



#### **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, March 25, 2026, 4:00 p.m.**

### **Videoconference meeting<sup>1</sup>**

**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/85666939928?pwd=F2ty2xt8qXVen2FpXa1DVYbnO5G01F.1>

Meeting ID: 856 6693 9928

Passcode: 004266

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 March 25, 2026**. 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 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 February 25, 2026 meeting.
- C2. Receive and ratify Central Health investments for February 2026.
- C3. Approve a resolution authorizing Central Health to join the Equalis Group Purchasing Program.
- C4. Approve the Annual Joint Staff Planning and Budgeting Methodology Pertaining to Health Center Program Funding.
- C5. Approve the President & CEO's goals for Fiscal Year 2026 as recommended by the Executive Committee.
- C6. Approve outside counsel for human resources legal services as recommended by the Executive Committee.

### **REGULAR AGENDA<sup>2</sup>**

- 1. Receive and discuss a report from the Board Chair including:
  - a. Board meeting mechanics and governance updates.
  - b. Update on a contract with outside counsel for human resources and governance legal services. (*Informational Item*)
- 2. Receive and discuss a report from the President & CEO including:
  - a. Strategic Board Alignment;
  - b. Clinical Excellence;
  - c. Financial Sustainability; and
  - d. People and Community. (*Informational Item*)

3. Receive, discuss, and take appropriate action on proposed driving forces impacting the Fiscal Year 2027 strategic initiatives. (*Action Item*)
4. Receive and discuss a Central Health System integration progress update. (*Informational Item*)
5. Review, discuss and take appropriate action on the compliance plan as recommended by the Chief Compliance Officer. (*Action Item*)
6. Receive a presentation on, review, and take appropriate action on the Central Health Fiscal Year 2025 financial audit and receive a presentation on the audit results of Central Health's component units (Central Texas Community Health Centers dba CommUnityCare and Sendero Health Plans Inc.). (*Action Item*)
7. Discuss and take appropriate action on the required documentation of closed sessions of Central Health Board of Managers and committee meetings. <sup>3</sup> (*Action Item*)
8. 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 and services provided by faculty and residents of The University of Texas at Austin Dell Medical School in support of Central Health's mission.<sup>3</sup> (*Informational Item*)
9. 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.<sup>3</sup> (*Informational Item*)
10. Deliberation and possible action on the appointment, employment, evaluation, reassignment, duties, discipline, or dismissal of one or more Central Health employees.<sup>3,4</sup> (*Action Item*)
11. Confirm the next regular Board meeting date, time, and location. (*Informational Item*)

**Notes:**

<sup>1</sup> This meeting may include one or more members of the Board of Managers 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, 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.**

<sup>2</sup> The Board of Managers may take items in an order that differs from the posted order and may consider any item posted on the agenda in a closed session if the item involves issues that require consideration in a closed session and the Board announces that the item will be considered during a closed session.

<sup>3</sup> Possible closed session discussion under Texas Government Code §551.071 (Consultation with Attorney).

<sup>4</sup> Possible closed session discussion under Texas Government Code §551.074 (Personnel Matters).

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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.

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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  
18 day of March 2026

Dyana Limon-Mercado  
County Clerk, Travis County, Texas

By [Signature] Deputy



**J E**

**FILED AND RECORDED  
OFFICIAL PUBLIC RECORDS**



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

**202680460**

Mar 18, 2026 03:24 PM

Fee: \$0.00

NUNEZJ

## **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.

Be it adopted that the above agreements will be honored and acted upon by each Board Manager as of 6/30/2021 and henceforth forward as indicated by signature below.

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Board Manager Signature

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Date

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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 that \_\_\_\_\_ people 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 that \_\_\_\_\_ and 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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## **BOARD MEETING**

**March 25, 2026**

## **AGENDA ITEM C1**

Approve the minutes of the Board of Managers February 25, 2026 meeting.

MINUTES OF MEETING – FEBRUARY 25, 2026  
CENTRAL HEALTH  
BOARD OF MANAGERS

On Wednesday, February 25, 2026, a meeting of the Central Health Board of Managers convened in open session at 4:28 p.m. remotely by toll-free videoconference and in person at the Central Health Administrative Offices. Clerk for the meeting was Valerie Guerra.

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**Board members present at Central Health:** Chairperson Rodriguez, Vice Chairperson May, Secretary Martin, Manager Kitchen (Departed 10:06 p.m.), Manager Jefferson, Manager Motwani, and Manager Valadez (Departed 9:54 p.m.).

**Board members present via video and audio:** Treasurer Museitif (arrived at 7:30 p.m.), Manager Brinson (arrived at 8:15 p.m.)

**PUBLIC COMMUNICATION**

**Clerk’s Notes:** Public Communication began at 4:28 p.m. Chair Rodriguez announced there were no speakers signed up for Public Communication.

**CONSENT AGENDA**

- C1. Approve the minutes of the September 10, 2025 Philanthropy Committee meeting and the Board of Managers January 28, 2026 meeting.**
- C2. Receive and ratify Central Health investments for January 2026.**
- C3. Receive the January 2026 financial statements for Central Health.**
- C4. Accept the Central Health Fiscal Year 2025 financial audit as recommended by the Budget and Finance Committee.**

Manager Kitchen moved that the Board approve Consent Agenda Items C1 through C3. Item C4 was not considered as it was postponed on the Budget and Finance meeting.

Manager May seconded the motion.

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

**REGULAR AGENDA**

- 1. Receive and discuss a Diversion Center update from Travis County Judge Andy Brown.**

**Clerk’s Notes:** Discussion on this item began at 4:49 p.m. Travis County Judge Andy Brown and Commissioner Ann Howard provided updates on the Diversion Center. They explained that Travis County is experiencing a mental health crisis and that the existing system is not equipped to meet community

needs, which often leads to poor outcomes. The Diversion Center will aim to fill gaps in the behavioral health continuum of care, provide strategic collaboration to integrate systems, and scale capacity. The County is currently finalizing Diversion Center planning elements. By end of Summer 2026, they expect to confirm partner commitments (funding, ownership, operator, and governance) and initiate phase II, which will focus on developing architectural and engineering documents.

2. **Receive and discuss a report from the President & CEO including:**
  - a. **Strategic Board Alignment;**
  - b. **Clinical Excellence;**
  - c. **Financial Sustainability; and**
  - d. **People and Community.**

**Clerk's Notes:** Discussion on this item began at 4:30 p.m. Dr. Pat Lee, President and CEO, provided key updates across several areas. Clinical updates included the delivery of the FibroScan device, progress on medication delivery system integration, the launch of new service lines, and advancements in new facility projects. Financial updates covered Medicare billing, philanthropic initiatives, and data-sharing efforts. Finally, systemwide community updates highlighted the kickoff of the Workforce Advisory Council, developments in AI governance structures, updates on entity data sharing, and continued community engagement activities.

3. **Discuss updates and Board input about East Cesar Chavez Neighborhood concerns regarding unhoused individuals and the Central Health Administration's response to those concerns.**

**Clerk's Notes:** Discussion on this item began at 5:52 p.m. Dr. Pat Lee, President and CEO, and Ted Burton, Chief Communications Officer, provided a brief update on Central Health's immediate response and cross-functional actions addressing concerns from the East Cesar Chavez Neighborhood. They explained that while immediate operational changes are underway, achieving a long-term resolution will require coordination among multiple agencies and cannot be accomplished by Central Health alone.

4. **Receive an update on Central Health's communications Awareness Survey results.**

**Clerk's Notes:** Discussion on this item began at 6:10 p.m. Ted Burton, Chief Communications Officer; Daniela Lopez, Management Supervisor from Sensis; and Derek Stafford, Research Director from Sensis, presented the Brand Tracker Survey findings. The presentation indicated: 1) notable increases in brand awareness, particularly among Spanish-speaking households, Latinos, and African Americans; 2) continued high levels of support for Central Health's mission across all demographic groups; 3) Central Health's leading favorability among current patients compared to peer organizations; and 4) a strong general understanding among residents of the relationships between Central Health, CommUnityCare, and Sendero Health Plans.

5. **Receive and discuss an update on the process and calendar for developing objectives and key results, key performance indicators, and the budget for Fiscal Year 2027.**

**Clerk's Notes:** Discussion on this item began at 6:51 p.m. Jeff Knodel, Chief Financial Officer; Kim Heinonen, Chief Transformation Officer; and Anisa Kendall, Sr. Director of Strategic Planning, shared a presentation highlighting several key topics. They explained that Board guidance will continuously inform the development of the FY27 Annual Budget planning cycle, including establishment of the System Objectives & Key Results. The presentation then provided a high-level review of the annual budget planning cycle, including how the process has evolved and how the strategic budget initiatives area anchored to clear objectives and measurable goals. Lastly they reviewed the FY27 Annual Planning and Budget Timeline and key presentations for Board guidance.

6. **Discuss and take appropriate action on the hiring of a board governance consultant.**

**Clerk's Notes:** Discussion on this item began at 7:34 p.m.

At 7:36 p.m.. Chairperson Rodriguez announced that the Board was convening in closed session to discuss agenda item 6 under Texas Government Code §551.071 (Consultation with Attorney).

At 10:23 p.m. the Board returned to open session.

No motion.

**7. Discuss and take appropriate action on the required documentation of closed sessions of Central Health Board of Managers and committee meetings.**

**Clerk's Notes:** Discussion on this item began at 7:34 p.m.

At 7:36 p.m. Chairperson Rodriguez announced that the Board was convening in closed session to discuss agenda item 7 under Texas Government Code §551.071 (Consultation with Attorney).

At 10:23 p.m. the Board returned to open session.

No motion.

**8. Discuss and take appropriate action to approve the President & CEO's goals for Fiscal Year 2026.**

**Clerk's Notes:** Discussion on this item began at 7:34 p.m.

At 7:36 p.m. Chairperson Rodriguez announced that the Board was convening in closed session to discuss agenda item 7 under Texas Government Code §551.071 (Consultation with Attorney).

At 10:23 p.m. the Board returned to open session.

No motion.

**9. Deliberation and possible action on the appointment, employment, evaluation, reassignment, duties, discipline, or dismissal of one or more Central Health employees.**

**Clerk's Notes:** Discussion on this item began at 7:34 p.m.

At 7:36 p.m. Chairperson Rodriguez announced that the Board was convening in closed session to discuss agenda item 7 under Texas Government Code §551.071 (Consultation with Attorney).

At 10:23 p.m. the Board returned to open session.

No motion.

**10. 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 and services provided by faculty and residents of The University of Texas at Austin Dell Medical School in support of Central Health's mission.**

**Clerk's Notes:** This item was not presented.

**11. 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.**

**Clerk's Notes:** This item was not presented.

**12. Review and take appropriate action on the CommUnityCare CEO employment agreement.**

**Clerk's Notes:** This item was not presented.

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

Manager May moved that the meeting adjourn.

Manager Motwani seconded the motion.

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

The meeting was adjourned at 10:24 p.m.

ATTESTED TO BY:

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Geronimo Rodriguez, Chairperson  
Central Health Board of Managers

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Manuel Martin, Secretary  
Central Health Board of Managers



### **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 MEETING**

**March 25, 2026**

## **AGENDA ITEM C2**

Receive and ratify Central Health investments for February 2026.

STATE OF TEXAS

COUNTY OF TRAVIS

CENTRAL HEALTH

Whereas, it appears to the Board of Managers of the Central Health, Travis County, Texas that there are sufficient funds on hand over and above those of immediate need for operating demand,

Now, Therefore, the Board of Managers hereby orders

- 1.) that the County Treasurer of Travis County, Texas, acting on behalf of Central Health, execute the investment of these funds in the total amount of \$152,483,097.65 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 14 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: March 25, 2026

\_\_\_\_\_  
CHAIR, BOARD OF MANAGERS

\_\_\_\_\_  
VICE CHAIR, BOARD OF MANAGERS

\_\_\_\_\_  
MANAGER



Central Health  
Investment Department  
Security Transaction Form

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Date: 2/2/2026

Time: 10:30

**The following transaction was executed on behalf of Central Health:**

Description: Texas Daily Select

Fund Name: Central Health

Par Value: \$13,962,000.00

Safekeeping No.: N/A

CPN/DISC Rate: N/A

Price: 100%

Maturity Date: N/A

Bond Eq Yield: 3.8400%

Principal: \$13,962,000.00

Purchased Thru: Texas Daily Select

Accured Int: N/A

Broker: N/A

Total Due: \$13,962,000.00

CUSIP #: N/A

Trade Date: 2/2/2026

Settlement Date: 2/2/2026

Authorized by:

Reagan James  
Cash / Investment Manager



Central Health  
Investment Department  
Security Transaction Form

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Date: 2/3/2026

Time: 10:30

**The following transaction was executed on behalf of Central Health:**

Description: TexPool

Fund Name: Central Health

Par Value: \$35,686,000.00

Safekeeping No.: N/A

CPN/DISC Rate: N/A

Price: 100%

Maturity Date: N/A

Bond Eq Yield: 3.6903%

Principal: \$35,686,000.00

Purchased Thru: TexPool

Accrued Int: N/A

Broker: N/A

Total Due: \$35,686,000.00

CUSIP #: N/A

Trade Date: 2/3/2026

Settlement Date: 2/3/2026

Authorized by:

Reagan Lewis  
Cash / Investment Manager



Central Health  
Investment Department  
Security Transaction Form

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Date: 2/3/2026  
Time: 10:30

The following transaction was executed on behalf of Central Health:

Description:	<u>TexPool LPPF Central Health to Operating</u>	Fund Name:	<u>Central Health</u>
Par Value:	<u>\$31,223,097.65</u>	Safekeeping No.:	<u>N/A</u>
CPN/DISC Rate:	<u>N/A</u>	Price:	<u>100%</u>
Maturity Date:	<u>N/A</u>	Bond Eq Yield:	<u>3.6903%</u>
Principal:	<u>\$31,223,097.65</u>	Purchased Thru:	<u>TexPool LPPF Central Health to Operating</u>
Accrued Int:	<u>N/A</u>	Broker:	<u>N/A</u>
Total Due:	<u>\$31,223,097.65</u>	CUSIP #:	<u>N/A</u>
Trade Date:	<u>2/3/2026</u>	Settlement Date:	<u>2/3/2026</u>

Authorized by:

Reagan Linn  
Cash / Investment Manager



Central Health  
Investment Department  
Security Transaction Form

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Date: 2/4/2026

Time: 10:30

The following transaction was executed on behalf of Central Health:

Description: TexPool Fund Name: Central Health

Par Value: \$14,216,000.00 Safekeeping No.: N/A

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

Maturity Date: N/A Bond Eq Yield: 3.6870%

Principal: \$14,216,000.00 Purchased Thru: TexPool

Accrued Int: N/A Broker: N/A

Total Due: \$14,216,000.00 CUSIP #: N/A

Trade Date: 2/4/2026 Settlement Date: 2/4/2026

Authorized by:

Reagan Lewis  
Cash / Investment Manager



Central Health  
Investment Department  
Security Transaction Form

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Date: 2/5/2026

Time: 10:30

**The following transaction was executed on behalf of Central Health:**

Description: Texas Daily Select

Fund Name: Central Health

Par Value: \$4,918,000.00

Safekeeping No.: N/A

CPN/DISC Rate: N/A

Price: 100%

Maturity Date: N/A

Bond Eq Yield: 3.8300%

Principal: \$4,918,000.00

Purchased Thru: Texas Daily Select

Accured Int: N/A

Broker: N/A

Total Due: \$4,918,000.00

CUSIP #: N/A

Trade Date: 2/5/2026

Settlement Date: 2/5/2026

Authorized by:

Reagan James  
Cash / Investment Manager



Central Health  
Investment Department  
Security Transaction Form

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Date: 2/6/2026

Time: 10:30

The following transaction was executed on behalf of Central Health:

Description: Texas Daily Select

Fund Name: Central Health

Par Value: \$3,136,000.00

Safekeeping No.: N/A

CPN/DISC Rate: N/A

Price: 100%

Maturity Date: N/A

Bond Eq Yield: 3.8100%

Principal: \$3,136,000.00

Purchased Thru: Texas Daily Select

Accured Int: N/A

Broker: N/A

Total Due: \$3,136,000.00

CUSIP #: N/A

Trade Date: 2/6/2026

Settlement Date: 2/6/2026

Authorized by:

Cash / Investment Manager

CENTRAL HEALTH  
INVESTMENT DEPARTMENT  
SECURITY TRANSACTION FORM

DATE: 2/9/2026

TIME: 9:30 AM

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	FNMA Callable	FUND NAME:	CENTRAL HEALTH OPERATING
PAR VALUE:	\$ 12,000,000.00	SAFEKEEPING NO:	P 31317
CUPON / DISCOUNT RATE	3.780%	PRICE:	100.0000000
MATURITY DATE:	11/13/2028 US TREASURY CONVENTION YLD		3.7800%
PRINCIPAL:	\$ 12,000,000.00	PURCHASED THROUGH:	ACADEMY SEC
ACCRUED INT:	\$ 0.00	BROKER:	KIM CASH
TOTAL DUE:	\$ 12,000,000.00	CUSIP #:	3136GCMB8
TRADE DATE:	2/9/2026	SETTLEMENT DATE:	2/11/2026

AUTHORIZED BY:

  
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Central Health  
Investment Department  
Security Transaction Form

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Date: 2/12/2026

Time: 10:30

**The following transaction was executed on behalf of Central Health:**

Description: Texas Daily Select

Fund Name: Central Health

Par Value: \$9,957,000.00

Safekeeping No.: N/A

CPN/DISC Rate: N/A

Price: 100%

Maturity Date: N/A

Bond Eq Yield: 3.8000%

Principal: \$9,957,000.00

Purchased Thru: Texas Daily Select

Accrued Int: N/A

Broker: N/A

Total Due: \$9,957,000.00

CUSIP #: N/A

Trade Date: 2/12/2026

Settlement Date: 2/12/2026

Authorized by:

  
Cash / Investment Manager

CENTRAL HEALTH  
INVESTMENT DEPARTMENT  
SECURITY TRANSACTION FORM

DATE: 2/12/2026

TIME: 9:30 AM

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	FNMA Callable	FUND NAME:	CENTRAL HEALTH OPERATING
PAR VALUE:	\$ 12,000,000.00	SAFEKEEPING NO:	P 31317
CUPON / DISCOUNT RATE	3.845%	PRICE:	100.0000000
MATURITY DATE:	2/13/2029 US TREASURY CONVENTION YLD		3.8450%
PRINCIPAL:	\$ 12,000,000.00	PURCHASED THROUGH:	ACADEMY SEC
ACCRUED INT:	\$ 0.00	BROKER:	KIM CASH
TOTAL DUE:	\$ 12,000,000.00	CUSIP #:	3136GCNG6
TRADE DATE:	2/12/2026	SETTLEMENT DATE:	2/13/2026

AUTHORIZED BY:

  
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Central Health  
Investment Department  
Security Transaction Form

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Date: 2/17/2026

Time: 10:30

The following transaction was executed on behalf of Central Health:

Description: Texas Daily Select

Fund Name: Central Health

Par Value: \$132,000.00

Safekeeping No.: N/A

CPN/DISC Rate: N/A

Price: 100%

Maturity Date: N/A

Bond Eq Yield: 3.8100%

Principal: \$132,000.00

Purchased Thru: Texas Daily Select

Accured Int: N/A

Broker: N/A

Total Due: \$132,000.00

CUSIP #: N/A

Trade Date: 2/17/2026

Settlement Date: 2/17/2026

Authorized by:

Reagan James  
Cash / Investment Manager

CENTRAL HEALTH  
INVESTMENT DEPARTMENT  
SECURITY TRANSACTION FORM

DATE: 2/18/2026

TIME: 10:00 AM

The following transaction was executed on behalf of Central Health:

DESCRIPTION:	Texas TERM	FUND NAME/NUMBER:	CENTRAL HEALTH OP
PAR VALUE:	\$ 12,000,000.00	SAFEKEEPING NO:	N/A
COUPON RATE:	3.710%	PRICE:	100.0000000
MATURITY DATE:	11/16/2026	US TREASURY CONVENTION YLD	3.7100%
PRINCIPAL:	\$ 12,000,000.00	PURCHASED THROUGH:	Texas TERM
ACCRUED INT:	\$ 0.00	BROKER:	N/A
TOTAL DUE:	\$ 12,000,000.00	CUSIP #:	TXTERM111626
TRADE DATE:	2/18/2026	SETTLEMENT DATE:	2/19/2026

AUTHORIZED BY:

  
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Central Health  
Investment Department  
Security Transaction Form

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Date: 2/20/2026

Time: 10:30

**The following transaction was executed on behalf of Central Health:**

Description: Texas Daily Select

Fund Name: Central Health

Par Value: \$1,434,000.00

Safekeeping No.: N/A

CPN/DISC Rate: N/A

Price: 100%

Maturity Date: N/A

Bond Eq Yield: 3.8300%

Principal: \$1,434,000.00

Purchased Thru: Texas Daily Select

Accrued Int: N/A

Broker: N/A

Total Due: \$1,434,000.00

CUSIP #: N/A

Trade Date: 2/20/2026

Settlement Date: 2/20/2026

Authorized by:

Reagan James  
Cash / Investment Manager



Central Health  
Investment Department  
Security Transaction Form

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Date: 2/26/2026

Time: 10:30

**The following transaction was executed on behalf of Central Health:**

Description: TexPool

Fund Name: Central Health

Par Value: \$739,000.00

Safekeeping No.: N/A

CPN/DISC Rate: N/A

Price: 100%

Maturity Date: N/A

Bond Eq Yield: 3.6848%

Principal: \$739,000.00

Purchased Thru: TexPool

Accured Int: N/A

Broker: N/A

Total Due: \$739,000.00

CUSIP #: N/A

Trade Date: 2/26/2026

Settlement Date: 2/26/2026

Authorized by:

Reagan Linn  
Cash / Investment Manager



Central Health  
Investment Department  
Security Transaction Form

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Date: 2/27/2026

Time: 10:30

The following transaction was executed on behalf of Central Health:

Description: TexPool

Fund Name: Central Health

Par Value: \$1,080,000.00

Safekeeping No.: N/A

CPN/DISC Rate: N/A

Price: 100%

Maturity Date: N/A

Bond Eq Yield: 3.6883%

Principal: \$1,080,000.00

Purchased Thru: TexPool

Accured Int: N/A

Broker: N/A

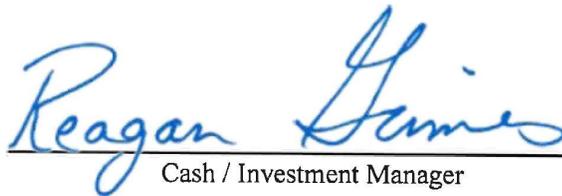
Total Due: \$1,080,000.00

CUSIP #: N/A

Trade Date: 2/27/2026

Settlement Date: 2/27/2026

Authorized by:

  
Cash / Investment Manager

CENTRAL HEALTH MONTHLY INVESTMENT REPORT  
 PORTFOLIO STATISTICS

DATE: February 28, 2026

By Fund Type		
Operating	\$ 874,825,975.31	73.95%
LPPF	16,520,625.34	1.40%
Bond Proceeds	291,670,652.04	24.65%
Other	-	0.00%
<b>Total Portfolio</b>	<b>\$ 1,183,017,252.69</b>	<b>100.00%</b>

By Security Type		
<b>Operating-</b>		
TexasDAILY	\$ 13,765,134.30	1.57%
TexasDAILY Select	\$ 265,843,444.59	30.39%
TexPool	\$ 162,041,163.98	18.52%
TexSTAR	\$ 186,166.47	0.02%
TexasTERM CP	12,000,000.00	1.37%
Non-Int Bearing Bank Account	438,284.01	0.05%
Certificates of Deposit	-	0.00%
Treasury Securities	11,885,625.00	1.36%
Government Agencies	380,431,204.36	43.49%
Commercial Paper	-	0.00%
Municipal Bonds	28,234,952.60	3.23%
<b>Total</b>	<b>\$ 874,825,975.31</b>	<b>100.00%</b>

**LPPF-**

TexPool	16,520,625.34	100.00%
<b>Total</b>	<b>\$ 16,520,625.34</b>	<b>100.00%</b>

**Bond Proceeds-**

TexPool	\$ 291,670,652.04	100.00%
<b>Total</b>	<b>\$ 291,670,652.04</b>	<b>100.00%</b>

Compared to Policy Limits		Actual %	Guidelines
TexasDAILY	13,765,134.30	1.16%	30.00%
TexasDAILY Select	265,843,444.59	22.48%	30.00%
TexPool	470,232,441.36	39.76%	50.00%
TexSTAR	186,166.47	0.02%	30.00%
TexasTERM CP	12,000,000.00	1.01%	30.00%
<b>Total LGIPS</b>	<b>\$ 762,027,186.72</b>	<b>41.96%</b>	<b>70.00%</b>
Certificates of Deposit	-	0.00%	50.00%
Treasury Securities	11,885,625.00	1.01%	100.00%
Government Agencies	380,431,204.36	32.17%	75.00%
Commercial Paper	-	0.00%	20.00%
Municipal Bonds	28,234,952.60	2.39%	20.00%
	<b>\$ 1,182,578,968.68</b>	<b>77.52%</b>	

**Municipal Bonds by Entity as a Percentage of Portfolio**

LA Unified SD - GO	\$ 6,039,360.00	21.39%	5.00%
ST Washington - GO	\$ 8,840,872.60	31.31%	5.00%
CO HSG & FIN Rev - TAX	\$ 500,000.00	1.77%	5.00%
State of Hawaii - GO	\$ 2,812,170.00	9.96%	5.00%
Tulsa OK ISD - GO	\$ 5,000,000.00	17.71%	5.00%
TX Pub Fin Auth	\$ 5,042,550.00	17.86%	5.00%
	<b>\$ 28,234,952.60</b>	<b>100.00%</b>	<b>25.00%</b>

Investment Revenue & Accrued Interest	February-26	Fiscal YTD
Interest/Dividends-		
TexasDAILY	\$ 38,877.94	\$ 66,649.40
TexasDAILY Select	\$ 785,991.28	\$ 3,204,471.55
TexPool	1,387,100.52	\$ 4,868,818.70
TexSTAR	523.61	\$ 3,636.95
TexasTERM CP	0.00	\$ -
Certificates of Deposit	0.00	\$ -
Treasury Securities	0.00	\$ -
Government Agencies	702,250.00	\$ 6,560,036.11
Commercial Paper	0.00	\$ -
Municipal Bonds	176,405.56	\$ 660,509.56
	<u>\$ 3,091,148.91</u>	<u>\$ 15,364,122.27</u>
Discounts, Premiums, & Accrued Interest		
TexasTERM CP	\$ 10,977.53	\$ 10,977.53
-less previous accruals	0.00	\$ -
Certificates of Deposit	0.00	\$ -
-less previous accruals	0.00	\$ -
Treasury Securities	35,428.54	\$ 72,807.22
-less previous accruals	0.00	\$ (34,848.07)
Government Agencies	1,176,436.61	\$ 5,773,943.34
-less previous accruals	(639,771.39)	\$ (5,884,558.20)
Commercial Paper	0.00	\$ -
-less previous accruals	0.00	\$ -
Municipal Bonds	60,890.98	\$ 404,281.81
-less previous accruals	(148,864.27)	\$ (576,147.87)
	<u>\$ 495,098.00</u>	<u>\$ (233,544.24)</u>
 Total Investment Revenue & Accrued Interest	 <u>\$ 3,586,246.91</u>	 <u>\$ 15,130,578.03</u>

STATE OF TEXAS

COUNTY OF TRAVIS

CENTRAL HEALTH - LPPF

Whereas, it appears to the Board of Managers of the Central Health, Travis County, Texas that there are sufficient funds on hand over and above those of immediate need for LPPF demand,

Now, Therefore, the Board of Managers hereby orders

- 1.) that the County Treasurer of Travis County, Texas, acting on behalf of Central Health LPPF, execute the investment of these funds in the total amount of \$88,000.00 in legally authorized securities as stipulated in the Travis County Healthcare District Investment and Collateral Policy for the periods as indicated in Attachment A, which consists of 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.

Date: March 25, 2026

\_\_\_\_\_  
CHAIR, BOARD OF MANAGERS

\_\_\_\_\_  
VICE CHAIR, BOARD OF MANAGERS

\_\_\_\_\_  
MANAGER



Central Health  
Investment Department  
Security Transaction Form

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Date: 2/12/2026

Time: 10:30

The following transaction was executed on behalf of Central Health:

Description: TexPool LPPF

Fund Name: Central Health LPPF

Par Value: \$88,000.00

Safekeeping No.: N/A

CPN/DISC Rate: N/A

Price: 100%

Maturity Date: N/A

Bond Eq Yield: 3.6693%

Principal: \$88,000.00

Purchased Thru: TexPool LPPF

Accured Int: N/A

Broker: N/A

Total Due: \$88,000.00

CUSIP #: N/A

Trade Date: 2/12/2026

Settlement Date: 2/12/2026

Authorized by:

  
Cash / Investment Manager

CENTRAL HEALTH - LPPF INVESTMENT REPORT  
 PORTFOLIO STATISTICS  
 DATE: February 28, 2026

By Fund Type		
LPPF	\$ 16,520,625.34	100.00%
Total Portfolio	<u>\$ 16,520,625.34</u>	<u>100.00%</u>

By Security Type		
<b>LPPF-</b>		
TexasDAILY	\$ -	0.00%
TexPool	\$ 16,520,625.34	100.00%
TexSTAR	\$ -	0.00%
TexasTERM CP	\$ -	0.00%
Non-Int Bearing Bank Account	\$ -	0.00%
Certificates of Deposit	\$ -	0.00%
Treasury Securities	\$ -	0.00%
Government Agencies	\$ -	0.00%
Commercial Paper	\$ -	0.00%
Municipal Bonds	\$ -	0.00%
Total	<u>\$ 16,520,625.34</u>	<u>100.00%</u>

LPPF Investment Revenue & Accrued Interest	February-26	Fiscal YTD
Interest/Dividends-		
TexasDAILY	0.00	0.00
TexPool	52,710.68	586,388.43
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	<u>\$ 52,710.68</u>	<u>\$ 586,388.43</u>



### **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 MEETING**

**March 25, 2026**

## **AGENDA ITEM C3**

Approve a resolution authorizing Central Health to join the Equalis Group Purchasing Program.



### 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 March 25, 2026

Who will present the agenda item? (Name, Title) Balena Bunch, Senior Procurement Director or Nicki Riley, Deputy CFO

General Item Description Approval to join Equalis Group Purchasing Program

Is this an informational or action item? Action

Fiscal Impact N/A

Recommended Motion (if needed – action item) Approval for Central Health to join the Equalis Group Purchasing Program

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

- 1) Access to additional maintenance, repair and operational (MRO) suppliers.
- 2) No cost to join.
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Memo, Membership form, and Contract Portfolio for Equalis

Estimated time needed for presentation & questions? 5 minutes

Is closed session recommended? (Consult with attorneys.) No

Form Prepared By/Date Submitted: Balena Bunch, March 5, 2026



# CENTRAL HEALTH

## MEMORANDUM

To: Central Health Board of Managers  
From: Balena Bunch, Senior Procurement Director  
CC: Nicki Riley, Deputy CFO, Jeff Knodel, CFO; Dr. Patrick Lee, President & CEO  
Date: 3/25/2026  
Re: Equalis Group Purchasing Program

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### **Overview**

Central Health's procurement policy authorizes the use of established local, state and national purchasing cooperatives to provide best value to Central Health. Texas Local Government Code Chapter 271 requires Board authorization to join a purchasing cooperative.

To support current operational activities and provide best value, Central Health has identified the Equalis Group as a new purchasing organization that provides public agencies with access to various products and services that have been competitively solicited.

The Equalis Group portfolio includes several maintenance, repair and operational (MRO) related suppliers, including several suppliers contracted through the Region 10 Education Service Center based in Richardson, TX.

As Central Health's property portfolio and facility projects continue to grow in volume and complexity, it would be beneficial for Central Health to be members of this cooperative agreement for additional vendor options, especially for facility emergencies.

Recently Central Health experienced a planned water outage that required sourcing portable ADA equipment. According to Central Health's Facilities department, the equipment required had limited sourcing options on existing cooperative contracts. Through market research, the Procurement team was introduced to the Equalis Group Purchasing Program which demonstrated a more robust catalog of vendor contracts related to consumable materials, disaster recovery, equipment recovery, equipment rental, remediation, and restoration products and services.

Attached is a copy of the recent listing of suppliers contacted with the Equalis Group Purchasing Group.

### **Fiscal Impact**

The Equalis South Central Regional Director has confirmed that there is no membership fee to join the purchasing program. Access to this cooperative purchasing program network with additional MRO supplier options would be of fiscal benefit to Central Health by economizing



## CENTRAL HEALTH

resources that would otherwise be expended to conduct our own formal, competitive procurement process.

### **Action Requested**

Staff recommends the Board of Managers approve the attached resolution authorizing Central Health to join the Equalis Group Purchasing Program (attached).



## **MASTER INTERGOVERNMENTAL COOPERATIVE PURCHASING AGREEMENT**

This Master Intergovernmental Cooperative Purchasing Agreement (the “**Agreement**”) is entered into by and between those certain government agencies that execute a Management Services Agreement (“**Lead Agencies**”) with Equalis Group LLC (“**Equalis Group**”) to be appended and made a part hereof and such other public agencies, non-profit organizations, and businesses (each a “**Purchasing Group Member**”) who register to participate in the cooperative purchasing programs administered by Equalis Group and its affiliates and subsidiaries (collectively, “**Equalis Group Purchasing Program**”) by either registering on an Equalis Group Purchasing Program website (such as [www.equalisgroup.org](http://www.equalisgroup.org)) or by executing a copy of this Agreement.

### **RECITALS**

**WHEREAS**, after a competitive solicitation and selection process conducted by Lead Agencies, Lead Agencies enter into master agreements (“**Master Agreements**”) with awarded suppliers to provide a variety of goods, products, and services (“**Products**”) to the applicable Lead Agency and Purchasing Group Members;

**WHEREAS**, Master Agreements are made available to Purchasing Group Members by Lead Agencies through the Equalis Group Purchasing Program and provide that Purchasing Group Members may voluntarily purchase Products on the same terms, conditions, and pricing as the Lead Agency, subject to any applicable federal and/or local purchasing ordinances and the laws of the State of purchase; and

**WHEREAS**, in addition to Master Agreements, the Equalis Group Purchasing Program may from time to time offer Purchasing Group Members the opportunity to acquire Products through other group purchasing agreements.

**NOW, THEREFORE**, in consideration of the mutual covenants contained herein and of the mutual benefits to result, the parties hereto agree as follows:

1. Each party will facilitate the cooperative procurement of Products.
2. The procurement of Products by Purchasing Group Member party to this Agreement shall be conducted in accordance with and subject to the relevant federal, state, and local statutes, ordinances, rules, and regulations that govern Purchasing Group Member’s procurement practices.
3. The cooperative use of Master Agreements and other group purchasing agreements shall be conducted in accordance with the terms and conditions of such agreements, except as modification of those terms and conditions is otherwise allowed or required by applicable federal, state, or local law.
4. The Lead Agencies will make available, upon reasonable request and subject to convenience, information about Master Agreements which may assist in facilitating and improving the procurement of Products by the Purchasing Group Member.
5. Purchasing Group Member agrees that Equalis Group Purchasing Program may provide access to group purchasing organization (“**GPO**”) agreements directly or indirectly by enrolling Purchasing Group Member in another GPO’s purchasing program; provided that the purchase of Products shall be at Purchasing Group Member’s sole discretion.
6. Purchasing Group Member shall make timely payments to the distributor, manufacturer, or other vendor (each a “**Supplier**”) for Products procured and received through any Master Agreement or GPO group purchasing agreement (each an “**Equalis Agreement**”) in accordance with the terms and conditions of this Agreement and of the Equalis Agreement, as applicable.
7. Purchasing Group Member acknowledges and agrees that Equalis Group may receive fees (“**Administrative Fees**”) from Suppliers, which are typically calculated as a percentage of the dollar value of purchases made by Purchasing Group Member under an Equalis Agreement. Equalis Group’s standard Administrative Fees are two percent (2%) or less. Equalis Group shall provide Purchasing Group Member with access to a listing of Equalis Agreements that provide for the payment to Equalis of



Administrative Fee in excess of three percent (3%). Additionally, Equalis Group shall provide Purchasing Group Member with access to an annual report listing Purchasing Group Member's purchases of Products through Equalis Agreements and the associated Administrative Fees received by Equalis Group.

