



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.

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AD HOC COMMUNITYCARE LIAISON COMMITTEE MEETING

Wednesday, December 3, 2025, 3:00 p.m.

Or following the Ad Hoc Policy and Bylaws Committee Meeting

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/82553233154?pwd=4mQ6mPcap9qW6Xt7Z11c9RwHJBuNXr.1>

Meeting ID: 825 5323 3154

Passcode: 505365

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: 825 5323 3154

Passcode: 505365

The Committee may meet via videoconference with a quorum present in person and will 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 the meeting notice, all members of the public are free to observe the meeting virtually and participate

in public comment, if desired, through the virtual meeting link or telephone number listed on each meeting notice.

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 1:30 p.m. on December 3, 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 public communication.

PUBLIC COMMUNICATION

Public Communication rules for Central Health Board and Committee meetings include setting a fixed amount of time per person to speak and limiting Committee responses to public inquiries, if any, to statements of specific factual information or existing policy. The Public Communication portion of the meeting will begin at 5:00 p.m.

COMMITTEE AGENDA²

1. Approve the minutes of the November 3, 2025 Ad hoc CommUnityCare Liaison Committee meeting and the amended minutes of the October 21, 2025 Ad hoc CommUnityCare Liaison Committee meeting. (*Action Item*)
2. Review and 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.³ (*Action Item*)
3. Confirm the next regular Ad Hoc CommUnityCare Liaison Committee meeting date, time, and location. (*Informational Item*)

Notes:

¹ This meeting may include one member of the Ad Hoc CommUnityCare Liaison Committee participating by videoconference. It is the intent of the presiding officer to be physically present and preside over the meeting at Central Health Administrative Offices, 1111 E. Cesar Chavez St., Austin, TX 78702, Board Room. This meeting location will be open to the public during the open portions of the meeting, and any member participating by videoconference shall be both visible and audible to the public whenever the member is speaking. **Members of the public are strongly encouraged to participate remotely through the toll-free videoconference link or telephone number provided.**

² The Ad Hoc CommUnityCare Liaison 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).

Any individual with a disability who plans to attend this meeting and requires auxiliary aids or services should notify Central Health at least two days in advance, so that appropriate arrangements can be made. Notice should be given to the Board Governance Manager by telephone at (512) 978-8049.

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

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

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

**CENTRAL HEALTH****Our Vision**

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STAYS IN FILE

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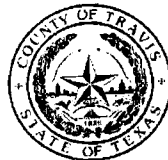
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Came to hand and posted on a Bulletin Board in the
County Recording Office, Austin, Travis County, Texas on this the
21 day of November 2025.

By Dyana Limon-Mercado Deputy
County Clerk, Travis County, Texas

ARIEL HERNANDEZ



**FILED AND RECORDED
OFFICIAL PUBLIC RECORDS**

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

202581630

Nov 21, 2025 04:48 PM

Fee: \$0.00

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AD HOC COMMUNITYCARE LIAISON COMMITTEE

December 3, 2025

AGENDA ITEM 1

Approve the minutes of the November 3, 2025 Ad Hoc CommUnityCare Liaison Committee meeting and the amended minutes of the October 21, 2025 Ad hoc CommUnityCare Liaison Committee meeting. (*Action Item*)

MINUTES OF MEETING – NOVEMBER 3, 2025
CENTRAL HEALTH
AD HOC COMMUNITYCARE LIAISON COMMITTEE

On Tuesday, November 3, 2025, a meeting of the Central Health Ad Hoc CommUnityCare Liaison Committee convened in open session at 4:04 p.m. in person at the Central Health Administrative Offices and remotely by toll-free videoconference. Clerk for the meeting was Valerie Guerra.

Committee members present in person: Chair Kitchen, Manager Brinson, Manager May, and Manager Rodriguez

Board members present via audio and video or in person: Manager Jones, Manager Martin, Manager Museitif, Manager Motwani (virtual at 4:14pm), Manager Valadez (4:39 p.m.)

PUBLIC COMMUNICATION

Clerk's Notes: Valerie Guerra announced that there were no speakers for Public Communication.

