medically complex MAP and MAP Basic members enrolled in Sendero Health Plan's high-risk premium support program with a goal of 900 unique program enrollees in CY2025	Jon Morgan and Dr. Alan Schalscha	Enrolled 924 members YTD; Current enrollment 860 Year-round enrollment for ESRD, CAR T-Cell immunotherapy and bone marrow transplant patients	100%	

04	System of Care Infrastructure	OWNER	Notes	Completion to Date	STATUS
KR	Health Systems Technology				
	Strengthen data compliance and security at a system level by implementing and operationalizing a data governance platform by the end of the fiscal year	John Clark	The platform is up and running in both a test and prod environment. The connectivity to all data sources has been established, and we've crawled in meta data from the sources. The initial implementation project is complete. A second project (Data Governance Council Launch & Platform Stabilization) has started, and the framework for enterprise data policy is being established. Further stabilization will be ongoing. The OvalEdge data governance platform is fully operational and use case configurations will be ongoing.	90%	
KR	Foundation Enablers				
	Invest in community workforce development through the Medical Assistant Apprenticeship with ACC, achieving a 90% average graduation/certification rate and graduating 18 medical assistants for direct hire at CH, CUC, and other safety-net system partners	Jon Morgan and Dr. Alan Schalscha	Total number of cohorts: 5, currently in the 5th cohort Total enrolled: 46 (10 in the current cohort) Graduation rate: 92.3% Completed program (cohorts 1-4): 32/35 2 cohorts for FY25 Hired within our enterprise: 24 (CH = 15 and CUC = 9) (enterprise hire rate = ~75%)	100%	



		Goals of MA program As Central Health continues to grow in the offerings of direct care, medical assista nts will be vital to the ongoing success of the delivery of care. Partner with Austin Community College to meet the clinical needs of CH patients Provide qualified applicants funded training and career growth opportunities, developing a strong healthcare workforce Meet the growing demand for equitable healthcare in our		
Invest in a survey tool to drive informed initiatives aimed at increasing job satisfaction, with a target of achieving a score of 82% or higher in the annual employee survey.	Jeannie Virden	System has been implemented, and we launched our first system wide engagement survey on Monday, September 8, 2025.	100%	



Final FY25 Objectives and Key Results Report Out

	Legend					
Color	Label	Definition				
	Completed	Met all project milestones				
	Partially Completed	Major project milestones achieved with some items				
		pending				
	Incomplete	Critical deliverables not met				

Updated 10/13/2025

01	Foster an Exceptional Shared Culture	OWNER	Notes	Completion to Date	STATUS
KR	Deliver one system wide New Employee Orientation (NEO) by the end of FY2025	Jeannie Virden and Yvonne Camarena	Our new system wide "Team Member Orientation"launched on Monday, October 6, 2025	100%	
KR	Develop a shared structure, roles and responsibilities for system facilities by end of FY2025	Stephanie McDonald, Tara Trower	Framework finished and reviewed with Tara. Presented during ELT Meeting on 10/6/2025	100%	
KR	Develop shared values, behaviors and principles by the end of FY2025	Jeannie Virden and Yvonne Camarena	We have created alignment with key stakeholders and other internal programs. We are in the final stages of preparing this important initiative, which will launch by mid-November.	75%	

02	Build a Comprehensive, Equitable Healthcare System	OWNER	Notes	Completion to Date	STATUS
KR	Establish an ambulatory access & quality plan and present to the Board of Managers for approval by the end of FY2025	Alan Schalscha & Nick Yagoda	Drafts plan created and circulated for feedback and collaborating efforts on merging plans; Beta testing at North Central CUC, will track lessons learned and implement across system; Infrastructure build phase- on track with roadmap Plan created-completed, working groups assigned and initiatives underway, training on Queuing Theory	100%	
KR	Launch three digital dashboards for system performance by the end of FY2025	John Clark, Jeff Knodel, Elizabeth Barreneche & Rosa De La Torre	Of the dashboards being developed, there are 5 currently produced that reflect clinic volumes. These are currently reflective	90%	