8. Purchasing Group Member agrees that Products purchased under Equalis Agreements are for Purchasing Group Member's own use in the conduct of its business, and in no event shall Purchasing Group Member sell, resell, lease, or otherwise transfer goods purchased through Equalis Agreements to an unrelated third party unless expressly permitted by the terms of the applicable Equalis Agreement.
9. Payment for Products and inspections and acceptance of Products ordered by Purchasing Group Member shall be the exclusive obligation of Purchasing Group Member. Disputes between Purchasing Group Member and any Supplier shall be resolved in accordance with the law and venue rules of the State of purchase unless otherwise agreed to by Purchasing Group Member and the Supplier. The exercise of any rights or remedies by Purchasing Group Member shall be the exclusive obligation of Purchasing Group Member.
10. Purchasing Group Member shall not use this Agreement or the terms and conditions of any Equalis Agreement as a method for obtaining additional concessions or reduced prices for similar products or services.
11. Purchasing Group Member shall be responsible for the ordering of Products under this Agreement. A non-procuring party shall not be liable in any fashion for any violation by a party procuring Products under this Agreement. To the extent permitted by law, the party procuring Products shall hold any non-procuring party harmless from any liability that may arise from action or inaction of the party procuring Products. Without limiting the generality of the foregoing, Equalis Group Purchasing Program makes no representations or warranties regarding any Product or Equalis Agreement and shall have no liability for any act or omission by a Supplier or other party under an Equalis Agreement.
12. This Agreement shall remain in effect unless terminated by one party giving thirty (30) days' written notice to the other party. The provisions of **Sections 5, 6, 7, 8, and 9** hereof shall survive any such termination.
13. If any term or provision of this Agreement is held invalid, illegal, or unenforceable in any jurisdiction, such invalidity, illegality, or unenforceability shall not affect any other term or provision of this Agreement or invalidate or render unenforceable such term or provision in any other jurisdiction.
14. This Agreement and the rights and obligations hereunder may not be assignable by either party hereto without the prior written consent of the other party, which consent shall not be unreasonably withheld, conditioned, or delayed, provided, however, that Purchasing Group Member and Equalis Group may assign their respective rights and obligations under this Agreement without the consent of the other party in the event either Purchasing Group Member or Equalis Group shall hereafter effect a corporate reorganization, consolidation, merger, merge into, sell to, or transfer all or substantially all of its properties or assets to another entity. Subject to the preceding sentence, this Agreement will be binding upon, inure to the benefit of, and be enforceable by the parties and their respective successors and assigns. Any instrument purporting to make an assignment in violation of this **Section 14** will be null and void.
15. This Agreement, together with any other documents incorporated herein by reference, constitutes the sole and entire agreement of the parties to this Agreement with respect to the subject matter contained herein, and supersedes all prior and contemporaneous understandings, agreements, representations, and warranties, both written and oral, with respect to such subject matter.
16. Equalis shall not be liable to Purchasing Group for any action, or failure to take action, of a Supplier in connection with the performance of Supplier's obligations under an Equalis Agreement.
17. Each party to this Agreement acknowledges it has read the Agreement and represents and warrants that it has the necessary legal authority and is legally authorized to execute and enter into this Agreement.
18. This Agreement shall take effect upon Purchasing Group Member (i) executing a copy of this Agreement, or (ii) registering on an Equalis Group Purchasing Program website.



The easiest way to complete this form is to visit: [www.equalisgroup.org/member-registration](http://www.equalisgroup.org/member-registration). You may also fill out this form electronically, print and sign it, then scan and email the fully completed document to [membership@equalisgroup.org](mailto:membership@equalisgroup.org).

Agency Information			
Agency Name:			
Agency Type:			
Agency Department:			
Street Address:			
City / St / Zip:			
Phone #:			
Federal Tax ID:			
Website URL:			

Primary Contact Information	
Name:	
Title:	
Phone #:	
Email:	
Which contract(s) are you interested in?:	

**IN WITNESS WHEREOF**, I hereby acknowledge, on behalf of \_\_\_\_\_, that I have read and agreed to the general terms and conditions set forth in the Equalis Group Master Intergovernmental Purchasing Agreement.

Authorized Signator	
Name:	
Title:	
Date:	

Signed: \_\_\_\_\_



## Contract Portfolio

Last Updated: March 2026

Equalis Group is a Member-Driven organization that embodies the power of partnership. Equalis Group operates with the guiding principle that when the objectives of buyers and sellers are aligned, sustainable value is created, transcending that of the typical short-term transactional relationship. With this differentiated approach, Equalis Group is not just a cooperative purchasing organization; we are a family.

[Explore additional contract highlights and details by simply clicking the supplier's name in the first column or visit www.EqualisGroup.org/Contracts](http://www.EqualisGroup.org/Contracts)

Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">22nd Century Technologies</a>	COG-2148A	HR & Benefits	Managed Staffing Services, Staffing + Consulting Services	CCOG	August 31, 2027	August 31, 2028
<a href="#">22nd Century Technologies</a>	R10-1105A	HR & Benefits	Managed Staffing Services, Staffing + Consulting Services	Region 10 ESC	October 31, 2026	October 31, 2027
<a href="#">22nd Century Technologies</a>	R10-1180A	Enterprise Solutions & Services, HR & Benefits	Managed Staffing Services, Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">ABcreative</a>	R10-1159A	Athletics, Parks & Recreation	Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">ACCO Engineered Systems</a>	R10-1132A	Facilities & MRO, Personal Protective Equipment	Air Filtration, Building Management + Systems, Energy + Performance Contracting, Fire Suppression + Alarm Systems, HVAC + Building Automation, Lighting Upgrades + Retrofits, Security + Access Control, Ultraviolet Light Disinfection	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">ACCO Engineered Systems</a>	R10-1177A	Facilities & MRO	Air Filtration, Building Management + Systems, Fire Suppression + Alarm Systems, HVAC + Building Automation, Job Order Contracting (JOC), Lighting Upgrades + Retrofits, Mechanical + Electrical + Plumbing (MEP), Safety + Security Systems + Services, Ultraviolet Light Disinfection	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">Acer</a>	COG-2160A	Information Technology	Chromebooks, Computer: Laptop + Desktop, IT: Hardware + Peripherals	CCOG	February 28, 2029	February 28, 2030
<a href="#">Adorama</a>	R10-1123A	Educational Products & Services, Information Technology, Office Equipment, Services & Supplies	Audio Visual Electronics, Computers + Tablets, Hardware + Peripherals, IT: Audio Visual Electronics, IT: Computers + Tablets, IT: Hardware + Peripherals, IT: Photography Equipment + Accessories, Photography Equipment + Accessories	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">ADPRO Sports</a>	COG-2144A	Athletics, Parks & Recreation	Athletic: Uniforms + Apparel + Footwear, Promotional Items	CCOG	April 30, 2027	April 30, 2028
<a href="#">Advanced Green Technologies</a>	COG-2143A	Construction, Facilities & MRO	Battery Energy Storage Systems (BESS), Solar: Engineering + Procurement + Construction + Installation	CCOG	April 30, 2027	April 30, 2028
<a href="#">Advanced Roofing</a>	R10-1166A	Construction, Facilities & MRO	Construction: Consultant + Procurement + Planning + Oversight, General Contracting Services, Job Order Contracting (JOC)	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Allseating</a>	COG-2152A	Facilities & MRO, Furniture & Storage	Office Furniture, School Furniture	CCOG	December 31, 2027	December 31, 2028
<a href="#">ALOIS</a>	R10-1180B	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">Alumni Educational Solutions</a>	R10-1176A	Educational Products & Services, Furniture & Storage	Cafeteria + Dining + Outdoor, Education + Library + Lab, Office + Conference Furniture, School Furniture, School Storage	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Ameresco</a>	COG-2114A	Facilities & MRO	Demand Management, Energy Consulting, Energy Management Services, Energy Procurement, Energy Procurement: Alternative Green Solutions, Energy Procurement: Electricity, Energy Procurement: Natural Gas	CCOG	April 30, 2026	April 30, 2026
<a href="#">AMN Healthcare</a>	R10-1180C	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030



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Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">AmTab</a>	COG-2152B	Educational Products & Services, Facilities & MRO, Furniture & Storage	Office Furniture, School Furniture	CCOG	December 31, 2027	December 31, 2028
<a href="#">Aramark Facilities Management</a>	R10-1167A	Facilities & MRO	Grounds Management Services, Janitorial Services, Landscaping Services, Operation + Maintenance Services	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Ariens + Gravely</a>	R10-1165A	Athletics, Parks & Recreation, Facilities & MRO, Fleet	Grounds Care Equipment, Mowers, Snow Removal Equipment, Utility Loaders, Utility Vehicles (UTV)	Region 10 ESC	June 30, 2027	June 30, 2027
<a href="#">Armis</a>	COG-2127A	Information Technology	Cybersecurity Products + Services	CCOG	April 30, 2026	April 30, 2027
<a href="#">Artcobell</a>	R10-1176B	Educational Products & Services, Furniture & Storage	Cafeteria + Dining + Outdoor, Education + Library + Lab, School Furniture, School Storage	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">AssetWorks</a>	COG-2123A	Enterprise Solutions & Services, Fleet, Information Technology	Asset Management, Fleet Management Software, GPS Telematics, Integrated Fuel Management, IT: Asset Management, IT: Fleet Management Software, IT: GPS Telematics, IT: SaaS	CCOG	August 31, 2026	August 31, 2026
<a href="#">AssetWorks</a>	R10-1114A	Educational Products & Services, Facilities & MRO, Furniture & Storage	IT: Computer Aided Facility Management (CAFM), IT: Computerized Maintenance Management System (CMMS), IT: Facilities + Asset Management, IT: Integrated Workplace Management System (IWMS), IT: SaaS, IT: Software	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">AstroTurf®</a>	COG-2164C	Athletics, Parks & Recreation, Construction, Facilities & MRO	AstroTurf Fields, Sports Surfaces, Sports Surfacing Maintenance	CCOG	June 30, 2025	June 30, 2029
<a href="#">AstroTurf Corporation</a>	COG-2164C	Athletics, Parks & Recreation, Construction, Facilities & MRO	AstroTurf Fields, Laykold Courts, Rekortan Tracks, Sports Surfaces, Sports Surfacing Maintenance, SYNLawns Landscapes	CCOG	June 30, 2025	June 30, 2029
<a href="#">Atrium</a>	CS-1010	Educational Products & Services, Enterprise Solutions & Services, Facilities & MRO, Information Technology	Access Control + Security, Attendance Tracking, Campus Card Management, Meal Plan + Point-of-Sale	CCOG	December 31, 2027	December 31, 2027
<a href="#">Autoclear</a>	R10-1129B	Facilities & MRO	Building Security Products + Services, Checkpoint Security	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">Avis</a>	COG-2159A	Fleet	Travel Services, Vehicle + Car Rental	CCOG	July 31, 2029	July 31, 2030
<a href="#">Axiom Learning</a>	R10-1152A	Educational Products & Services	Professional Development, Student Counseling, Test Preparation, Tutoring + Academic Prep	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Aya Education</a>	R10-1180D	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">B&amp;H Photo</a>	R10-1123B	Educational Products & Services, Information Technology, Office Equipment, Services & Supplies	Audio Visual Electronics, Computers + Tablets, Hardware + Peripherals, IT: Audio Visual Electronics, IT: Computers + Tablets, IT: Hardware + Peripherals, IT: Photography Equipment + Accessories, Photography Equipment + Accessories	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">BCI Burke</a>	COG-2165A	Athletics, Parks & Recreation, Educational Products & Services	Fitness Equipment, Playground Equipment	CCOG	June 30, 2029	June 30, 2030



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Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">BELDON Roofing</a>	R10-1172A	Construction, Facilities & MRO	Exterior Surfacing, HVAC + Building Automation, Job Order Contracting (JOC), Roofing, Solar: Procurement + Construction + Installation	Region 10 ESC	December 31, 2027	December 31, 2029
<a href="#">Blade</a>	R10-1136B	Educational Products & Services, Facilities & MRO	Air Filtration + Purification, Air Quality Services	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">Blue Bird</a>	RFP-2501KM-C	Educational Products & Services, Fleet	Automotive Parts + Supplies, Buses, Electric Vehicles	GCPS	May 15, 2028	May 15, 2030
<a href="#">BlueCrest</a>	COG-2112B	Enterprise Solutions & Services, Information Technology, Office Equipment, Services & Supplies, Voting & Ballot Solutions	Inbound + Outbound Mail Ballot Processing, Inserting Solutions, IT: Communications Workflow Tracking, IT: Document Lifecycle Tracking, IT: Mailroom Management Solutions, IT: One-to-One Ballot Validation, IT: Postal Compliance + Optimization, Mail + Package Sorting, Mail + Package Tracking, Mail Ballot Inserting Solutions, Mail Printing Solutions, One-to-One Ballot Validation, Postage Accounting + Funds Management, Postal Compliance + Optimization, Print + Mail Workflow Management	CCOG	September 30, 2026	September 30, 2026
<a href="#">Bobcat</a>	COG-2169B	Construction, Facilities & MRO	Construction Equipment, Generators, Grounds Care Equipment, Material Handling Equipment	CCOG	October 31, 2029	October 31, 2030
<a href="#">Brady Signs</a>	COG-2162A	Athletics, Parks & Recreation, Educational Products & Services, Facilities & MRO	Digital Displays, Scoreboards + Signage	CCOG	February 28, 2029	February 28, 2030
<a href="#">Brother International Corporation</a>	R10-1169A	Office Equipment, Services & Supplies	Copiers + Scanners, Managed Print Services, Multifunctional Devices, Office Products	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">Busch Systems</a>	COG-2113A	Facilities & MRO, Office Equipment, Services & Supplies	Indoor Waste Bins + Recycling Bins, Janitorial + Sanitation Supplies	CCOG	April 30, 2026	April 30, 2026
<a href="#">Bush Business Furniture</a>	R10-1176C	Educational Products & Services, Furniture & Storage	Office + Conference Furniture, Reception + Lounge Furniture, Storage	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Business Interiors</a>	R10-1176E	Educational Products & Services, Furniture & Storage	Architectural Wall Solutions, Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, Office + Conference Furniture, School Furniture, School Storage	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Canon USA</a>	R10-1169B	Office Equipment, Services & Supplies	Cloud Solutions, Computer Accessories, Copiers + Scanners, Cybersecurity Products + Services, IT: Hardware + Software, Managed Cybersecurity Services, Managed Print Services, Multifunctional Devices, Office Products	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">Carahsoft</a>	R10-1111A	Enterprise Solutions & Services, Information Technology	IT: Cloud Services, IT: IaaS, IT: Software, IT: PaaS, IT: VMware	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">CDW-G</a>	R10-1123C	Educational Products & Services, Enterprise Solutions & Services, Information Technology, Office Equipment, Services & Supplies	Educational Technology, IT: Hardware + Peripherals, IT: Managed Services, IT: Software	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">ChargePoint</a>	2020.05.3-B	Fleet	Electric Vehicle Charging	CCOG	August 31, 2026	August 31, 2026
<a href="#">Clearwing</a>	EQ-111519-05A	Educational Products & Services, Facilities & MRO	AV: Lighting + Staging, Sound Management	Region 10 ESC	February 28, 2027	February 28, 2027
<a href="#">CME Corp.</a>	COG-2167A	Medical	Healthcare Equipment, Laboratory, Medical Supplies + Equipment, Surgical	CCOG	October 31, 2029	October 31, 2030



## Contract Portfolio

Last Updated: March 2026

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[Explore additional contract highlights and details by simply clicking the supplier's name in the first column or visit \[www.EqualisGroup.org/Contracts\]\(http://www.EqualisGroup.org/Contracts\)](#)

Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">Cogent Infotech</a>	COG-2163A	Information Technology	Cybersecurity Products + Services, IT: Cloud Services, IT: Managed Services	CCOG	February 28, 2029	February 28, 2030
<a href="#">Connection Public Sector</a>	EQ-013120-01A	Educational Products & Services, Enterprise Solutions & Services, Information Technology, Office Equipment, Services & Supplies	IT: Hardware + Peripherals, IT: Integration, IT: Software	Region 10 ESC	April 30, 2026	April 30, 2026
<a href="#">CORE Construction</a>	COG-2132A	Construction, Facilities & MRO	General Contracting Services, Job Order Contracting (JOC)	CCOG	June 30, 2026	June 30, 2027
<a href="#">CORE Construction</a>	R10-1166B	Construction, Facilities & MRO	Construction: Consultant + Procurement + Planning + Oversight, General Contracting Services, Job Order Contracting (JOC)	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">CORE Energy</a>	R10-1135A	Facilities & MRO	Building Management + Systems, HVAC + Building Automation, Security + Access Control	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">CORE Office Interiors</a>	R10-1130A	Construction, Facilities & MRO, Furniture & Storage	A/V Electronics, Office Furniture, School Furniture	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">Cotton</a>	COG-2134A	Construction, Enterprise Solutions & Services, Facilities & MRO	Consumable Materials, Disaster Recovery, Equipment Rental, Rebuild, Remediation, Restoration	CCOG	August 31, 2026	August 31, 2027
<a href="#">Crayon</a>	R10-1111B	Enterprise Solutions & Services, Information Technology	IT: Cloud Services, IT: IaaS, IT: Software, IT: PaaS, IT: VMware	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Crocus</a>	EQ-111519-06A	Educational Products & Services, Enterprise Solutions & Services	Benchmarking + Reporting, Instructor Preparedness + Resources, IT: Integration	Region 10 ESC	February 28, 2027	February 28, 2027
<a href="#">D&amp;H Distributing Company</a>	R10-1173A	Information Technology	Cloud Solutions, Cybersecurity Products + Services, IT: Hardware + Peripherals, IT: Integration, IT: Software	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">DATSON360</a>	R10-1180E	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">Dave Bang Associates</a>	R10-1159B1	Athletics, Parks & Recreation	Outdoor Furnishings, Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Dayforce</a>	R10-1141A	Enterprise Solutions & Services, HR & Benefits	Finance Management Solutions, HR Solutions, Human Resource Information System (HRIS) Software, Payroll + HR Management Services	Region 10 ESC	December 31, 2026	December 31, 2027
<a href="#">Diagnostic Assessment Services</a>	R10-1180F	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">Diamond Mowers</a>	R10-1165B	Athletics, Parks & Recreation, Facilities & MRO, Fleet	Attachments: Backhoes, Excavators, Skid Steers, Stand-On Loaders, Track Loaders, Wheel Loaders, Construction Equipment, Grounds Care Equipment, Land Clearing + Debris Removal, Mowers, Mulchers, Snow Removal Equipment, Stump Grinders, Utility Loaders, Utility Vehicles (UTV)	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Disaster Recovery Services</a>	COG-2125A	Consulting, Disaster Recovery, Grant Management	Consulting, Disaster Recovery, Grant Management	CCOG	April 30, 2026	April 30, 2027
<a href="#">Diversified</a>	R10-1130B	Construction, Facilities & MRO	A/V Electronics	Region 10 ESC	April 30, 2027	April 30, 2027



## Contract Portfolio

Last Updated: March 2026

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Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">Diversified Woodcrafts</a>	R10-1176D	Educational Products & Services, Furniture & Storage	Cafeteria + Dining + Outdoor, Education + Library + Lab, Office + Conference Furniture, School Furniture, School Storage	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">DKI</a>	COG-2134B	Construction, Enterprise Solutions & Services, Facilities & MRO	Consumable Materials, Disaster Recovery, Equipment & Vehicle Rental, Rebuild, Remediation, Restoration	CCOG	August 31, 2026	August 31, 2027
<a href="#">Dynamic Fitness &amp; Strength</a>	COG-2144C	Athletics, Parks & Recreation, Facilities & MRO	Cardio Equipment, Exercise Equipment, Strength Training Equipment	CCOG	April 30, 2027	April 30, 2028
<a href="#">E3</a>	R10-1135B	Facilities & MRO	Building Management + Systems, HVAC + Building Automation, Security + Access Control	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">E3</a>	R10-1143A	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Performance Contracting, HVAC + Building Automation, Lighting Upgrades + Retrofits, Water Conservation	Region 10 ESC	December 31, 2027	December 31, 2027
<a href="#">EC America</a>	COG-2139B	Enterprise Solutions & Services, Information Technology	Cloud Solutions, IT: Hardware + Software	CCOG	December 31, 2026	December 31, 2027
<a href="#">Educational Environments</a>	COG-2152E	Educational Products & Services, Facilities & MRO, Furniture & Storage	School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Edustaff</a>	COG-2148B	HR & Benefits	School Staffing, Substitute Teachers	CCOG	August 31, 2027	August 31, 2028
<a href="#">Element</a>	COG-2122B	Enterprise Solutions & Services, Fleet, Information Technology	Asset Management, Electric Vehicles, Fleet Lifecycle, Fleet Management Software, Fleet Management: Consulting + Analytics, Fleet Procurement, Leasing + Financing, Remarketing, Telematics, Title + Registration	CCOG	August 31, 2026	August 31, 2026
<a href="#">EMCOR Services Mesa Energy</a>	R10-1177H	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Power, Grounds Maintenance, Heavy Equipment Sales + Rentals, HVAC + Building Automation, Janitorial + Sanitation Supplies, Janitorial Services, Job Order Contracting (JOC), Mechanical + Electrical + Plumbing (MEP)	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">Epic Business Essentials</a>	R10-1171A	Athletics, Parks & Recreation, Educational Products & Services, Facilities & MRO, Furniture & Storage, Information Technology, Office Equipment, Services & Supplies	Cleaning Chemicals + Wipes, Computer Accessories + Peripherals, Cut Sheet Paper, Desks + Workstations + Panels + Tables, Facility Supplies, File Cabinets, Food + Beverage, Foodservice Disposables, Furniture Accessories, Health + Personal Care, IT: Hardware, Office Supplies, Printing Consumables, Safety + Security, Seating, Smallwares + Equipment, Storage + Shelving, Technology, Tools + Specialty Equipment, Towel + Tissue + Washroom	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">Epic Solar Control</a>	R10-1146A	Construction, Educational Products & Services, Facilities & MRO	Breach-Resistant Window Products	Region 10 ESC	December 31, 2027	December 31, 2027
<a href="#">ePlus Technology, Inc.</a>	R10-1173B	Information Technology	Apple Hardware + Peripherals, Cloud Solutions, Cybersecurity Products + Services, IT: Hardware + Peripherals, IT: Hardware + Software, IT: Integration	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">EPS Learning</a>	R10-1158A	Educational Products & Services	Curriculum, Professional Development, Student Counseling, Teaching Materials, Test Preparation, Tutoring + Academic Prep	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">ESS</a>	R10-1105C	Educational Products & Services, HR & Benefits	Staffing Services	Region 10 ESC	October 31, 2026	October 31, 2027
<a href="#">ESS</a>	R10-1180G	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030



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<a href="#">Euna Budget</a>	COG-2139C	Enterprise Solutions & Services, Information Technology	Cloud Solutions, IT: SaaS, IT: Software	CCOG	December 31, 2027	December 31, 2027
<a href="#">Euna Grants</a>	COG-2139C	Enterprise Solutions & Services, Information Technology	Cloud Solutions, IT: SaaS, IT: Software	CCOG	December 31, 2027	December 31, 2027
<a href="#">Euna Payments</a>	COG-2139C	Enterprise Solutions & Services, Information Technology	Cloud Solutions, IT: SaaS, IT: Software	CCOG	December 31, 2027	December 31, 2027
<a href="#">Euna Procurement™</a>	COG-2139C	Enterprise Solutions & Services, Information Technology	IT: Procurement Solutions, IT: RFP + Bid Evaluation, IT: RFP + Bid Management, IT: SaaS, IT: Strategic Sourcing, Procurement Management, RFP + Bid Evaluation, RFP + Bid Management, Strategic Sourcing	CCOG	December 31, 2027	December 31, 2027
<a href="#">Euna Procurement™</a>	R10-1122A	Enterprise Solutions & Services, Information Technology	IT: Procurement Solutions, IT: RFP + Bid Evaluation, IT: RFP + Bid Management, IT: SaaS, IT: Strategic Sourcing, Procurement Management, RFP + Bid Evaluation, RFP + Bid Management, Strategic Sourcing	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">Euna Special Education™</a>	COG-2139C	Enterprise Solutions & Services, Information Technology	Cloud Solutions, IT: SaaS, IT: Software, Special Education	CCOG	December 31, 2027	December 31, 2027
<a href="#">Everon</a>	R10-1129A	Construction, Facilities & MRO	Building Security Products + Services	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">Ewing Outdoor Supply</a>	R10-1154A	Athletics, Parks & Recreation, Facilities & MRO	Landscape + Irrigation Supplies, Watering Tools & Equipment, Yard Tools	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">ezCater</a>	R10-1162A	Food & Beverage	Catering Services, Online Delivery Platform	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">F.H. Paschen</a>	COG-2132B	Construction, Facilities & MRO	Construction Management, Design Build Services, General Contracting Services, Job Order Contracting (JOC)	CCOG	June 30, 2026	June 30, 2027
<a href="#">Factory Motor Parts</a>	COG-2129A	Fleet	Auto + Truck Parts	CCOG	April 30, 2026	April 30, 2027
<a href="#">FastServ Supply</a>	R10-1160D	Facilities & MRO, Fleet, Office Equipment & Services & Supplies, Personal Protective Equipment	Fasteners + Chemicals + Electrical + Cutting Tools + Abrasives + Fluid Power + Automotive + Material Handling + Safety + Shop Supplies + Hand Tools + Storage Equipment + Welding + Part Washers	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Federal Contracts Company</a>	COG-2149B	Construction, Fleet	Construction Equipment	CCOG	August 31, 2027	August 31, 2028
<a href="#">Federal Contracts Company</a>	R10-1175A	Fleet	All-Terrain Vehicles (ATV), Low Speed Vehicles (LSV), Recreational + Utility Snowmobiles, Side-By-Side Vehicles, Utility Vehicles (UTV), Vehicle Accessories	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">Fellowes</a>	COG-2152C	Facilities & MRO, Furniture & Storage	Modular Walls, Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Fellowes</a>	R10-1136E	Facilities & MRO	Air Filtration + Purification, Air Quality Services	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">FieldTurf</a>	COG-2164A	Athletics, Parks & Recreation, Construction, Facilities & MRO	Sports Surfaces, Sports Surfacing Maintenance	CCOG	June 30, 2029	June 30, 2030



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<a href="#">FieldWare</a>	COG-2170A	Information Technology	Public Safety, Technology	CCOG	October 31, 2029	October 31, 2030
<a href="#">First Student</a>	R10-1149A	Educational Products & Services, Fleet	Alternative Special Transportation, Student Transportation: Vans + Sedans + Wheelchair Vans	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Foliot Furniture</a>	COG-2152D	Educational Products & Services, Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Fomcore</a>	R10-1176F	Educational Products & Services, Furniture & Storage	Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, Office + Conference Furniture, School Furniture, Stadiums + Auditoriums	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Fortinet</a>	COG-2127C	Information Technology	Cybersecurity Products + Services	CCOG	June 30, 2026	June 30, 2027
<a href="#">Forward Edge</a>	COG-2163B	Information Technology	Cybersecurity Products + Services, IT: Cloud Services, IT: Managed Services	CCOG	February 28, 2029	February 28, 2030
<a href="#">Four Seasons Environmental, Inc.</a>	R10-1177B	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Power, Grounds Maintenance, Heavy Equipment Sales + Rentals, HVAC + Building Automation, Janitorial + Sanitation Supplies, Janitorial Services, Job Order Contracting (JOC), Mechanical + Electrical + Plumbing (MEP)	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">Freemotion</a>	COG-2120A	Athletics, Parks & Recreation, Educational Products & Services, Facilities & MRO, HR & Benefits	Cardio Equipment, Employee Wellness, Exercise Equipment, Fitness Equipment, Strength Training Equipment	CCOG	August 31, 2026	August 31, 2026
<a href="#">Friant</a>	R10-1176G	Furniture & Storage	Architectural Wall Solutions, Office + Conference Furniture	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">G&amp;R Controls</a>	R10-1177C	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, HVAC + Building Automation, Mechanical + Electrical + Plumbing (MEP)	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">Game One</a>	COG-2144B	Athletics, Parks & Recreation	Athletic: Uniforms + Apparel + Footwear + Equipment, Equipment: Gym + Fitness + Field, Services: Installation + Reconditioning + Repair, Supplies: Medical + Training + Sports, Video Boards + Scoreboards + Audio	CCOG	April 30, 2027	April 30, 2028
<a href="#">Gardiner</a>	COG-2124B	Facilities & MRO, Personal Protective Equipment	Air Filtration, Building Management + Systems, HVAC + Building Automation, Ultraviolet Light Disinfection	CCOG	December 31, 2025	December 31, 2026
<a href="#">Gardiner</a>	R10-1135C	Facilities & MRO	Building Management + Systems, HVAC + Building Automation, Security + Access Control	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">Garland</a>	COG-2133A	Construction, Facilities & MRO	Roofing (Ohio)	CCOG	July 31, 2026	July 31, 2027
<a href="#">Gerflor USA</a>	COG-2157B	Construction, Facilities & MRO	Flooring	CCOG	October 31, 2028	October 31, 2029
<a href="#">Global Furniture</a>	R10-1176H	Educational Products & Services, Furniture & Storage	Architectural Wall Solutions, Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, Office + Conference Furniture, Office Furniture, School Furniture, Stadiums + Auditoriums	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Global Industrial</a>	R10-1160A	Educational Products & Services, Facilities & MRO, Fleet, Furniture & Storage, Office Equipment, Services & Supplies, Personal Protective Equipment	Building Supplies, Educational Technology, Fasteners + Hardware, HVAC, Janitorial Facility Maintenance, Lighting + Electrical, Material Handling, Outdoor Furnishings, Plumbing Supplies, Storage + Shelving, Tool Storage + Equipment, Warehouse Supplies + Carts + Bulk Containers + Utility Carts + Lift Trucks + Dollies + Outfitting	Region 10 ESC	December 31, 2026	December 31, 2028



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<a href="#">Gordian</a>	R10-1179B	Construction	Job Order Contracting (JOC)	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">GovDeals</a>	R10-1134A	Enterprise Solutions & Services	Auction Services	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">Granite</a>	R10-1120A	Enterprise Solutions & Services, Information Technology, Office Equipment, Services & Supplies	Internet Connectivity, IT: Internet Connectivity, IT: Mobility Solutions, IT: SaaS, IT: Telecommunications, IT: VoIP, Mobility Solutions, Telecommunications Solutions, VoIP Equipment + Services	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">Great Southern Recreation</a>	COG-2165B	Athletics, Parks & Recreation, Educational Products & Services	Fitness Equipment, Playground Equipment	CCOG	June 30, 2029	June 30, 2030
<a href="#">GreenPower Motor Company</a>	RFP-2501KM-B	Educational Products & Services, Fleet	Automotive Parts + Supplies, Buses, Electric Vehicles	GCPS	May 16, 2028	May 16, 2030
<a href="#">GRM Information Management</a>	COG-2168A	Office Equipment & Services & Supplies	Document Destruction, Shredding	CCOG	October 31, 2029	October 31, 2030
<a href="#">Harper Turf Equipment</a>	R10-1165C	Athletics, Parks & Recreation, Facilities & MRO, Fleet	Grounds Care Equipment, Land Clearing + Debris Removal, Mowers, Sweepers + Vacuums + Scrubbers, Turf Maintenance	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Haskell Education</a>	COG-2152F	Educational Products & Services, Facilities & MRO, Furniture & Storage	School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Helm Group</a>	R10-1132B	Facilities & MRO, Personal Protective Equipment	Air Filtration, Building Management + Systems, Energy + Performance Contracting, Fire Suppression + Alarm Systems, HVAC + Building Automation, Lighting Upgrades + Retrofits, Security + Access Control, Ultraviolet Light Disinfection	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">Helm Group</a>	R10-1177G	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Power, Fire Suppression + Alarm Systems, HVAC + Building Automation, Job Order Contracting (JOC), Lighting Upgrades + Retrofits, Mechanical + Electrical + Plumbing (MEP), Safety + Security Systems + Services, Ultraviolet Light Disinfection	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">Herc Rentals</a>	COG-2126B	Construction, Facilities & MRO, Fleet	Construction Equipment Rental, Vehicle Rental	CCOG	April 30, 2026	April 30, 2027
<a href="#">HES Facilities</a>	COG-2110A	Facilities & MRO	Building Maintenance + Repairs, Custodial Services, Grounds Management Services, Janitorial Services, Landscaping Services	CCOG	December 31, 2030	December 31, 2030
<a href="#">HireRight</a>	R10-1119A	Enterprise Solutions & Services, HR & Benefits	Employee Screenings + Background Checks	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">HiTouch Business Services</a>	R10-1171B	Athletics, Parks & Recreation, Educational Products & Services, Facilities & MRO, Furniture & Storage, Information Technology, Office Equipment, Services & Supplies	Breakroom Products, Computer Supplies, Fulfillment + Distribution, IT: Products + Services, Janitorial + Breakroom Products, Managed Print Services, Managed Software Services, Office Furniture, Office Storage, Office Supplies, Print + Promotional Items, School Furniture, School Storage, School Supplies, Transactional Furniture	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">HiTouch Contract Furniture</a>	COG-2152G	Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">HITT Contracting</a>	COG-2132C	Construction, Facilities & MRO	General Contracting Services, Job Order Contracting (JOC)	CCOG	June 30, 2026	June 30, 2027



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<a href="#">Holman Capital</a>	COG-2145A	Construction, Facilities & MRO, Fleet, Furniture & Storage, Information Technology, Medical, Office Equipment, Services & Supplies	Leasing + Financing	CCOG	April 30, 2027	April 30, 2028
<a href="#">Honeywell</a>	R10-1143B	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Performance Contracting, HVAC + Building Automation, Lighting Upgrades + Retrofits, Water Conservation	Region 10 ESC	December 31, 2027	December 31, 2027
<a href="#">HORNE</a>	COG-2125B	Enterprise Solutions & Services	Consulting, Disaster Recovery, Grant Management	CCOG	April 30, 2026	April 30, 2027
<a href="#">HotSpot</a>	COG-2154A	Enterprise Solutions & Services, Information Technology	License Plate Recognition, Mobile Parking Payment, Parking Enforcement, Permits	CCOG	June 30, 2028	June 30, 2029
<a href="#">HOE Systems, Inc</a>	R10-1147A	Construction, Educational Products & Services, Facilities & MRO	Breach-Resistant Window Products, Incident Reporting, Non-Scalable Fencing, Remote Door Lockdown, Safety Notifications + Alerts, School Security, Silent Panic Alert Technology, Situational Awareness Technology	Region 10 ESC	December 31, 2027	December 31, 2027
<a href="#">HUB</a>	R10-1125B	Enterprise Solutions & Services, HR & Benefits	Employee Benefits Consulting	Region 10 ESC	December 31, 2026	December 31, 2026
<a href="#">Hughes</a>	COG-2161A	Information Technology	Internet Connectivity, IT: Hardware, Telecommunications Solutions	CCOG	February 28, 2029	February 28, 2030
<a href="#">ICON EV</a>	COG-2116A	Athletics, Parks & Recreation, Facilities & MRO, Fleet	Golf Carts, Low Speed Vehicles (LSV), Passenger Transportation Shuttles, Utility Vehicles (UTV)	CCOG	April 30, 2026	April 30, 2026
<a href="#">KIO LED Lighting</a>	R10-1170A	Construction, Facilities & MRO	A/V: Lighting + Staging, Ballasts, Lighting Controls + Sensors, Lighting Upgrades + Retrofits, Lighting: Indoor + Outdoor	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">Imperial Supplies</a>	COG-2129C	Facilities & MRO, Fleet	Auto + Truck Parts, Customer Managed Inventory, Fleet MRO	CCOG	April 30, 2026	April 30, 2027
<a href="#">Indoff</a>	R10-1176I	Furniture & Storage	Architectural Wall Solutions, Cafeteria + Dining + Outdoor, Office + Conference Furniture, Office Furniture, Stadiums + Auditoriums	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Infojini</a>	COG-2148C	HR & Benefits	Managed Staffing Services, Staffing + Consulting Services	CCOG	August 31, 2027	August 31, 2028
<a href="#">Infojini</a>	R10-1180H	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">InfoStride, Inc.</a>	R10-1180I	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">Insidesource</a>	COG-2152Q	Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Insight Public Sector</a>	R10-1173C	Educational Products & Services, Information Technology, Office Equipment, Services & Supplies	Cloud Solutions, Cybersecurity Products + Services, Educational Technology, IT: Hardware + Peripherals, IT: Managed Services, IT: Software	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">InstantServe, LLC</a>	R10-1180J	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">Interior Environments</a>	COG-2152H	Educational Products & Services, Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028