COMMITTEE AGENDA

1. **Approve the minutes of the October 21, 2025 Ad hoc CommUnityCare Liaison Committee meeting.**

Clerk's Notes: Discussion on this item began at 4:04 p.m.

Manager May moved that the Committee approve the minutes of the October 21, 2025 Ad hoc CommUnityCare Liaison Committee meeting.

Manager Brinson seconded the motion.

Chairperson Kitchen	Abstain because ex-officio
Manager Brinson	For
Manager May	For
Manager Rodriguez	For

2. **Review and 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.**

Clerk's Notes: Discussion on this item began at 4:09 p.m.

At 4:09 p.m. Chairperson Kitchen announced that the Committee was convening in closed session to discuss agenda item 2 under Texas Government Code §551.071 (Consultation with Attorney).

At 7:17 p.m. the Committee returned to open session.

3. **Confirm the next regular Ad Hoc Succession Committee meeting date, time, and location.**

Manager Rodriguez moved that the Committee adjourn.

Manager May seconded the motion.

Chairperson Kitchen	Abstain because Ex-officio
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Manager Brinson	For
Manager May	For
Manager Rodriguez	For

The meeting was adjourned at 7:18 p.m.

ATTESTED TO BY:

Ann Kitchen, Chairperson
Central Health Ad Hoc CommUnityCare Liaison
Committee

Manuel Martin, Secretary
Central Health Board of Managers

MINUTES OF MEETING – OCTOBER 21, 2025
CENTRAL HEALTH
AD HOC COMMUNITYCARE LIAISON COMMITTEE

On Tuesday, October 21, 2025, a meeting of the Central Health Ad Hoc CommUnityCare Liaison Committee convened in open session at 5:03 p.m. in person at the Central Health Administrative Offices and remotely by toll-free videoconference. Clerk for the meeting was Valerie Guerra.

Committee members present in person: Chair Kitchen, Manager May, and Manager Rodriguez

Board members present via audio and video or in person: Manager Jones, Manager Martin (arrived at 5:13 p.m.), and Manager Valadez

Absent: Manager Brinson

PUBLIC COMMUNICATION

Clerk's Notes: Valerie Guerra introduced no speakers for Public Communication.

COMMITTEE AGENDA

1. **Approve the minutes of the September 18, 2025 Ad hoc CommUnityCare Liaison Committee meeting.**

Clerk's Notes: Discussion on this item began at 5:22 p.m.

Chair Kitchen moved that the Committee approve the minutes of the September 18, 2025 Ad hoc CommUnityCare Liaison Committee meeting.

Manager Rodriguez seconded the motion.

Chairperson Kitchen	For
Manager Brinson	Absent
Manager May	For
Manager Rodriguez	For

2. **Review and take appropriate action on the Annual Joint Staff Planning and Budgeting Methodology Pertaining to Health Center Program Funding.**

Clerk's Notes: Discussion on this item began at 5:07 p.m. Dr. Lee, President and CEO, explained how the Annual Joint Staff Planning and Budgeting Methodology outlines the annual process in accordance with the Co-applicant agreement, whereby the CEOs of CommUnityCare Health Centers and Central Health will meet to develop the annual budget and service delivery objectives.

Manager May moved that the Committee recommend that the Board approve the document summarizing the annual joint staff planning and budgeting methodology pertaining to health center program funding.

Manager Martin seconded the motion.

Chairperson Kitchen	For
Manager Brinson	Absent
Manager May	For
Manager Rodriguez	For

3. Review and 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.

Clerk's Notes: Discussion on this item began at 5:26 p.m.

At 5:26 p.m. Chairperson Kitchen announced that the Committee was convening in closed session to discuss agenda item 3 under Texas Government Code §551.071 (Consultation with Attorney).

At 7:05 p.m. the Committee returned to open session.

4. Review and take appropriate action on the CommUnityCare CEO personnel policy.

Clerk's Notes: Discussion on this item began at 5:26 p.m.

At 5:26 p.m. Chairperson Kitchen announced that the Committee was convening in closed session to discuss agenda item 4 under Texas Government Code §551.071 (Consultation with Attorney).

At 7:08 p.m. the Committee returned to open session.

Manager May moved that the Committee recommend that the Board approve the CommUnityCare CEO Personnel Policy as discussed in closed session.