			of Central Health and		
			Sendero data.		
			l <u>_</u>		
			There is ongoing work		
			with CUC to align and		
			define their data into the		
			existing dashboards.		
			The dashboards are		
			published and		
			accessible through the		
			intranet SharePoint site,		
			when connected to the		
			network directly or		
			through VPN.		
KR	Describe the future integrated care	Monica	Developed high level	80%	
	system and present to the Board of	Crowley,	proposal for Local		
	Managers for approval by the end	Tara	Payer Provider Public		
	of Q1 FY	Trower,	System vision approach		
	2026	Karen Ator	and continuing to build		
		& Kim Heinonen	out details of each key		
		1 101110116[]	element. Adopted Five		
			Step Strategy Cascade		
			process in August.		
			Conducted initial		
			executive retreat on		
			9/11 and presented high		
			level vision to board on		
			9/24. Next steps are to		
			incorporate board		
			feedback and develop a		
			simplified version and to		
			convene executive		
			retreats to answer the 5		
			questions for		
			ambulatory, acute, post-		
			acute and coverage.		
KR	Develop 5-year system	Jon	Initial discussions	20%	
'\'\	transformation plan – care delivery	Morgan,	complete; beginning	2070	
	capability, capacity, and	Tara	current facility capacity,		
	infrastructure plan and present to	Trower &	location and		
	the Board of Managers for	Stephanie	assessment; aligning		
	approval by the end of FY2025	McDonald	with related OKRs		
			ISIGIOG OITIO		
			Focusing current efforts		
			on describing future		
			integrated care system		
			to align 5-year		
			transformation plan.		
KR	Engage in strategic partnerships	Perla	Central Health	100%	
	with Integral Care, Austin Public	Cavazos,	deepened partnerships		
	Health, Emergency Medical	Ted Burton,	with Austin Public		
	Services, and two other community	Tara Trower &	Health, Integral Care,		
	partners to improve healthcare	IIUWEI Q	Austin-Travis County		



	access for underserved populations by the end of FY2025	Sharon Alvis	EMS, and community groups to expand outreach and coordinate care, laying the groundwork for a shared goals and funding framework to guide future collaboration. In addition to greater alignment and collaboration with Integral Care, EMS, and Austin Public Health, we contracted with two community-based organizations, Austin Asian Community Health Initiative (AACHI) and ProMo Salud to expand outreach and MAP enrollment within the Asian and Latino communities.		
KR	Develop in collaboration with Integral Care a system of care to provide behavioral / mental health services for Central Health patients (MAP, MAP Basic), inclusive of funding mechanisms.	Monica Crowley, Jon Morgan, Alan Schalscha	Initial meeting conducted 4.17.25 with IC; Identified focus areas for continued joint planning and weekly meetings conducted for 4 weeks (4.17, 4.25, 5.1, 5.7) and bi-weekly meetings to begin 5.23; Revision to SUD treatment contract, right sizing outpatient services agreement, expanding access/integrated IC psychiatry intakes, M3 integration and sustainability, and align on initiatives with Travis Co Jail; ½ day working session focused on finding services and gaps, scheduled Aug 19; Work buckets have been identified, leaders identifying working group members and focused areas, assigning a PM to assist with deadlines and deliverables	100%	



	Focused areas identified, plan presentation delivered to board on 10.8 and next steps will be identified through ongoing meeting series in FY2026	
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О3	Create Simplified, Seamless Patient Care Journeys	OWNER	Notes	Completion to Date	STATUS
KR	Conduct patient journey mapping workshop(s) with CUC and partners for patients experiencing homelessness by end of FY2025	Audrey Kuang, Tim Mercer, Mike Stefanowi cz & Mary Carol Jennings	Meetings conducted with owners to scope the work and the next working group meeting to begin the mapping process 6.13.25; Rescheduled to July 15, 2025, 2 patients have been identified; Patient Journey Mapping completed with proposed strategies Journey map- completed; Identified strategies to focus with guidance from Systems Engineer	100%	
KR	Establish intent to complete journey mapping for current patients. Conduct one patient journey mapping workshop for patients experiencing heart failure by end of FY2025	Alan Schalscha & Susan Dubois	Patient journey mapping template created, identifying working group members and assigning working group members and meetings beginning in June; identifying 1 day for providers to attend session; Identifying patients with avoidable ED utilization w/ analytics team and case management; Identified a few patients to review, working on scheduling due to PTO, tentative completion date 7.30; Patient Journey Mapping completed with proposed strategies Journey mapcompleted; Identified strategies to focus with guidance from Systems Engineer	100%	



