



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

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STRATEGIC PLANNING COMMITTEE MEETING

Wednesday, November 12, 2025, 1:00 p.m.

Videoconference meeting¹

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

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

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

<https://us06web.zoom.us/j/84997205062?pwd=ShiSHwTVKEPP6o1vBogK6li3tsolFt.1>

Meeting ID: 849 9720 5062

Passcode: 899330

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

Meeting ID: 849 9720 5062

Passcode: 899330

The Committee may meet via videoconference with a quorum present in person and allow public participation via videoconference and telephone as allowed under the Open Meetings Act. Although a quorum of the Committee will be physically present at the location posted in this meeting notice, all members of the public may observe the meeting virtually and participate in public comment, if desired, through the virtual meeting link or telephone number listed on this meeting notice.

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 11:30 a.m. on November 12, 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 and leave a voice message with your full name, your request to comment via telephone, videoconference, or in-person at the meeting; or
- Sign-in at the front desk on the day of the meeting, prior to the start of the meeting.

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

PUBLIC COMMUNICATION

Public Communication rules for Central Health Board and Committee meetings include setting a fixed amount of time for a 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 1:00 p.m.

COMMITTEE AGENDA²

1. Review and approve the minutes of the June 11, 2025 Strategic Planning Committee meeting. (*Action Item*)
2. Receive and discuss a report from the President & CEO on Fiscal Year 2025 Accomplishments, Priorities, and Key Results. (*Informational Item*)
3. Review and discuss a draft system transformation policy and strategy framework.³ (*Informational Item*)
4. Confirm the next Strategic Planning Committee meeting date, time, and location. (*Informational Item*)

¹ This meeting may include a member of the Strategic Planning Committee participating by videoconference. It is the intent of the presiding officer to be physically present and preside over the meeting at Central Health Headquarters, 1111 Cesar Chavez, Austin, Texas 78702. This meeting location will be open to the public during the open portions of the meeting, and any member participating by videoconference shall be visible and audible to the public members in attendance whenever the member is speaking. **Members of the public are strongly encouraged to participate remotely through the toll-free videoconference link or telephone number provided.**

² The Strategic Planning Committee may take items in an order that differs from the posted order and may consider any item posted on the agenda in a closed session if the item involves issues that require consideration in a closed session and the Committee announces that the item will be considered during a closed session. A quorum of Central Health's Board of Managers may convene or participate via videoconference to discuss matters on the Committee agenda. However, Board members who are not Committee members will not vote on any Committee agenda items, nor will any full Board action be taken.

- ³ Possible closed session discussion under Texas Government Code §551.071 (Consultation with Attorney) and Texas Government Code §551.085 (Governing Board of Certain Providers of Health Care Services).

Any individual with a disability who plans to attend or view this meeting and requires auxiliary aids or services should notify Central Health as far in advance of the meeting day as possible, but no less than two days in advance, so that appropriate arrangements can be made. Notice should be given to the Board Governance Manager by telephone at (512) 978-8049.

Cualquier persona con una discapacidad que planee asistir o ver esta reunión y requiera ayudas o servicios auxiliares debe notificar a Central Health con la mayor anticipación posible de la reunión, pero no menos de dos días de anticipación, para que se puedan hacer los arreglos apropiados. Se debe notificar al Gerente de Gobierno de la Junta por teléfono al (512) 978-8049.

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

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

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Came to hand and posted on a Bulletin Board in the
County Recording Office, Austin, Travis County, Texas on this the
5 day of November 2025

Dyana Limon-Mercado

County Clerk, Travis County, Texas

By Ariel Hernandez Deputy

ARIEL HERNANDEZ



**FILED AND RECORDED
OFFICIAL PUBLIC RECORDS**

Dyana Limon-Mercado

Dyana Limon-Mercado, County Clerk
Travis County, Texas

202581528

Nov 05, 2025 02:57 PM

Fee: \$0.00

HERNANDEZA



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STRATEGIC PLANNING COMMITTEE

November 12, 2025

AGENDA ITEM 1

Review and approve the minutes of the June 11, 2025 Strategic Planning Committee meetings.
(*Action Item*)

MINUTES OF MEETING – JUNE 11, 2025
CENTRAL HEALTH
STRATEGIC PLANNING COMMITTEE

On Wednesday, June 11, 2025, a meeting of the Central Health Strategic Planning Committee convened in open session at 1:01 p.m. in person at the Central Health Administrative Offices and remotely by toll-free videoconference. Clerk for the meeting was Briana Yanes.