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<a href="#">Iron Mountain Government Solutions</a>	COG-2168B	Information Technology, Office Equipment & Services & Supplies	Document Destruction, IT: Software, Shredding	CCOG	October 31, 2029	October 31, 2030
<a href="#">JAMB Services</a>	R10-1179A	Construction	Job Order Contracting (JOC)	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">JCB</a>	COG-2149E	Construction, Fleet	Attachments, Backhoe Loaders, Excavators, Forklifts, Scissor Lifts, Site Dumpers, Skid Steers, Telemasters, Telescopic Handlers, Wheel Loaders	CCOG	August 31, 2027	August 31, 2028
<a href="#">JMO MODULAR</a>	R10-1186C	Construction, Facilities & MRO	Modular Building Components, Standalone Structures + Storage, Trailers + Containers + Structures	Region 10 ESC	February 28, 2029	February 28, 2031
<a href="#">Johnson Controls</a>	COG-2143B	Construction, Facilities & MRO	Renewable Energy Certificates (REC): Carbon Offsets, Renewable Energy Supply Services: PPA + vPPA, Solar: Equipment + Installation	CCOG	April 30, 2027	April 30, 2028
<a href="#">Johnson Controls</a>	R10-1143C	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Performance Contracting, HVAC + Building Automation, Lighting Upgrades + Retrofits, Water Conservation	Region 10 ESC	December 31, 2027	December 31, 2027
<a href="#">Johnson Controls</a>	R10-1168A	Facilities & MRO	Building Management + Systems, Fire Protection, Fire Suppression + Alarm Systems, Remote Monitoring, Security + Access Control, Security Systems + Services, Smart Building	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Johnson Controls</a>	R10-1177D	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Power, Fire Suppression + Alarm Systems, Heavy Equipment Sales + Rentals, HVAC + Building Automation, Job Order Contracting (JOC), Lighting Upgrades + Retrofits, Mechanical + Electrical + Plumbing (MEP), Safety + Security Systems + Services, Ultraviolet Light Disinfection	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">JustPark</a>	COG-2154D	Enterprise Solutions & Services, Information Technology	Event Parking + Hardware + Management, Mobile Parking Payment + Aggregation	CCOG	June 30, 2028	June 30, 2029
<a href="#">Kaplan Early Learning Company</a>	COG-2152J	Educational Products & Services, Facilities & MRO, Furniture & Storage	School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Kaplan Early Learning Company</a>	R10-1164A	Educational Products & Services, Furniture & Storage	A/V: Lighting + Staging, Early Learning, Educational Technology, Fitness Equipment, Instructional Resources, Instructor Preparedness + Resources, Office Supplies, Outdoor Furnishings, School Furniture, School Storage, School Supplies	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Karber Corporation</a>	R10-1177E	Facilities & MRO	Air Filtration, Building Management + Systems, HVAC + Building Automation, Mechanical + Electrical + Plumbing (MEP)	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">Kenworth</a>	COG-2129D	Fleet	Auto + Truck Parts, Medium + Heavy Duty Truck Parts, School Bus Parts, Trailer Parts	CCOG	September 30, 2026	September 30, 2027
<a href="#">Krueger International</a>	COG-2152K	Educational Products & Services, Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Kubota</a>	COG-2149A	Construction, Fleet	Backhoes, Construction Equipment, Excavators, Skid Steers, Stand-On Loaders, Track Loaders, Wheel Loaders	CCOG	August 31, 2027	August 31, 2028
<a href="#">Kyndryl</a>	COG-2139D	Enterprise Solutions & Services, Information Technology	Cloud Infrastructure Services, Cloud Solutions, IT: Cloud Services, IT: Consulting, IT: IaaS, IT: Managed Services, IT: PaaS	CCOG	December 31, 2026	December 31, 2027



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<a href="#">Lakeshore Learning Materials</a>	COG-2152L	Educational Products & Services, Facilities & MRO, Furniture & Storage	School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Lakeshore Learning Materials</a>	R10-1164B	Educational Products & Services, Furniture & Storage	AV: Lighting + Staging, Early Learning, Educational Technology, Fitness Equipment, Instructional Resources, Instructor Preparedness + Resources, Office Supplies, Outdoor Furnishings, School Furniture, School Storage, School Supplies	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Lawson Products</a>	R10-1160B	Facilities & MRO, Fleet, Office Equipment, Services & Supplies, Personal Protective Equipment	Fasteners + Chemicals + Electrical + Cutting Tools + Abrasives + Fluid Power + Automotive + Material Handling + Safety + Shop Supplies + Hand Tools + Storage Equipment + Welding + Part Washers	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Laykold®</a>	COG-2164C	Athletics, Parks & Recreation, Construction, Facilities & MRO	Laykold Courts, Pickleball, Tennis, Basketball, Track + Roller Hockey, Sports Surfaces, Sports Surfacing Maintenance	CCOG	June 30, 2025	June 30, 2029
<a href="#">Learn It</a>	R10-1152C	Educational Products & Services	Professional Development, Student Counseling, Tutoring + Academic Prep	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Lenovo</a>	COG-2160B	Information Technology	Computer: Desktop + Laptop, IT: Hardware + Peripherals	CCOG	February 28, 2029	February 28, 2030
<a href="#">Lenovo Global Technology</a>	COG-2160C	Information Technology	Data Storage + Management Equipment, IT: Hardware + Software	CCOG	February 28, 2029	February 28, 2030
<a href="#">Liftnow</a>	COG-2115A	Facilities & MRO, Fleet	Portable Shop Equipment, Lift Equipment Installation + Inspection + Training Services, Vehicle + Truck + Bus Lifts, Vehicle + Truck + Bus Washing Systems, Wheel Service Equipment	CCOG	April 30, 2026	April 30, 2026
<a href="#">Lion Electric</a>	R10-1148A	Educational Products & Services, Fleet	Buses, Electric Buses: Type A + C + D, Electric Vehicles	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Lobaki</a>	R10-1157A	Assistive Technology & Services, Educational Products & Services, Information Technology	3D Modeling + Rendering + Animation, Professional Development, Virtual Reality (VR) + Augmented Reality (AR), VR Hardware + Software + Training + Educational Programs	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">Lockton</a>	R10-1125A	Enterprise Solutions & Services, HR & Benefits	Employee Benefits Consulting	Region 10 ESC	October 31, 2026	October 31, 2026
<a href="#">Maintex</a>	COG-2171C	Facilities & MRO, Food & Beverage	Floor Care + Cleaning, Foodservice Operation Supplies, Janitorial Sanitation (JanSan) Supplies + Services, Sweepers + Vacuums + Scrubbers	CCOG	February 28, 2030	February 28, 2031
<a href="#">Mammoth Sports Construction</a>	COG-2138A	Athletics, Parks & Recreation, Construction, Facilities & MRO	Athletic Facilities Design, Construction + Maintenance, Contractor Services, Design Build Services, Sports Construction, Turn-Key Service	CCOG	December 31, 2026	December 31, 2027
<a href="#">Marsden Services</a>	R10-1167B	Facilities & MRO	Grounds Management Services, Janitorial Services, Landscaping Services, Operation + Maintenance Services, Security Services	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">MasteryPrep</a>	R10-1158B	Educational Products & Services	Curriculum, Professional Development, Student Counseling, Teaching Materials, Test Preparation, Tutoring + Academic Prep	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">McClure Company</a>	R10-1177F	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Power, HVAC + Building Automation, Job Order Contracting (JOC), Lighting Upgrades + Retrofits, Mechanical + Electrical + Plumbing (MEP), Roofing, Safety + Security Systems + Services	Region 10 ESC	October 31, 2027	October 31, 2030



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Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">McCoy Rockford</a>	R10-1176J	Educational Products & Services, Furniture & Storage	Architectural Wall Solutions, Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, Office + Conference Furniture, School Furniture, Stadiums + Auditoriums	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">McKesson</a>	COG-2167B	Assistive Technology & Services, Personal Protective Equipment, Medical	Laboratory, Mobility Products, Personal Protective Equipment (PPE), Pharmaceutical, Supplies + Equipment, Surgical	CCOG	October 31, 2029	October 31, 2030
<a href="#">Mercury</a>	COG-2122A	Enterprise Solutions & Services, Fleet	Fleet Data Analytics + Service Tools, Fleet Management Consulting, Fleet Solution Acquisition + System Implementation	CCOG	August 31, 2026	August 31, 2026
<a href="#">Meteor Education</a>	R10-1176K	Educational Products & Services, Furniture & Storage	Architectural Wall Solutions, Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, School Furniture, School Storage, Stadiums + Auditoriums	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Midstates Recreation</a>	R10-1159B3	Athletics, Parks & Recreation	Outdoor Furnishings, Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Model 1 Commercial Vehicles</a>	RFP-2501KM-E	Educational Products & Services, Fleet	Automotive Parts + Supplies, Buses, Electric Vehicles	GCPS	May 15, 2028	May 15, 2030
<a href="#">Mohawk Group</a>	COG-2157A	Construction, Facilities & MRO	Commercial Flooring, Flooring	CCOG	October 31, 2028	October 31, 2029
<a href="#">Mohawk Lifts</a>	COG-2115B	Facilities & MRO, Fleet	Portable Shop Equipment, Vehicle + Truck + Bus Lifts, Vehicle + Truck + Bus Washing Systems, Wheel Service Equipment	CCOG	April 30, 2026	April 30, 2026
<a href="#">Moto Electric Vehicles</a>	R10-1175B	Fleet	All-Terrain Vehicles (ATV), Golf Carts, Passenger Transportation Shuttles, Side-By-Side Vehicles, Utility Vehicles (UTV), Vehicle Accessories	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">Multiquip</a>	COG-2149C	Construction, Fleet	Air Compressors, Compaction, Concrete Finishing + Material Placement + Vibrators + Material Placement + Solutions, Construction + Power + Lighting Equipment, Generators, Masonry, Mixers, Water Pumps + Trailers, Welder Generators	CCOG	August 31, 2027	August 31, 2028
<a href="#">Musco Lighting</a>	COG-2166A	Athletics, Parks & Recreation, Construction, Educational Products & Services, Facilities & MRO	Electrical + Lighting, Site Preparation: Athletics, Sports + Stadium Lighting, Sports Lighting	CCOG	June 30, 2029	June 30, 2030
<a href="#">NAPA Auto Parts</a>	COG-2129B	Fleet	Auto + Truck Parts, Inventory + Circulation Management Solutions	CCOG	April 30, 2026	April 30, 2027
<a href="#">NAPA Integrated Business Solutions</a>	COG-2129B	Fleet	Auto + Truck Parts, Inventory + Circulation Management Solutions, Vendor Managed Inventory (VMI)	CCOG	April 30, 2026	April 30, 2027
<a href="#">National Business Furniture</a>	COG-2152M	Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">National Car Charging</a>	2020.05.3-A	Fleet	Electric Vehicle Charging	CCOG	August 31, 2026	August 31, 2026
<a href="#">National Public Seating</a>	COG-2152N	Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">NBCP Communication Systems</a>	R10-1182C	Assistive Technology & Services, Educational Products & Services, Enterprise Solutions & Services, Information Technology, Office Equipment & Services & Supplies	Assistive Technology, Audio Visual, Educational Technology, IT: Hardware + Peripherals, IT: Managed Services, IT: Software	Region 10 ESC	February 28, 2029	February 28, 2031



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<a href="#">Network Distribution®</a>	R10-1138A	Facilities & MRO	Air Filtration + Purification, Breakroom Products, Chemicals + Treatments, Floor Care + Cleaning Equipment, Food Packaging Supplies, Food Service Equipment, Foodservice Disposables, Janitorial + Sanitation Supplies, Laundry, Personal Protective Equipment (PPE), Robotic Scrubbers, Smallwares, Sweepers + Vacuums, Tabletop, Warewash, Waste Containment	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">Network Distribution®</a>	RPS-1020-A	Food & Beverage	Air Filtration + Purification, Chemicals + Treatments, Cleaning Equipment, Food Packaging Supplies, Food Service Equipment, Foodservice Disposables, Janitorial Supplies, Laundry, Personal Protective Equipment (PPE), Smallwares, Tabletop, Warewash, Waste Containment	RPS	June 30, 2026	June 30, 2029
<a href="#">NetZero USA®</a>	R10-1170B	Construction, Facilities & MRO	A/V: Lighting + Staging, Ballasts, Lighting Controls + Sensors, Lighting Upgrades + Retrofits, Lighting: Indoor + Outdoor	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">New Tech Solutions</a>	R10-1183C	Enterprise Solutions & Services, Information Technology	Cloud Solutions, Cybersecurity, Data Storage + Management Equipment, IT: Cloud Services, IT: Hardware, IT: IaaS, IT: PaaS, IT: Software, IT: VMware	Region 10 ESC	February 28, 2029	February 28, 2031
<a href="#">Next Generation Recreation</a>	R10-1159B8	Athletics, Parks & Recreation	Outdoor Furnishings, Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">NGS</a>	R10-1146B	Construction, Educational Products & Services, Facilities & MRO	Breach-Resistant Window Products	Region 10 ESC	December 31, 2027	December 31, 2027
<a href="#">Nickerson</a>	R10-1176L	Educational Products & Services, Furniture & Storage	Architectural Wall Solutions, Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, Office + Conference Furniture, School Furniture, Stadiums + Auditoriums	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">NorthStar Recovery Services</a>	COG-2134C	Construction, Enterprise Solutions & Services, Facilities & MRO	Consumable Materials, Disaster Recovery, Equipment & Vehicle Rental, Rebuild, Remediation, Restoration	CCOG	August 31, 2026	August 31, 2027
<a href="#">Northwest Playground Equipment</a>	R10-1159B4	Athletics, Parks & Recreation	Outdoor Furnishings, Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">NorvaNivel</a>	COG-2152S	Educational Products & Services, Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Novatech</a>	R10-1169D	Information Technology, Office Equipment, Services & Supplies	Cloud Solutions, Computer Accessories, Copiers, Cybersecurity Products + Services, Hardware, Managed Cybersecurity Services, Managed Print Services, Multifunctional Devices, Scanners, Software	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">ODP Business Solutions</a>	R10-1128A	Educational Products & Services, Furniture & Storage, Information Technology, Office Equipment, Services & Supplies, Personal Protective Equipment	Breakroom Products, Educational Technology, Instructional Resources, IT: Hardware + Peripherals, IT: Integration, IT: Software, Janitorial + Sanitation Supplies, Office Furniture, Office Storage, Office Supplies, Personal Protective Equipment (PPE), School Furniture, School Supplies	Region 10 ESC	February 28, 2027	February 28, 2027
<a href="#">OperationsHERO</a>	COG-2156A	Facilities & MRO, Information Technology	IT: Computerized Maintenance Management System (CMMS), IT: Energy + Event Management, IT: Facilities + Asset Management, IT: SaaS, IT: Software	CCOG	June 30, 2028	June 30, 2029
<a href="#">OPEX</a>	COG-2112A	Enterprise Solutions & Services, Office Equipment, Services & Supplies	Digital Mail Equipment, High Speed Document Scanners, Mail Extraction Desks	CCOG	December 30, 2026	December 31, 2027



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<a href="#">OTTO</a>	COG-2113B	Facilities & MRO	Commercial Waste Containers, Janitorial + Sanitation Supplies, Waste Carts + Recycling Bins	CCOG	April 30, 2026	April 30, 2026
<a href="#">Pacific Ink</a>	R10-1171C	Athletics, Parks & Recreation, Educational Products & Services, Facilities & MRO, Furniture & Storage, Information Technology, Office Equipment, Services & Supplies	Cleaning Chemicals + Wipes, Computer Accessories + Peripherals, Cut Sheet Paper, Desks + Workstations + Panels + Tables, Facility Supplies, File Cabinets, Food + Beverage, Foodservice Disposables, Furniture Accessories, Health + Personal Care, IT: Hardware, Office Supplies, Printing Consumables, Safety + Security, Seating, Smallwares + Equipment, Storage + Shelving, Technology, Tools + Specialty Equipment, Towel + Tissue + Washroom	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">Paragon Furniture</a>	R10-1176M	Educational Products & Services, Furniture & Storage	Architectural Wall Solutions, Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, Office + Conference Furniture, School Furniture, School Storage	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Parallel Learning</a>	R10-1180L	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">ParkMobile</a>	COG-2154C	Enterprise Solutions & Services, Information Technology	Mobile Parking Payment	CCOG	June 30, 2028	June 30, 2029
<a href="#">Patriot Construction Management</a>	R10-1129C	Construction, Facilities & MRO	Building Security Products + Services	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">PaveConnect</a>	R10-1181B	Construction, Facilities & MRO	Asphalt Striping, Concrete + Asphalt Paving, Exterior Surfacing, Job Order Contracting (JOC)	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">Peach State Truck Centers</a>	RFP-2501KM-H	Educational Products & Services, Fleet	Automotive Parts + Supplies, Buses, Electric Vehicles	GCPS	May 15, 2028	May 15, 2030
<a href="#">Pedagogy Furniture</a>	COG-2152S	Educational Products & Services, Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Pediatric Developmental Services</a>	R10-1180M	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">Pelican Playgrounds</a>	R10-1159B9	Athletics, Parks & Recreation	Outdoor Furnishings, Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Peterbilt</a>	COG-2129D	Fleet	Auto + Truck Parts, Medium + Heavy Duty Truck Parts, School Bus Parts, Trailer Parts	CCOG	September 30, 2026	September 30, 2027
<a href="#">Plante Moran</a>	COG-2127E	Information Technology	Cybersecurity Consulting, Cybersecurity Products + Services	CCOG	April 30, 2026	April 30, 2027
<a href="#">Plante Moran</a>	R10-1126A	Educational Products & Services, Information Technology	Consulting, IT: Capabilities Assessment, IT: Cyber Security, IT: Infrastructure Consulting, IT: Technology Design, IT: Threat Assessment	Region 10 ESC	December 31, 2026	December 31, 2026
<a href="#">Platinum Visual Solutions</a>	R10-1176N	Educational Products & Services, Furniture & Storage	Education + Library + Lab, Office + Conference Furniture, School Furniture, School Storage	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Playground Solutions of Texas</a>	R10-1159B5	Athletics, Parks & Recreation	Outdoor Furnishings, Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Playground Specialists</a>	R10-1159B0	Athletics, Parks & Recreation	Outdoor Furnishings, Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028



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<a href="#">Playmore</a>	R10-1159B2	Athletics, Parks & Recreation	Outdoor Furnishings, Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">PowerSchool</a>	COG-2121A	Educational Products & Services, Enterprise Solutions & Services, HR & Benefits, Information Technology	Applicant Tracking, Employee Records, Finance Management Solutions, HR Solutions, IT: ERP, IT: Parental Engagement, IT: SaaS, IT: School District Administration, IT: Student Assessment, IT: Student Enrollment, IT: Student Information Systems, IT: Student Performance, Parental Engagement, Payroll, School District Administration, Student Assessment, Student Enrollment, Student Information Systems, Student Performance, Talent Acquisition	CCOG	August 31, 2026	August 31, 2026
<a href="#">Powr-Flite</a>	R10-1137A	Facilities & MRO	Floor Care + Cleaning, Sweepers + Vacuums + Scrubbers	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">PPG</a>	R10-1116A	Facilities & MRO	Adhesives, Paint, Sealants, Stains	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Premium Parking</a>	COG-2154B	Enterprise Solutions & Services, Information Technology	License Plate Recognition, Mobile Parking Payment, PARCS, Parking Enforcement, Permits	CCOG	June 30, 2028	June 30, 2029
<a href="#">PrepScholar</a>	R10-1158C	Educational Products & Services	Curriculum, Professional Development, Student Counseling, Teaching Materials, Test Preparation, Tutoring + Academic Prep	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">Presidio</a>	R10-1173D	Information Technology	Apple Hardware + Peripherals, Cloud Solutions, Cybersecurity Products + Services, IT: Hardware + Peripherals, IT: Integration, IT: Software	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">Price Modern</a>	R10-1176O	Educational Products & Services, Furniture & Storage	Architectural Wall Solutions, Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, Office + Conference Furniture, School Furniture, School Storage, Stadiums + Auditoriums	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">PROCEDEO Group</a>	COG-2142A	Construction, Facilities & MRO	Construction: Consultant + Procurement + Planning + Oversight	CCOG	April 30, 2027	April 30, 2028
<a href="#">Progressive Roofing</a>	R10-1172A	Construction, Facilities & MRO	Exterior Surfacing, HVAC + Building Automation, Job Order Contracting (JOC), Roofing, Solar: Procurement + Construction + Installation	Region 10 ESC	December 31, 2027	December 31, 2029
<a href="#">Qualtrics</a>	R10-1163A	Information Technology	Administration Processes, Customer Feedback + Satisfaction, Data Analytics, Educational Software, Evaluations, Experience Management, Surveys	Region 10 ESC	April 30, 2027	April 30, 2029
<a href="#">Rackspace Technology</a>	R10-1111C	Enterprise Solutions & Services, Information Technology	IT: Cloud Services, IT: IaaS, IT: Software, IT: Storage, IT: PaaS, IT: VMware	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Rave Mobile Safety</a>	R10-1147B	Educational Products & Services, Facilities & MRO, Information Technology	Breach-Resistant Window Products, Incident Reporting, Non-Scalable Fencing, Remote Door Lockdown, Safety Notifications + Alerts, School Security, Silent Panic Alert Technology, Situational Awareness Technology	Region 10 ESC	December 31, 2027	December 31, 2027
<a href="#">RCP Shelters</a>	R10-1159C	Athletics, Parks & Recreation	Outdoor Shelters + Sunshades + Amenities + Pavilions	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">ReadyRefresh by Nestle</a>	EQ-052920-02A	Food & Beverage, Personal Protective Equipment	Water Distribution + Dispensers	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">Rekortan®</a>	COG-2164C	Athletics, Parks & Recreation, Construction, Facilities & MRO	Rekortan Tracks, Running Track Systems, Sports Surfaces, Sports Surfacing Maintenance	CCOG	June 30, 2025	June 30, 2029



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<a href="#">Renaissance Institute</a>	R10-1126B	Educational Products & Services, Information Technology	Consulting, IT: Capabilities Assessment, IT: Infrastructure Consulting, IT: Technology Design	Region 10 ESC	December 31, 2026	December 31, 2026
<a href="#">Riddell</a>	COG-2144D	Athletics, Parks & Recreation	Athletic: Supplies + Equipment + Apparel, Equipment Reconditioning Services, Sports Helmets + Pads	CCOG	April 30, 2027	April 30, 2028
<a href="#">RIDE Mobility</a>	RFP-2501KM-D	Educational Products & Services, Fleet	Automotive Parts + Supplies, Buses, Electric Vehicles	GCPS	May 15, 2028	May 15, 2030
<a href="#">RLP Mechanical Contractors, Inc.</a>	R10-1132C	Facilities & MRO, Personal Protective Equipment	Air Filtration, Building Management + Systems, Energy + Performance Contracting, Fire Suppression + Alarm Systems, HVAC + Building Automation, Lighting Upgrades + Retrofits, Security + Access Control, Ultraviolet Light Disinfection	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">RoofConnect</a>	R10-1172B	Construction, Facilities & MRO	Exterior Surfacing, HVAC + Building Automation, Job Order Contracting (JOC), Roofing, Solar: Procurement + Construction + Installation	Region 10 ESC	December 31, 2027	December 31, 2029
<a href="#">RoofConnect (OH)</a>	COG-2133B	Construction, Facilities & MRO	Roofing (Ohio)	CCOG	July 31, 2026	July 31, 2027
<a href="#">Rose Paving</a>	R10-1181B	Construction, Facilities & MRO	Asphalt Striping, Concrete + Asphalt Paving, Exterior Surfacing, Job Order Contracting (JOC), Seal Coating + Crack Filling Services	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">RS Commercial Construction</a>	R10-1166C	Construction, Facilities & MRO	Construction: Consultant + Procurement + Planning + Oversight, General Contracting Services, Job Order Contracting (JOC)	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Rush Bus Centers of Georgia</a>	RFP-2501KM-F	Educational Products & Services, Fleet	Automotive Parts + Supplies, Buses, Electric Vehicles	GCPS	May 15, 2028	May 15, 2030
<a href="#">RWC Group</a>	R10-1148B	Educational Products & Services, Fleet	Buses: Diesel + Gasoline, Electric Buses: Type A + D	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">S-Works</a>	R10-1166D	Construction, Facilities & MRO	Construction: Consultant + Procurement + Planning + Oversight, General Contracting Services, Job Order Contracting (JOC)	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Savoy Contract Furniture™</a>	COG-2152I	Educational Products & Services, Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">School Health Corporation</a>	COG-2167C	Assistive Technology & Services, Athletics, Parks & Recreation, Educational Products & Services, Medical, Personal Protective Equipment	Assistive Technology + Special Education, Athletic Equipment + Supplies, Emergency Preparedness, First Aid, Health + Athletic Room Furnishings, Hearing + Vision + Speech Devices, Hydration, Nutrition, Personal Protective Equipment (PPE), Physical Education (PE) Equipment + Supplies, Rehabilitation + Therapy, Sports Medicine	CCOG	October 31, 2029	October 31, 2030
<a href="#">School Health Corporation</a>	R10-1131A	Assistive Technology & Services, Athletics, Parks & Recreation, Educational Products & Services, Medical, Personal Protective Equipment	Assistive Technology + Special Education, Athletic Equipment + Supplies, Emergency Preparedness, First Aid, Health + Athletic Room Furnishings, Hearing + Vision + Speech Devices, Hydration, Nutrition, Personal Protective Equipment (PPE), Physical Education (PE) Equipment + Supplies, Rehabilitation + Therapy, Sports Medicine	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">School Specialty</a>	COG-2152O	Educational Products & Services, Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028



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Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">School Specialty</a>	R10-1164D	Educational Products & Services, Furniture & Storage	A/V: Lighting + Staging, Early Learning, Educational Technology, Fitness Equipment, Instructional Resources, Instructor Preparedness + Resources, Office Supplies, Outdoor Furnishings, School Furniture, School Storage, School Supplies	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">SCRAM Systems</a>	COG-2170B	Information Technology	Public Safety, Public Safety Equipment, Technology	CCOG	October 31, 2029	October 31, 2030
<a href="#">SealMaster</a>	COG-2149D	Construction, Fleet	Asphalt Distributors, Bulk Storage Tanks, Seal Coating + Crack Filling Equipment, Sealants	CCOG	August 31, 2027	August 31, 2028
<a href="#">SealMaster</a>	R10-1181C	Construction, Facilities & MRO	Asphalt Distributors, Asphalt Striping, Concrete + Asphalt Paving, Exterior Surfacing, Job Order Contracting (JOC), Seal Coating + Crack Filling Services	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">Secure Logic</a>	R10-1183D	Enterprise Solutions & Services, Information Technology	Cloud Solutions, Cybersecurity, Data Storage + Management Equipment, IT: Cloud Services, IT: Hardware, IT: IaaS, IT: PaaS, IT: Software, IT: VMware	Region 10 ESC	February 28, 2029	February 28, 2031
<a href="#">Sedia Systems</a>	R10-1113A	Educational Products & Services, Facilities & MRO, Furniture & Storage	Auditorium: Fixed Seating, Lecture Hall: Fixed Seating + Tables, Seating, Sound Management	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Shamrock Foods</a>	RPS-1010	Food & Beverage	Broadline Food Distribution, Fresh Produce + Dairy + Food + Non-food + Chemicals + Equipment, School Foodservice	RPS	June 30, 2026	June 30, 2029
<a href="#">Shamrock Foods</a>	RPS-1020-B	Food & Beverage	Chemicals + Equipment + Supplies, Foodservice Disposables, School Foodservice	RPS	June 30, 2026	June 30, 2029
<a href="#">Sharp</a>	R10-1169E	Office Equipment, Services & Supplies	Cloud Solutions, Computer Accessories, Copiers + Scanners, Cybersecurity Products + Services, IT: Hardware + Software, Managed Cybersecurity Services, Managed Print Services, Multifunctional Devices, Office Products	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">Sharp</a>	R10-1173E	Information Technology, Office Equipment, Services & Supplies	IT: Hardware + Peripherals, IT: Software	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">Sika Roofing</a>	COG-2151A	Facilities & MRO	Roofing	CCOG	August 31, 2027	August 31, 2028
<a href="#">Sika Roofing</a>	R10-1172C	Construction, Facilities & MRO	Exterior Surfacing, Roofing, Solar: Procurement + Construction + Installation	Region 10 ESC	December 31, 2027	December 31, 2029
<a href="#">Skanska</a>	R10-1166E	Construction, Facilities & MRO	Construction: Consultant + Procurement + Planning + Oversight, General Contracting Services, Job Order Contracting (JOC)	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Smith System</a>	R10-1176P	Educational Products & Services, Furniture & Storage	Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, School Furniture, School Storage	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Snap-on Industrial</a>	R10-1153A	Fleet	Diagnostic + Garage Equipment, Tools, Vehicle Lifts + Maintenance	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">Southwest Solutions Group</a>	COG-2152P	Facilities & MRO, Furniture & Storage	Equipment Storage, Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">SP+ Transportation Services</a>	COG-2155A	Fleet	Shuttle + Van + Bus + Charter Services	CCOG	June 30, 2028	June 30, 2029



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Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">Spacesaver Corporation</a>	R10-1176Q	Athletics, Parks & Recreation, Educational Products & Services, Furniture & Storage	Art + Weapon Racks, Athletic + Healthcare + Museum Storage, Cafeteria + Dining + Outdoor, Education + Library + Lab, Equipment Storage, Evidence Lockers, Library Shelving, Office + Conference Furniture, School Furniture, School Storage, Stadiums + Auditoriums	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">Special-T</a>	R10-1176T	Educational Products & Services, Furniture & Storage	Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, Office + Conference Furniture, School Furniture, School Storage, Stadiums + Auditoriums	Region 10 ESC	August 31, 2028	August 31, 2030
<a href="#">SportMaster</a>	COG-2138B	Athletics, Parks & Recreation, Educational Products & Services, Facilities & MRO	Outdoor Sport Court Surfacing, Pickleball, Tennis, Basketball, Track + Roller Hockey, Sport Court Surfacing Maintenance	CCOG	December 31, 2026	December 31, 2027
<a href="#">Star Playgrounds</a>	R10-1159B6	Athletics, Parks & Recreation	Outdoor Furnishings, Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Stark Tech</a>	R10-1132D	Facilities & MRO, Personal Protective Equipment	Air Filtration, Building Management + Systems, Energy + Performance Contracting, Fire Suppression + Alarm Systems, HVAC + Building Automation, Lighting Upgrades + Retrofits, Security + Access Control, Ultraviolet Light Disinfection	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">Stark Tech</a>	R10-1168B	Facilities & MRO	Building Access + Automation, Building Management + Systems, Fire Protection, Fire Suppression + Alarm Systems, Remote Monitoring, Security + Access Control, Smart Building	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Stark Tech</a>	R10-1177I	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Power, Fire Suppression + Alarm Systems, HVAC + Building Automation, Lighting Upgrades + Retrofits, Mechanical + Electrical + Plumbing (MEP), Safety + Security Systems + Services, Security + Access Control	Region 10 ESC	October 31, 2027	October 31, 2030
<a href="#">STEMfinity</a>	R10-1164E	Educational Products & Services, Furniture & Storage	3D Modeling + Rendering + Animation, Educational Technology, Instructional Resources, Instructor Preparedness + Resources, School Supplies, STEM Materials, Virtual Reality (VR) + Augmented Reality (AR), VR Hardware + Software + Training + Educational Programs	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">STS EDUCATION</a>	R10-1112A	Athletics, Parks & Recreation, Educational Products & Services, Furniture & Storage, Information Technology	Esports, Esports Consulting, Esports Furniture, IT: Hardware + Peripherals, IT: Software	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Student Nest</a>	R10-1152D	Educational Products & Services	Professional Development, Student Counseling, Tutoring + Academic Prep	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Sunstate Mechanical Services</a>	R10-1136C	Facilities & MRO	Air Filtration + Purification, Air Quality Services, HVAC	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">Synergy Disaster Solutions</a>	COG-2125C	Enterprise Solutions & Services	Consulting, Disaster Recovery, Grant Management	CCOG	April 30, 2026	April 30, 2027
<a href="#">SYNLawn®</a>	COG-2164C	Athletics, Parks & Recreation, Construction, Facilities & MRO	Artificial Turf Installation + Removal + Maintenance, Sports Surfaces, Sports Surfacing Maintenance, SYNLawn Landscapes, Turf Maintenance	CCOG	June 30, 2025	June 30, 2029
<a href="#">Sysco</a>	CPC-25.12	Food & Beverage	Broadline Food Distribution, Fresh Produce + Dairy + Food + Non-food + Chemicals + Equipment, School Foodservice	CPC	June 30, 2026	June 30, 2029



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Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">Tayco</a>	R10-1176R	Furniture & Storage	Cafeteria + Dining + Outdoor, Equipment Storage, Office + Conference Furniture	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">TD SYNEX</a>	R10-1173F	Information Technology	Apple Hardware + Peripherals, Cloud Solutions, Cybersecurity Products + Services, IT: Hardware + Peripherals, IT: Integration, IT: Software	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">TD SYNEX Public Sector</a>	COG-2127B	Information Technology	Cybersecurity Products + Services	CCOG	April 30, 2026	April 30, 2027
<a href="#">TD SYNEX Public Sector</a>	COG-2139A	Enterprise Solutions & Services, Information Technology	Cloud Solutions, IT: Hardware + Software	CCOG	December 31, 2026	December 31, 2027
<a href="#">TDIndustries</a>	R10-1136D	Facilities & MRO	Air Filtration + Purification, Air Quality Services, HVAC	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">TDIndustries</a>	R10-1177J	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Power, Fire Suppression + Alarm Systems, HVAC + Building Automation, Lighting Upgrades + Retrofits, Mechanical + Electrical + Plumbing (MEP), Safety + Security Systems + Services	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">Tech Logic</a>	R10-1118A	Educational Products & Services, Information Technology	Identity Theft Protection, Inventory + Circulation Management Solutions, Library Management Software, Patron Self-Service Solutions, RFID Tags + Scanners + Barcode Printers	Region 10 ESC	June 30, 2026	June 30, 2028
<a href="#">TenCate</a>	COG-2164B	Athletics, Parks & Recreation, Construction, Facilities & MRO	Sports Surfaces, Sports Surfacing Maintenance	CCOG	June 30, 2029	June 30, 2030
<a href="#">TenCate</a>	COG-2166B	Athletics, Parks & Recreation, Construction, Educational Products & Services, Facilities & MRO	Electrical + Lighting, GeoSport Lighting Systems, Site Preparation: Athletics, Sports + Stadium Lighting, Sports Lighting Solutions	CCOG	June 30, 2029	June 30, 2030
<a href="#">Tennant</a>	R10-1137B	Facilities & MRO	Floor Care + Cleaning, Sweepers + Vacuums + Scrubbers	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">Terminix Commercial</a>	R10-1151A	Facilities & MRO	Chemicals + Treatments, Insect + Rodent + Pest Control	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Tetra Tech</a>	COG-2125D	Enterprise Solutions & Services	Consulting, Disaster Recovery, Grant Management	CCOG	April 30, 2026	April 30, 2027
<a href="#">The Bus Center Atlanta</a>	RFP-2501KM-G	Educational Products & Services, Fleet	Automotive Parts + Supplies, Buses, Electric Vehicles	GCPS	May 15, 2028	May 15, 2030
<a href="#">The Group</a>	COG-2129E	Fleet	Auto + Truck Parts	CCOG	April 30, 2026	April 30, 2027
<a href="#">The HVAC Company</a>	R10-1132E	Facilities & MRO, Personal Protective Equipment	Air Filtration, Building Management + Systems, Energy + Performance Contracting, Fire Suppression + Alarm Systems, HVAC + Building Automation, Lighting Upgrades + Retrofits, Security + Access Control, Ultraviolet Light Disinfection	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">The LandTek Group</a>	COG-2138C	Athletics, Parks & Recreation, Construction, Facilities & MRO	Athletic Facilities Design, Construction + Maintenance, Contractor Services, Design Build Services, Sports Construction, Sports Facility Products + Equipment Distributor, Turn-Key Service	CCOG	December 31, 2026	December 31, 2027