Manager Rodriguez seconded the motion.

Chairperson Kitchen	For
Manager Brinson	Absent
Manager May	For
Manager Rodriguez	For

5. Discuss follow-up items resulting from the Central Health and CommUnityCare Joint Board Retreat held on August 13, 2025.

Clerk's Notes This item was not taken up.

6. Confirm the next regular Ad Hoc Succession Committee meeting date, time, and location.

Manager Rodriguez moved that the Committee adjourn.

Manager May seconded the motion.

Chairperson Kitchen	For
Manager Brinson	Absent
Manager May	For
Manager Rodriguez	For

The meeting was adjourned at 7:09 p.m.

ATTESTED TO BY:

Ann Kitchen, Chairperson
Central Health Ad Hoc CommUnityCare Liaison
Committee

Manuel Martin, Secretary
Central Health Board of Managers



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.

- a. 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;
 - ii. 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).

**Annual Joint Staff Planning and Budgeting Methodology Pertaining to
Health Center Program Funding**

Annually, in accordance with the Co-applicant agreement, the CEOs of CommUnityCare Health Centers (CommUnityCare [CUC] or Health Center) and the Grantee (Central Health) will meet prior to development of the annual budget to develop budgetary guidelines and service delivery objectives.

Pursuant to the Co-applicant agreement between the Co-applicant Board of Directors (BOD) and Grantee and the Health Center HRSA-approved Scope of Project, CommUnityCare will provide healthcare delivery services, including but not limited to Medical, Dental, Behavioral Health, and Pharmacy Services.

It is the intent of the parties that:

- Subject to final approval of the annual budget in accordance with the Co-Applicant Agreement, Central Health will fund CUC \$98,800,000 on a cost-of-operations basis, the amount for which will be established every year during the budget development process. The amount for FY 2026 is \$98,800.00.
- Subject to final approval of the annual budget, and subject to CUC compliance with the requirements of the approved annual budget, Central Health will make 12 monthly payments to CUC over the course of the annual budget year, adjusted as necessary to sustain adequate operational cash levels to maintain 30-days+ cash on hand.
- CH and CUC staff will review actuals-to-budget and year-end projections on an agreed-upon frequency — no less than quarterly— and report the results to the Central Health Board. CH and CUC staff will also regularly discuss service line budget variances, progress on service delivery objectives and targeted outcomes and emerging opportunities and risks aligned with the Board established goals, and report the results to the CH Board.
- Throughout the budget year, Central Health and CUC will notify the other party of any proposed amendment to the budget and any such amendments must be approved by both parties, including approval by the Central Health Board of Managers in a duly called and noticed open meeting of the amounts specified in the bullet below.
- Substantial deviations from the approved annual Health Center budget or additional contemplated financial risks or obligations regarding the health center program and 330 grant, including those listed below, will be jointly evaluated and jointly approved, including approval by the Central Health Board of Managers in a duly called and noticed open meeting, to effectively plan for any anticipated financial impact to the health center program:
 - incurrence of debt of more than \$1,000,000
 - acquisition of another entity or line of business
 - divestiture of Health Center assets or lines of business that significantly alter service delivery

- payor contracts with greater than \$500,000 downside financial risk
 - purchases or new leases of real estate
 - capital or one-time expenses greater than \$500,000
- CH and CUC staff will jointly recommend, for final approval by the Co-Applicant BOD, any additions or material changes to CUC service lines, service locations and HRSA scope of services
- CUC will notify Central Health of its intent to establish activities or provide services outside of the HRSA approved scope of project; use of public health center resources (e.g. personnel, systems, facilities) for any out-of-scope activities must either be jointly approved by CUC and CH, including approval by the Central Health Board of Managers, or such activities must be solely funded with funds other than Health Center program income in a manner that is compliant with state and federal law.
- It is the intent of the parties that, in addition to the annual operating budget, Central Health and CUC will annually approve a reserve level equal to 30-days of cash on-hand based on the current year approved budget; each entity will equally share in the aggregate reserve level target; in FY26, this represents \$12 million of CUC reserves + additional \$12 million of designated CH reserves. Grant funds cannot be used as the source of reserve funding. Any use of reserves to meet cash flow needs will be reported to each respective board. CUC cash above and beyond \$12 million reserve will be applied to meet future cash flow and/or subsequent year budget needs. Actual approval of CH's reserve level may only be acted upon by the Central Health Board of Managers in a duly called and noticed open meeting.