Committee members present in person: Chair Brinson, Manager Jones, Manager May, and Manager Valadez

Board members present in person: Manager Kitchen, Manager Martin (arrived at 1:15) and Manager Rodriguez (arrived at 1:25)

PUBLIC COMMUNICATION

Clerk's Notes: Public Communication began at 1:02 p.m. Yesenia Ramos introduced two speakers for Public Communication.

Members of the Board heard from: Ted Burton, Chief Communications Officer, and Yesenia Ramos, Community Engagement Manager.

COMMITTEE AGENDA

1. Review and approve the minutes of the April 9 and May 14, 2025 Strategic Planning Committee meetings.

Clerk's Notes: Discussion on this item began at 1:09 p.m.

Manager Valadez moved that the Committee approve the minutes of the April 9 and May 14, 2025 Strategic Planning Committee meetings.

Manager May seconded the motion.

Chairperson Brinson	For
Manager Jones	For
Manager May	For
Manager Valadez	For

2. Receive and discuss an update on the implementation of the Service Delivery Strategic Plan (Healthcare Equity Plan).

Clerk's Notes: Discussion on this item began at 1:11 p.m. Ms. Monica Crowley, Chief Strategy and Planning Officer & Sr. Counsel; Mr. Jonathan Morgan, Chief Operating Officer; Dr. Alan Schalscha, Chief Medical Officer; and Mr. Jeff Knodel, Chief Financial Officer, Ted Burton, Chief Communications Officer, and Sarita Clark-Leach, VP of Quality, Analytics and Performance Improvement, presented a progress update on the Healthcare Equity Plan.

The update opened with a brief review of the plan's development and the estimated cost of implementation, as outlined in the Board-adopted Healthcare Equity Strategic Plan. The presentation then covered the following:

- Progress made and the total investment in implementing the Healthcare Equity Plan, including key initiatives, investments, and new opportunities not identified in the original plan.

- The implementation timeline, highlighting planning phases, service expansion, scaling, new investments, and evolving priorities.
- Details regarding the annual implementation of projects by community need and initiative and outstanding projects that were proposed to be implemented in future years in the original Healthcare Equity Plan.

3. Confirm the next Strategic Planning Committee meeting date, time, and location.

Manager Valadez moved that the Committee adjourn.

Manager Martin seconded the motion.

Chairperson Brinson	For
Manager Jones	For
Manager May	For
Manager Valadez	For

The meeting was adjourned at 4:34 p.m.

ATTESTED TO BY:

Chair Brinson, Chairperson
Central Health Strategic Planning Committee

Manuel Martin, Secretary
Central Health Board of Managers



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STRATEGIC PLANNING COMMITTEE

November 12, 2025

AGENDA ITEM 2

Receive and discuss a report from the President & CEO on Fiscal Year 2025 Accomplishments, Priorities, and Key Results. (*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 November 12, 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

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

- 1) Update on Shared 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 11/04/2025



CENTRAL HEALTH

Fiscal Year 2025

CEO Performance Review

Prepared for the Board of Directors

October 13, 2025

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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 year-over-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 decision-making.

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 AI 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 multi-year 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

O1	Increase Access and Capacity	OWNER	Notes	Completion to Date	STATUS
KR	Expand Access to Specialty Care				
	<i>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.</i>	Jon Morgan and Dr. Alan Schalscha	20,461 encounters through year-end FY2025	152% of goal	
KR	Healthcare for the Homeless				
	<i>Expand initiatives to support unhoused patients by operationalizing Respite Care at the CEC with a target of 450 bed days.</i>	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				
	<i>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</i>	Jon Morgan and Dr. Alan Schalscha	2,032 care episodes through year-end FY2025: <ul style="list-style-type: none"> 1,633 inpatient hospital care transitions 399 skilled nursing direct care patient episodes	145% of goal	

KR	Social Determinants of Health				
	<i>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.</i>	Monica Crowley and Megan Cermak	<p>The mobile food pharmacy program is well underway, distributing an average of over 7,000 lbs. of food each month to CH and CUC patients.</p> <p>The Medically Tailored Meal delivery program has launched, and patients will receive their first meals in mid-November.</p> <p>A vendor has been selected for the Workforce Development program, and contract negotiations are underway.</p>	95%	
KR	Budget Expenditures				
	<i>Demonstrate to the Commissioner's Court budget dollars were expended in accordance with the Board of Managers & Commissioner's Court approved budget resolution.</i>	Jeff Knodel	<p>Conducted 5/5 Community Conversations and 4 County Commissioner Workshops.</p> <p>We are also working to follow the TCCC Financial Policies to present our Budget in upcoming sessions, scheduled quarterly with TCCC</p>	100%	