04	Empower and Develop our Team	OWNER	Notes	Completion to Date	STATUS
KR	Develop and initiate implementation of leadership competencies by end of FY2025 (September 30, 2025) to help provide professional and administrative growth opportunities within the system. Include leadership development plan for the Board appointed Deputy Administrator.	Jeannie Virden & Nick Yagoda	System executives and a pilot group of leaders across all entities completed the first round of training in September. Deputy Administrator Leadership Development plan completed.	100%	
KR	Develop plan to align holidays and wellness days for CY2026 by end of FY2025	Jeannie Virden & Joy Sloan	The aligned holiday and wellbeing days were announced in September and will be effective January 1, 2026.	100%	
KR	Develop a competitive and sustainable incentive program framework for Primary Care Providers (PCPs) by end of Q3 FY2025	Jeannie Virden & Susan Dubois	Excellent progress has been made to align the provider incentive plan with strategic initiatives. Key developmental phases have been completed, positioning us for an initial launch soon.	70%	
KR	Implement Priorities and Key Results across the system by end of FY2025	Kim Heinonen, Monica Crowley & Tara Trower	One hour training module, implementation guide, OKR template developed for department champions for August/September rollout. ServiceNow capabilities as a software solution for OKR tracking under development.	50%	
KR	Provide leadership demographic report and termination report as requested by end of May 2025.	Jeannie Virden	Summary memos and reports provided to board on 05/28/25	100%	

O5	Demonstrate the Value of Community Support	OWNER	Notes	Completion to Date	STATUS
KR	Develop, launch, and implement a system-wide program, the Community Health Initiatives Fund (CHIF) to improve health outcomes in patients with chronic diseases by addressing food insecurity by the end of FY2025	Megan Cermak & Monica Crowley	The mobile food farmacy program is well underway, distributing an average of over 7,000 lbs. of food each month to CH and CUC patients. The Medically Tailored Meal delivery program has launched, and	95%	
			patients will receive		



			their first meals in mid- November. A vendor has been selected for the Workforce Development program, and contract negotiations are underway.		
KR	Combine three duplicated services across the system by end of FY2025	Jon Morgan, Tara Trower & Karen Ator	FY2025 efforts focused on eligibility/financial screening services (CUC/CH), provider credentialing processes (CUC/Sendero) and patient transportation contracts (Sendero/CH); Other areas under discussion for early FY2026 implementation include healthcare for the homeless services, Epic EHR resources, addiction medicine programs and pharmacy.	100%	
KR	Collaboratively demonstrate the value of public investment by the end of FY2025	Perla Cavazos, Ted Burton & Tara Trower	Central Health's external affairs initiative significantly boosted public awareness, engagement, and trust—reaching 184.6 million impressions, generating more than 150,000 community interactions, and earning 97.5% positive or neutral sentiment. This growing confidence culminated in a unanimous (5–0) budget approval by Travis County Commissioners, with 100% positive testimony from community members, for a second consecutive year.	100%	



Central Texas is a model healthy community.

Our Mission

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

Our Values

Central Health will achieve excellence through:

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

Innovation - We create solutions to improve healthcare access.

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

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

BOARD MEETING

October 22, 2025

REGULAR AGENDA ITEM 3

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



MEMORANDUM

To: Central Health Board of Managers

From: Valerie Guerra, Board Governance Specialist

CC: Perla Cavazos, Deputy Administrator

Date: October 17, 2025

Re: Review prioritization and tentative scheduling of items for consideration at future

Central Health Board and Committee meetings.

Overview:

Attached are the November and December tentative agenda items for your review. To assist with planning of future Board meeting and committee agendas, we will review and discuss these items.

Action Requested:

This is an informational item and requires no action.