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AD HOC COMMUNITYCARE LIAISON COMMITTEE

December 3, 2025

AGENDA ITEM 2

Review and 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.³ (*Action Item*)

MEMORANDUM

To Central Health Board of Managers
From: Ann Kitchen, Central Health Board Chair
Dr. Cynthia Brinson, Central Health Board Vice-Chair
Date: November 17, 2025
RE: Motion to Ensure Collaborative Relationship with CommUnity Care

The purpose of this Memorandum is to recommend a motion for consideration to articulate the will of the Board regarding the collaborative relationship with CommUnity Care.

The attached Motion provides direction for four of the key issues identified by Central Health for discussion with the CUC team. These are the issues most critical to advancing conversations with CUC related to the Co-Applicant Agreement.

All of these issues were discussed in detail with our Liaison Committee in the meeting on November 3rd. The Committee members are Dr. Cynthia Brinson, Geronimo Rodriquez, Eliza May, and Ann Kitchen (ex-officio). In addition to the Committee members, over a majority of Board members were present during that meeting. The discussion addressed a draft proposed motion, Dr. Lee's perspective, and Board members' questions and comments.

The attached motion only addresses the issues that were thoroughly discussed at the November 3rd Liaison Committee meeting. The Committee and other Board members present identified additional information needed to think through other issues like asset management. The Committee will schedule another meeting to discuss the issues not yet thoroughly discussed.

Please note that the scope of the discussions with the CUC Team is limited to matters necessary to the Co-Applicant Agreement. Although there may be some overlap that must be discussed, matters that only impact the EVP position within the Central Health system structure are for discussion with our Central Health Board and our CEO.

Attached Documents:

Co-Applicant Agreement Issues Motion 111925 – document for Board vote

Background Documents:

- 1) Co-Applicant Agreement Key Issues List (this document was shared with CUC Team)
- 2) Required Co-Applicant Board Authorities and Responsibilities (this document was shared at the November 3rd Committee meeting and lists federal law requirements with citations)

MOTION TO ENSURE COLLABORATIVE RELATIONSHIP WITH COMMUNITY CARE

PURPOSE: Central Health is transforming our services to achieve a coordinated, ambulatory-driven system of care for our patients – an objective shared by our system partners CommUnity Care and Sendero.

Central Health cannot achieve this vision for our patients alone.

The Central Health Board is responsible for approving the final revised Co-Applicant Agreement. The Board recognizes that ensuring a collaborative, transparent, and accountable relationship with CommUnityCare is necessary to success in achieving this objective. The revised Co-Applicant Agreement, as well as a signed contract with the CUC CEO, must be completed to move forward with our transformational vision.

DIRECTION: The Central Health Board directs the Central Health CEO to incorporate this motion's terms in the draft revised Co-Applicant Agreement developed in joint discussions with the CommUnity Care Board and the Central Health CUC Liaison Committee.

The Central Health Board may direct additional terms in future meetings, as recommended by the Board CUC Liaison Committee and as needed to advance discussions with the CUC Team.

CENTRAL HEALTH ADOPTS THE FOLLOWING TERMS:

1.A. Process for Establishing Aligned Strategic Direction

The Central Health (CH) and CommUnityCare Boards are responsible for alignment of each organization's respective strategic plans. The Liaison and Strategic Planning Committees for each organization, in consultation with staff, are charged with jointly developing processes for ensuring alignment, including a process to obtain community input, and recommending these processes to the respective Boards for approval.

1.B. CEO and Staff Reporting

- *Resolved By Central Health Board Approved MOU: Health Center staff report to and through the CUC CEO consistent with CH Personnel Policies that align with agreements.*
- *Resolved by Central Health Board Approved MOU and Personnel Policy: CUC CEO oversight process by CH CEO and CH Board*

Health Center staff relationship to Central Health counterparts is collaborative, for purpose of advancing aligned strategic direction. Structures for health center staff reporting will be determined jointly by both CH and CUC CEOs to best advance the

aligned strategic direction and collaborative approach. CH and CUC CEOs will provide these agreed upon structures to CH and CUC Boards for approval.