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Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">The Library Corporation</a>	R10-1118A	Educational Products & Services, Information Technology	Identity Theft Protection, Inventory + Circulation Management Solutions, Library Management Software, Patron Self-Service Solutions, RFID Tags + Scanners + Barcode Printers	Region 10 ESC	June 30, 2026	June 30, 2028
<a href="#">TK Elevator</a>	EQ-111519-03A	Facilities & MRO	Elevators + Escalators	Region 10 ESC	February 28, 2027	February 28, 2027
<a href="#">Top Line Recreation</a>	R10-1159D	Athletics, Parks & Recreation	Dogs Parks + Equipment, Outdoor Shelters + Sunshades + Amenities + Pavilions, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Tornado</a>	R10-1137A	Facilities & MRO	Floor Care + Cleaning, Sweepers + Vacuums + Scrubbers	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">TPx</a>	COG-2163C	Information Technology	IT: Hardware + Software, IT: Managed Services, IT: Organization + Communication Tools, Managed Cybersecurity Services, Unified Communications (UCaaS)	CCOG	February 28, 2029	February 28, 2030
<a href="#">Tradesmen International</a>	COG-2148D	Construction, Facilities & MRO, HR & Benefits	Trade Labor Staffing	CCOG	August 31, 2027	August 31, 2028
<a href="#">Tradesmen International</a>	R10-1180N	Enterprise Solutions & Services, HR & Benefits	Staffing + Consulting Services, Trade Labor Staffing	Region 10 ESC	October 31, 2028	October 31, 2030
<a href="#">Transfr, Inc.</a>	R10-1157B	Assistive Technology & Services, Educational Products & Services, Information Technology	3D Modeling + Rendering + Animation, Professional Development, Virtual Reality (VR) + Augmented Reality (AR), VR Hardware + Software + Training + Educational Programs	Region 10 ESC	August 31, 2026	August 31, 2028
<a href="#">TransPar Group, Inc.</a>	COG-2122A	Enterprise Solutions & Services, Fleet	Fleet Data Analytics + Service Tools, Fleet Management Consulting, Fleet Solution Acquisition + System Implementation	CCOG	August 31, 2026	August 31, 2026
<a href="#">TRP</a>	COG-2129D	Fleet	Auto + Truck Parts, Medium + Heavy Duty Truck Parts, School Bus Parts, Trailer Parts	CCOG	September 30, 2026	September 30, 2027
<a href="#">True North</a>	R10-1126C	Educational Products & Services, Enterprise Solutions & Services, Information Technology	Bond Programming + Planning, IT: Cyber Security, IT: Risk + Vulnerability Assessment, IT: Technology Design	Region 10 ESC	December 31, 2026	December 31, 2026
<a href="#">Tryfacta</a>	COG-2148E	HR & Benefits	Managed Staffing Services, Staffing + Consulting Services	CCOG	August 31, 2027	August 31, 2028
<a href="#">turnerboone</a>	COG-2152R	Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">Tutor.com</a>	R10-1127B	Assistive Technology & Services, Educational Products & Services, Information Technology	Educational Software, IT: Software, Tutoring + Academic Prep	Region 10 ESC	December 31, 2026	December 31, 2026
<a href="#">TutorMe</a>	R10-1127C	Assistive Technology & Services, Educational Products & Services, Information Technology	Educational Software, IT: Software, Tutoring + Academic Prep	Region 10 ESC	December 31, 2026	December 31, 2026
<a href="#">U.S. Foam &amp; Etch</a>	R10-1160C	Facilities & MRO	Diagnostic + Garage Equipment, Maintenance, Tool Storage + Equipment	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Uber for Business</a>	COG-2155B	Fleet	Non-Emergency Medical Transportation (NEMT): Wheelchair Vans, Rideshare, Shuttle Services	CCOG	June 30, 2028	June 30, 2029
<a href="#">Uber for Business</a>	R10-1162B	Food & Beverage	Catering Services, Online Delivery Platform, Uber Eats	Region 10 ESC	December 31, 2026	December 31, 2028



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Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">UltiPlay Parks &amp; Playgrounds</a>	R10-1159B7	Athletics, Parks & Recreation	Outdoor Furnishings, Outdoor Shelters + Sunshades + Amenities + Fitness Equipment, Playground Equipment, Safety Surfacing	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Underwood Distributing</a>	R10-1164C	Educational Products & Services	Calculators, Educational Technology, Instructional Resources, Instructor Preparedness + Resources, School Supplies, STEM Materials	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">United Site Services</a>	COG-2126C	Construction, Facilities & MRO	Dumpsters, Portable Restrooms, Sanitation Equipment Rental, Shower Trailers, Temporary Fences	CCOG	April 30, 2026	April 30, 2027
<a href="#">Vari</a>	COG-2152T	Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">vCloud Tech Inc.</a>	R10-1173G	Information Technology	Apple Hardware + Peripherals, Cloud Solutions, Cybersecurity Products + Services, IT: Hardware + Peripherals, IT: Integration, IT: Software	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">Veregy</a>	COG-2143C	Construction, Facilities & MRO	Renewable Energy Production, Solar	CCOG	April 30, 2027	April 30, 2028
<a href="#">Veregy</a>	R10-1143D	Construction, Facilities & MRO	Air Filtration, Building Management + Systems, Energy + Performance Contracting, HVAC + Building Automation, Lighting Upgrades + Retrofits, Water Conservation	Region 10 ESC	December 31, 2027	December 31, 2027
<a href="#">Veregy</a>	R10-1170C	Construction, Facilities & MRO	AV: Lighting + Staging, Ballasts, Lighting Controls + Sensors, Lighting Upgrades + Retrofits, Lighting: Indoor + Outdoor	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">Vestis</a>	R10-1174A	Facilities & MRO	Laundry + Cleaning Services, School + Sports Uniforms, Uniform + Apparel + Linen + Textile	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">Victor Stanley</a>	R10-1159E	Athletics, Parks & Recreation	Outdoor Amenities + Site Furnishings	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">Virtucom</a>	R10-1173H	Information Technology	IT: Hardware + Peripherals	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">VisualVault</a>	COG-2168C	Information Technology	IT: Software	CCOG	October 31, 2029	October 31, 2030
<a href="#">W.B. Mason Interiors</a>	COG-2152U	Educational Products & Services, Facilities & MRO, Furniture & Storage	Office Furniture, Office Storage, School Furniture, School Storage	CCOG	December 31, 2027	December 31, 2028
<a href="#">W.B. Mason</a>	R10-1128B	Furniture & Storage, Information Technology, Office Equipment, Services & Supplies, Personal Protective Equipment	Breakroom Products, Instructional Resources, IT: Hardware + Peripherals, IT: Software, Janitorial + Sanitation Supplies, Office Furniture, Office Storage, Office Supplies, Personal Protective Equipment (PPE), School Furniture, School Supplies	Region 10 ESC	February 28, 2027	February 28, 2027
<a href="#">Waibel</a>	R10-1132F	Facilities & MRO, Personal Protective Equipment	Air Quality Services, Building Management + Systems, Energy System Audits, Facility Maintenance, HVAC + Building Automation, Plumbing Services, Security + Access Control	Region 10 ESC	April 30, 2027	April 30, 2027
<a href="#">Waibel (Ohio)</a>	COG-2124A	Facilities & MRO, Personal Protective Equipment	Air Quality Services, Building Management + Systems, Energy System Audits, Facility Maintenance, HVAC + Building Automation, Plumbing Services, Security + Access Control	CCOG	December 31, 2025	December 31, 2026



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Supplier Name	Contract #	Categories	Products & Services Available	Lead Agency	Current Term Through	Renewable Through
<a href="#">Watchfire</a>	COG-2162B	Athletics, Parks & Recreation, Educational Products & Services, Facilities & MRO	Digital Displays, Scoreboards + Signage	CCOG	February 28, 2029	February 28, 2030
<a href="#">Water Splash</a>	R10-1159F	Athletics, Parks & Recreation	Aquatic Equipment + Accessories, Splash Pads	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">WB Manufacturing</a>	R10-1176S	Educational Products & Services, Furniture & Storage	Cafeteria + Dining + Outdoor, Dorm + Residence Furniture, Education + Library + Lab, Office + Conference Furniture, School Furniture, School Storage, Stadiums + Auditoriums	Region 10 ESC	June 30, 2028	June 30, 2030
<a href="#">West Coast Automation Services</a>	R10-1135D	Facilities & MRO	Building Management + Systems, HVAC + Building Automation, Security + Access Control	Region 10 ESC	August 31, 2027	August 31, 2027
<a href="#">Westwind Computer Products</a>	R10-1173I	Information Technology	Apple Hardware + Peripherals, Cloud Solutions, Cybersecurity Products + Services, IT: Hardware + Peripherals, IT: Integration, IT: Software	Region 10 ESC	February 28, 2028	February 28, 2029
<a href="#">What Drives Winning Education</a>	R10-1152E	Educational Products & Services	Conference Event Motivational Speakers, Leadership Coaching, Professional Development	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Winzer</a>	R10-1160D	Facilities & MRO, Fleet, Office Equipment, Services & Supplies, Personal Protective Equipment	Fasteners + Chemicals + Electrical + Cutting Tools + Abrasives + Fluid Power + Automotive + Material Handling + Safety + Shop Supplies + Hand Tools + Storage Equipment + Welding + Part Washers	Region 10 ESC	December 31, 2026	December 31, 2028
<a href="#">World Kinect</a>	COG-2114B	Facilities & MRO	Demand Management, Energy Consulting, Energy Management Services, Energy Procurement, Energy Procurement: Alternative Green Solutions, Energy Procurement: Electricity, Energy Procurement: Natural Gas	CCOG	April 30, 2026	April 30, 2026
<a href="#">Wright Manufacturing</a>	R10-1165D	Athletics, Parks & Recreation, Facilities & MRO, Fleet	Grounds Care Equipment, Lawn Maintenance, Mowers, Stand-On + Walk-Behind + Sit-Down Commercial Zero Turn Rider Mowers	Region 10 ESC	June 30, 2027	June 30, 2029
<a href="#">Xerox Business Solutions</a>	R10-1169C	Office Equipment, Services & Supplies	Cloud Solutions, Computer Accessories, Copiers + Scanners, Cybersecurity Products + Services, IT: Hardware + Software, Managed Cybersecurity Services, Managed Print Services, Multifunctional Devices, Office Products	Region 10 ESC	October 31, 2027	October 31, 2029
<a href="#">Xpel by Forward Edge</a>	COG-2127D	Information Technology	Cybersecurity Products + Services, Managed Cybersecurity Services	CCOG	April 30, 2026	April 30, 2027
<a href="#">Yamaha Motor Co</a>	R10-1175C	Fleet	All-Terrain Vehicles (ATV), Golf Carts, Low Speed Vehicles (LSV), Side-By-Side Vehicles, Utility Vehicles (UTV), Vehicle Accessories	Region 10 ESC	February 28, 2028	February 28, 2030
<a href="#">Zavo</a>	COG-2161B	Information Technology	Internet Connectivity, IT: Hardware, Telecommunications Solutions	CCOG	February 28, 2029	February 28, 2030
<a href="#">zLink</a>	R10-1114B	Facilities & MRO, Information Technology	IT: Computer Aided Facility Management (CAFM), IT: Computerized Maintenance Management System (CMMS), IT: Facilities + Asset Management, IT: Integrated Workplace Management System (IWMS), IT: SaaS, IT: Software	Region 10 ESC	April 30, 2026	April 30, 2028
<a href="#">Zonar</a>	COG-2123B	Enterprise Solutions & Services, Fleet, Information Technology	Asset Management, Fleet Management Software, GPS Telematics, Integrated Fuel Management, IT: Asset Management, IT: Fleet Management Software, IT: GPS Telematics, IT: SaaS, School Bus GPS Telematics	CCOG	August 31, 2026	August 31, 2026



### **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 MEETING**

**March 25, 2026**

## **AGENDA ITEM C4**

Approve the Annual Joint Staff Planning and Budgeting Methodology Pertaining to Health Center Program Funding.



## CENTRAL HEALTH

### MEMORANDUM

To: Central Health Board of Managers  
From: Dr. Patrick Lee, President & CEO  
CC: Jonathan Morgan, COO  
Date: March 11, 2026  
Re: Updated: Revision to the FY26 Annual Joint Staff Planning and Budgeting Methodology Agreement Pertaining to Health Center Program Funding with CommUnityCare– ACTION ITEM

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CommUnityCare and Central Health prepared a revision to the Annual Joint Staff Planning and Budgeting Methodology Agreement for the current fiscal year. A redlined draft of the previously approved agreement is attached for reference. Staff are recommending approval of the attached draft.

CommUnityCare staff requested a change to the agreement in order to reduce ambiguity related to what actions may qualify as substantial deviations from the annual budget approved by the Board of Managers. The original agreement contained a list of non-exhaustive examples. The recommended change *limits* the scenarios to those listed as examples.

While this limitation does create some additional risk for potential misalignment between the parties and potential additional financial risk to Central Health, staff are confident that other safeguards within the agreement sufficiently mitigate those risks. For example, Central Health's continued funding throughout the fiscal year is contingent upon CommUnityCare's compliance with the requirements of the approved annual budget and staff are required to jointly review financial performance throughout the year. There will also continue to be opportunities to add or revise the list of examples qualifying as substantial deviations as needed on an ad hoc basis or as the agreement is updated annually.

Central Health staff are supportive of the requested revision to the agreement in order to provide CommUnityCare leadership with additional operational flexibility and clarity regarding scenarios where approvals are required for substantial deviations to the annual approved budget.

At the direction of Chair Rodriguez and Vice Chair May, we are providing a copy of the redlined agreement for the Board of Managers' review.

Staff recommend approval of the attached draft.

**Annual Joint Staff Planning and Budgeting Methodology Agreement Pertaining to Health Center Program Funding between the Travis County Healthcare District d/b/a Central Health and Central Texas Community Health Centers d/b/a CommUnityCare**

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 pursuant to 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 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 \$98,800,000.
- 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 as](#) 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.

**IN WITNESS WHEREOF**, the Parties have duly executed this Annual Joint Staff Planning and Budgeting Methodology to be effective on October 21, 2025.

**CENTRAL TEXAS COMMUNITY HEALTH CENTERS D/B/A COMMUNITYCARE**

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Nicholas Yagoda, MD  
Chief Executive Officer

**TRAVIS COUNTY HEALTHCARE DISTRICT D/B/A CENTRAL HEALTH**

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Patrick T. Lee, MD  
President & CEO



### **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.

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## **BOARD MEETING**

**March 25, 2026**

## **AGENDA ITEM C5**

Approve the President & CEO's goals for Fiscal Year 2026 as recommended by the Executive 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 March 25, 2026

Who will present the agenda item? (Name, Title) Consent Item

General Item Description Central Health CEO Top Goals FY2026

Is this an informational or action item? \_\_\_\_\_

Fiscal Impact None

Recommended Motion (if needed – action item) On March 9 the Executive Committee recommended that the Board approve the President & CEO's goals for Fiscal Year 2026.

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

- 1) Strategic Board Alignment
- 2) Clinical Excellence
- 3) Financial Sustainability
- 4) People and Community

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

Estimated time needed for presentation & questions? 0 mins

Is closed session recommended? (Consult with attorneys.) No

Form Prepared By/Date Submitted: Valerie Guerra 03/17/2026



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## **BOARD MEETING**

**March 25, 2026**

## **AGENDA ITEM C6**

Approve outside counsel for human resources legal services as recommended by the Executive Committee.



### AGENDA ITEM SUBMISSION FORM

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Agenda Item Meeting Date March 25, 2026

Who will present the agenda item? (Name, Title) Chair Rodriguez

General Item Description Approve outside counsel for human resources legal services as recommended by the Executive Committee.

Is this an informational or action item? Consent Item

Fiscal Impact \_\_\_\_\_

Recommended Motion (if needed – action item) On March 9 the Executive Committee recommended that the Board approve outside counsel for human resources legal services.

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

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

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

Estimated time needed for presentation & questions? \_\_\_\_\_

Is closed session recommended? (Consult with attorneys.) No

Form Prepared By/Date Submitted: Valerie Guerra, March 18, 2026



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## **BOARD MEETING**

**March 25, 2026**

## **REGULAR AGENDA ITEM 1**

Receive and discuss a report from the Board Chair including:

- a. Board meeting mechanics and governance updates.
- b. Update on a contract with outside counsel for human resources and governance legal services. (*Informational Item*)



### AGENDA ITEM SUBMISSION FORM

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Agenda Item Meeting Date March 25, 2026

Who will present the agenda item? (Name, Title) Chair Rodriguez

General Item Description Receive and discuss a report from the Board Chair including:  
a. Board meeting mechanics and governance updates.  
b. Update on a contract with outside counsel for human resources and governance legal services.

Is this an informational or action item? Informational Item

Fiscal Impact \_\_\_\_\_

Recommended Motion (if needed – action item) \_\_\_\_\_  
\_\_\_\_\_

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

- 1) Chair Rodriguez will give a verbal update.
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

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? 20 minutes

Is closed session recommended? (Consult with attorneys.) No

Form Prepared By/Date Submitted: Valerie Guerra March 3, 2026



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## **BOARD MEETING**

**March 25, 2026**

## **REGULAR AGENDA ITEM 2**

Receive and discuss a report from the President & CEO including:

- a. Strategic Board Alignment;
- b. Clinical Excellence;
- c. Financial Sustainability; and
- d. People and Community. (*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 March 25 , 2026

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 Clinical Facilities
- 2) Update on Workforce and Organizational Culture
- 3) Update on Shareholder and Community Engagement
- 4) Update on Health System Data Points

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 3/18/2026



**MARCH 2026**

**CEO Monthly Update: Major Milestones Across the Central Health System**

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**Clinical & Facilities Updates**

- ❖ CommUnityCare Incubator Grant for Women's Health Services Expansion
- ❖ Continued Progress on our Hancock Facility – Slated to Open in April
- ❖ Recovery Unplugged and Karma Health Partnerships for Substance Use Treatment
- ❖ Launch of New Outpatient Parenteral Antimicrobial Therapy Program
- ❖ Integration of Central Health Advocates at Dell Seton Medical Center
- ❖ Congressional Earmark Proposal Submission for Dental & Imaging Capacity

**Workforce & Organizational Culture**

- ❖ Celebrating Employee Appreciation Week
- ❖ Physicians Recognized in Austin Monthly's Top Doctors 2026 List
- ❖ New Senior Leadership Hires at Central Health and CommUnityCare

**Stakeholder & Community Engagement**

- ❖ First Community Conversation of 2026 in Precinct 3; Upcoming Community Conversation in Precinct 1 on April 16
- ❖ City Council Public Health Committee Briefing on Behavioral Health Partnerships and Follow-Up Briefings
- ❖ Engagements with Local Business Community: Downtown Austin Alliance Board Presentation, Opportunity Austin
- ❖ Upcoming Quarterly Travis County Commissioners Court Presentation on March 31

# March 2026

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Below is a summary of Community Engagement and Outreach initiatives within the Central Health Communications Department. It is not an exhaustive list.

## **Virtual External Lunch N' Learn – Food is Medicine (February 27)**

Over the past year, Central Health has expanded its Food Is Medicine work to better support people facing food insecurity, one of the biggest barriers to good health for people with low income. Over 60 community members and system-wide Central Health staff tuned in live to this virtual event to hear from Megan Cermak, Senior Director of Public Health Strategy. She shared updates from the Medically Tailored Meals program and the Mobile Food FARMacy to policy priorities such as screening patients for food needs and connecting food referrals to clinical care.

## **Community Conversation – Precinct 3 with Commissioner Ann Howard (March 4)**

Central Health hosted the first of five community conversations in Precinct 3 to engage residents, community partners, and elected officials in discussion about the Central Health system and our Year of Access. Key discussion themes were MAP enrollment continuity, the local health care safety net model, the federal policy and funding landscape, community trust amid the immigration climate, and mental health and jail diversion efforts.

## **Community Health Champions Alumni Health Equity Coffee Club (March 10)**

This month, the engagement team introduced a new opportunity to keep our alumni engaged and active. The Health Equity Coffee Club is a monthly meet-up every second Tuesday morning to reconnect with members from all nine previous cohorts and share important updates. The first meet up brought together five members from various cohort years, all excited to hear about what's new at Central Health and to share what initiatives they are currently working on in their work and/or personal lives.

## **East Cesar Chavez Neighborhood (March 11)**

A series of ongoing meetings are being held to address concerns about overnight camping in the East Cesar Chavez neighborhood. In a meeting convened by José Velásquez with city departments and community partners (*the city's Homeless Strategies and Operations Office, Central Health, Integral Care, Texas Harm Reduction Alliance, Austin Resource Recovery, Austin Police Department, the Austin Public Library, and 2 representatives from the neighborhood*), neighbors agreed to send their specific requests and invite Angel House to future conversations, while agencies continue coordinated outreach, enforcement, and environmental improvements. Neighbors also expressed appreciation for Central Health leadership and the Board of Managers' quick action to expand private security, noting immediate improvements.

## Community Meetings Attended

These community meetings are attare an opportunity for the Communications Department’s engagement and outreach team members to share information, and receive feedback from residents and organizations. *Other departments across the system may be meeting with other organizations.*

- Colony Park Neighborhood Association
- Austin Voices for Education and Youth Block Leaders / Promotoras
- Colony Park Neighborhood Association
- Community Coalition for Health’s (C2H) Health Fellowship Interns
- Dove Springs Community Alliance
- Leadership Austin hosted by Ricardo Zavala
- Rundberg Community Alliance
- Texas Anti-Poverty Project (TAPP)

## Grassroots Outreach

The outreach team has been connecting unhoused residents to MAP coverage at places that offer meals, shelter, and books. A new partnership with the Del Valle Libraries pairs their mobile library unit and our CHWs on visits to encampments in the furthest areas in Eastern Travis County. Our team has been able to help individuals get enrolled in MAP, case management, and health care services.

## Upcoming community engagement activity

### Community Health Champions: Rundberg (March 24 and 31)

This neighborhood-based, two-workshop program will be hosted at Dobie Middle School in Northeast Austin to educate patient populations on the Central Health system and its programs and services.

### Cesar Chavez Day Community March (March 28)

Join us as we march with the community from the Terrazas library to Pan-Am Park in honor of Cesar Chavez and Dolores Huerta. Stay and listen to local leaders speak about justice reform.

### Community Conversation – Precinct 1 with Commissioner Jeff Travillion (April 16)

The second community conversation of the fiscal year will take place at the Asian American Resource Center from 5:30 – 7:30 p.m. in collaboration with Commissioner Travillion.



## Healthcare System Data Points

### Summary

These interconnected metrics provide a comprehensive view of healthcare system performance across the quadruple aim: improving population health (Quality), enhancing patient experience (Experience), reducing costs (Finance), and ensuring access (Coverage and Access). Regular monitoring and strategic improvement of these data points enables executive leadership to drive organizational excellence, meet regulatory requirements, succeed in value-based contracts, and fulfill the mission of delivering high-quality, accessible, and affordable care to the community.

### 1. Coverage

#### **Total Covered Lives**

Number of people enrolled or otherwise attributed to our system. Shows the size of the population we are responsible for and helps plan capacity and resources.

### 2. Access

#### **Total Unique Patients Seen**

Count of distinct patients who received care in a period. Indicates reach into the covered population and whether people are connecting with services.

#### **Total Visits**

Total encounters across all settings. Reflects demand for services, informs staffing, and helps track shifts in utilization patterns.

#### **Lead Time (Referral to Appointment; Appointment to Being Seen)**

Average time from referral to scheduled visit and from appointment time to actual visit. Captures timeliness of care, patient convenience, and potential barriers to access.

#### **Third Next Available Appointment (3rd Next Available)**

Average number of days from the date a patient requests an appointment to the third open appointment slot. Indicates reliable access to care and helps identify capacity or scheduling constraints that delay timely visits.

### 3. Experience

#### **Net Promoter Score (NPS)**

Measures how likely patients are to recommend our system to others. Summarizes overall patient experience and loyalty and highlights where service improvements are needed.

### 4. Quality

#### **Cancer Screenings (UDS)**

- **Breast Cancer Screening Rate** – Share of eligible patients receiving recommended mammography; supports early detection and reduced mortality.
- **Cervical Cancer Screening Rate** – Share of eligible patients receiving Pap/HPV screening; prevents late-stage cervical cancer.
- **Colorectal Cancer Screening Rate** – Share of eligible adults screened for colorectal cancer; improves survival and reduces treatment intensity.

#### **Chronic Disease Management**

- **Hypertension Control** – Percentage of patients with blood pressure at goal. Reduces risk of stroke, heart attack, and kidney disease.
- **A1c Control** – Percentage of patients with diabetes with A1c at goal. Lowers risk of complications, hospitalizations, and long-term costs.

#### **Avoidable ED Utilization**

Rate of emergency department visits that could be managed in outpatient settings. Signals gaps in primary care access, care coordination, or patient education.

#### **30-Day Readmissions**

Percentage of patients readmitted to the hospital within 30 days of discharge. Reflects discharge quality, follow-up care, and care coordination across settings.

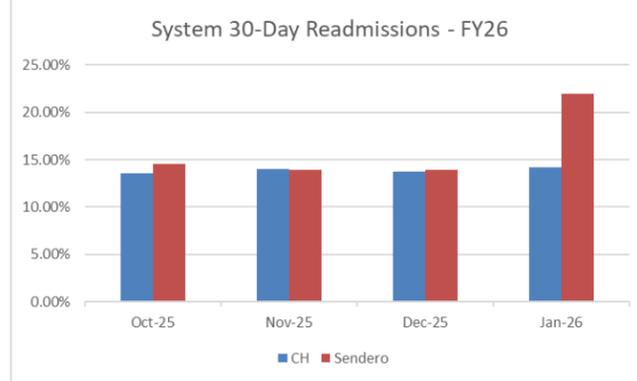
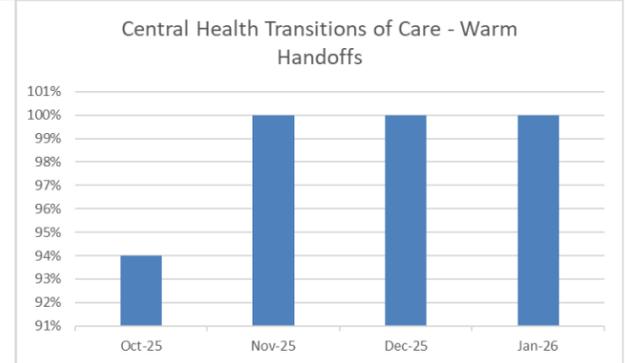
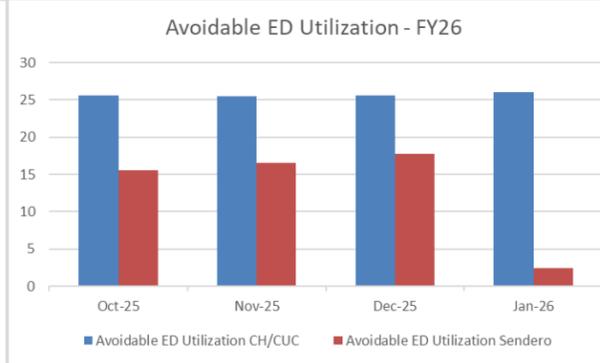
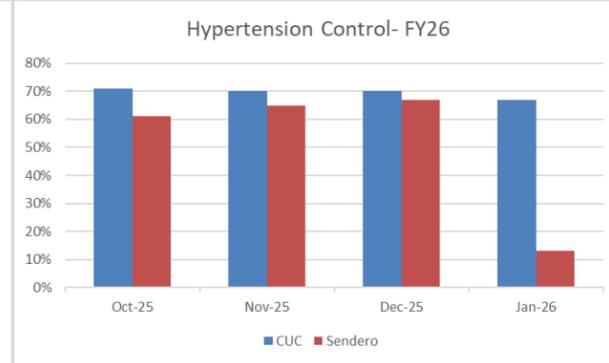
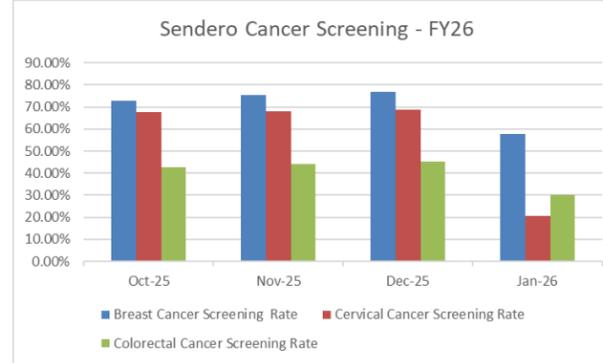
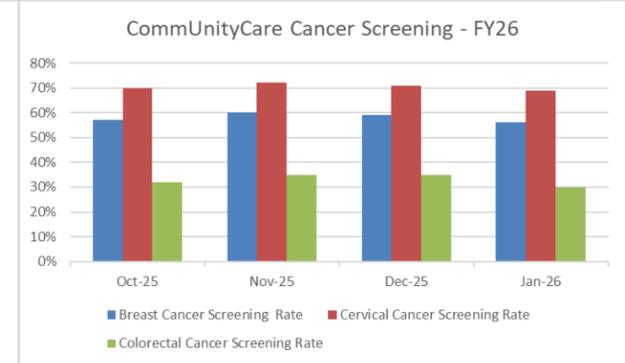
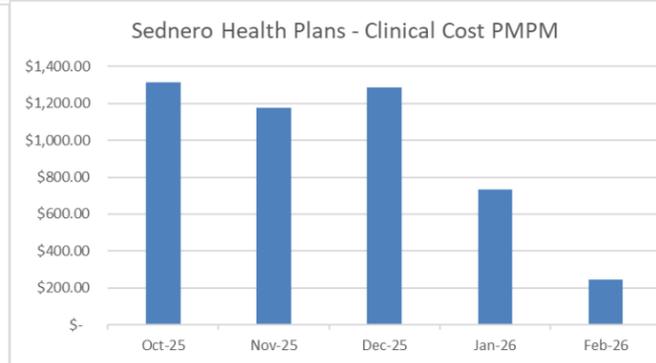
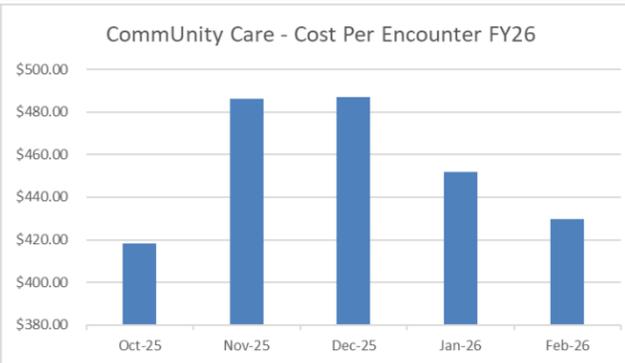
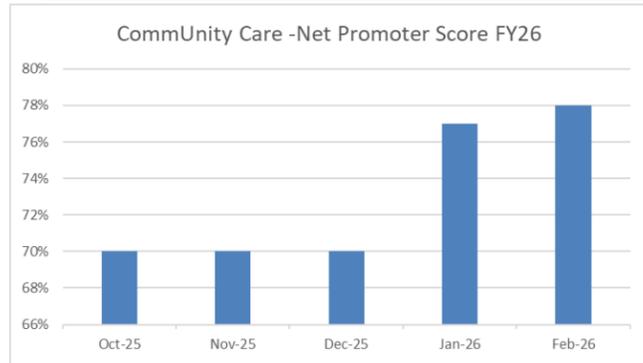
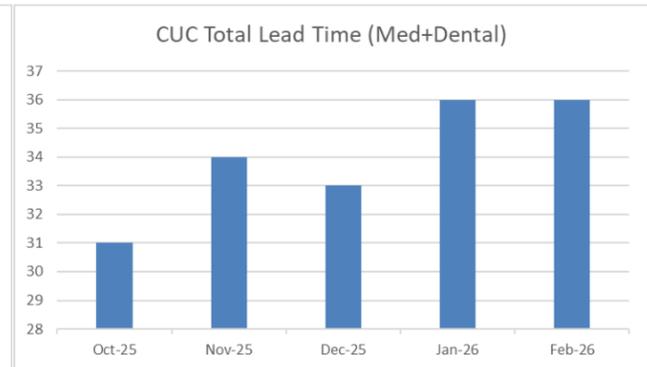
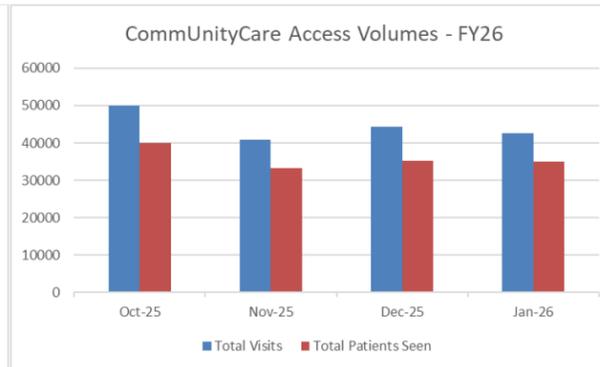
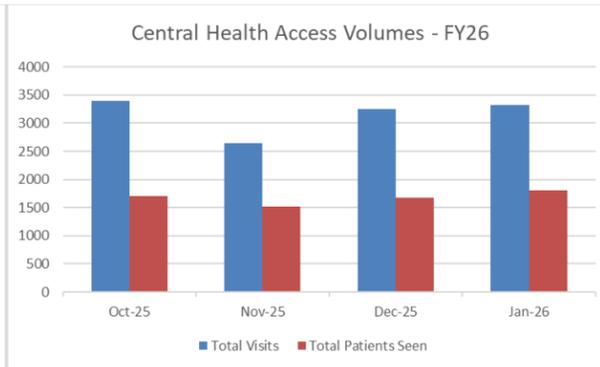
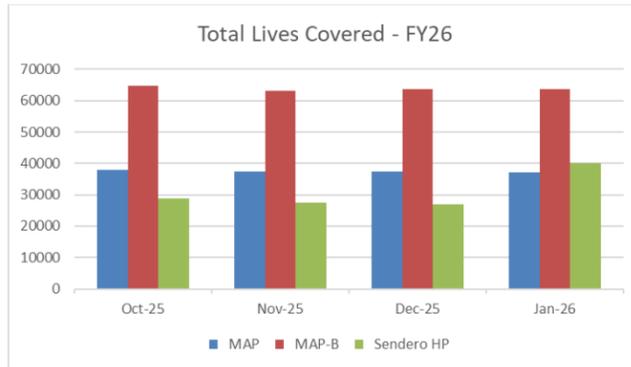
### 5. Finance

#### **Cost Per Encounter**

Average cost of delivering a single visit or service. Used to understand efficiency, set rates, and identify opportunities to streamline care.