November 2025 Tentative Schedule

CUC Liaison Committee: • Update on co-applicant agreement discussions TBD Bylaws Committee: TBD Nominations Committee: November 12, 2025 Strategic Planning Committee: • Minutes

November 17, 2025

Infrastructure Committee:

- Update on Brackenridge property
- Update on Facilities Plan status

Board Retreat:

• Future Health Care System

November 19, 2025

Budget and Finance Committee:

- Minutes
- CUC financials
- CH financials
- Receive an update on Sendero's proposed budget for CY2026

Board of Managers:

Public Communication

Consent items

- Minutes
- Investments
- Approve Sendero budget for CY2026

Regular agenda items

- Co-applicant agreement discussions
- Approve Bylaws Amendments
- Appoint Compliance Officer
- CEO Performance Review
- DMS data update
- Dean of the Dell Medical School will provide an update on certain programs.

Standing items

- CEO update
- Legislative update
- Performance review update
- Ascension lawsuit update/
- Birch lawsuit update
- Personnel issues

December 2025 Tentative Schedule

TBD

CUC Liaison Committee:

December 10, 2025

Strategic Planning Committee:

Minutes

Nominations Committee:

Meet to consider and recommend officer nominations to the full board

December 17, 2025

Budget and Finance Committee:

- Minutes
- CUC financials
- CH financials
- Approve investment policy

Board of Managers:

Public Communication

Consent items

- Minutes
- Investments
- Investment Policy

Financial items

Regular Items

- Officer elections
- Annual review of Board compliance policies
- Approve 2026 Meetings Calendar
- Take action to approve co-applicant agreement amendments
- Take action on future healthcare system strategic framework

Other items

- CEO update
- Legislative update
- Performance review update
- Ascension lawsuit update/
- Birch lawsuit update
- Personnel issues



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BOARD MEETING

October 22, 2025

REGULAR AGENDA ITEM 4

Receive and discuss an overview of legislative and regulatory issues impacting the Central Health System.³ (*Informational Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date	October 21, 2025
Who will present the agenda item? (Name, Title)	Perla Cavazos, Chief Governance and Government Affairs Officer Rob Borja, Director of Government Affairs and Public Policy Monica Crowley, Chief Strategy and Planning Officer & Sr. Counsel
General Item Description	Receive and discuss an overview of legislative and regulatory issues impacting the Central Health System.
Is this an informational or action item?	Informational update
Fiscal Impact	N/A
Recommended Motion (if needed – action item)	N/A
Please note that 1) of the situation a	item, and/or feedback sought from the Board of Managers: this agenda item will be taken up at the discretion of the chair based on status at the time of the meeting.
What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.)	Verbal update
Estimated time needed for presentation & questions?	TBD
Is closed session recommended? (Consult with attorneys.)	Yes
Form Prepared By/Date Submitted:	Valerie Guerra/October 14, 2025



State and Federal Legislative Update October 17, 2025

- CORNERSTONE GOVERNMENT AFFAIRS: Because of the many and frequent policy changes coming from Congress and the federal government, Central Health has retained Cornerstone Government Affairs to provide monitoring and analysis of federal issues that are important to the Central Health System. Cornerstone also provides services to our peer institutions, Harris Health and Parkland Health.
- 2. GOVERNMENT SHUTDOWN: The federal government shutdown continues with no end in sight. Some furloughed employees were terminated at seven federal agencies including HHS. The shutdown has largely centered on partisan disputes over whether to extend Affordable Care Act (ACA) subsidies for 22 million patients set to expire at the end of the year. Some Senate Democrats have said they are open to initiating an income cap on Affordable Care Act tax credits to continue negotiations with Senate Republicans. Senate Republicans have shared that their objections to renewing the federal subsidies are, in part, due to higher-earners ability to use the ACA tax credits.
- 3. 340B SENATE HEARING: The Senate Health, Education, Labor and Pensions Committee will be holding a hearing on October 23 called, "The 340B Program: Examining Its Growth and Impact on Patients." Committee Chairman U.S. Sen. Bill Cassidy (R-La.), a 340B critic who has called for major program reforms, will preside over the hearing. The hearing will likely touch on the Congressional Budget Office's (CBO) September report on 340B growth. That report, which Cassidy and GOP House leaders requested, found that covered entities participating in the 340B prime vendor program spent nearly \$44 billion on discounted drugs in 2021, up from \$6.6 billion in 2010. The CBO attributed the growth to overall drug spending increases, expanded contract pharmacy use, provider consolidation and expanded participation following the ACA.
- 4. REP. HINOJOSA RUNNING FOR GOVERNOR. Local State Representative Gina Hinojosa announced that she will run for Texas Governor against fellow Democrat Andrew White and incumbent Republican Greg Abbott. Local State Representative Vikki Goodwin also recently announced she will run for Lt Governor of Texas against incumbent Dan Patrick.