CUC CEO has dual reporting responsibilities to CUC Board for HRSA compliance with scope of project, and to CH CEO for public accountability.

CommUnityCare Board retains discretion and autonomy over the health center's day-to-day operations (outside of areas identified in Budget MOU), subject to operating within aligned strategic direction and performance targets approved by the CH and CommUnity Care Boards.

3. Alignment of CommUnityCare Bylaws and Agreements to Co-Applicant Agreement

Revise CUC ByLaws to state in the event of any conflict between the ByLaws and Co-Applicant Agreement, the Co-Applicant Agreement shall control per federal law as amended from time to time.

ByLaws require CH CEO and Board be notified of all proposed changes and any amendments Central Health believes affect it's HRSA responsibilities and receive written approval from CH Board.

All other agreements, including Administrative EF and Services Agreements, should be reviewed, updated, and harmonized with the revised Co-Applicant Agreement, and approved by the CH and CUC Boards.

4. Accountability and Transparency

Central Health and CommUnityCare shall develop collaborative and transparent processes to ensure Central Health's real-time access to all information related to the health center project (including HRSA filings, communications through EHB, financial records, and service delivery data) except where restricted by law or regulation.

Processes should ensure ongoing, information transparency

The CEOs will promptly inform the Boards in the event of unresolved disputes related to information sharing.

Co-Applicant Agreement Key Issues List

These issues are intended to be in addition to issues identified by CommUnity Care in their list of items for discussion, except where noted as resolved. Central Health agrees to discuss the areas that CommUnity Care has identified for discussion.

1. Process for Aligning Strategy, Policies and Operations

Discuss the process for ensuring that Central Health and CommUnityCare strategies are aligned, and that policies and operations are carried out in accordance with the aligned strategies.

a. Process for Establishing Aligned Strategic Direction

Discuss a process for ensuring alignment of the health center's and Central Health's strategic direction.

b. CEO and Staff Reporting

Discuss the framework for the health center CEO's reporting to the Central Health CEO, in addition to the CommUnityCare Board, and how the reporting relationships will differ in terms of purpose and scope. Health center staff reporting to and through the CommUnityCare CEO was agreed to in the MOU, but health center staff relationship (for example dotted or solid line reporting) to Central Health counterparts (e.g., CFO, CMO) has not been addressed.

c. Health Center Policies and Policymaking

Discuss the continued application of Central Health personnel and financial management policies to the health center including the process for establishing and documenting the review of revised or additional policies that may be requested to apply to the health center. Discuss the process for establishing other types of health center policies where alignment with Central Health policies and/or involvement of Central Health in the development of certain policies is critical to mission alignment. As indicated in CommUnityCare's list of issues, to be discussed is the role that Central Health should have in the development of, or approval of, Health Center policies and procedures (other than those related to fiscal and personnel issues) and other than those that HRSA requires the health center board to adopt.

d. Operational Management

Discuss delegation of operational management processes, such as the Joint Staff Planning and Budget Methodology, to staff. Any delegated processes would address the

development of the detailed operational processes needed to implement the governance principles outlined above

2. Asset Ownership

Discuss the range and ownership of assets associated with the health center project, including capital (facilities and equipment) and financial assets (i.e., Program Income).

3. Alignment of CommUnityCare Bylaws and Other Agreements to Co-Applicant Agreement

Discuss approach to ensuring CommUnityCare Bylaws are aligned with the Co-Applicant Agreement, as revised, and making other revisions as appropriate. Relatedly, discuss ensuring that any other agreements between Central Health and CommUnityCare are updated to align with the Co-Applicant Agreement.

4. Accountability and Transparency

Discuss Central Health's access to health center operational and financial information and reports, filings and communications with HRSA, including through HRSA's grants management service, the Electronic Handbook (EHB), the free exchange of information between Central Health and CommUnityCare staff, and Central Health's rights related to reviewing and auditing any CommUnityCare books and records relating to the health center project.