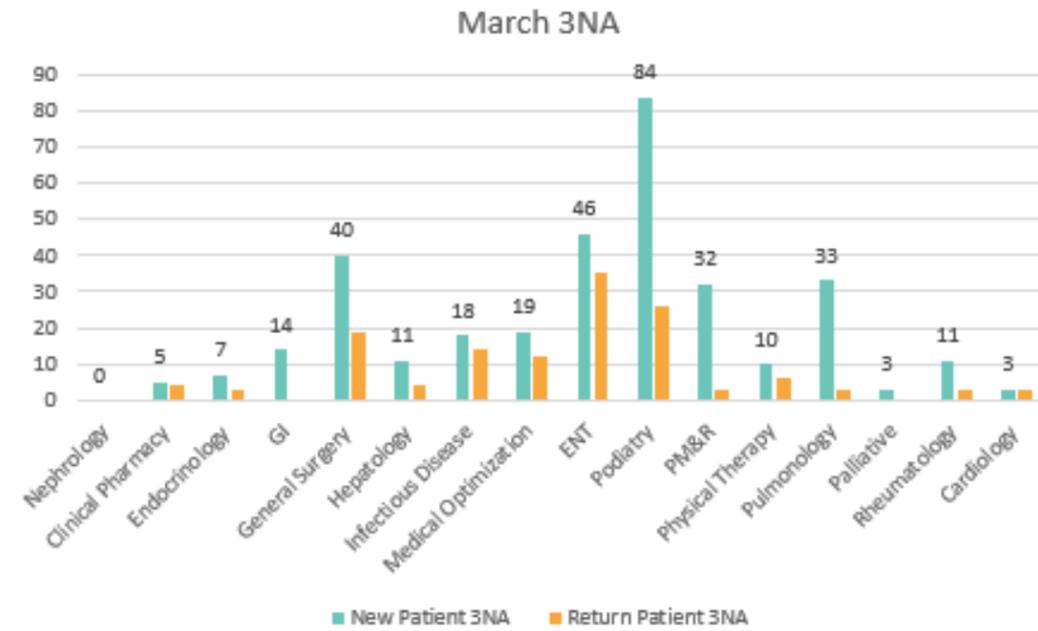
#### **Clinical Costs Per Member Per Month (PMPM)**

Average monthly clinical cost for each covered life. Core measure for value-based care performance, combining utilization, unit cost, and population health impact.



# March 2026- Third Next Available

Specialty	Service Line Go-Live	New Patient 3NA	Return Patient 3NA	ASC 3NA	Waitlist
Nephrology	Feb-2024	0	0	0	0
Clinical Pharmacy	Apr-2024	5	4	0	0
Endocrinology	July-2025	7	3	0	0
GI	Oct-23	14	0	19	140
General Surgery	Jan-2025	40	19	0	0
Hepatology	Feb-2024	11	4	0	0
Infectious Disease	Feb-2025	18	14	0	0
Medical Optimization		19	12	0	0
ENT	Apr-2025	46	35	10	0
Podiatry	Oct-2024	84	26	3	0
PM&R	Sep-2025	32	3	0	0
Physical Therapy	Nov-2025	10	6	0	0
Pulmonology	Oct-2023	33	3	0	0
Palliative	Feb-2024	3	0	0	0
Rheumatology	Jun-2025	11	3	0	0
Cardiology	Sep-2024	3	3	0	0
<b>Total</b>		<b>21</b>	<b>8</b>	<b>2</b>	<b>140</b>





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## **BOARD MEETING**

**March 25, 2026**

## **REGULAR AGENDA ITEM 3**

Receive, discuss, and take appropriate action on proposed driving forces impacting the Fiscal Year 2027 strategic initiatives. (*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 March 25 , 2026

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

General Item Description FY27 Driving Forces

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) Summary of Driving Forces
- 2) FY27 Budget Timeline
- 3) FY27 SWOT Analysis
- 4) Prior Year Driving Forces

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

Estimated time needed for presentation & questions? 30 Min

Is closed session recommended? (Consult with attorneys.) No

Form Prepared By/Date Submitted: Lucas Bustelo 3/18/2026



**CENTRAL HEALTH**  
TRAVIS COUNTY HOSPITAL DISTRICT

# FY2027 Driving Forces

March 25, 2026



# Driving Forces shape resource decisions and guide annual budget planning

## What are Driving Forces?

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Driving Forces are the critical internal and external factors that significantly impact, drive, or alter our work and influence our annual Budget Planning Process.

They help us understand where we need to invest, where risk exist, and where opportunities lie as we build the upcoming fiscal year budget.

## How We Use Driving Forces

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- Guide Resource Allocation
- Identify Areas Requiring Investment or Mitigation
- Align Budget Decisions with Strategic Direction
- Inform Operational Planning Across the System

# Example: Workforce Competition and Retention



Healthcare Workforce shortages and competition for other employers threaten our ability to recruit and retain qualified staff

Requires investment in competitive compensation, retention programs, pipeline development, and partnership strategies

# FY 2027 Annual Planning and Budget Development Timeline

We Are Here



FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER
<b>February 11</b> <i>Strategic Planning</i> <ul style="list-style-type: none"> <li>Present Progress Update on Strategic Plan (HEP)</li> </ul>	<b>March 9</b> <i>Executive Committee</i> <ul style="list-style-type: none"> <li>Discuss Proposed FY27 Driving Forces</li> <li>Present Update on Board Policies</li> </ul>	<b>April 8</b> <i>Strategic Planning</i> <ul style="list-style-type: none"> <li>Discuss Proposed FY27 System OKRs</li> </ul>	<b>Date Pending</b> <i>Travis County Commissioners</i> <ul style="list-style-type: none"> <li>Q3 Update</li> </ul>	<b>June 24</b> <i>Budget and Finance (Budget Session)</i> <ul style="list-style-type: none"> <li>★ Present Financial Forecast</li> </ul>	<b>July 22</b> <i>Budget and Finance (Budget Session)</i> <ul style="list-style-type: none"> <li>★ Present Proposed FY27 Joint Budget with CUC</li> </ul>	<b>August 12</b> <i>Budget and Finance (Budget Session)</i> <ul style="list-style-type: none"> <li>★ Present Proposed FY27 Joint Budget with CUC and Tax Rate</li> </ul>	<b>September 2</b> <i>Board of Managers (Budget Session)</i> <ul style="list-style-type: none"> <li>★ Public Hearing: FY27 Budget and Tax Rate</li> </ul>
<b>February 25</b> <i>Board of Managers</i> <ul style="list-style-type: none"> <li>FY27 Annual Budget Development, Including System OKRs</li> </ul>	<b>March 25</b> <i>Board of Managers</i> <ul style="list-style-type: none"> <li>★ Approve FY27 Driving Forces</li> <li>★ Approve Board Policies</li> </ul>	<b>April 22</b> <i>Board of Managers</i> <ul style="list-style-type: none"> <li>★ Approve FY27 System OKRs</li> </ul>	<b>May 13</b> <i>Strategic Planning</i> <ul style="list-style-type: none"> <li>Discuss Proposed FY27 System KPIs</li> </ul>	<b>June 24</b> <i>Board of Managers (Budget Session)</i> <ul style="list-style-type: none"> <li>★ Discuss Proposed FY27 Strategic Budget Initiatives</li> </ul>		<b>August 26</b> <i>Board of Managers (Budget Session)</i> <ul style="list-style-type: none"> <li>★ Approve FY27 Proposed Tax Rate for Public Notice</li> </ul>	<b>September 9</b> <i>Board of Managers (Budget Session)</i> <ul style="list-style-type: none"> <li>★ Adopt FY27 Budget and Tax Rate</li> </ul>
	<b>March 31</b> <i>Travis County Commissioners</i> <ul style="list-style-type: none"> <li>Q2 Update</li> </ul>		<b>May 27</b> <i>Budget and Finance Committee</i> <ul style="list-style-type: none"> <li>Discuss Proposed Homestead Exemption</li> </ul> <b>Board of Managers</b> <ul style="list-style-type: none"> <li>★ Approve FY27 System KPIs</li> <li>★ Approve Homestead Exemption</li> </ul>	<b>Date Pending</b> <i>Travis County Commissioners</i> <ul style="list-style-type: none"> <li>Approve Homestead Exemption</li> </ul>		<b>Date Pending</b> <i>Travis County Commissioners</i> <ul style="list-style-type: none"> <li>Q4 and Budget Update</li> </ul>	<b>Date Pending</b> <i>Travis County Commissioners</i> <ul style="list-style-type: none"> <li>Approve FY27 Budget &amp; Tax Rate</li> </ul>

Public Involvement: Development of FY 2027 Strategic Initiatives

Budget Alignment with Strategic Initiatives

Public Involvement: FY 2027 Proposed Budget. September 2<sup>nd</sup> Public Hearing

All Other Board Activity (Strategic Plan and System-Level Planning, Including OKRs, Policy Development, Litigation, and Other Activities)

★ Denotes Budget Session, Board discussion, action, approval / adoption

## Central Health Community Conversations

- 3/4 Oak Hill Community Ctr. (PCT. 3)
- 4/16 Asian American Resource Ctr. (PCT. 1)
- 5/14 Montopolis Recreation and Community Ctr. (PCT. 4)
- 6/11 Austin Community College (ACC) Northridge Campus (PCT. 2)
- 7/16 ACC Highland Campus (FY27 CH Budget Townhall with Judge Brown)

## Travis County Commissioners Court

- 3/31 Q2 Update
- Date Pending, Q3 Update
- Date Pending, Approve Homestead Exemption
- Date Pending, Q4 and Budget Update
- Date Pending, Vote and Adopt FY27 Budget and Tax Rate

**Definitions:** OKRs = Objectives and Key Results. KPIs = Key Performance Indicators.

The public is encouraged to provide input on the FY 2027 budget via the website at [CentralHealth.net](http://CentralHealth.net), at Board of Managers and committee meetings, during Community Conversations, and at public hearings.

# FY27 Driving Forces

Foundational factors informing the FY27 budget, master facilities planning, and system transformation efforts.

## ADVANTAGES

### STRENGTHS

1. Initial Board direction and internal alignment (system transformation resolution)
2. Mission-driven workforce + culture of trust & growth
3. Healthy financial position

- FQHC at center, integrated ambulatory care continuum, providing "#1 favorability" primary and specialty services
- Trusted relationships with community, CBOs, partners, Commissioners
- Unified brand demonstrating value to community
- "Promises kept" re Healthcare Equity Plan (33 new services lines established), serving 1 in 6 Travis County residents
- Strong early results in complex care populations (e.g. TOC, homeless, jail/mental health)
- Progress on system unification (OKRs; major areas de-duplicated)
- Footprint that can support future growth, pending master facilities and organizational growth plans
- Uniquely differentiated as a local payer-provider public system
- Emerging Data-Capabilities to support Board-Approved system KPIs

### INTERNAL FACTORS

Includes Organizational Capabilities, Culture, and Current Infrastructure

### OPPORTUNITIES

1. Maturing partnerships in diversion, mental health, SUD, homelessness services
2. Maximizing community value and taxpayer savings through optimal leveraging of state and federal funds
3. Emerging coalition for mental health continuum

- Community supports healthcare as a right
- Integrate planning assessments to align data, capacity, resources and gain efficiencies
- Enhance affordable coverage and access
- Federal funding for high-impact clinical services (e.g. cancer care)
- Proactive positioning in state and federal policy environments
- Bridge remaining gaps in care/learning continuum (e.g., Pedi, GME, OB, cancer care)
- Innovative approaches to care delivery models, potentially using AI
- Strengthen healthcare workforce pipeline through higher ed partnerships (e.g. ACC, UT, St. E's, Huston-Tillotson)
- Connect students at an early age to diverse healthcare career pathways
- Preparedness for public health emergencies
- Maximizing FQHC partnership model
- Clarify and strengthen Central Health's role in Mental Health in Travis County

### EXTERNAL FACTORS

Includes Community Need, Policy, Funding, Workforce, and Market Conditions

## VULNERABILITIES

### WEAKNESSES

1. Organizational growth outpacing system maturity
2. Fragmented data systems, and data reporting dashboards across the system
3. Change management strategies and communication on system transformation

- Lack of Formal Organizational and Workforce Growth Plan
- Absence of Finalized Master Facilities Plan and Updated Enterprise Strategic Plan
- Delineation of Board governance policies vs operational procedures not established
- Benchmarking for infrastructure and support functions
- Capacity strain on internal resources system expansion
- Competing priorities impacts focus, efficiency and effectiveness
- Underleveraging funding sources (e.g. 340B and IGT Programs)
- Misalignment on perceived community needs and timing of planning
- Gaps in clinical services and unmet needs remain (e.g. cancer, post acute, GI, Derm)
- Limited capacity in other clinical areas (e.g. lab, diagnostics)
- Strategic governance alignment across CH system

### THREATS

1. Local, state and federal funding volatility (public/grants/legislature)
2. Workforce competition and retention
3. Funding and capacity impact on mental health continuum

- Local marketplace dynamics
- Taxpayer burden, property cost pressures, healthcare, and food
- Funding for CBOs, pressure to fund activities outside of CH scope and mission
- Health equity and DEI scrutiny
- Medicaid and ACA contractions
- Immigration policies and other state/federal services for safety net-population
- Reduced public support for social services
- Need for clearer communication of value and outcomes to taxpayers

Note: The top three items reflect prioritization, remaining items are not rank ordered

Note: This is the THIRD YEAR using Driving Forces to guide the annual budget process.



# Appendix

# FY26 Driving Forces

**Driving Forces: Significantly impacts, drives, or alters work and influences planning process**

## **Care Continuum and Partnership Opportunities**

- **Align on a Shared Vision and Strategic Priorities with Community, County and City Stakeholders**
- **Enhancing Cancer Continuum of Care**
- **Advance Diverse Community Workforce Development Through Partnerships and Educational Programs**
- **Strengthen Support for Under-Resourced CBOs Addressing Disparities in Communities of Color**

## **Economic, Political, Legislative Uncertainty**

- **Navigate Ongoing Shifts in Local Healthcare Market Landscape**
- **Evaluate Healthcare Hospital District Funding, Financing and Reimbursement Mechanisms**
- **Respond to State/Federal Administration, Policy and Legislative Changes**
- **Impact of Changes to Immigration Policies**

## **System Integration and Resource Optimization**

- **System Alignment Including Resource Efficiency Processes, Strategic Priorities and Budget Planning**
- **Leverage Technology, including Artificial Intelligence (AI) for Care Coordination, Outcomes and Operational Improvements**
- **Strengthen Cyber Security, Data Management and Continuous Monitoring**

## **Workforce Competition and Market Conditions**

- **Increased Competition for Experienced Talent**
- **Affordability of Housing, Transportation and Childcare Services**
- **Healthcare Workforce Shortages Driving Competition**

## **Demographic and Community Infrastructure Changes**

- **Population Movement and Migration Patterns**
- **Increase in homelessness and poverty across demographic groups**
- **Rising Housing Costs and Limited Affordability Options**
- **Increased Pandemic and Climate Change Risks**

# FY25 Board Validated Driving Forces

## Changing Landscape

- Artificial intelligence enhancements and safeguards
- Community focus on addressing homelessness
- UT hospitals construction and announcement
- Shifting demographics impacting access and service planning
- Window of opportunity with new leadership at a number of organizations



## Workforce Competition and Market Conditions

- Need to continue to capitalize on what we learned about working together during the pandemic
- Affordability gap, including housing, childcare and transportation
- Need to innovate, collaborate, and drive towards equity
- Increased competition for talent



## Data Sharing and Exchange Ecosystem

- TX Health and Human Services Commission focus on data strategy
- Health Information Exchange fatigue around challenges



## Regulatory and Funding Policies

- Resizing of Federal Funding Pool and Supplemental Payment Programs (e.g. Uncompensated Care)
- Regulatory Uncertainty





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*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**

**March 25, 2026**

## **REGULAR AGENDA ITEM 4**

Receive and discuss a Central Health System integration progress update. (*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	<u>March 25, 2026</u>
Who will present the agenda item? (Name, Title)	<u>Dr. Pat Lee, President &amp; CEO, Central Health and Dr. Nick Yagoda, CEO, CommUnityCare</u>
General Item Description	<u>Progress Update on System Integration Efforts</u>
Is this an informational or action item?	<u>Informational</u>
Fiscal Impact	<u>None</u>
Recommended Motion (if needed – action item)	<u>None</u>

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

- Dr. Yagoda will present on achievements from the past year, current ongoing work, and future plans to advance system integration
- 1) plans to advance system integration
  - 2) \_\_\_\_\_
  - 3) \_\_\_\_\_
  - 4) \_\_\_\_\_

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

Board memo on system integration progress updates

Estimated time needed for presentation & questions?

15 minutes

Is closed session recommended?

No

Form Prepared By/Date Submitted:

Katie Pastor, 03/13/2026



# CENTRAL HEALTH

## MEMORANDUM

To: Central Health Board of Managers  
From: Dr. Pat Lee, President & CEO of Central Health; Dr. Nick Yagoda, CEO of CommUnityCare;  
Sharon Alvis, CEO of Sendero Health Plans  
Date: March 18, 2026  
Re: System Integration Updates

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Context: Over the past year, Central Health, CommUnityCare, and Sendero Health Plans have made significant progress integrating operations across our system. This work is designed to strengthen coordination between our organizations, reduce administrative duplication, and create a more seamless experience for our patients. This memo provides an overview of the objectives guiding system integration and highlights key milestones achieved this year, along with current focus areas.

### Objectives:

The integration of Central Health, CommUnityCare, and Sendero is guided by several core goals:

- **Reducing duplication and improving efficiency** by aligning teams, processes, platforms, and vendors across our system.
- **Designing solutions collaboratively**, incorporating input from teams across the system to ensure our integration approaches best meet the needs of our organizations and the individuals we serve.
- **Implementing flexible integration models**, which may include shared leadership structures, shared service models, consolidated vendor contracts, shared technology platforms, or matrixed reporting structures across the three organizations.
- **Maintaining workforce stability.** Integration is not intended to eliminate staff positions. While roles and reporting structures may evolve, these efforts often create opportunities for professional development and advancement.
- **Generating efficiencies and savings for taxpayers** while improving the patient experience through a more coordinated system of care.

### Integration Focus Areas – Recent Accomplishments:

#### **Healthcare for the Homeless (February 2026)**

We have established a unified leadership structure for Healthcare for the Homeless services across the Central Health and CommUnityCare clinical environments.

- Dr. Tim Mercer now serves as Director of System Integration for Healthcare for the Homeless, focusing on patient-centered care design across the continuum.
- Dr. Matt Hubley (CommUnityCare) & Megan Ruttiman (Central Health) now serve as integrated clinical leaders overseeing operations of both organizations. Their oversight includes ARCH,



## CENTRAL HEALTH

CareCo, and mobile and street medicine services within CommUnityCare; Bridge clinic, Bridge mobile and M3 services within Central Health; and Permanent Supportive Housing Health Care Collaborative operations at both organizations.

### **Epic Electronic Health Record (EHR) System (February 2026)**

Central Health and CommUnityCare combined our separate Epic teams into a single system-wide team supporting EHR development, analytics, training, and program management across all care environments.

- Heather Hosking, previously Epic Program Director at CommUnityCare, now serves as Senior Director of Epic Operations overseeing system-wide Epic operations.
- Kirsten Escobedo, previously Epic Program Director at Central Health, now serves as Director of the Epic Education and Project Management Office.

Epic leadership reports to Dr. Nick Yagoda as Central Health's EVP of Ambulatory Services, with additional reporting to system clinical and operations leadership.

### **Pharmacy (February 2026)**

Cristie Pelligrini, CommUnityCare's Chief Pharmacy Officer, has assumed the role of SVP of Pharmacy, overseeing clinical pharmacy services, pharmacy benefit managers, and patient assistance programs across the system. She also leads system-wide operational alignment across key initiatives including infusions, central fill pharmacy operations, and pharmacy courier services.

### **Addiction Medicine (February 2026)**

Dr. John Embers was appointed Director of System Integration for Addiction Medicine at Central Health while continuing to practice at CommUnityCare. His role supports the development of addiction medicine services within Central Health, building on services currently provided by CommUnityCare. This includes expansion into post-acute and medical respite settings, specialty clinics, mobile and street medicine teams, and programs serving justice-involved patients.

### **Eligibility & Financial Screening (October 2025)**

CommUnityCare and Central Health integrated our eligibility and financial screening departments into a unified team of more than 100 staff providing enrollment assistance through virtual navigation services; dedicated eligibility offices; and clinic, hospital, and community outreach sites.

This integration supports a more seamless patient experience and operational efficiencies through cross-training staff, consolidating contracting, standardizing procedures, and implementing shared technology. All staff are trained to screen and enroll patients across MAP, MAP Basic, Sliding Fee Scale, and grant-funded services, and assist eligible individuals with Medicaid and CHIP applications. System-wide eligibility services are led by Kit Abney Spelce, VP of Operations at Central Health.

### **Third Party Administrative Services (FY2025)**

Beginning in FY2024, Central Health and Sendero collaborated to bring claims payment services in-house at Sendero and consolidate claims processing onto a single payment adjudication platform after



## CENTRAL HEALTH

several vendor transitions over the past decade. Establishing this capability internally improves our system stability, expands customization and analytics capabilities, and is expected to reduce administrative costs while creating potential opportunities to generate external revenue.

In June 2025, we made Sendero's third-party utilization management vendor available to Central Health to support peer-to-peer medical necessity reviews for MAP specialty care services.

### **Supply Chain (October 2025)**

System-wide supply chain coordination is now overseen by Chad Roberts, Director of Procurement at CommUnityCare. Supply chain teams are now co-located with and aligning their processes with the Central Health infrastructure team, led by Stephanie McDonald, Chief Infrastructure Officer at Central Health. Teams have begun implementing a visual two-bin inventory control process across Central Health sites, with plans to expand to CommUnityCare locations.

### **Analytics & Data Engineering (October 2025)**

Central Health's data analytics team was integrated into the Joint Technology team, overseen by John Clark, SVP & Chief Information Officer at Central Health, during the first quarter of FY2026. Led by Sarita Clark-Leach, VP of Data Insights and Innovation, this integrated team aligns data engineering, analytics, and external partner data to strengthen system-wide data coordination and insights.

### **System Guiding Team & Executive Leadership Team (Fall 2025)**

Executive leaders from Central Health, CommUnityCare, and Sendero have begun meeting twice weekly to strengthen coordination across the system and support long-term strategic planning. One meeting focuses on aligning leadership around shared strategic priorities, including the development of systemwide Objectives and Key Results; whereas the second convenes executive leaders to share key departmental updates and improve information flow across the three organizations.

### Current Integration Focus Areas:

#### **Provider Credentialing (Ongoing)**

Teams are exploring opportunities to align credentialing processes across the three organizations while maintaining each entity's independent credentialing authority.

Sendero implemented **HealthStream credentialing software** in FY2025, which can support credentialing functions across all three entities and reduce duplicative documentation requirements.

#### **Ambulatory Specialty Care (Ongoing)**

Central Health and CommUnityCare staff are working to better align specialty care delivery across clinical environments. Dr. Meera Subash, previously Central Health's Director of Specialty Care, now serves as Director of Medical Specialty Care, overseeing specialty care service lines across both systems and leading efforts to strengthen access to specialty services. Dr. Subash will report into clinical leadership for Central Health and CommUnityCare for their respective service lines.

#### **Process Improvement (Ongoing)**



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Since November 2025, our Process Improvement and Quality Improvement teams across the system are working to align their processes and tools for staff education.

### **Transportation Solutions (Ongoing)**

Central Health and Sendero are working to align ride share scheduling platforms used for patient transportation. Sendero's navigation center already uses the new platform, and Central Health is updating its contracts in preparation for transitioning to the same system.

### **Revenue Cycle (Ongoing)**

Joy Sloan now serves as SVP of Finance for Central Health and Chief Financial Officer for CommUnityCare, overseeing and standardizing revenue cycle operations across both organizations.

Kuntal Sindha, Director of Revenue Cycle at Central Health, continues supporting revenue cycle integration while shifting her long-term focus to system-wide artificial intelligence governance.

### **Integrated Technology (Ongoing)**

Our Joint Technology team is implementing several system-wide platform alignments, including transitioning messaging from RingCentral to Microsoft Teams; deploying a Cisco unified communications platform for navigation centers and staff; and aligning project management functions around ServiceNow across the system.

### **Language Access (Ongoing)**

Sendero joined Central Health's language interpretation services agreement in FY2025. Navigation center teams are now working to align with CommUnityCare so all system organizations utilize one single vendor. Teams are also evaluating opportunities to use AI-enabled interpretation technologies to improve responsiveness and service quality for our patients.

### **Facilities Management (Ongoing)**

CommUnityCare and Central Health integrated both organizations' facilities teams under the direction of Chris Scheffel, Director of Facilities Management at Central Health, starting at the beginning of Fiscal Year 2026. This single team continues to create a unified streamlined process including consistent service delivery, work order system integration, building compliance and regulatory reporting, while maintaining Joint Commission standards in CommUnityCare clinical environments.

### **Fleet Management (Ongoing)**

Central Health has developed a fleet program with over 25 vehicles as part of the Support Operations function. This work has created a fleet policy, established a fleet coordinator position, standardized maintenance, insurance, driver record checks at hire and at regular intervals, in addition to requisition of several new vehicles for Facilities, Bridge and Street Medicine teams, and a Patient Transport program targeted at patients in Skilled Nursing Facilities and in our Medical Respite program.

### *Additional Integration Areas Under Development in FY2026:*

Integration work planned for the second half of FY2026 includes:

- Hancock Operations & Administration



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- Case Management & Community Health Worker Services
- System Data Sharing Infrastructure
- External Affairs
- Marketing & Communications



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## **BOARD MEETING**

**March 25, 2026**

## **REGULAR AGENDA ITEM 5**

Review, discuss and take appropriate action on the compliance plan as recommended by the Chief Compliance Officer. (*Action Item*)



# COMPLIANCE PLAN

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## THE COMPLIANCE PLAN OF CENTRAL HEALTH

### I. COMPLIANCE PLAN OVERVIEW

This document sets forth the Compliance Plan of Central Health. The purpose of this Compliance Plan is to define Central Health's policy and commitment to conducting its operations in accordance with applicable federal, state, and local regulatory requirements, as well as to uphold the highest standards of legal and ethical conduct. The Compliance Plan supports the detection, prevention, and correction of potential violations of law, regulation, or internal standards, and fosters a culture of compliance and accountability throughout Central Health.

Central Health is subject to legal, regulatory, and ethical requirements and considerations. It is the policy of Central Health that all its business and other practices be conducted at all times in compliance with all applicable laws and regulations of the United States, the State of Texas, all other applicable laws and ordinances, and the ethical standards/practices of the industry. In alignment with guidance from the U.S. Department of Health and Human Services Office of Inspector General (OIG), Central Health adopted a Compliance Plan that incorporates the OIG's Seven Elements of an effective Compliance Program. The seven core elements include: (1) compliance oversight, including the designation of a compliance officer and compliance committee; (2) implementing written policies and standards of conduct; (3) conducting effective training and education; (4) developing effective lines of communication; (5) conducting internal monitoring and auditing; (6) publicizing disciplinary guidelines, and (7) responding promptly to detected offenses and undertaking corrective action (***Policy Reference - Compliance Program (CMP-001P) Policy***).

This document serves as a guide to help implement a policy of compliance with all applicable standards. The Compliance Plan's focus is on promoting a culture of compliance including detecting, correcting, and preventing non-compliance, fraud, waste, and abuse, and Code of Conduct violations, and incorporating principles of continuous quality improvement into our methods.

Central Health is committed to conducting its business ethically and maintaining and promoting a system wide culture that emphasizes integrity; individual and institutional acceptance of responsibility; effective self-policing; and transparency in the relationships between Central Health and its key stakeholders, including government officials and agencies.

The Compliance Plan governs all activities conducted by Central Health. As the Hospital District for Travis County, Central Health is responsible for providing medical and hospital services to eligible people in Travis County including delivering direct healthcare services, working through our affiliates CommUnityCare and Sendero Health Plans and through administering the Medical Assistance Program (MAP) and MAP Basic programs. The Compliance Plan is holistically applicable across all departments, functions, and service lines of Central Health. To ensure effective oversight, annual Compliance Work Plans are developed based on identified risk areas and outline targeted auditing and monitoring strategies tailored to specific operational and programmatic needs.

The Board of Managers will approve the Compliance Plan. By adopting this Compliance Plan, Central Health seeks to promote a working environment that fosters and expands these standards. All team members, contractors, and agents of Central Health are expected to comply with all laws and regulations, report non-compliance, cooperate in compliance investigations and implement corrective actions in accordance with the highest standards of ethical and professional conduct.

Central Health embraces the benefits associated with the implementation of this Compliance Plan to promote the following goals:

- Improve quality of health care services;
- Reduce the overall cost of health care services;
- Enhance health care operations;
- Demonstrate Central Health's commitment to honest and responsible corporate conduct;
- Prevent fraud, waste and abuse;
- Increase the likelihood of preventing, identifying, and correcting unlawful and unethical behavior at an early stage;
- Encourage employees to report potential problems to allow for appropriate internal inquiry and corrective actions; and
- Through early detection and reporting, minimize financial loss to Central Health.

## **II. APPLICATION**

### **A. Mission and Guiding Principle**

The mission of Central Health is "by caring for those who need it most, Central Health improves the health of our community." Central Health, Travis County's hospital district, is building a comprehensive, high-functioning healthcare system for residents with low incomes who need it most.

### **B. Code of Conduct**

Central Health maintains and annually updates a written Code of Conduct that articulates its commitment to ethical behavior. The Code of Conduct is a key element of the Compliance Program and details the fundamental principles, values, and framework that guide everyday practice ([EXHIBIT E Code of Conduct and Ethics for Employees and Code of Conduct and Ethics for Board of Managers](#)).

**Commented [NS1]:** Per EC; added reference to Code of Conduct and inserted in Exhibit E.

The Code of Conduct establishes the ethical standards team members must uphold in critical areas and aspects of Central Health's operations. The Code of Conduct explains our commitment to ethical standards and sets expectations for all employees in achieving and maintaining these standards.

The Code of Conduct applies to all business operations and all team members of Central Health. Representatives that are not directly employed by, but represent Central Health, such as contractors, consultants, and students, are directed to conduct themselves in a manner consistent with this Code of Conduct when they are acting on behalf of Central Health.

Central Health team members are trained on the Code of Conduct within 45 days of hire and, at a minimum, annually thereafter. Training includes a review of the Code of Conduct and the Compliance Plan. At the conclusion of training, team members are required to attest that they read and understand the Code of Conduct, agree to abide by its principles, and to report any suspected or possible violations.

Compliance with the Code of Conduct and all applicable policies and procedures is a condition of employment and an element in evaluating the performance of all team members, contractors, consultants, and students (***Policy Reference - Standards of Conduct (HR2-008P) Policy***). Due to the nature of Central Health's business, and responsibility for the appropriate use of taxpayer funds, conduct relating to billing, reimbursement, referrals, and the provision of health care services is of particular importance.

The following examples are brief descriptions of **prohibited conduct**:

- No Central Health team member or contractor shall knowingly submit any claims based on the provision of a health care provider's services when the person providing the service is not properly licensed.
- No Central Health team member or contractor shall submit any claims for services that the individual has reason to believe were not medically necessary, not properly documented or not payable by the program or payor to which the claim is submitted.
- No Central Health team member or contractor shall pay or offer to pay for referrals of items or services.
- No Central Health team member or contractor shall receive or solicit any payment for referrals of items or services.

- No Central Health team member or contractor shall knowingly make any false statement on behalf of Central Health in any claim or application for benefits for a patient.
- No Central Health team member shall retain funds from any governmental agency or other payor on behalf of Central Health, which the employee believes were not properly due to Central Health.

In addition to the above, the Central Health policy relating to health care fraud, waste, and abuse and related issues may be found in Central Health's online policy manager (***Policy Reference - Compliance with Fraud, Waste, and Abuse Laws and Regulations (FWA - 001P) Policy***).

### **C. Specific Laws and Regulations**

Central Health's team members, physicians, officers, directors, and contractors shall act with the highest level of integrity in all Central Health activities and comply with applicable laws and standards. Such representatives are expected to learn about, understand and follow Central Health's policies and Federal and State laws and regulations that govern their activities.

Central Health's team members, physicians, officers, directors and contractors are not expected to have expert knowledge of all legal and regulatory requirements that may apply to their responsibilities. However, it is expected that the Central Health Board of Managers and team members will be sensitive to legal and ethical issues, and the goal of this Compliance Plan is to give them the foundation to know enough to ask questions if they are uncertain about any given situation and the method of seeking advice.

Team members are expected to consult the Chief Compliance Officer (CCO) regarding potential compliance issues and the applicability of legal and regulatory requirements.

### **D. Distribution of the Compliance Plan and Compliance Requirements**

Central Health will provide a copy of this Compliance Plan to all Board Members, team members, and independent contractors to inform them of Central Health's policy and their obligations for complying with the Compliance Plan. The term "contractor" means an individual who works within the Central Health's environment or who is contracted to provide clinical, billing, or administrative services for Central Health.

As part of the new team member onboarding process, all new Central Health employees will receive information for reporting compliance concerns.

### **E. Adherence to the Compliance Plan and Compliance Requirements**

Central Health is committed to compliance with the law. Compliance with the law is desirable for its own sake to fulfill Central Health's role as a special purpose taxing district that upholds the highest standards and meets our obligations laid out in the Constitution

and laws and regulations of Texas and the people of Travis County. Compliance is also important to avoid legal penalties, imprisonment of individuals, fines and/or exclusion of both individuals and Central Health from participation in government health care programs. *Any person who violates these laws will be subject to disciplinary action, up to and including immediate termination of their employment or affiliation with Central Health.*

### III. RESPONSIBILITIES AND OVERSIGHT

#### A. Board of Managers Oversight

The Board of Managers is responsible for oversight of Central Health's Compliance Program to ensure that the organization conducts its operations in compliance with applicable federal, state, and local laws and regulations, and in accordance with the highest standards of ethical conduct.

The Board fulfills its oversight responsibilities through approval of the Compliance Plan; review of Compliance Program effectiveness; and receipt of regular compliance reporting regarding identified risks, investigations, corrective actions, and program performance. The Board's role is one of oversight and accountability and does not include day-to-day management or operational execution of compliance activities.

The Board of Managers has appointed a CCO to design, implement, and oversee Central Health's Compliance Program. The CCO serves as the Board's primary resource and advisor on compliance, ethics, and regulatory risk matters. The authority, responsibilities, reporting relationships, and independence of the CCO are set forth in Section B of this Compliance Plan.

Consistent with the District's Bylaws and Board approved policies, the CCO maintains direct, regular, and unrestricted access to the Board of Managers. The CCO will may report regularly and directly to the Board in accordance with the Compliance Governance and Reporting structure outlined in Section III.D of this Compliance Plan.

By resolution, the Board of Managers empowers the CCO to carry out the responsibilities described in this Compliance Plan and to support the Board in fulfilling its compliance oversight obligations. The Board Resolution Regarding the Compliance Program is attached as Exhibit A.

The Board of Managers has a duty to oversee Central Health's compliance with laws and regulations and has therefore resolved to empower the CCO to address compliance issues

**Commented [NS2]:** Per Executive Committee request add the oversight responsibilities of the Board in this section.

**Commented [NS3]:** Per Executive Committee request add CCO access to the Board.

**Commented [NS3R2]:** Per EC feedback updated language and added "will" removed "may, Referenced the reporting section D.

~~and implement this Compliance Plan. The Board Resolution Regarding the Compliance Program is attached as **Exhibit A**.~~

~~The Chief Compliance Officer maintains direct, regular, and open access to the Board and gives periodic reports to the Board regarding compliance activities.~~

### **B. Chief Compliance Officer**

This Compliance Plan shall be implemented under the guidance and supervision of Central Health's CCO.

It is the duty of the CCO to oversee the implementation of this Compliance Plan; measure and assess its effectiveness; assure that team members and contractors are notified of compliance standards; coordinate education and training of employees; ensure a method for reporting issues of noncompliance; review and respond to reports of compliance issues; coordinate internal investigations; and report, as applicable and consistent with the approved compliance reporting policy, to the Board on the status Central Health's compliance efforts.

The CCO reports to the President and Chief Executive Officer to ensure access to executive leadership and effective integration of the Compliance Program across the organization.

The CCO is a member of the Executive Leadership Team, which supports direct engagement with senior leadership and integration of compliance oversight across Central Health.

This reporting relationship does not limit the CCO's independence or authority. The CCO maintains direct and unrestricted access to the Board of Managers. The CCO will report to the Board in accordance with the Compliance Governance and Reporting structure outlined in Section III.D of this Compliance Plan.