O3	Member Enrollment and Engagement	OWNER	Notes	Completion to Date	STATUS
KR	Enrollment and Eligibility				
	<i>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 approaches to expand capacity</i>	Jon Morgan and Dr. Alan Schalscha	<p>Total MAP + MAP Basic: <i>Average monthly enrollment</i> 99,333 YTD compared to 87,666 in FY24</p> <p>*Monitoring emerging trends of decreases in new enrollments</p> <p>Homeless individuals: 11,1527 enrollments YTD compared to 8,336 at this time last year</p>	<p>99,333/92,049 = 107.9% of goal</p> <p>13.3% enrollment increase over FY24 (Monthly Rolling AVG)</p> <p>11,527/11,476=100.4% of goal</p>	

KR	Coverage Programs, Benefits, & Structures				
	<i>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</i>	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%	

O4	System of Care Infrastructure	OWNER	Notes	Completion to Date	STATUS
KR	Health Systems Technology				
	<i>Strengthen data compliance and security at a system level by implementing and operationalizing a data governance platform by the end of the fiscal year</i>	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				
	<i>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</i>	Jon Morgan and Dr. Alan Schalscha	Total number of cohorts: 5, currently in the 5th cohort <ul style="list-style-type: none"> 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%	

			<p>Goals of MA program</p> <ul style="list-style-type: none"> • As Central Health continues to grow in the offerings of direct care, medical assistants 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 community 		
	<p><i>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.</i></p>	<p>Jeannie Virden</p>	<p>System has been implemented, and we launched our first system wide engagement survey on Monday, September 8, 2025.</p>	<p>100%</p>	

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

O1	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%	

O2	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%	

			<p>of Central Health and Sendero data.</p> <p>There is ongoing work with CUC to align and define their data into the existing dashboards.</p> <p>The dashboards are published and accessible through the intranet SharePoint site, when connected to the network directly or through VPN.</p>		
KR	Describe the future integrated care system and present to the Board of Managers for approval by the end of Q1 FY 2026	Monica Crowley, Tara Trower, Karen Ator & Kim Heinonen	<p>Developed high level proposal for Local Payer Provider Public System vision approach and continuing to build out details of each key 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.</p>	80%	
KR	Develop 5-year system transformation plan – care delivery capability, capacity, and infrastructure plan and present to the Board of Managers for approval by the end of FY2025	Jon Morgan, Tara Trower & Stephanie McDonald	<p>Initial discussions complete; beginning current facility capacity, location and assessment; aligning with related OKRs</p> <p>Focusing current efforts on describing future integrated care system to align 5-year transformation plan.</p>	20%	
KR	Engage in strategic partnerships with Integral Care, Austin Public Health, Emergency Medical Services, and two other community partners to improve healthcare	Perla Cavazos, Ted Burton, Tara Trower &	Central Health deepened partnerships with Austin Public Health, Integral Care, Austin-Travis County	100%	

	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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O3	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 Stefanowicz & 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 map-completed; Identified strategies to focus with guidance from Systems Engineer	100%	

O4	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 pharmacy 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	95%	

			<p>their first meals in mid-November.</p> <p>A vendor has been selected for the Workforce Development program, and contract negotiations are underway.</p>		
KR	Combine three duplicated services across the system by end of FY2025	Jon Morgan, Tara Trower & Karen Ator	<p>FY2025 efforts focused on eligibility/financial screening services (CUC/CH), provider credentialing processes (CUC/Sendero) and patient transportation contracts (Sendero/CH);</p> <p>Other areas under discussion for early FY2026 implementation include healthcare for the homeless services, Epic EHR resources, addiction medicine programs and pharmacy.</p>	100%	
KR	Collaboratively demonstrate the value of public investment by the end of FY2025	Perla Cavazos, Ted Burton & Tara Trower	<p>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.</p>	100%	



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.

STRATEGIC PLANNING COMMITTEE

November 12, 2025

AGENDA ITEM 3

Review and discuss a draft system transformation policy and strategy framework.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 November 12, 2025

Who will present the
agenda item? (Name, Title) Dr. Pat Lee, CEO

General Item Description Review and discuss a draft system transformation policy and strategic framework

Is this an informational or
action item? Informational

Fiscal Impact None

Recommended Motion (if
needed – action item) _____

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

- 1) Discuss the Purpose of the Policy
- 2) Why Transformation is Needed
- 3) Discuss the Key Concepts of the Policy
- 4) _____

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

Estimated time needed for
presentation & questions? 30 Min

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

Form Prepared By/Date
Submitted: Lucas Bustelo 11/03/2025



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STRATEGIC PLANNING COMMITTEE

November 12, 2025

AGENDA ITEM 4

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