Issues CommUnityCare Identified as Resolved

- **CEO Oversight:** Issues related to the selection, discipline, supervision and dismissal of the CommUnityCare CEO were detailed and approved by the Central Health Board of Managers in the **CEO MOU**, the **CEO Agreement and the Personnel Policy**, and are thus considered resolved by both parties.
- **CEO Authority:** Issues related to CommUnityCare staff reporting to and through the CommUnityCare CEO, consistent with Central Health personnel policies that align with agreements between the entities, were detailed, outlined, and approved by the Central Health Board of Managers in the **CEO MOU**, and are thus considered resolved by both parties.
 - *Central Health: Health center staff reporting to and through the CommUnityCare CEO was agreed to in the MOU, but health center staff relationship (for example dotted or solid line reporting) to Central Health counterparts (e.g., CFO, CMO) has not been addressed.*

- **Budget Process:** Issues related to Central Health funding of the Health Center budget are addressed in the **Joint Staff Planning and Budgeting Methodology which has been approved by the Central Health Board of Managers**. In addition to the process for determining the annual budget, the Budget Methodology speaks to processes for (1) Central Health payments to CommUnityCare; (2) budget variances; (3) health center reserves; (4) budget amendments; (5) any additions or material changes to service lines, service locations, and scope of services; (5) out-of-scope activities; and (6) Central Health Board of Managers approvals.

- **CUC Oversight Over Health Center Policies and Procedures:** It is understood that the CommUnityCare Board will develop all health center policies that HRSA requires the health center board to adopt (e.g., scope and availability of services, service site location, hours of operations, billing and collection policies, quality assurance programs) with the exception of certain fiscal and personnel policies that are developed by Central Health consistent with the agreements between the entities.
 - *Central Health: As indicated in CommUnityCare’s list of issues, to be discussed is the role that Central Health should have in the development of, or approval of, Health Center policies and procedures (other than those related to fiscal and personnel issues).*

Required Co-Applicant Board Authorities and Responsibilities

The HRSA Health Center Compliance Manual outlines the following authorities and responsibilities that must be held and exercised by the co-applicant board.¹

Oversight Responsibilities

- Assuring that the center is operated in compliance with applicable Federal, State, and local laws and regulations.

Authorities Relating to the Project Director

- Approving the selection and termination/dismissal of the health center's Project Director/Chief Executive Officer (CEO).

Policy Setting Authorities

- Establishing or adopting policies for the conduct of the Health Center Program project and for updating these policies when needed. Specifically, the health center governing board must have authority for:
 - Adopting policies for financial management practices and a system to ensure accountability for center resources, ***unless established by the public agency grantee***, including periodically reviewing the financial status of the health center and the results of the annual audit to ensure appropriate follow-up actions are taken.
 - Establishing and maintaining general personnel policies for the health center, ***unless established by the public agency grantee***.
 - Establishing, adopting and updating (at least once every three years) health care policies—specifically, the Sliding Fee Discount Program, Quality Improvement/Assurance, Billing and Collections policies, and policies related to scope and availability of services, service site location(s), and hours of operation of service sites.

Budget and Health Center Applications

- Approving applications related to the Health Center Program project, including approving the annual budget, which outlines the proposed uses of both Health Center Program award and non-Federal resources and revenue.

¹ 42 C.F.R. § 51c.304(d); HRSA, Health Center Program Compliance Manual, Chapter 19: Board Authority (last updated October 3, 2025), available at <https://bphc.hrsa.gov/compliance/compliance-manual>.

Planning and Evaluation Authorities

- Developing an overall plan for the Health Center Program project under the direction of the governing board.
- Providing direction for long-range planning, including but not limited to identifying health center priorities and adopting a three-year plan for financial management and capital expenditures.
- Evaluating the performance of the health center based on quality assurance/quality improvement assessments and other information received from health center management, ensuring appropriate follow up actions are taken, and developing a process for hearing and resolving patient complaints.



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.

AD HOC COMMUNITYCARE LIAISON COMMITTEE

December 3, 2025

AGENDA ITEM 3

Confirm the next regular Ad Hoc CommUnityCare Liaison Committee meeting date, time, and location. (*Informational Item*)