**Commented [NS4]:** Per EC, Added "will" and removed "may" updated redundant language and referenced governance reporting section.

The CCO shall carry out duties independently of operational management and without interference, delay, or retaliation.

All questions and concerns regarding compliance with the standards set forth in this Compliance Plan shall be directed to the CCO. All Board Members and Central Health team members must cooperate fully and assist the CCO as required in the exercise of their duties. If a Board Member or team member is uncertain whether specified conduct is prohibited, they must contact the CCO for guidance prior to engaging in such conduct.

### **C. Responsibilities**

The President and CEO, and Board of Managers are responsible for:

- i. Exemplifying a culture of compliance and ethics throughout Central Health.
- ii. Setting the expectation for compliance and ethics as a core responsibility for all team members.

- iii. Ensuring that the CCO and Compliance Department have sufficient staffing, resources, and financial support to perform their responsibilities.
- iv. Consulting with the CCO on compliance matters and supporting the effective operation of a robust and dynamic Compliance Program.
- v. Coordinating with the CCO and Compliance Department to periodically evaluate the Compliance Program to ensure that it (i) functions as intended, (ii) serves the purposes for which it has been designed, and (iii) enables Central Health to meet its high standards and commitment to compliance and ethics.
- vi. Promoting and maintaining a work environment where concerns can be raised, openly discussed, and reported without fear of retaliation, and
- vii. Complying with all the requirements set forth in the Compliance Plan and Compliance policies and procedures as organizational leaders.

The Compliance Officer is responsible for:

- i. Designing, implementing, and overseeing an effective Compliance Program that meets the expectations set forth in United States Sentencing Guidelines and Office of Inspector General's Compliance Program Guidance.
- ii. Staffing and leading a Compliance Department responsible for ensuring performance of the Compliance Program components described herein.
- iii. Keeping informed of developments and trends in healthcare compliance and using such information to enhance the Compliance Program.
- iv. Keeping the CEO, the members of the Central Health Compliance Committee and the Board regularly informed of Compliance Program developments, as well as industry best practices and government enforcement actions related to the Compliance Program; and
- v. Periodically assessing the effectiveness of the Compliance Program to determine that it (i) functions as intended; (ii) serves the purposes for which it has been designed; (iii) is reflective of current laws, developments, and industry best practices; and (iv) enables Central Health to meet its high standards and commitment to compliance.

Team members are responsible for:

- i. Acting in compliance with the performance of their duties and in their conduct.
- ii. Supporting the Compliance Program (leaders have a heightened responsibility to do so).
- iii. Reading, understanding, and complying with the Code of Conduct and all other compliance and privacy policies and procedures.
- iv. Completing all required compliance and ethics training in a timely manner.
- v. Reporting potential compliance issues to their leader, another member of the management team, the People Department, the CCO, or the Compliance and Ethics Hotline; and
- vi. Cooperating with the Compliance Department in the performance of compliance investigations and auditing and monitoring activities.

Leaders have additional responsibilities to:

- i. Demonstrate and emphasize the importance of compliance and ethics.
- ii. Model behaviors in support of compliance and ethics.
- iii. Assess compliance and ethics as part of performance measurement for all team members.
- iv. Maintain an environment where individuals can comfortably ask questions or raise compliance concerns without fear of retaliation.
- v. Provide appropriate and timely responses to questions or concerns, in consultation with the Compliance Department, as needed.
- vi. Maintain communication with the Compliance Department about potential compliance and ethics concerns.
- vii. Shall set an example of a strong commitment to compliance; and
- viii. Shall encourage open communication among team members concerning compliance matters.

#### D. **Compliance Governance, and Reporting**

Central Health has appointed a CCO ~~who is~~ responsible for overseeing and monitoring the Compliance Program. The ~~CCO reports directly to the~~ ~~has a direct reporting relationship to~~ the Chief Executive Officer and maintains direct, ~~independent and~~ unrestricted access to the Board of Managers. The ~~CCO will~~ ~~may~~ report directly to the Board of Managers on ~~a regular basis and as needed regarding~~ significant compliance risks, regulatory matters, ~~and~~ ~~or~~ issues involving senior leadership, ~~as warranted.~~

The CCO is a member of the Central Health Executive Leadership Team and maintains direct line of communication with Compliance Leadership for CommUnityCare and Sendero Health Plans, and the Central Health Chief Legal Officer. This enables the CCO to learn and know about areas of needed collaboration, best practices and current fraud trends from across the country. The CCO regularly informs the Chief Executive Officer, the Compliance Committee, the Executive Committee of the Board, and the Board of Managers of material compliance risks, program updates, investigations, or issues requiring governance attention.

The CCO has the authority to access information and records relevant to compliance oversight, including, but not limited to policies, contracts, billing and claims data, documentation, workforce records, and records related to arrangements with vendors, contractors, suppliers, agents, and physicians, consistent with applicable law. The CCO is authorized to review contracts and financial arrangements that may implicate referral, payment, or inducement risks and to seek the advice of legal counsel where appropriate.

#### E. Compliance Committee

Central Health maintains a Compliance Committee composed of executive-level leadership, including the President and Chief Executive Officer. The CCO serves as Chair of

the Compliance Committee. A formal Compliance Committee Charter outlining the Committee's purpose, authority, and responsibilities is submitted to the Board of Managers for approval. The Compliance Committee documents its decisions and action items and ensures timely follow-up on recommendations to support the effectiveness of the Compliance Program. The Compliance Committee reports to the Chief Executive Officer and provides regular compliance reporting to the Executive Committee of the Board, consistent with the Board's bylaws. The Executive Committee reviews compliance activities, compliance program documentation, and matters requiring escalation and makes recommendations to the Board of Managers, as appropriate.

The Compliance Plan and Compliance Work Plan are reviewed and updated at least annually by the Compliance Committee and presented to the Executive Committee and Board of Managers, as appropriate. The Compliance Committee receives regular reporting on progress against the Compliance Work Plan.

#### **Compliance Committee Responsibilities**

The Compliance Committee's functions related to the Compliance Plan include:

- i. Analyzing Central Health's legal, regulatory, and contractual compliance requirements and evaluating associated risk areas
- ii. Assessing existing policies and procedures addressing identified risk areas for alignment with the Compliance Plan
- iii. Recommending and overseeing, in coordination with department leadership, the effectiveness of internal controls, auditing, and monitoring activities designed to support compliance with applicable standards, policies, and procedures
- iv. Determining strategies to promote adherence to the Compliance Plan and to support the detection and reporting of potential violations
- v. Defining and reviewing compliance performance metrics, including issues reviewed, audit follow-up completion, training compliance rates, and reporting activity
- vi. Addressing other functions where compliance impacts operating structure and daily routine of Central Health's delivery of services.
- vii. Establishing sub-committees, as appropriate to support the effective implementation of the Compliance Program..

The Compliance Committee shall meet on a quarterly basis. All Compliance Committee discussions, findings, decisions, etc. shall be documented via the formal minutes taken at each Compliance Committee meeting.

#### **IV. COMPLIANCE REQUIREMENTS**

##### **A. Risk Assessment, Auditing, and Monitoring**

Central Health maintains an organization-wide, risk-based compliance program designed to prevent, detect, and correct noncompliance across all operational and service areas. A formal compliance risk assessment is conducted to identify and prioritize compliance risks

and to inform the development of the annual Compliance Work Plan, auditing, and monitoring activities. The compliance risk assessment includes:

- Identification of key compliance risk areas including but not limited to billing, coding, environment of care, privacy and security, and referral arrangements.
- Integration of input from leadership employees, and prior audit and monitoring results, regulatory guidance, and enforcement trends.
- Documentation of risk prioritization decisions mitigation plans, and corrective action plans.
- Reporting of Risk Assessment findings and mitigation strategies to the Compliance Committee, Executive Committee and the Board of Managers, as appropriate.

Work Plans will be developed for operational and service areas based on risk and will differentiate the monitoring and auditing efforts, respectively.

Annually thereafter, a compliance risk assessment will be completed to evaluate the ongoing compliance-related risks that have the potential for legal, financial, and/or operational implications and appropriate mitigation strategies will be implemented as warranted.

Auditing and monitoring activities will be calibrated based on the results of the annual compliance risk assessment, previous auditing and monitoring activities, and compliance investigations. Auditing may be conducted by Central Health team members or by third party contractors. When activities are conducted outside of the Compliance Department, Compliance maintains oversight responsibility to ensure independence, consistency, and appropriate escalation of findings.

The CCO and the Compliance Department will oversee the compliance audits of various business areas within Central Health in a manner consistent with applicable audit standards. Audits may be conducted by Central Health team members or through contracted third parties. As examples, these audits may be used to determine whether:

- i. The policies and procedures mentioned in this Compliance Plan are current and complete.
- ii. Bills are accurately coded and accurately reflect the services provided (as documented in the medical record).
- iii. Documentation is being completed correctly and timely (***Documentation in the Medical Health Record SOP HCD-ADM-002SOP***).
- iv. Services or items provided are reasonable and necessary.
- v. Any incentives for unnecessary services exist.
- vi. Privacy and security standards are being met.

As vendors and third parties can pose significant compliance risks to Central Health, Central Health will implement a comprehensive oversight program that aligns with best practices and guidance from the Office of Inspector General Compliance Program Guidance

(GCPG). Central Health will enhance its oversight of external parties by implementing structured onboarding and compliance training requirements, requiring documented attestations of policy adherence, and expanding screening procedures beyond basic exclusion checks. Additionally, high-risk vendors—particularly those involved in billing, referrals, or access to protected health information—should be subject to ongoing monitoring and performance audits. Contracts should include clear compliance obligations, audit rights, and provisions for corrective actions. These enhancements will strengthen accountability, mitigate regulatory risk, and reinforce Central Health’s commitment to ethical and lawful business practices.

Results of compliance audits and monitoring activities are reviewed by the Compliance Committee and escalated to the Executive Committee and the Board of Managers when findings present material risk, require governance action, or involve senior leadership.

## **B. Reporting**

Central Health maintains open and effective lines of communication to encourage the reporting of potential compliance concerns. All team members shall promptly report any information regarding noncompliance with or any other known or suspected violation of applicable laws, regulations, ethical standards or Central Health policy. Failure to report a known compliance issue is a violation of Central Health policy and will subject a team member to disciplinary action, including termination.

Reporting issues of noncompliance may be accomplished in a variety of ways. The team member may report the incident directly to the CCO either verbally or in writing. If reporting through the Compliance and Ethics Hotline, the team member may choose to identify themselves or to remain anonymous. The CCO will strive to shield the identity of reporting individuals wanting to remain anonymous. However, it is recognized that there may be situations in which the investigation may lead to the disclosure of the reporter’s identity. Anonymity is not guaranteed.

Team members may also utilize the following mechanisms to report compliance issues in accordance with Central Health policies:

- Compliance Department’s email at [CHCompliance@centralhealth.net](mailto:CHCompliance@centralhealth.net)
- Hotline Website: [www.lighthouse-services.com/centralhealth](http://www.lighthouse-services.com/centralhealth)
- Toll-Free Telephone: (833) 770-0080 (English)
- Toll-Free Telephone: (800) 216-1288 (Spanish)
- Email to Hotline Vendor: [reports@lighthouse-services.com](mailto:reports@lighthouse-services.com) (must reference Central Health with the report)
- Fax: (215) 689-3885 (must reference Central Health with the report)

No team member who reports a compliance issue in good faith will be subject to disciplinary action or punished in any way for making a report. However, submission of a report by a

team member that the team member knows is false or misleading will subject the team member to disciplinary action, including termination.

An individual whose report of misconduct contains admissions of personal wrongdoing will not be guaranteed protection from disciplinary action simply because they made the report. In determining what disciplinary action may be taken against a reporting individual, Central Health may consider an individual's own admissions of wrongdoing, provided, however, that their involvement was not previously known to Central Health, its discovery was not imminent, and the admission was complete and truthful. The weight to be given the self-reporting will depend on all the facts known at the time Central Health makes its disciplinary decision (***Policy Reference - Reporting and Non-Retaliation (CMP-006P) Policy***).

### **C. Incident / Noncompliance Investigation**

Upon receipt of a report, other information suggesting a possible compliance issue or finding from audit results, the CCO will conduct a brief review of the issue to determine if the report constitutes a potential compliance violation. If it is determined that the report constitutes a potential or actual violation, the CCO will make a record of the information and confer with the Chief Legal Officer. The CCO, along with the Chief Legal Officer and/or outside hired legal counsel, may decide who should conduct the investigation: the CCO alone or with the assistance of other team members, legal counsel, or an outside expert retained by legal counsel. Investigations will commence as soon as reasonably possible following the receipt of information suggesting a possible compliance issue. Investigation activities may include, but are not limited to, the following:

- Interviews of the complainant and others.
- A review of relevant documents.
- A review of applicable laws/regulations.

Team members are expected to cooperate fully with any investigation conducted in response to a report concerning compliance issues.

### **D. Corrective Action**

If, upon conclusion of an investigation, it appears there is a substantiated compliance concern, the CCO shall ensure a corrective action plan is formulated and implemented. The CCO may obtain the advice and guidance of legal counsel, and others as appropriate in ensuring a corrective action plan is formulated and implemented. The corrective action plan will be designed to ensure the specific issue is addressed and, to the extent possible, similar problems do not occur in other departments or areas. Examples of corrective actions include but are not limited to: 1) adopting new policies and procedures to prevent recurrence of the problem, 2) imposing restrictions on duties certain individuals are allowed to perform, 3) specific education and training for the team member, 4) education and training for all team members, 5) discipline of the employee, and/or 6) disclosure to appropriate oversight authorities.

If the investigation reveals possible non-compliant conduct, Central Health shall proceed as follows:

- If the problem relates to billing, cease any questioned billing until the problem is corrected or clarified.
- Initiate appropriate disciplinary action if needed in accordance with the Corrective Discipline Policy.
- If determined necessary after consultation with the Chief Legal Officer, notify appropriate State or Federal officials.
- Repay improper payments received and provide education on appropriate billing procedure. The CCO, the CEO, and the Chief Legal Officer, as necessary, shall determine at what level any necessary repayment will be made, and whether any particular disclosures should be made.

Due to the importance of monitoring efforts, any issue for which a corrective action plan is implemented may be targeted for future monitoring. These issues shall be tracked by the CCO. All pertinent information learned during investigations will be incorporated into Board Members and Central Health team members' education and training to prevent recurrence of the non-compliant activity.

On a periodic basis, the CCO will report to the Compliance Committee any investigation undertaken and the results of that investigation. The Compliance Committee may report this information to the Central Health Board of Managers as determined by the Chair of the Compliance Committee, the CCO (***Policy Reference - Compliance Investigations (CMP-008P) Policy***).

#### **E. Enforcement and Discipline**

A team member's commitment to compliance and ethical conduct may be noted for purposes of the team member's performance evaluation.

Disciplinary action against any team member involved in dishonest conduct, including, but not limited to, suspension or termination, may be taken under any of the following circumstances (these circumstances do not constitute an exhaustive list):

- If the team member authorizes or participates in any action which constitutes a violation of applicable laws, regulations, or ethical standards/policies of Central Health
- If the team member fails to promptly report a known or suspected violation of applicable laws, regulations, or ethical standards/policies of Central Health, or if the team member withholds information from the CCO concerning a violation about which they are aware.
- If the team member attempts to retaliate or participate in retaliation against a team member who reports a compliance issue in good faith.
- If the team member makes a report of a compliance issue which the team member knows to be false or misleading, or

- If the team member interferes or fails to cooperate fully with Central Health's efforts to investigate or address any compliance report.

Central Health intends to be consistent in its enforcement of compliance; however, Central Health reserves the right to exercise discretion in penalizing those who violate these standards including team members, contractors and vendors. Disciplinary actions may extend to individuals responsible for the failure to prevent, detect, or report an offense.

All disciplinary actions will be consistent with Central Health's applicable policies and procedures. All disciplinary actions and all documentation will be sent to the People Department for proper filing. Department leaders are expected to keep the appropriate copy of the disciplinary actions for their records in a secure location (***Policy Reference - Standards of Conduct (HR2-008P) Policy***).

## **V. TRAINING, AWARENESS AND COMPETENCE**

Within three (3) months after the Compliance Plan is adopted by Central Health, all Central Health team members shall be required to acknowledge the Compliance Plan within the Central Health Learning Management System and must attend an introductory training session regarding the contents of this Compliance Plan. Some team members may receive additional specialized training appropriate to the areas in which they work, such as claims development and billing practices and procedures training. New Central Health team members will be educated regarding the contents of the Compliance Plan during their onboarding.

At the time a team member is educated about the Compliance Plan, the team member must sign the acknowledgment attached to this Compliance Plan as ***Exhibit B*** and saved within the team member's Learning Management System profile. Reading this Compliance Plan and signing the acknowledgment will be a condition to employment with Central Health.

### **A. New Employee and Annual Trainings**

All new Central Health team members are required to complete the new team member Compliance training within 45 days of employment and then again annually during the designated annual training (***Policy Reference - Orientation, Annual Training, & Department Onboarding Policy HR2-007P***).

### **B. Periodic Training**

All Central Health team members are required to receive periodic training on the Central Health's Compliance Plan and pertinent policies and topics.

### **C. Specialized Training**

Specific Central Health team members may receive specialized training because of the areas in which they work. This specialized training may focus on complex or high-risk

operational areas. As new developments or concerns arise, the CCO may require additional training sessions for some or all Central Health team members. Such training shall utilize in-house subject-matter experts whenever possible. However, if deemed necessary, the services of outside experts may be enlisted to conduct specialized or highly technical training.

The CCO or a designee will also be available to create and deliver location and department specific compliance, contractual and plan integrity training.

The CCO or a designee will ensure there is a record of attendance at each session or documentation of completion of each course is retained.

## VI. POLICY AND PROCEDURES

Central Health maintains policies and procedures that reflect its commitment to compliance and effectively address applicable legal, regulatory, and ethical obligations. These policies and procedures account for specific areas of compliance and ethics risks relevant to healthcare organizations.

These policies and procedures ensure that officers, directors, and team members understand what is required to maintain high standards of ethical conduct in business and operational practices. Policies and procedures are reviewed at least annually, and more frequently as needed based on regulatory changes, operational risk, or identified compliance issues, and are made accessible to employees to guide operational processes and compliance related activities.

Policies supporting the Compliance Program address, at a minimum, the following areas:

- Compliance Program governance and oversight
- Reporting mechanisms and non-retaliation
- Fraud, waste, and abuse prevention
- Privacy and security of protected health information
- Compliance training and education
- Conflict of interest
- Audit, monitoring, and corrective action
- Anonymous compliance reporting

A current inventory of Compliance Program policies is maintained by the Compliance Office and is included as **Exhibit D** Compliance Policy Inventory to this Plan.

**Commented [N55]:** Per Executive Committee feedback update and add a list of compliance policies. Updated section and added Appendix D with current Compliance policy inventory.

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## VII. ACCOUNTABILITY, RESPONSIBILITY, AND SCREENING PROGRAM

Central Health will not contract with, employ, or bill for services rendered by an individual or entity that (A) is or has been sanctioned, excluded or ineligible to participate in state or Federal government health care programs; (B) is suspended or debarred from state or

Federal government health care contracts; or (C) has been convicted of a criminal offense related to the provision of health care items or services.

Central Health shall have appropriate procedures in place to ensure it does not employ or utilize Board Members, Central Health team members, agents, vendors or contractors whom the organization knew, or should have known, to have engaged in illegal activities or other conduct inconsistent with the Compliance Plan.

## **VIII. PLAN MODIFICATION**

The Compliance Plan is the foundation for a dynamic program that provides a flexible framework for adapting to the changing healthcare environment in which Central Health operates within. It is reviewed at least annually by the CCO, and the Central Health Compliance Committee to ensure that it functions as intended, serves the purpose for which it has been designed, and enables Central Health to meet its high standards and commitment to compliance.

Maintaining organizational compliance is something that is not done once, nor is the effort complete once the program has been implemented. Central Health's leadership, and the CCO, with the Board's assurance, will continually strive to improve the Compliance Plan and ensure it is tailored to issues relevant to Central Health's operations and the needs of Central Health's patients. When violations of Central Health's standards occur, they will be evaluated to determine how they could be prevented in the future and, if needed, the Compliance Plan and related policies and procedures will be modified accordingly. Central Health's team members will be educated as needed regarding any changes in the Compliance Plan or policies.

The CCO is responsible for assessing the overall effectiveness of Central Health's Compliance Program. To strengthen this process and align with guidance from the Office of Inspector General (OIG) and the Department of Justice (DOJ), the Compliance Plan tracks metrics including training completion rates and comprehension scores, analyzes hotline usage and the nature of reported concerns, monitors the timeliness of investigations and corrective actions, and administers employee surveys to assess awareness and culture of compliance. In addition, Central Health will consider periodic benchmarking against peer organizations and industry standards and engage external evaluators periodically for independent assessment.

## **IX. OVERVIEW OF RELEVANT LAWS**

There are many federal and state laws that govern Central Health. A general overview of some of the healthcare fraud and abuse laws that might apply is attached as **Exhibit C**. This overview is accurate as of the time this Compliance Plan was adopted. There may be changes to these laws periodically which are not reflected in Exhibit C. The reader should seek further guidance as necessary from the CCO.

## **X. REPORTING**

The following contact information shall be used to report fraud, waste and abuse:

**Chief Compliance & Risk Officer**

Central Health  
Austin, TX 78702  
Email: [CHCompliance@centralhealth.net](mailto:CHCompliance@centralhealth.net)

**Compliance Department**

Email: [CHCompliance@centralhealth.net](mailto:CHCompliance@centralhealth.net)

**Compliance and Ethics Hotline (Anonymous Reporting option)**

Hotline Website: [www.lighthouse-services.com/centralhealth](http://www.lighthouse-services.com/centralhealth)

Toll-Free Telephone: (833) 770-0080 (English)

Toll-Free Telephone: (800) 216-1288 (Spanish)

Email: [reports@lighthouse-services.com](mailto:reports@lighthouse-services.com)\*

Fax: (215) 689-3885\*

\*Must reference Central Health with the report

**XI. SUMMARY**

The Central Health Compliance Plan confirms the establishment of a Compliance Officer, a Compliance Committee, and a program for effective training and education; auditing and monitoring; and the prevention, detection and resolution of fraud, waste and abuse. Effective and clear lines of communication have been established and internal investigation and disciplinary processes developed. Specific controls have been set in place to prevent and detect compliance issues, and procedures are in place for the reporting of non-compliance with applicable healthcare laws and regulations.

Central Health has established a clear commitment to compliance and program integrity.

**EXHIBIT A**

**RESOLUTION OF THE TRAVIS COUNTY HEALTHCARE DISTRICT D/B/A CENTRAL  
HEALTH BOARD OF MANAGERS REGARDING  
THE COMPLIANCE PROGRAM**

**WHEREAS**, the policy of Central Health has been always to conduct its business in compliance with applicable federal, state and local laws and regulations, and to adhere to the highest ethical standards; and

**WHEREAS**, Central Health recognizes that even unknowing violations of laws and regulations by Central Health employees, contractors and agents can subject the organization to civil and criminal penalties, tarnish its reputation for professionalism, and lead to unfavorable publicity; and

**WHEREAS**, Central Health recognizes that the federal agencies responsible for enforcement of laws and regulations applicable to healthcare providers have encouraged the development and implementation of formal compliance programs by healthcare providers; and

**WHEREAS**, Central Health believes that the development and implementation of a formal compliance program is consistent with the organization's efforts to improve quality and performance, and further reflects the organization's long-standing commitment to conduct its business in compliance with applicable Federal laws and regulations and applicable State laws and regulations and the highest ethical standards; and

**WHEREAS**, Central Health wishes to ensure that the Compliance Program is effective in identifying and correcting practices and policies that are not in compliance with applicable laws and regulations, including, where necessary, by providing for disciplinary action against those employees, contractors and agents that fail to comply with such laws and regulations; and

**WHEREAS**, Central Health further wishes the Compliance Program to formalize, and reflect specific standards of conduct and policies for educating and training employees, contractors and agents with respect to those standards, review and continually enhance internal controls and monitoring systems, and foster effective communication and responsiveness to address compliance issues.

**NOW, THEREFORE, BE IT RESOLVED** that the Board of Managers of this organization adopts the attached Compliance Plan. The Board of Managers shall receive periodic progress reports on the development, implementation, and ongoing operation of this Compliance Program.

**ADOPTED** this \_\_ day of \_\_\_\_\_, 2026 by the Central Health Board of Managers.

\_\_\_\_\_  
Chairperson  
Central Health Board of Managers

**EXHIBIT B**

**ACKNOWLEDGMENT ATTESTATION**

I, \_\_\_\_\_ the undersigned team member, contractor or agent of Central Health, do hereby acknowledge that I have read and reviewed Central Health's Compliance Plan.

I understand the content of the Compliance Plan and am fully aware that I must comply with these standards or face disciplinary measures.

I will cooperate fully with the CCO in the ongoing implementation of the Compliance Plan.

In addition, I will fully offer the CCO my assistance during all auditing, monitoring, and investigational activities related to my position at Central Health.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print/Type Name

\_\_\_\_\_  
Position

Note: This acknowledgement form will be signed and stored electronically as a part of the onboarding process, annually, and as needed periodically.

## **EXHIBIT C**

### **HEALTH CARE FRAUD AND ABUSE LAWS**

#### **Federal False Claims Act**

The federal False Claims Act (31 U.S.C. § 3729-3733) is a federal law that imposes penalties on any person or organization that knowingly makes a false record or files a false claim regarding any federal health care program, which includes any plan or program that provides health benefits, whether directly, through insurance, or otherwise, which is funded directly, in whole or in part, by the United States Government or any state health care program. “Knowingly” includes having actual knowledge that a claim is false or acting with “reckless disregard” as to whether a claim is false. Examples of potential false claims include knowingly billing Medicare for services that were not provided, submitting inaccurate or misleading claims for actual services provided, or making false statements to obtain payment for services.

The federal False Claims Act contains provisions that allow private parties, also known as “qui tam relators,” with original information concerning fraud involving government health care programs to file a lawsuit on behalf of the government and, if the lawsuit is successful, to receive a portion of recoveries received by the government. The federal False Claims Act protects anyone who files a lawsuit under the Act from being fired, demoted, threatened or harassed by his or her employer as a result of filing a False Claims Act lawsuit. Remedies for retaliation include reinstatement with comparable seniority as the qui tam relator would have had but for the discrimination, two times the amount of any back pay, interest on any back pay and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorney fees.

There are significant penalties for violating the federal False Claims Act. Financial penalties to an organization that submits a false claim can total as much as three times the amount of the claim plus fines. In addition to fines and penalties, the courts can impose criminal penalties against individuals and organizations for willful violations of the False Claims Act.

#### **Program Fraud Civil Remedies Act**

In addition to the remedies available under the False Claims Act, the Program Fraud Civil Remedies Act (“PFCRA”) (31 U.S.C. § 3801 - 3812) provides an administrative remedy for false claims or statements submitted to certain federal agencies, including the U.S. Department of Health and Human Services. Generally, the PFCRA imposes civil monetary penalties on any person who makes, presents, or submits, or causes to be made, presented,

or submitted, claims or statements that the person knows or has reason to know are false, fictitious or fraudulent. Persons violating the PFCRA are subject to civil monetary penalties of up to \$5,500 per false claim or statement and up to twice the amount claimed in lieu of damages. The PFCRA is generally limited to claims amounting to \$150,000 or less.

### **Federal Anti-Kickback Statute**

The federal Anti-Kickback Statute (42 U.S.C. § 1320a-7b(b)) makes it a criminal offense to knowingly and willfully offer, pay, solicit, or receive any remuneration to induce or reward referrals of items or services reimbursable by a federal health care program. Remuneration includes the transfer of anything of value, directly or indirectly, overtly or covertly, in cash or in kind.

If a transaction falls within a statutory exception or a regulatory “safe harbor” to the Anti-Kickback Statute, it is not treated as a violation. The safe harbor regulations were enacted to cover practices unlikely to result in fraud or abuse. For a safe harbor to apply, each and every requirement set forth in the regulation must be satisfied. However, even where a transaction does not fall within a safe harbor, it does not necessarily mean it is illegal; the transaction will be subject to scrutiny, and the more safe harbor conditions satisfied, the more likely it will be found not to violate the Anti-Kickback Statute.

Penalties for violation of the federal Anti-Kickback Statute include:

- Fines up to \$25,000;
- Imprisonment for up to five years;
- Exclusion from participation, regardless of whether a criminal conviction is obtained; and/or
- Civil monetary penalty equal to triple the amount of damages to the government, plus \$50,000 for each violation.

### **Federal Physician Self-Referral Law (“Stark Law”)**

The federal Stark Law (42 U.S.C. § 1395nn) prohibits physicians from referring patients who participate in Medicare for certain “designated health services” to an entity in which the physician (or an immediate family member) has a financial relationship, unless an exception is met. The statute also prohibits an entity furnishing the services pursuant to a prohibited referral from presenting a claim or bill to Medicare. Allegations of Stark Law violations are often coupled with federal False Claims Act allegations.

A financial relationship includes an ownership or investment interest in the entity providing the service, or an ownership or investment interest in a separate entity which holds an ownership or investment interest in the entity providing the service. It also includes a compensation arrangement between the physician (or an immediate family member) and the entity.

“Designated health services” covered by the Stark Law includes the following:

- Clinical laboratory services;
- Physical therapy services;
- Occupational therapy services;
- Radiology services, including magnetic resonance imaging, computerized axial tomography scans, and ultrasound services;
- Radiation therapy services and supplies;
- Durable medical equipment and supplies;
- Parenteral and enteral nutrients, equipment, and supplies;
- Prosthetics, orthotics, and prosthetic devices and supplies;
- Home health services;
- Outpatient prescription drugs;
- Inpatient and outpatient hospital services; and
- Outpatient speech-language pathology services.

If a physician or entity violates this statute, significant civil sanctions may be imposed, including:

- Mandatory denial of payment;
- Recoupment of amounts collected in violation of the statute;
- Exclusion from participation in Federal health care programs;
- Civil monetary penalty of up to \$15,000 for each bill or claim the person knew or should have known was for a service for which payment may not be made, plus treble damages; and/or
- Civil monetary penalty of up to \$100,000 for each arrangement or scheme which the physician or entity knew or should have known has a principal purpose of assuring referrals which would be in violation of the Stark Law.

The Stark Law also requires that any entity providing designated health services report to the government information concerning the entity’s ownership, investment, and compensation arrangements. Failure to meet this reporting requirement would subject the entity to a civil monetary penalty of up to \$10,000 for each day the reporting requirement was to have been met.

Numerous exceptions apply to the Stark Law. However, unlike the safe harbors for the Anti-Kickback statute, if one of these exceptions is not satisfied, the relationship is automatically illegal, and the physician and entity are subject to sanctions.

**EXHIBIT D**

**COMPLIANCE POLICY AND PROCEDURES**

<b>Compliance Policy</b>	<b>Reference Code</b>
Compliance Plan	
Compliance Committee Charter	
Code of Conduct and Ethics for Board Members	CMP-010P
Code of Conduct and Ethics for Employees	CMP-002P
Compliance Investigations	CMP-008P
Compliance Program	CMP-001P
Compliance Training and Education	CMP-012P
Duality and Conflict of Interest	CMP-009P
Fraud, Waste, and Abuse	CMP-015P
Policies and Standard Operating Procedure Management	CMP-011P
Prohibition of Patient Inducement	CMP-014P
Reporting and Non-Retaliation	CMP-006P

*\*Additional compliance-related policies and procedures may be developed or updated as part of the Compliance Program's ongoing maturation and risk-based work plan.*

**EXHIBIT E**

**CODE OF CONDUCT AND ETHICS FOR EMPLOYEES  
CODE OF CONDUCT AND ETHICS FOR BOARD MEMBERS**

<b>Policy Title:</b> Code of Conduct and Ethics for Employees	
<b>Policy #:</b> CMP-002P	
<b>Effective Date:</b> May 2010	
<b>Last Review Date:</b> August 2023	
<b>Policy Owner:</b> Chief Compliance and Risk Officer	
<b>Executive Sponsor:</b> Chief Executive Officer	
<b>Attachment/s:</b> Employee Attestation for Code of Conduct and Ethics (A)	
<input checked="" type="checkbox"/> <b>Central Health Specific</b>	<input type="checkbox"/> <b>Enterprise Included</b>

**I. PURPOSE**

This Code of Conduct and Ethics is a component of the written compliance policies for the Central Health Compliance Program. The Code of Conduct and Ethics is a set of practical standards for ethical business conduct that requires all Central Health employees, independent contractors, and agents to comply with applicable federal and state laws governing Central Health's business activities. The Code of Conduct and Ethics promotes Central Health's commitment to compliance; addresses specific areas of potential noncompliance, including fraud; and reduces the risk of violations. The Code of Conduct and Ethics will be distributed to all employees, and, when appropriate, to agents and independent contractors. Affected personnel will participate in training that includes, among other topics, a review of the Code of Conduct and Ethics.

**II. SCOPE**

This policy applies to all Central Health employees and operations. This includes officers, interns, volunteers, and temporary employees.

**III. DEFINITIONS**

None.

**IV. POLICY**

**(1) Be honest**

All Central Health employees, agents, and independent contractors must be honest in the performance of their duties for Central Health.

**(2) Follow applicable law, policies and procedures**

Central Health is committed to complying, and employees, agents, and independent contractors are under an ongoing duty to comply, with all applicable state and federal laws, regulations, guidelines, and Central Health policies and procedures, where applicable, including this Code of Conduct and Ethics. Noncompliance with Central

Health policies, procedures, federal or state laws, regulations, guidelines, or any implication or suspicion thereof must be brought to the attention of a Board member, officer, supervisor, the Compliance Officer, or reported by contacting the Compliance and Ethics Hotline at Toll-Free Telephone: 833-770-0080 or/ web: [www.lighthouseservices.com/centralhealth](http://www.lighthouseservices.com/centralhealth). See *Reporting and Non-Retaliation, Policy Number CMP-006P*, and *Standards of Conduct, Policy Number HR2-008P*. Suspected noncompliance with Central Health personnel policies should be brought to the attention of an employee's supervisor, Human Resources or the Compliance Officer.

### **(3) Keep accurate and timely records**

Business actions and transactions, including compliance-related transactions, must be accurately documented on a timely basis according to Central Health policy and procedures and in accordance with applicable state and federal laws and regulations. Falsifying a government record may result in disciplinary actions and/or criminal liability. Central Health has provided a Record Management Policy that establishes guidance regarding the creation, distribution, retention, storage, retrieval, and destruction of documents. The Record Management policy outlines retention for (i) all records and documentation required by state and federal law for participation in federal health care programs; and (ii) all records necessary to protect the integrity of Central Health's compliance process and confirm the effectiveness of the program, including training records, reports from the Hotline, modifications to the Compliance Program, and the results of auditing and monitoring efforts.

### **(4) Protect Central Health assets**

Central Health property, facilities, equipment, supplies, personnel time, and accounts receivable (including monies owed to Central Health) are Central Health assets. All Central Health employees, agents, and independent contractors must respect Central Health property and maintain and protect it. See *Security and Loss Prevention, Policy Number HR5-004P*. Central Health assets, including computers, supplies, staff time, client records, business records, and cash, may not be used for personal use or gain.

Equipment and supplies removed from Central Health must be accounted for, used for Central Health business, and all equipment and unused disposable supplies must be returned in good condition.

Waste of Central Health personnel time is a waste of Central Health assets. All Central Health personnel are expected to use their time effectively for Central Health purposes.

Central Health personnel are expected to respect goods and services secured by contract and ensure that those resources are received by Central Health and used efficiently and appropriately for Central Health purposes.