Central Texas is a model healthy community.

Our Mission

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

Our Values

Central Health will achieve excellence through:

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

Innovation - We create solutions to improve healthcare access.

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

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

BOARD MEETING

October 22, 2025

REGULAR AGENDA ITEM 5

Receive and discuss a briefing regarding *Travis County Healthcare District d/b/a Central Health v. Ascension Texas f/k/a Seton Healthcare Family*, Cause No. D-1-GN-23-000398.³ (*Informational Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date	October 21, 2025
Who will present the agenda item? (Name, Title)	Monica Crowley, Chief Strategy and Planning Officer & Sr. Counsel
General Item Description	Receive and discuss a briefing regarding <i>Travis County Healthcare District d/b/a Central Health v. Ascension Texas f/k/a Seton Healthcare Family</i> , Cause No. D-1-GN-23-000398. ³ (<i>Informational Item</i>)
Is this an informational or action item?	Informational
Fiscal Impact	N/A
Recommended Motion (if needed – action item)	N/A
Briefing with lega	item, and/or feedback sought from the Board of Managers: al counsel as needed. Please note that this agenda item will be taken up at the chair based on status of the situation at the time of the meeting.
What backup will be provided, or will this be a verbal update? (Backup is	
due one week before the	
meeting.)	Verbal update
Estimated time needed for presentation & questions?	TBD
Is closed session recommended? (Consult with attorneys.)	Yes
Form Prepared By/Date Submitted:	Valerie Guerra/ October 14, 2025



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BOARD MEETING

October 22, 2025

REGULAR AGENDA ITEM 6

Receive and discuss a briefing regarding *Birch, et al. v. Travis County Healthcare District d/b/a Central Health and Dr. Patrick Lee*, Cause No. D-1-GN-17-005824 in the 345th District Court of Travis County.³ (*Informational Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date	October 21, 2025
Who will present the	
agenda item? (Name, Title)	Monica Crowley, Chief Strategy and Planning Officer & Sr. Counsel
General Item Description	Receive and discuss a briefing regarding Birch, et al. V. Travis County Healthcare District d/b/a Central Health and Mike Geeslin, Cause No. D-1-GN-17-005824 in the 345th District Court of Travis County.
Is this an informational or	
action item?	Informational
Fiscal Impact	N/A
Recommended Motion (if needed – action item)	N/A
Briefing with leg	item, and/or feedback sought from the Board of Managers: al counsel as needed. Please note that this agenda item will be taken up at the chair based on status of the situation at the time of the meeting.
2)	chair based on status of the statution at the time of the meeting.
What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.)	Verbal update
•	·
Estimated time needed for presentation & questions?	TBD
Is closed session recommended? (Consult with attorneys.)	Yes
Form Prepared By/Date Submitted:	Valerie Guerra/ October 14, 2025



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BOARD MEETING

October 22, 2025

REGULAR AGENDA ITEM 7

Deliberation and possible action on the appointment, employment, evaluation, reassignment, duties, discipline, or dismissal of one or more Central Health employees.^{3,4} (*Action Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date	October 21, 2025
Who will present the agenda item? (Name, Title)	
General Item Description	Deliberation and possible action on the appointment, employment, evaluation, reassignment, duties, discipline, or dismissal of one or more Central Health employees.
Is this an informational or action item?	Action
Fiscal Impact	
Recommended Motion (if needed – action item)	As needed
	item, and/or feedback sought from the Board of Managers: this agenda item will be taken up at the discretion of the chair on an as needed
2)	
What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.)	Verbal update
Estimated time needed for presentation & questions?	TBD
Is closed session recommended? (Consult with attorneys.)	Yes
Form Prepared By/Date Submitted:	Valerie Guerra/ October 14, 2025



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BOARD MEETING

October 22, 2025

REGULAR AGENDA ITEM 8

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