Central Health personnel are responsible for protecting and conserving Central Health assets and resources and for reporting the suspected inappropriate use of assets to a Board member, officer, supervisor, the Compliance Officer or by contacting the Compliance and Ethics Hotline. *See Reporting and Non-Retaliation, Policy Number CMP-006P.*

**(5) Respect the rights of others**

All persons at Central Health should be treated with dignity and respect. Central Health does not tolerate harassment or discrimination of any personnel or member of the public in any manner or form on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, pregnancy, age, national origin, disability status, genetic information, protected veteran status, or any other characteristic protected by law. Suspected harassment or discrimination in any form must be reported to a Board member, officer, supervisor, Human Resources, or the Compliance Officer, according to the comfort level of the employee. *See Equal Employment Opportunity, Policy Number HR1-004P, and Anti-Harassment and Retaliation, Policy Number HR1-005P.*

Central Health prohibits personnel from discriminating based on a person's source of payment or ability to pay for services. If any Central Health employee believes that someone may have been discriminated against on this basis, that individual must report those concerns to a Board member, officer, supervisor, or the Compliance Officer or by contacting the Compliance and Ethics Hotline.

**(6) Business transactions must be conducted free from offers or solicitation of gifts**

Central Health personnel must conduct all Central Health business with honesty and integrity. Central Health expects personnel to conduct business transactions free from offers or solicitation of gifts, favors, or other improper inducements. Business transactions with outside vendors, contractors, and other third parties must be free from offers or solicitation of gifts and favors or other improper inducements in exchange for influence or assistance in a transaction. Central Health personnel cannot accept gifts, favors, services, entertainment, or other things of value to the extent that the decision-making of Central Health might be influenced. Employees may retain gifts from vendors that will not influence decision-making and have a nominal value of less than \$50 per gift and \$300 per year in the aggregate. If there is any concern about whether a particular gift should be accepted, Central Health personnel must consult with the Compliance Officer.

Central Health personnel cannot offer gift cards, anything of value, or other remunerations. There are exceptions to this general prohibition, such a donated item from a third party that will benefit the population served by Central Health. Please contact the Compliance Officer for review and approval. *See Prohibition of Patient Inducements, Policy Number TBD.*

**(7) Do not offer, solicit, or accept bribes, kickbacks, or rebates**

Offering, soliciting, or accepting a bribe, kickback, or rebate for any good or service associated with Central Health is inappropriate, illegal, unethical, and strictly prohibited by Central Health. A "bribe" is money or other thing of value, including a favor, given or promised in order to influence the judgment or conduct of another person. A "kickback" is the return of a part of a sum or other thing of value received often because of a confidential agreement or coercion. A "rebate" is the return of a part of a payment. If there are any questions concerning a potential offer, solicitation, or other arrangement, as soon as possible contact the Compliance Officer, the Chief Financial Officer, or the CEO.

**(8) Lead by example**

It is incumbent upon Central Health's leadership to provide ethical leadership to Central Health and to assure that adequate policies, procedures, protocols or other processes are in place to promote and better ensure ethical and legal conduct.

**V. RELEVANT STATUTES, REGULATIONS OR GUIDANCE**

United States Sentencing Guidelines

**VI. RELATED POLICIES AND PROCEDURES**

CMP-001P - Compliance Program

CMP-006P - Reporting and Non-Retaliation

HR2-008P - Standards of Conduct

HR2-017P - Discipline

HR2-021P - Solicitation Policy

Policy Number - Prohibition of Patient Inducements (Contact Compliance Officer)

**VII. PROCESS**

None

<b>Policy Title:</b> Code of Conduct and Ethics for Board Members	
<b>Policy #:</b> CMP-010P	
<b>Effective Date:</b> May 2010	
<b>Last Review Date:</b> April 2025	
<b>Policy Owner:</b> Chief Compliance and Risk Officer	
<b>Executive Sponsor:</b> Chief Executive Officer	
<b>Attachments:</b> None	
<input checked="" type="checkbox"/> <b>Central Health Specific</b>	<input type="checkbox"/> <b>Enterprise Included</b>

**PURPOSE**

- I. This Code of Conduct and Ethics for Board Members is a component of the written compliance policies for the Central Health Compliance Program. The Code of Conduct and Ethics for Board Members is a set of standards for legal and ethical business conduct that requires all Central Health Board members to comply with applicable federal and state laws governing Central Health's governance and to provide guidance to Board members regarding Board conduct and practices. The Code of Conduct and Ethics for Board Members will be distributed to all Board members upon appointment.

**II. SCOPE**

This Code of Conduct and Ethics for Board Members applies to all Board members in carrying out their duties and authorities pursuant to their constitutional and statutory mandates, as well as those outlined in governing documents and policies.

**III. DEFINITIONS**

None.

**IV. POLICY**

**1) Be Honest**

All Central Health Board members must be honest in the performance of their duties for Central Health.

**2) Follow applicable law, policies, and procedures**

Central Health is committed to complying, and Board members are under an ongoing duty to comply with all applicable state and federal laws, regulations, guidelines, and Central Health policies and procedures, where applicable, including this Code of Conduct and Ethics for Board Members. Noncompliance with Central Health policies, procedures federal or state laws, regulations, guidelines, or any implication or suspicion thereof must be brought to the attention of a Board Chairperson, Legal Counsel or the Compliance Officer.

### **3) Maintain and protect information**

Certain actions and transactions, including compliance-related transactions, must be accurately documented on a timely basis according to Central Health policy and procedures and in accordance with applicable state and federal laws and regulations. Falsifying a government record may result in criminal liability. Central Health has provided a Record Management Policy that establishes guidance regarding the creation, distribution, retention, storage, retrieval, and destruction of documents. The Record Management policy outlines retention for (i) all records and documentation required by state and federal law for participation in state or federal health care programs; and (ii) all records necessary to protect the integrity of Central Health.

### **4) Protect Central Health assets**

Central Health property, facilities, equipment, supplies, personnel time, and accounts receivable (including monies owed to Central Health) are Central Health assets. Central Health Board members must respect Central Health property and maintain and protect it. Central Health assets and property, including but not limited to computers, supplies, staff time, records, business records and cash, may not be used for personal use or gain. Equipment and supplies removed from Central Health must be accounted for, used for Central Health business and all equipment and unused disposable goods must be returned in good condition.

### **5) Respect the rights of others**

All persons at Central Health should be treated with dignity and respect.

Central Health does not tolerate harassment or discrimination of any personnel or member of the public in any manner or form, and specifically, on the basis of sex, race, color, national origin, citizenship status, marital status, sexual orientation, veteran status, religion, age, or disability. Suspected harassment or discrimination shall be reported to the Board Chairperson or Compliance Officer.

### **6) Business transactions must be conducted free from offers or solicitation of gifts**

Central Health Board members must conduct all Central Health business with honesty and integrity. Central Health Board members are expected to conduct business in a manner that is free from offers or solicitation of gifts, favors, or other improper inducements. Business transactions with outside vendors, contractors and other third parties must be free from offers or solicitation of gifts and favors or other improper inducements in exchange for influence or assistance in a transaction. Central Health Board members cannot accept gifts, favors, services, entertainment, or other things of value to the extent that the decision making of Central Health or a Board member might be influenced. **Board members will abide by Local Government Code, Chapter 171 and Chapter 176.** If there is any concern about whether a particular gift should be accepted, Board members should consult with Central Health Legal Counsel or Compliance Officer. Board members should reference Compliance Policy CMP-009P and CMP-009SOP Duality and Conflict of Interest Policy and Standard Operating Procedures for additional information.

### **7) Do not offer, solicit, or accept bribes, kickbacks, or rebates**

Offering, soliciting, or accepting a bribe, kickback, or rebate for any good or service associated with Central Health is inappropriate, illegal, unethical, and strictly prohibited by Central Health.

- A "bribe" is money or other thing of value, including a favor, given or promised in order to influence the judgment or conduct of another person.
- A "kickback" is the return of a part of a sum or other thing of value received, often because of a confidential agreement or coercion.
- A "rebate" is the return of part of a payment.

If there are any questions concerning a potential offer, solicitation, or other arrangement, contact the Compliance Officer or Legal Counsel. Board members should reference Compliance Policy CMP-009P and CMP-009SOP Duality and Conflict of Interest Policy and Standard Operating Procedures for additional information.

### **8) Lead by example**

It is incumbent upon Central Health Board members to provide leadership that is ethical and lawful to Central Health and to assure that adequate systems, policies and procedures are in place to promote and ensure ethical and legal conduct.

### **9) Fiduciary Duties**

Under Texas law and Central Health policy, Board members owe a fiduciary duty to Central Health. A Board member's fiduciary duty includes the duty to act in the best interests of Central Health, including placing the public interest and Central Health's interests above personal conflicts or conflicting loyalties. A Board member's fiduciary duty includes but is not limited to avoiding conflicts of interest. A Board member's fiduciary duty to Central Health precludes a Board member from appearing before the Central Health Board or lobbying Central Health staff as an advocate for Central Health funding to outside persons, groups, or interests.

### **10) Use of Central Health staff and resources**

#### **Official requests for staff time or resources**

Board members making use of Central Health staff time or resources should specify whether the request is made in an official capacity regarding Board policy or potential Board policy, or individual capacity. Requests from board members not expressed during a board or committee meeting should be directed to Central Health's President and CEO or designee. If the request is made in an official capacity, the Board member should first discuss the request with the Chairperson. Board members shall be respectful of Central Health staff time and duties and avoid unduly burdensome and/ or unreasonably repetitive requests. Requests for staff time or resources shall not be unreasonably withheld.

#### **Information requests for staff time or resources**

Information requests made by a Board member in a personal capacity should utilize the process established by Central Health for receiving Texas Public Information Act requests, including the submission of the request in writing. Board members who request information in their personal capacity should not seek special or expedited treatment. Before making requests for information retained by Central Health, that may be confidential or protected by law, Board members may consult with Legal Counsel.

### **11) Appointments**

A Board member appointed by Central Health to another board or organization, including affiliated entities of Central Health, should remain aware, in consultation with Central Health's President and CEO and Legal Counsel, that the Board member's duty is to represent Central Health. If a conflict of interest arises between Central Health and the entity to which the Board member is appointed, the Board member should recuse themselves from any discussion, consideration, or action that presents a conflict of interest. A member of the Board of Managers appointed to another entity shall protect from unauthorized disclosure all confidential information that may be orally presented or come into the physical possession of the Board member, concerning Central Health, the other organization, or entity.

### **12) Public Appearances**

A Board member appearing in a public forum or making a public statement should make it clear whether the Board member is speaking in a personal capacity or as a representative for Central Health. A Board member appearing in a public forum or making public statements should not purport to speak on behalf of Central Health or the Board of Managers unless authorized to do so by the Board or Board Chairperson. A Board member may communicate publicly concerning official Board policy positions or an approved Central Health initiative or activity. A Board member appearing at a public forum or making public statements or communications in any capacity should be cognizant of his or her fiduciary duty to Central Health.

### **13) Record Retention**

Board members will comply with Central Health policies on record retention. Board members will be cognizant that communications in their official capacities or concerning Central Health business made using personal email, text messaging or any electronic media may be subject to public disclosure under the Texas Public Information Act. Board members shall retain personal Central Health and Board related electronic correspondence and other communications on personal devices and systems in a manner that complies with Central Health's record retention policy and applicable law. Board members will cooperate fully with Central Health staff, the Compliance Officer and/or Legal Counsel in responding to information requests that seek official Central Health communications maintained by a Board member in private email or on other private electronic communication systems. Board members should avoid making statements in an official capacity by emails or any electronic media that, if disclosed, could reasonably cause negative public perceptions of Central Health or the Board of Managers.

### **14) Ethics**

Board members will:

- Listen carefully to fellow Board Members;
- Respect the opinion of fellow Board Members;
- Respect and support the majority decisions of the Board or Board Committee;
- Bring to the attention of the Board any issue the Board member has reason to believe will adversely affect Central Health or the Board of Managers;
- Not discuss the confidential business or proceeding of Central Health or the Board;
- Adhere to any signed agreements/understandings as Board Managers outside the boardroom or confidential and privileged setting; and
- Not interfere with the duties of the President and CEO.

### **15) Compliance**

Violations of this Code of Conduct and Ethics for Board members policy shall be reviewed by the Chairperson, who may and in consultation and with the approval of the Board officers, may take reasonable action that is intended to correct the violation and encourage compliance. Any such action may include a verbal discussion with the Board member, written documentation of the violation, making or changing committee assignments, or other action that may be deemed appropriate as determined by the Board.

## **V. RELEVANT STATUTES, REGULATIONS OR GUIDANCE**

Chapter 171 and 176, Texas Local Government Code.

## **VI. RELATED POLICIES AND PROCEDURES**

CMP-001P - Compliance Program

CMP-006P - Reporting and Non-Retaliation

CMP-008P - Compliance Investigations

CMP-009P - Duality and Conflict of Interest

CMP-009SOP – Duality of Conflict and Interest (SOP)

CMP-009-SOPa - Duality and Conflict of Interest (Attachment A)

## **VII. PROCESS**

None.



# COMPLIANCE PLAN

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# THE COMPLIANCE PLAN OF CENTRAL HEALTH

## I. COMPLIANCE PLAN OVERVIEW

This document sets forth the Compliance Plan of Central Health. The purpose of this Compliance Plan is to define Central Health's policy and commitment to conducting its operations in accordance with applicable federal, state, and local regulatory requirements, as well as to uphold the highest standards of legal and ethical conduct. The Compliance Plan supports the detection, prevention, and correction of potential violations of law, regulation, or internal standards, and fosters a culture of compliance and accountability throughout Central Health.

Central Health is subject to legal, regulatory, and ethical requirements and considerations. It is the policy of Central Health that all its business and other practices be conducted at all times in compliance with all applicable laws and regulations of the United States, the State of Texas, all other applicable laws and ordinances, and the ethical standards/practices of the industry. In alignment with guidance from the U.S. Department of Health and Human Services Office of Inspector General (OIG), Central Health adopted a Compliance Plan that incorporates the OIG's Seven Elements of an effective Compliance Program. The seven core elements include: (1) compliance oversight, including the designation of a compliance officer and compliance committee; (2) implementing written policies and standards of conduct; (3) conducting effective training and education; (4) developing effective lines of communication; (5) conducting internal monitoring and auditing; (6) publicizing disciplinary guidelines, and (7) responding promptly to detected offenses and undertaking corrective action (***Policy Reference - Compliance Program (CMP-001P) Policy***).

This document serves as a guide to help implement a policy of compliance with all applicable standards. The Compliance Plan's focus is on promoting a culture of compliance including detecting, correcting, and preventing non-compliance, fraud, waste, and abuse, and Code of Conduct violations, and incorporating principles of continuous quality improvement into our methods.

Central Health is committed to conducting its business ethically and maintaining and promoting a system wide culture that emphasizes integrity; individual and institutional acceptance of responsibility; effective self-policing; and transparency in the relationships between Central Health and its key stakeholders, including government officials and agencies.

The Compliance Plan governs all activities conducted by Central Health. As the Hospital District for Travis County, Central Health is responsible for providing medical and hospital services to eligible people in Travis County including delivering direct healthcare services, working through our affiliates CommUnityCare and Sendero Health Plans and through

administering the Medical Assistance Program (MAP) and MAP Basic programs. The Compliance Plan is holistically applicable across all departments, functions, and service lines of Central Health. To ensure effective oversight, annual Compliance Work Plans are developed based on identified risk areas and outline targeted auditing and monitoring strategies tailored to specific operational and programmatic needs.

The Board of Managers will approve the Compliance Plan. By adopting this Compliance Plan, Central Health seeks to promote a working environment that fosters and expands these standards. All team members, contractors, and agents of Central Health are expected to comply with all laws and regulations, report non-compliance, cooperate in compliance investigations and implement corrective actions in accordance with the highest standards of ethical and professional conduct.

Central Health embraces the benefits associated with the implementation of this Compliance Plan to promote the following goals:

- Improve quality of health care services;
- Reduce the overall cost of health care services;
- Enhance health care operations;
- Demonstrate Central Health’s commitment to honest and responsible corporate conduct;
- Prevent fraud, waste and abuse;
- Increase the likelihood of preventing, identifying, and correcting unlawful and unethical behavior at an early stage;
- Encourage employees to report potential problems to allow for appropriate internal inquiry and corrective actions; and
- Through early detection and reporting, minimize financial loss to Central Health.

## **II. APPLICATION**

### **A. Mission and Guiding Principle**

The mission of Central Health is “by caring for those who need it most, Central Health improves the health of our community.” Central Health, Travis County's hospital district, is building a comprehensive, high-functioning healthcare system for residents with low incomes who need it most.

### **B. Code of Conduct**

Central Health maintains and annually updates a written Code of Conduct that articulates its commitment to ethical behavior. The Code of Conduct is a key element of the Compliance Program and details the fundamental principles, values, and framework that guide everyday practice (**EXHIBIT E** *Code of Conduct and Ethics for Employees and Code*

*of Conduct and Ethics for Board of Managers).*

The Code of Conduct establishes the ethical standards team members must uphold in critical areas and aspects of Central Health's operations. The Code of Conduct explains our commitment to ethical standards and sets expectations for all employees in achieving and maintaining these standards.

The Code of Conduct applies to all business operations and all team members of Central Health. Representatives that are not directly employed by, but represent Central Health, such as contractors, consultants, and students, are directed to conduct themselves in a manner consistent with this Code of Conduct when they are acting on behalf of Central Health.

Central Health team members are trained on the Code of Conduct within 45 days of hire and, at a minimum, annually thereafter. Training includes a review of the Code of Conduct and the Compliance Plan. At the conclusion of training, team members are required to attest that they read and understand the Code of Conduct, agree to abide by its principles, and to report any suspected or possible violations.

Compliance with the Code of Conduct and all applicable policies and procedures is a condition of employment and an element in evaluating the performance of all team members, contractors, consultants, and students **(Policy Reference - Standards of Conduct (HR2-008P) Policy)**. Due to the nature of Central Health's business, and responsibility for the appropriate use of taxpayer funds, conduct relating to billing, reimbursement, referrals, and the provision of health care services is of particular importance.

The following examples are brief descriptions of **prohibited conduct**:

- No Central Health team member or contractor shall knowingly submit any claims based on the provision of a health care provider's services when the person providing the service is not properly licensed.
- No Central Health team member or contractor shall submit any claims for services that the individual has reason to believe were not medically necessary, not properly documented or not payable by the program or payor to which the claim is submitted.
- No Central Health team member or contractor shall pay or offer to pay for referrals of items or services.
- No Central Health team member or contractor shall receive or solicit any payment for referrals of items or services.
- No Central Health team member or contractor shall knowingly make any false statement on behalf of Central Health in any claim or application for benefits for a patient.
- No Central Health team member shall retain funds from any governmental agency or other payor on behalf of Central Health, which the employee believes were not properly due to Central Health.

In addition to the above, the Central Health policy relating to health care fraud, waste, and abuse and related issues may be found in Central Health's online policy manager (***Policy Reference - Compliance with Fraud, Waste, and Abuse Laws and Regulations (FWA - 001P) Policy***).

### **C. Specific Laws and Regulations**

Central Health's team members, physicians, officers, directors, and contractors shall act with the highest level of integrity in all Central Health activities and comply with applicable laws and standards. Such representatives are expected to learn about, understand and follow Central Health's policies and Federal and State laws and regulations that govern their activities.

Central Health's team members, physicians, officers, directors and contractors are not expected to have expert knowledge of all legal and regulatory requirements that may apply to their responsibilities. However, it is expected that the Central Health Board of Managers and team members will be sensitive to legal and ethical issues, and the goal of this Compliance Plan is to give them the foundation to know enough to ask questions if they are uncertain about any given situation and the method of seeking advice.

Team members are expected to consult the Chief Compliance Officer (CCO) regarding potential compliance issues and the applicability of legal and regulatory requirements.

### **D. Distribution of the Compliance Plan and Compliance Requirements**

Central Health will provide a copy of this Compliance Plan to all Board Members, team members, and independent contractors to inform them of Central Health's policy and their obligations for complying with the Compliance Plan. The term "contractor" means an individual who works within the Central Health's environment or who is contracted to provide clinical, billing, or administrative services for Central Health.

As part of the new team member onboarding process, all new Central Health employees will receive information for reporting compliance concerns.

### **E. Adherence to the Compliance Plan and Compliance Requirements**

Central Health is committed to compliance with the law. Compliance with the law is desirable for its own sake to fulfill Central Health's role as a special purpose taxing district that upholds the highest standards and meets our obligations laid out in the Constitution and laws and regulations of Texas and the people of Travis County. Compliance is also important to avoid legal penalties, imprisonment of individuals, fines and/or exclusion of both individuals and Central Health from participation in government health care programs. *Any person who violates these laws will be subject to disciplinary action, up to and including immediate termination of their employment or affiliation with Central Health.*

### **III. RESPONSIBILITIES AND OVERSIGHT**

#### **A. Board of Managers Oversight**

The Board of Managers is responsible for oversight of Central Health's Compliance Program to ensure that the organization conducts its operations in compliance with applicable federal, state, and local laws and regulations, and in accordance with the highest standards of ethical conduct.

The Board fulfills its oversight responsibilities through approval of the Compliance Plan; review of Compliance Program effectiveness; and receipt of regular compliance reporting regarding identified risks, investigations, corrective actions, and program performance. The Board's role is one of oversight and accountability and does not include day-to-day management or operational execution of compliance activities.

The Board of Managers has appointed a CCO to design, implement, and oversee Central Health's Compliance Program. The CCO serves as the Board's primary resource and advisor on compliance, ethics, and regulatory risk matters. The authority, responsibilities, reporting relationships, and independence of the CCO are set forth in Section B of this Compliance Plan.

Consistent with the District's Bylaws and Board approved policies, the CCO maintains direct, regular, and unrestricted access to the Board of Managers. The CCO will ~~may~~ report regularly and directly to the Board in accordance with the Compliance Governance and Reporting structure outlined in Section III.D of this Compliance Plan.

By resolution, the Board of Managers empowers the CCO to carry out the responsibilities described in this Compliance Plan and to support the Board in fulfilling its compliance oversight obligations. The Board Resolution Regarding the Compliance Program is attached as *Exhibit A*.

#### **B. Chief Compliance Officer**

This Compliance Plan shall be implemented under the guidance and supervision of Central Health's CCO.

It is the duty of the CCO to oversee the implementation of this Compliance Plan; measure and assess its effectiveness; assure that team members and contractors are notified of compliance standards; coordinate education and training of employees; ensure a method for reporting issues of noncompliance; review and respond to reports of compliance issues;

coordinate internal investigations; and report, as applicable and consistent with the approved compliance reporting policy, to the Board on the status Central Health's compliance efforts.

The CCO reports to the President and Chief Executive Officer to ensure access to executive leadership and effective integration of the Compliance Program across the organization.

The CCO is a member of the Executive Leadership Team, which supports direct engagement with senior leadership and integration of compliance oversight across Central Health.

This reporting relationship does not limit the CCO's independence or authority. The CCO maintains direct and unrestricted access to the Board of Managers. The CCO will report to the Board in accordance with the Compliance Governance and Reporting structure outlined in Section III.D of this Compliance Plan.

The CCO shall carry out duties independently of operational management and without interference, delay, or retaliation.

All questions and concerns regarding compliance with the standards set forth in this Compliance Plan shall be directed to the CCO. All Board Members and Central Health team members must cooperate fully and assist the CCO as required in the exercise of their duties. If a Board Member or team member is uncertain whether specified conduct is prohibited, they must contact the CCO for guidance prior to engaging in such conduct.

### **C. Responsibilities**

The President and CEO, and Board of Managers are responsible for:

- i. Exemplifying a culture of compliance and ethics throughout Central Health.
- ii. Setting the expectation for compliance and ethics as a core responsibility for all team members.
- iii. Ensuring that the CCO and Compliance Department have sufficient staffing, resources, and financial support to perform their responsibilities.
- iv. Consulting with the CCO on compliance matters and supporting the effective operation of a robust and dynamic Compliance Program.
- v. Coordinating with the CCO and Compliance Department to periodically evaluate the Compliance Program to ensure that it (i) functions as intended, (ii) serves the purposes for which it has been designed, and (iii) enables Central Health to meet its high standards and commitment to compliance and ethics.
- vi. Promoting and maintaining a work environment where concerns can be raised, openly discussed, and reported without fear of retaliation, and
- vii. Complying with all the requirements set forth in the Compliance Plan and Compliance policies and procedures as organizational leaders.

The Compliance Officer is responsible for:

- i. Designing, implementing, and overseeing an effective Compliance Program that meets the expectations set forth in United States Sentencing Guidelines and Office of Inspector General's Compliance Program Guidance.
- ii. Staffing and leading a Compliance Department responsible for ensuring performance of the Compliance Program components described herein.
- iii. Keeping informed of developments and trends in healthcare compliance and using such information to enhance the Compliance Program.
- iv. Keeping the CEO, the members of the Central Health Compliance Committee and the Board regularly informed of Compliance Program developments, as well as industry best practices and government enforcement actions related to the Compliance Program; and
- v. Periodically assessing the effectiveness of the Compliance Program to determine that it (i) functions as intended; (ii) serves the purposes for which it has been designed; (iii) is reflective of current laws, developments, and industry best practices; and (iv) enables Central Health to meet its high standards and commitment to compliance.

Team members are responsible for:

- i. Acting in compliance with the performance of their duties and in their conduct.
- ii. Supporting the Compliance Program (leaders have a heightened responsibility to do so).
- iii. Reading, understanding, and complying with the Code of Conduct and all other compliance and privacy policies and procedures.
- iv. Completing all required compliance and ethics training in a timely manner.
- v. Reporting potential compliance issues to their leader, another member of the management team, the People Department, the CCO, or the Compliance and Ethics Hotline; and
- vi. Cooperating with the Compliance Department in the performance of compliance investigations and auditing and monitoring activities.

Leaders have additional responsibilities to:

- i. Demonstrate and emphasize the importance of compliance and ethics.
- ii. Model behaviors in support of compliance and ethics.
- iii. Assess compliance and ethics as part of performance measurement for all team members.
- iv. Maintain an environment where individuals can comfortably ask questions or raise compliance concerns without fear of retaliation.
- v. Provide appropriate and timely responses to questions or concerns, in consultation with the Compliance Department, as needed.
- vi. Maintain communication with the Compliance Department about potential compliance and ethics concerns.
- vii. Shall set an example of a strong commitment to compliance; and
- viii. Shall encourage open communication among team members concerning compliance matters.

#### **D. Compliance Governance and Reporting**

Central Health has appointed a CCO responsible for overseeing and monitoring the Compliance Program. The CCO reports directly to the Chief Executive Officer and maintains direct, independent and unrestricted access to the Board of Managers. The CCO will report directly to the Board of Managers on a regular basis and as needed regarding significant compliance risks, regulatory matters, and issues involving senior leadership.

The CCO is a member of the Central Health Executive Leadership Team and maintains direct line of communication with Compliance Leadership for CommUnityCare and Sendero Health Plans, and the Central Health Chief Legal Officer. This enables the CCO to learn and know about areas of needed collaboration, best practices and current fraud trends from across the country. The CCO regularly informs the Chief Executive Officer, the Compliance Committee, the Executive Committee of the Board, and the Board of Managers of material compliance risks, program updates, investigations, or issues requiring governance attention.

The CCO has the authority to access information and records relevant to compliance oversight, including, but not limited to policies, contracts, billing and claims data, documentation, workforce records, and records related to arrangements with vendors, contractors, suppliers, agents, and physicians, consistent with applicable law. The CCO is authorized to review contracts and financial arrangements that may implicate referral, payment, or inducement risks and to seek the advice of legal counsel where appropriate.

#### **E. Compliance Committee**

Central Health maintains a Compliance Committee composed of executive-level leadership, including the President and Chief Executive Officer. The CCO serves as Chair of the Compliance Committee. A formal Compliance Committee Charter outlining the Committee's purpose, authority, and responsibilities is submitted to the Board of Managers for approval. The Compliance Committee documents its decisions and action items and ensures timely follow-up on recommendations to support the effectiveness of the Compliance Program. The Compliance Committee reports to the Chief Executive Officer and provides regular compliance reporting to the Executive Committee of the Board, consistent with the Board's bylaws. The Executive Committee reviews compliance activities, compliance program documentation, and matters requiring escalation and makes recommendations to the Board of Managers, as appropriate.

The Compliance Plan and Compliance Work Plan are reviewed and updated at least annually by the Compliance Committee and presented to the Executive Committee and Board of Managers, as appropriate. The Compliance Committee receives regular reporting on progress against the Compliance Work Plan.

#### **Compliance Committee Responsibilities**

The Compliance Committee's functions related to the Compliance Plan include:

- i. Analyzing Central Health's legal, regulatory, and contractual compliance requirements and evaluating associated risk areas
- ii. Assessing existing policies and procedures addressing identified risk areas for alignment with the Compliance Plan
- iii. Recommending and overseeing, in coordination with department leadership, the effectiveness of internal controls, auditing, and monitoring activities designed to support compliance with applicable standards, policies, and procedures
- iv. Determining strategies to promote adherence to the Compliance Plan and to support the detection and reporting of potential violations
- v. Defining and reviewing compliance performance metrics, including issues reviewed, audit follow-up completion, training compliance rates, and reporting activity
- vi. Addressing other functions where compliance impacts operating structure and daily routine of Central Health's delivery of services.
- vii. Establishing sub-committees, as appropriate to support the effective implementation of the Compliance Program..

The Compliance Committee shall meet on a quarterly basis. All Compliance Committee discussions, findings, decisions, etc. shall be documented via the formal minutes taken at each Compliance Committee meeting.

#### **IV. COMPLIANCE REQUIREMENTS**

##### **A. Risk Assessment, Auditing, and Monitoring**

Central Health maintains an organization-wide, risk-based compliance program designed to prevent, detect, and correct noncompliance across all operational and service areas. A formal compliance risk assessment is conducted to identify and prioritize compliance risks and to inform the development of the annual Compliance Work Plan, auditing, and monitoring activities. The compliance risk assessment includes:

- Identification of key compliance risk areas including but not limited to billing, coding, environment of care, privacy and security, and referral arrangements.
- Integration of input from leadership employees, and prior audit and monitoring results, regulatory guidance, and enforcement trends.
- Documentation of risk prioritization decisions mitigation plans, and corrective action plans.
- Reporting of Risk Assessment findings and mitigation strategies to the Compliance Committee, Executive Committee and the Board of Managers, as appropriate.

Work Plans will be developed for operational and service areas based on risk and will differentiate the monitoring and auditing efforts, respectively.

Annually thereafter, a compliance risk assessment will be completed to evaluate the ongoing compliance-related risks that have the potential for legal, financial, and/or operational implications and appropriate mitigation strategies will be implemented as warranted.

Auditing and monitoring activities will be calibrated based on the results of the annual compliance risk assessment, previous auditing and monitoring activities, and compliance investigations. Auditing may be conducted by Central Health team members or by third party contractors. When activities are conducted outside of the Compliance Department, Compliance maintains oversight responsibility to ensure independence, consistency, and appropriate escalation of findings.

The CCO and the Compliance Department will oversee the compliance audits of various business areas within Central Health in a manner consistent with applicable audit standards. Audits may be conducted by Central Health team members or through contracted third parties. As examples, these audits may be used to determine whether:

- i. The policies and procedures mentioned in this Compliance Plan are current and complete.
- ii. Bills are accurately coded and accurately reflect the services provided (as documented in the medical record).
- iii. Documentation is being completed correctly and timely (***Documentation in the Medical Health Record SOP HCD-ADM-002SOP***).
- iv. Services or items provided are reasonable and necessary.
- v. Any incentives for unnecessary services exist.
- vi. Privacy and security standards are being met.

As vendors and third parties can pose significant compliance risks to Central Health, Central Health will implement a comprehensive oversight program that aligns with best practices and guidance from the Office of Inspector General Compliance Program Guidance (GCPG). Central Health will enhance its oversight of external parties by implementing structured onboarding and compliance training requirements, requiring documented attestations of policy adherence, and expanding screening procedures beyond basic exclusion checks. Additionally, high-risk vendors—particularly those involved in billing, referrals, or access to protected health information—should be subject to ongoing monitoring and performance audits. Contracts should include clear compliance obligations, audit rights, and provisions for corrective actions. These enhancements will strengthen accountability, mitigate regulatory risk, and reinforce Central Health’s commitment to ethical and lawful business practices.

Results of compliance audits and monitoring activities are reviewed by the Compliance Committee and escalated to the Executive Committee and the Board of Managers when findings present material risk, require governance action, or involve senior leadership.

## **B. Reporting**

Central Health maintains open and effective lines of communication to encourage the reporting of potential compliance concerns. All team members shall promptly report any information regarding noncompliance with or any other known or suspected violation of applicable laws, regulations, ethical standards or Central Health policy. Failure to report a known compliance issue is a violation of Central Health policy and will subject a team member to disciplinary action, including termination.

Reporting issues of noncompliance may be accomplished in a variety of ways. The team member may report the incident directly to the CCO either verbally or in writing. If reporting through the Compliance and Ethics Hotline, the team member may choose to identify themselves or to remain anonymous. The CCO will strive to shield the identity of reporting individuals wanting to remain anonymous. However, it is recognized that there may be situations in which the investigation may lead to the disclosure of the reporter's identity. Anonymity is not guaranteed.

Team members may also utilize the following mechanisms to report compliance issues in accordance with Central Health policies:

- Compliance Department's email at [CHCompliance@centralhealth.net](mailto:CHCompliance@centralhealth.net)
- Hotline Website: [www.lighthouse-services.com/centralhealth](http://www.lighthouse-services.com/centralhealth)
- Toll-Free Telephone: (833) 770-0080 (English)
- Toll-Free Telephone: (800) 216-1288 (Spanish)
- Email to Hotline Vendor: [reports@lighthouse-services.com](mailto:reports@lighthouse-services.com) (must reference Central Health with the report)
- Fax: (215) 689-3885 (must reference Central Health with the report)

No team member who reports a compliance issue in good faith will be subject to disciplinary action or punished in any way for making a report. However, submission of a report by a team member that the team member knows is false or misleading will subject the team member to disciplinary action, including termination.

An individual whose report of misconduct contains admissions of personal wrongdoing will not be guaranteed protection from disciplinary action simply because they made the report. In determining what disciplinary action may be taken against a reporting individual, Central Health may consider an individual's own admissions of wrongdoing, provided, however, that their involvement was not previously known to Central Health, its discovery was not imminent, and the admission was complete and truthful. The weight to be given the self-reporting will depend on all the facts known at the time Central Health makes its disciplinary decision (***Policy Reference - Reporting and Non-Retaliation (CMP-006P) Policy***).

### **C. Incident / Noncompliance Investigation**

Upon receipt of a report, other information suggesting a possible compliance issue or finding from audit results, the CCO will conduct a brief review of the issue to determine if the report constitutes a potential compliance violation. If it is determined that the report

constitutes a potential or actual violation, the CCO will make a record of the information and confer with the Chief Legal Officer. The CCO, along with the Chief Legal Officer and/or outside hired legal counsel, may decide who should conduct the investigation: the CCO alone or with the assistance of other team members, legal counsel, or an outside expert retained by legal counsel. Investigations will commence as soon as reasonably possible following the receipt of information suggesting a possible compliance issue. Investigation activities may include, but are not limited to, the following:

- Interviews of the complainant and others.
- A review of relevant documents.
- A review of applicable laws/regulations.

Team members are expected to cooperate fully with any investigation conducted in response to a report concerning compliance issues.

#### **D. Corrective Action**

If, upon conclusion of an investigation, it appears there is a substantiated compliance concern, the CCO shall ensure a corrective action plan is formulated and implemented. The CCO may obtain the advice and guidance of legal counsel, and others as appropriate in ensuring a corrective action plan is formulated and implemented. The corrective action plan will be designed to ensure the specific issue is addressed and, to the extent possible, similar problems do not occur in other departments or areas. Examples of corrective actions include but are not limited to: 1) adopting new policies and procedures to prevent recurrence of the problem, 2) imposing restrictions on duties certain individuals are allowed to perform, 3) specific education and training for the team member, 4) education and training for all team members, 5) discipline of the employee, and/or 6) disclosure to appropriate oversight authorities.

If the investigation reveals possible non-compliant conduct, Central Health shall proceed as follows:

- If the problem relates to billing, cease any questioned billing until the problem is corrected or clarified.
- Initiate appropriate disciplinary action if needed in accordance with the Corrective Discipline Policy.
- If determined necessary after consultation with the Chief Legal Officer, notify appropriate State or Federal officials.
- Repay improper payments received and provide education on appropriate billing procedure. The CCO, the CEO, and the Chief Legal Officer, as necessary, shall determine at what level any necessary repayment will be made, and whether any particular disclosures should be made.

Due to the importance of monitoring efforts, any issue for which a corrective action plan is implemented may be targeted for future monitoring. These issues shall be tracked by the CCO. All pertinent information learned during investigations will be incorporated into Board Members and Central Health team members' education and training to prevent recurrence of the non-compliant activity.

On a periodic basis, the CCO will report to the Compliance Committee any investigation undertaken and the results of that investigation. The Compliance Committee may report this information to the Central Health Board of Managers as determined by the Chair of the Compliance Committee, the CCO (***Policy Reference - Compliance Investigations (CMP-008P) Policy***).

#### **E. Enforcement and Discipline**

A team member's commitment to compliance and ethical conduct may be noted for purposes of the team member's performance evaluation.

Disciplinary action against any team member involved in dishonest conduct, including, but not limited to, suspension or termination, may be taken under any of the following circumstances (these circumstances do not constitute an exhaustive list):

- If the team member authorizes or participates in any action which constitutes a violation of applicable laws, regulations, or ethical standards/policies of Central Health
- If the team member fails to promptly report a known or suspected violation of applicable laws, regulations, or ethical standards/policies of Central Health, or if the team member withholds information from the CCO concerning a violation about which they are aware.
- If the team member attempts to retaliate or participate in retaliation against a team member who reports a compliance issue in good faith.
- If the team member makes a report of a compliance issue which the team member knows to be false or misleading, or
- If the team member interferes or fails to cooperate fully with Central Health's efforts to investigate or address any compliance report.

Central Health intends to be consistent in its enforcement of compliance; however, Central Health reserves the right to exercise discretion in penalizing those who violate these standards including team members, contractors and vendors. Disciplinary actions may extend to individuals responsible for the failure to prevent, detect, or report an offense.

All disciplinary actions will be consistent with Central Health's applicable policies and procedures. All disciplinary actions and all documentation will be sent to the People Department for proper filing. Department leaders are expected to keep the appropriate copy of the disciplinary actions for their records in a secure location (***Policy Reference - Standards of Conduct (HR2-008P) Policy***).

#### **V. TRAINING, AWARENESS AND COMPETENCE**

Within three (3) months after the Compliance Plan is adopted by Central Health, all Central Health team members shall be required to acknowledge the Compliance Plan within the Central Health Learning Management System and must attend an introductory training

session regarding the contents of this Compliance Plan. Some team members may receive additional specialized training appropriate to the areas in which they work, such as claims development and billing practices and procedures training. New Central Health team members will be educated regarding the contents of the Compliance Plan during their onboarding.

At the time a team member is educated about the Compliance Plan, the team member must sign the acknowledgment attached to this Compliance Plan as **Exhibit B** and saved within the team member's Learning Management System profile. Reading this Compliance Plan and signing the acknowledgment will be a condition to employment with Central Health.

#### **A. New Employee and Annual Trainings**

All new Central Health team members are required to complete the new team member Compliance training within 45 days of employment and then again annually during the designated annual training (**Policy Reference - Orientation, Annual Training, & Department Onboarding Policy HR2-007P**).

#### **B. Periodic Training**

All Central Health team members are required to receive periodic training on the Central Health's Compliance Plan and pertinent policies and topics.

#### **C. Specialized Training**

Specific Central Health team members may receive specialized training because of the areas in which they work. This specialized training may focus on complex or high-risk operational areas. As new developments or concerns arise, the CCO may require additional training sessions for some or all Central Health team members. Such training shall utilize in-house subject-matter experts whenever possible. However, if deemed necessary, the services of outside experts may be enlisted to conduct specialized or highly technical training.

The CCO or a designee will also be available to create and deliver location and department specific compliance, contractual and plan integrity training.

The CCO or a designee will ensure there is a record of attendance at each session or documentation of completion of each course is retained.

### **VI. POLICY AND PROCEDURES**

Central Health maintains policies and procedures that reflect its commitment to compliance and effectively address applicable legal, regulatory, and ethical obligations. These policies and procedures account for specific areas of compliance and ethics risks relevant to healthcare organizations.

These policies and procedures ensure that officers, directors, and team members understand what is required to maintain high standards of ethical conduct in business and operational practices. Policies and procedures are reviewed at least annually, and more frequently as needed based on regulatory changes, operational risk, or identified compliance issues, and are made accessible to employees to guide operational processes and compliance related activities.

Policies supporting the Compliance Program address, at a minimum, the following areas:

- Compliance Program governance and oversight
- Reporting mechanisms and non-retaliation
- Fraud, waste, and abuse prevention
- Privacy and security of protected health information
- Compliance training and education
- Conflict of interest
- Audit, monitoring, and corrective action
- Anonymous compliance reporting

A current inventory of Compliance Program policies is maintained by the Compliance Office and is included as **Exhibit D** Compliance Policy Inventory to this Plan.

## **VII. ACCOUNTABILITY, RESPONSIBILITY, AND SCREENING PROGRAM**

Central Health will not contract with, employ, or bill for services rendered by an individual or entity that (A) is or has been sanctioned, excluded or ineligible to participate in state or Federal government health care programs; (B) is suspended or debarred from state or Federal government health care contracts; or (C) has been convicted of a criminal offense related to the provision of health care items or services.

Central Health shall have appropriate procedures in place to ensure it does not employ or utilize Board Members, Central Health team members, agents, vendors or contractors whom the organization knew, or should have known, to have engaged in illegal activities or other conduct inconsistent with the Compliance Plan.

## **VIII. PLAN MODIFICATION**

The Compliance Plan is the foundation for a dynamic program that provides a flexible framework for adapting to the changing healthcare environment in which Central Health operates within. It is reviewed at least annually by the CCO, and the Central Health Compliance Committee to ensure that it functions as intended, serves the purpose for which it has been designed, and enables Central Health to meet its high standards and commitment to compliance.

Maintaining organizational compliance is something that is not done once, nor is the effort complete once the program has been implemented. Central Health's leadership, and the CCO, with the Board's assurance, will continually strive to improve the Compliance Plan

and ensure it is tailored to issues relevant to Central Health's operations and the needs of Central Health's patients. When violations of Central Health's standards occur, they will be evaluated to determine how they could be prevented in the future and, if needed, the Compliance Plan and related policies and procedures will be modified accordingly. Central Health's team members will be educated as needed regarding any changes in the Compliance Plan or policies.

The CCO is responsible for assessing the overall effectiveness of Central Health's Compliance Program. To strengthen this process and align with guidance from the Office of Inspector General (OIG) and the Department of Justice (DOJ), the Compliance Plan tracks metrics including training completion rates and comprehension scores, analyzes hotline usage and the nature of reported concerns, monitors the timeliness of investigations and corrective actions, and administers employee surveys to assess awareness and culture of compliance. In addition, Central Health will consider periodic benchmarking against peer organizations and industry standards and engage external evaluators periodically for independent assessment.

## **IX. OVERVIEW OF RELEVANT LAWS**

There are many federal and state laws that govern Central Health. A general overview of some of the healthcare fraud and abuse laws that might apply is attached as **Exhibit C**. This overview is accurate as of the time this Compliance Plan was adopted. There may be changes to these laws periodically which are not reflected in Exhibit C. The reader should seek further guidance as necessary from the CCO.

## **X. REPORTING**

The following contact information shall be used to report fraud, waste and abuse:

### **Chief Compliance & Risk Officer**

Central Health  
Austin, TX 78702

Email: [CHCompliance@centralhealth.net](mailto:CHCompliance@centralhealth.net)

### **Compliance Department**

Email: [CHCompliance@centralhealth.net](mailto:CHCompliance@centralhealth.net)

### **Compliance and Ethics Hotline (Anonymous Reporting option)**

Hotline Website: [www.lighthouse-services.com/centralhealth](http://www.lighthouse-services.com/centralhealth)

Toll-Free Telephone: (833) 770-0080 (English)

Toll-Free Telephone: (800) 216-1288 (Spanish)

Email: [reports@lighthouse-services.com](mailto:reports@lighthouse-services.com)\*

Fax: (215) 689-3885\*

\*Must reference Central Health with the report

## **XI. SUMMARY**

The Central Health Compliance Plan confirms the establishment of a Compliance Officer, a Compliance Committee, and a program for effective training and education; auditing and monitoring; and the prevention, detection and resolution of fraud, waste and abuse. Effective and clear lines of communication have been established and internal investigation and disciplinary processes developed. Specific controls have been set in place to prevent and detect compliance issues, and procedures are in place for the reporting of non-compliance with applicable healthcare laws and regulations.

Central Health has established a clear commitment to compliance and program integrity.

## **EXHIBIT A**

### **RESOLUTION OF THE TRAVIS COUNTY HEALTHCARE DISTRICT D/B/A CENTRAL HEALTH BOARD OF MANAGERS REGARDING THE COMPLIANCE PROGRAM**

**WHEREAS**, the policy of Central Health has been always to conduct its business in compliance with applicable federal, state and local laws and regulations, and to adhere to the highest ethical standards; and

**WHEREAS**, Central Health recognizes that even unknowing violations of laws and regulations by Central Health employees, contractors and agents can subject the organization to civil and criminal penalties, tarnish its reputation for professionalism, and lead to unfavorable publicity; and

**WHEREAS**, Central Health recognizes that the federal agencies responsible for enforcement of laws and regulations applicable to healthcare providers have encouraged the development and implementation of formal compliance programs by healthcare providers; and

**WHEREAS**, Central Health believes that the development and implementation of a formal compliance program is consistent with the organization's efforts to improve quality and performance, and further reflects the organization's long-standing commitment to conduct its business in compliance with applicable Federal laws and regulations and applicable State laws and regulations and the highest ethical standards; and

**WHEREAS**, Central Health wishes to ensure that the Compliance Program is effective in identifying and correcting practices and policies that are not in compliance with applicable laws and regulations, including, where necessary, by providing for disciplinary action against those employees, contractors and agents that fail to comply with such laws and regulations; and

**WHEREAS**, Central Health further wishes the Compliance Program to formalize, and reflect specific standards of conduct and policies for educating and training employees, contractors and agents with respect to those standards, review and continually enhance internal controls and monitoring systems, and foster effective communication and responsiveness to address compliance issues.

**NOW, THEREFORE, BE IT RESOLVED** that the Board of Managers of this organization adopts the attached Compliance Plan. The Board of Managers shall receive periodic progress reports on the development, implementation, and ongoing operation of this Compliance Program.

**ADOPTED** this \_\_ day of \_\_\_\_\_, 2026 by the Central Health Board of Managers.

\_\_\_\_\_  
Chairperson  
Central Health Board of Managers

## **EXHIBIT B**

### **ACKNOWLEDGMENT ATTESTATION**

I, \_\_\_\_\_ the undersigned team member, contractor or agent of Central Health, do hereby acknowledge that I have read and reviewed Central Health's Compliance Plan.

I understand the content of the Compliance Plan and am fully aware that I must comply with these standards or face disciplinary measures.

I will cooperate fully with the CCO in the ongoing implementation of the Compliance Plan.

In addition, I will fully offer the CCO my assistance during all auditing, monitoring, and investigational activities related to my position at Central Health.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print/Type Name

\_\_\_\_\_  
Position

Note: This acknowledgement form will be signed and stored electronically as a part of the onboarding process, annually, and as needed periodically.

**EXHIBIT C**

**HEALTH CARE FRAUD AND ABUSE LAWS**

**Federal False Claims Act**

The federal False Claims Act (31 U.S.C. § 3729-3733) is a federal law that imposes penalties on any person or organization that knowingly makes a false record or files a false claim regarding any federal health care program, which includes any plan or program that provides health benefits, whether directly, through insurance, or otherwise, which is funded directly, in whole or in part, by the United States Government or any state health care program. “Knowingly” includes having actual knowledge that a claim is false or acting with “reckless disregard” as to whether a claim is false. Examples of potential false claims include knowingly billing Medicare for services that were not provided, submitting inaccurate or

misleading claims for actual services provided, or making false statements to obtain payment for services.

The federal False Claims Act contains provisions that allow private parties, also known as “qui tam relators,” with original information concerning fraud involving government health care programs to file a lawsuit on behalf of the government and, if the lawsuit is successful, to receive a portion of recoveries received by the government. The federal False Claims Act protects anyone who files a lawsuit under the Act from being fired, demoted, threatened or harassed by his or her employer as a result of filing a False Claims Act lawsuit. Remedies for retaliation include reinstatement with comparable seniority as the qui tam relator would have had but for the discrimination, two times the amount of any back pay, interest on any back pay and compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorney fees.

There are significant penalties for violating the federal False Claims Act. Financial penalties to an organization that submits a false claim can total as much as three times the amount of the claim plus fines. In addition to fines and penalties, the courts can impose criminal penalties against individuals and organizations for willful violations of the False Claims Act.

### **Program Fraud Civil Remedies Act**

In addition to the remedies available under the False Claims Act, the Program Fraud Civil Remedies Act (“PFCRA”) (31 U.S.C. § 3801 - 3812) provides an administrative remedy for false claims or statements submitted to certain federal agencies, including the U.S. Department of Health and Human Services. Generally, the PFCRA imposes civil monetary penalties on any person who makes, presents, or submits, or causes to be made, presented, or submitted, claims or statements that the person knows or has reason to know are false, fictitious or fraudulent. Persons violating the PFCRA are subject to civil monetary penalties of up to \$5,500 per false claim or statement and up to twice the amount claimed in lieu of damages. The PFCRA is generally limited to claims amounting to \$150,000 or less.

### **Federal Anti-Kickback Statute**

The federal Anti-Kickback Statute (42 U.S.C. § 1320a-7b(b)) makes it a criminal offense to knowingly and willfully offer, pay, solicit, or receive any remuneration to induce or reward referrals of items or services reimbursable by a federal health care program. Remuneration includes the transfer of anything of value, directly or indirectly, overtly or covertly, in cash or in kind.

If a transaction falls within a statutory exception or a regulatory “safe harbor” to the Anti-Kickback Statute, it is not treated as a violation. The safe harbor regulations were enacted to cover practices unlikely to result in fraud or abuse. For a safe harbor to apply, each and every requirement set forth in the regulation must be satisfied. However, even where a transaction does not fall within a safe harbor, it does not necessarily mean it is illegal; the transaction will be subject to scrutiny, and the more safe harbor conditions satisfied, the more likely it will be found not to violate the Anti-Kickback Statute.

Penalties for violation of the federal Anti-Kickback Statute include:

- Fines up to \$25,000;
- Imprisonment for up to five years;
- Exclusion from participation, regardless of whether a criminal conviction is obtained; and/or
- Civil monetary penalty equal to triple the amount of damages to the government, plus \$50,000 for each violation.

### **Federal Physician Self-Referral Law (“Stark Law”)**

The federal Stark Law (42 U.S.C. § 1395nn) prohibits physicians from referring patients who participate in Medicare for certain “designated health services” to an entity in which the physician (or an immediate family member) has a financial relationship, unless an exception is met. The statute also prohibits an entity furnishing the services pursuant to a prohibited referral from presenting a claim or bill to Medicare. Allegations of Stark Law violations are often coupled with federal False Claims Act allegations.

A financial relationship includes an ownership or investment interest in the entity providing the service, or an ownership or investment interest in a separate entity which holds an ownership or investment interest in the entity providing the service. It also includes a compensation arrangement between the physician (or an immediate family member) and the entity.

“Designated health services” covered by the Stark Law includes the following:

- Clinical laboratory services;
- Physical therapy services;
- Occupational therapy services;
- Radiology services, including magnetic resonance imaging, computerized axial tomography scans, and ultrasound services;
- Radiation therapy services and supplies;
- Durable medical equipment and supplies;
- Parenteral and enteral nutrients, equipment, and supplies;
- Prosthetics, orthotics, and prosthetic devices and supplies;
- Home health services;
- Outpatient prescription drugs;
- Inpatient and outpatient hospital services; and
- Outpatient speech-language pathology services.

If a physician or entity violates this statute, significant civil sanctions may be imposed, including:

- Mandatory denial of payment;
- Recoupment of amounts collected in violation of the statute;
- Exclusion from participation in Federal health care programs;
- Civil monetary penalty of up to \$15,000 for each bill or claim the person knew or should have known was for a service for which payment may not be made, plus treble damages; and/or
- Civil monetary penalty of up to \$100,000 for each arrangement or scheme which the physician or entity knew or should have known has a principal purpose of assuring referrals which would be in violation of the Stark Law.

The Stark Law also requires that any entity providing designated health services report to the government information concerning the entity's ownership, investment, and compensation arrangements. Failure to meet this reporting requirement would subject the entity to a civil monetary penalty of up to \$10,000 for each day the reporting requirement was to have been met.

Numerous exceptions apply to the Stark Law. However, unlike the safe harbors for the Anti-Kickback statute, if one of these exceptions is not satisfied, the relationship is automatically illegal, and the physician and entity are subject to sanctions.

## **EXHIBIT D**

### **COMPLIANCE POLICY AND PROCEDURES**

<b>Compliance Policy</b>	<b>Reference Code</b>
Compliance Plan	
Compliance Committee Charter	
Code of Conduct and Ethics for Board Members	CMP-010P
Code of Conduct and Ethics for Employees	CMP-002P
Compliance Investigations	CMP-008P
Compliance Program	CMP-001P
Compliance Training and Education	CMP-012P
Duality and Conflict of Interest	CMP-009P
Fraud, Waste, and Abuse	CMP-015P
Policies and Standard Operating Procedure Management	CMP-011P
Prohibition of Patient Inducement	CMP-014P
Reporting and Non-Retaliation	CMP-006P

*\*Additional compliance-related policies and procedures may be developed or updated as part of the Compliance Program's ongoing maturation and risk-based work plan.*

**EXHIBIT E**

**CODE OF CONDUCT AND ETHICS FOR EMPLOYEES  
CODE OF CONDUCT AND ETHICS FOR BOARD MEMBERS**



**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 MEETING**

**March 25, 2026**

## **REGULAR AGENDA ITEM 6**

Receive a presentation on, review, and take appropriate action on the Central Health Fiscal Year 2025 financial audit and receive a presentation on the audit results of Central Health's component units (Central Texas Community Health Centers dba CommUnityCare and Sendero Health Plans Inc.). (*Action Item*)

# Central Health

**Financial Statements and Supplemental  
Information as of and for the Year Ended  
September 30, 2025  
and Independent Auditors' Report**

Prepared for:  
Central Health

Presented by:  
Maxwell Locke & Ritter



# Agenda Slide

Overview of the Audit Report

Independent Auditors' Report

Internal Controls

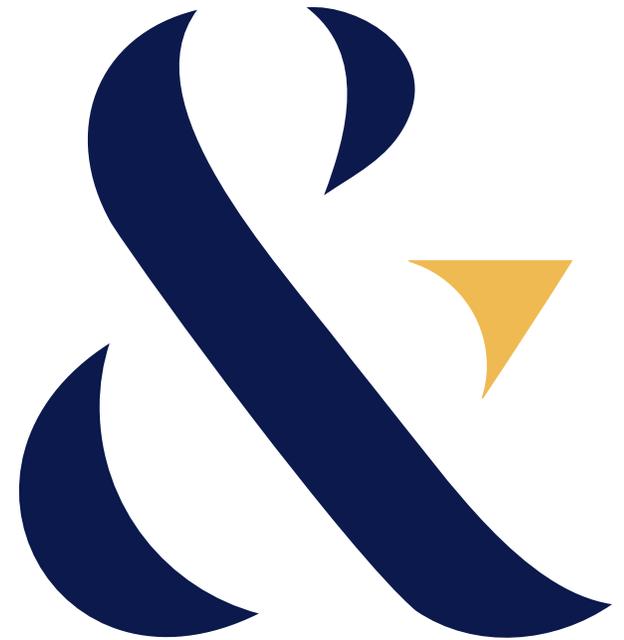
Central Health Financial Statements (one year presentation)

- Statement of Net Position
- Statement of Revenues, Expenses, and Changes in Net Position
- Statement of Cash Flows

Other Financial Highlights

Governance Letters

CommUnityCare



# Overview of the Audit Report

Central Health's financial statements consist of the financials of Central Health as well as its discretely presented component units. A separate audit for each component unit was conducted independent of the Central Health audit.

## **Contents of the Audit Report:**

- Independent Auditors' Report
- Management's Discussion & Analysis
- Basic Financial Statements:
  - Statement of Net Position
  - Statement of Revenues, Expenses, and Changes in Net Position
  - Statement of Cash Flows
  - Notes to the Financial Statements
- Independent Auditors' Report on Internal Control and Other Matters Based on an Audit Performed in Accordance with *Government Auditing Standards*

## **Component Units:**

- CommUnityCare
- Sendero Health Plans, Inc.
- Community Care Collaborative

# Independent Auditors' Report: Central Health

## Unmodified opinion

- Also known as a “clean” opinion and the best opinion that can be received on audited financial statements.

### Independent Auditors' Report

To the Board of Managers of  
Travis County Healthcare District dba Central Health:

### Report on the Audit of the Financial Statements

#### Opinion

We have audited the financial statements of the business-type activities and the aggregate discretely presented component units of the Travis County Healthcare District (dba and hereinafter referred to as “Central Health”), as of and for the year ended September 30, 2025, and the related notes to the financial statements, which collectively comprise Central Health’s basic financial statements as listed in the table of contents.

In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the respective financial position of the business-type activities and the aggregate discretely presented component units of Central Health, as of September 30, 2025, and the respective changes in financial position, and, where applicable, cash flows thereof for the year then ended in accordance with accounting principles generally accepted in the United States of America.

# Internal Controls- Central Health

**We did not identify any deficiencies in internal control that we consider to be material weaknesses:**

- A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis.
- A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected, on a timely basis.
- A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

# Summary of Financial Results: Central Health

Year-over-year, net position has increased by \$77.7M or 9%.

Total assets increased by \$77.5M, mostly due to an increase in CIP for the new administrative headquarters at the Hanock Center in Northeast Austin.

Current liabilities increased by \$8.3M, \$4.2M increase due to salaries and benefits payable (driven by increase in employees) and \$2.0M related to IBNR

Net investment in capital assets increased by \$42M, driven by CIP capitalized during the year.

Statement of Net Position (Primary Government Only)			
	2025	2024	% Change
Current Assets	\$615,940,085	\$616,539,077	<1%
Noncurrent assets	\$544,076,237	\$533,952,162	2%
Capital assets	\$248,744,808	\$180,741,742	38%
<b>Total Assets</b>	<b>\$1,408,761,130</b>	<b>\$1,331,232,981</b>	<b>6%</b>
Current Liabilities	\$69,501,450	\$61,212,943	14%
Noncurrent liabilities and deferred inflows of resources	\$432,055,299	\$440,515,191	(2%)
<b>Total Liabilities and Deferred Inflows of Resources</b>	<b>\$501,556,749</b>	<b>\$501,728,134</b>	<b>0%</b>
Net position:			
Net investment in capital assets	\$127,032,703	\$84,621,972	50%
Restricted for capital outlay	\$79,857,386	\$43,502,791	84%
Restricted for opioid remediation efforts	\$2,919,365	\$4,664,833	(37%)
Restricted in escrow	\$200,000	\$0	100%
Unrestricted	\$697,194,927	\$696,715,251	<1%
<b>Total net position</b>	<b>\$907,204,381</b>	<b>\$829,504,847</b>	<b>9%</b>

# Summary of Financial Results: Central Health

Operating revenues decreased by \$4.0M, mainly due to CEC lease ending.

Operating expenses increased by \$77.0M, due to increase in healthcare delivery expenses (driven by increase in number of locations and added services).

Statement of Revenues, Expenses, and Changes in Net Position (Primary Government Only)			
	2025	2024	% Change
Operating revenues:			
Lease revenue	\$12,966,615	\$17,057,617	(24%)
Ground sublease revenue	\$2,392,045	\$2,356,885	1%
Grant revenue	\$84,120	-	100%
<b>Total operating revenues</b>	<b>\$15,442,780</b>	<b>\$19,414,502</b>	<b>(20%)</b>
Operating expenses:			
Health care delivery	\$267,990,212	\$199,697,169	34%
Administrative expense	\$29,938,659	\$22,078,920	36%
UT affiliation	\$35,000,000	\$35,000,000	0%
Depreciation and amortization	\$10,981,672	\$10,165,960	8%
<b>Total operating expenses</b>	<b>\$343,910,543</b>	<b>\$266,942,049</b>	<b>29%</b>
<b>Net operating loss</b>	<b>(\$328,467,763)</b>	<b>\$(247,527,547)</b>	<b>33%</b>

# Summary of Financial Results: Central Health

Nonoperating revenues increased by \$48.3M primarily due to tax revenue increasing by \$28.8M (higher tax rate for FY25) and a \$21.3M gain on sale of capital assets for the sale of David Powell location.

## Statement of Revenues, Expenses, and Changes in Net Position (continued) (Primary Government Only)

	2025	2024	% Change
Nonoperating revenues, net:			
Net ad valorem tax revenue	\$341,040,674	\$312,161,403	9%
Investment income	\$38,129,195	\$44,394,284	(14%)
Net tobacco settlement revenue	\$6,817,278	\$5,194,413	31%
Opioid settlement revenue	\$1,108,668	\$4,664,833	(76%)
Interest expense	(\$8,424,651)	\$(8,719,908)	(3%)
Gain/(Loss) on disposal of capital assets	\$21,244,723	(\$92,435)	(23,083%)
Other revenue, net	\$6,251,410	\$112,771	5,443%
<b>Total nonoperating revenues, net</b>	<b>\$406,167,297</b>	<b>\$357,715,361</b>	<b>14%</b>
<b>Change in net position</b>	<b>\$77,699,534</b>	<b>\$110,187,814</b>	<b>(29%)</b>
Total net position - beginning of year	\$829,504,847	\$719,317,033	15%
<b>Total net position - end of year</b>	<b>\$907,204,381</b>	<b>\$829,504,847</b>	<b>9%</b>

## Other Financial Highlights

- **As of year end, Central Health's bank balances were fully collateralized and/or protected by FDIC insurance**
- **Investments are in compliance with Central Health's investment policy which complies with the Public Funds Investment Act**
- **Central Health had outstanding Certificates of Obligation and General Obligation Bonds of \$157,670,000, of which \$8,320,000 in principal is due in fiscal year 2026**

# Governance Letter

(required communications to those charged with governance)

- **Qualitative Aspects of Accounting Practices**
  - No new accounting policies were adopted during the year ended September 30, 2025
- **Difficulties Encountered in Performing the Audit**
  - There were no difficulties encountered in performing and completing our audit.
- **Adjustments Identified During the Audit**
  - No significant misstatements were detected as a result of our audit procedures.
- **Disagreements with Management**
  - There were no disagreements with management that arose during the course of our audit.

# CommUnityCare

**Independent Auditors' Report  
And Financial Statements  
as of and for the Year Ended  
September 30, 2025**



# Independent Auditors' Report - CommUnityCare

## **Unmodified opinion**

- Also known as a “clean” opinion and the best opinion that can be received on audited financial statements.

## **Independent Auditors' Report**

To the Board of Directors of  
Central Texas Community Health Centers, Inc. (dba CommUnityCare):

## **Opinion**

We have audited the financial statements of Central Texas Community Health Centers, Inc. (dba and hereinafter referred to as “CommUnityCare”), a component unit of Travis County Healthcare District (dba Central Health), (a nonprofit organization), which comprise the statement of financial position as of September 30, 2025, and the related statements of operations and changes in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the financial position of CommUnityCare as of September 30, 2025 and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

# Independent Auditors' Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*

## **Internal Control Over Financial Reporting**

- During our audit, we did not identify any deficiencies in internal control that we consider to be material weaknesses.

## **Compliance and Other Matters**

- The results of our tests of CommUnityCare's compliance with certain provisions of laws, regulations, contracts, and grant agreements disclosed no instances of noncompliance that are required to be reported under *Government Auditing Standards*.

# Independent Auditors' Report on Compliance for Each Major Federal and State Program and on Internal Control Over Compliance Required by the Uniform Guidance and Texas Grant Management Standards

## **Opinion on Each Major Federal and State Program**

- CommUnityCare complied, in all material respects, with the compliance requirements that could have a direct and material effect on each of its major federal and state programs.

## **Report on Internal Control Over Compliance**

- We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses.

# Thank you!

 512-370-3200

 [PPatel@mlrpc.com](mailto:PPatel@mlrpc.com)

 [facebook.com/MaxLocRit](https://facebook.com/MaxLocRit)

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## CENTRAL HEALTH

### MEMORANDUM

To: Central Health Board of Managers  
From: Nicki Riley, Deputy CFO  
CC: Jeff Knodel, CFO; Dr. Patrick Lee, President & CEO  
Date: 3/3/2026  
Re: FY 2025 Audit Report

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Attached is the latest draft of the FY 2025 Central Health Audit Report prepared by Maxwell, Locke and Ritter, the external audit firm for both Central Health and CommUnityCare.

As a best practice, the audit firm presents its findings directly to the governing board. Accordingly, a presentation is scheduled for the upcoming Budget & Finance Committee meeting on March 25th. The presentation was previously included in the February agenda packet. As a reminder, Central Health received an Unmodified Opinion, the highest level of assurance an auditor can issue.

The auditors also review an entity's internal controls and identify any material or significant control deficiencies. In their report to the Board, they noted no findings of deficient internal controls, reflecting the effectiveness of the organization's financial management and the Board's oversight.

Maxwell, Lock and Ritter will also provide a brief overview of CommUnityCare's audit results. CommUnityCare likewise received an Unmodified Opinion and no internal control findings.

Please do not hesitate to let me know if you have any questions.

# **Travis County Healthcare District dba Central Health**

**Financial Statements and  
Supplemental Information  
as of and for the Year Ended  
September 30, 2025 and  
Independent Auditors' Report**

# Travis County Healthcare District dba Central Health

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## **Independent Auditors' Report**

To the Board of Managers of  
Travis County Healthcare District dba Central Health:

### **Report on the Audit of the Financial Statements**

#### **Opinion**

We have audited the financial statements of the business-type activities and the aggregate discretely presented component units of the Travis County Healthcare District (dba and hereinafter referred to as "Central Health"), as of and for the year ended September 30, 2025, and the related notes to the financial statements, which collectively comprise Central Health's basic financial statements as listed in the table of contents.

In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the respective financial position of the business-type activities and the aggregate discretely presented component units of Central Health, as of September 30, 2025, and the respective changes in financial position, and, where applicable, cash flows thereof for the year then ended in accordance with accounting principles generally accepted in the United States of America.

We did not audit the financial statements of Sendero Health Plans, Inc. ("Sendero"), a discretely presented component unit of Central Health. Those statements were audited by other auditors whose report has been furnished to us, and our opinion, insofar as it relates to the amounts included for Sendero, is based solely on the report of the other auditors.

#### **Basis for Opinion**

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Central Health and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

## **Responsibilities of Management for the Financial Statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Central Health's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

## **Auditors' Responsibilities for the Audit of the Financial Statements**

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with auditing standards generally accepted in the United States of America and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with auditing standards generally accepted in the United States of America and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Central Health's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Central Health's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

### **Required Supplementary Information**

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

### **Other Reporting Required by Government Auditing Standards**

In accordance with *Government Auditing Standards*, we have also issued our report dated **Month XX, 2026** on our consideration of Central Health's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Central Health's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Central Health's internal control over financial reporting and compliance.

Austin, Texas  
**Month XX, 2026**

# Travis County Healthcare District dba Central Health

## Management's Discussion and Analysis Year Ended September 30, 2025

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This section of the Travis County Healthcare District's (dba and hereinafter referred to as "Central Health") financial report presents background information and management's analysis of Central Health's financial results for the fiscal year ended September 30, 2025. Please read this section in conjunction with Central Health's financial statements, which begin on page 13.

### Background and Formation

In 2003, the 78<sup>th</sup> Session of the Texas Legislature amended Chapter 281 of the Texas Health and Safety Code to enable Travis County, Texas ("Travis County") to create a hospital district. For a copy of the code see: [www.statutes.legis.state.tx.us/Docs/hs/htm/hs.281.htm](http://www.statutes.legis.state.tx.us/Docs/hs/htm/hs.281.htm). Chapter 281 states that a county may create a countywide hospital district to furnish medical aid and hospital care to indigent and needy persons residing in Travis County. The law stipulates that creation of a hospital district is dependent upon approval by a majority of the qualified voters of the county. On May 15, 2004, Travis County held a countywide election to determine if the voters of the county supported the creation of a hospital district. The proposition passed with 54.73% of the voters supporting the creation of the new district, now doing business as Central Health.

Upon creation of Central Health, Travis County and the City of Austin, Texas ("City of Austin") transferred the portion of their tax base dedicated to health care to Central Health. This change served to redistribute the cost of health care more equally across all residents of Travis County. Previously, City of Austin residents paid a higher percentage of their taxes for health care than did those residing within Travis County but outside the City of Austin's city limits. With the creation of Central Health, the tax burden was distributed equally across all residents.

In addition to the tax base, Central Health received ownership of and responsibility for the Downtown Campus, which at the time was leased to Seton Healthcare Family which was a predecessor to Ascension Texas ("Seton") to operate University Medical Center Brackenridge ("UMCB") and Children's Hospital of Austin, the hospitals located on the campus, Austin Women's Hospital (leased to the University of Texas Medical Branch to operate), and the Central Texas Community Health Centers, operated until March 1, 2009 by the City of Austin through an interlocal agreement between Central Health and the City of Austin. In June 2007, Seton opened the new Dell Children's Medical Center of Central Texas which is not located on the Downtown Campus nor owned by Central Health. The former Children's Hospital associated with the Downtown Campus was converted into various other uses and is currently leased from Central Health by Seton.

Chapter 281 allows Central Health to create a health maintenance organization to provide or arrange for health care services for the residents of the district. Central Health may also create a charitable organization to facilitate management of a district health care program by providing or arranging health care services, developing resources for health care services, or providing ancillary support services for the district. Under state law, counties are required to provide medical services for indigent residents. In Texas, indigent is defined as an individual with net income at or below 21% of federal poverty income guidelines (Chapter 61 of the Texas Health and Safety Code).

Central Health may levy taxes to finance health care services and the levy of tax shall not exceed 25 cents on each \$100 of assessed valuation of property taxable by Central Health. The fiscal year 2025 tax levy for Central Health was \$0.107969 per \$100 valuation of assessed property.

Effective March 1, 2009, Central Health and its affiliated entity, the Central Texas Community Health Centers, Inc. (dba and herein after referred to as “CommUnityCare”), a 501(c)(3) nonprofit corporation, became joint holders of the Federally Qualified Health Center (“FQHC”) designation awarded by the Health Resources and Services Administration of the U.S. Department of Health and Human Services Department. This designation allows the countywide system of primary clinics operated by CommUnityCare and supported by Central Health to participate in various federal programs; to receive enhanced Medicaid reimbursement for primary care patient visits at CommUnityCare; to receive medical malpractice insurance coverage under the Federal Tort Claims Act for its physicians; and to benefit from substantial reductions in the cost of pharmaceuticals prescribed to patients in Central Health’s Medical Assistance Program who are treated at CommUnityCare.

In addition, on March 1, 2009, other assets formerly owned by the City of Austin were transferred pursuant to State law to Central Health upon resolution of the FQHC status of CommUnityCare and Central Health.

In May of 2017, Seton transitioned operations from the Downtown Campus to Dell Seton Medical Center at The University of Texas (“DSMC-UT”), a new 211-bed teaching hospital and Level 1 trauma center. Built, owned and operated by Seton. DSMC-UT serves as the safety net hospital in Travis County and can accommodate more patients than UMCB and serves as the primary teaching hospital for Dell Medical School at The University of Texas at Austin.

With the transition of hospital operations, Central Health has entered into agreements within the 14.3 acre Central Health Downtown Campus to provide long-term funding for the mission of Central Health. Effective October 1, 2024, Seton provided notice of termination of the lease of the Clinical Education Center (CEC) and renewed the lease of the adjoining parking garage that accesses DSMC-UT. Central Health has renovated a portion of the CEC to serve as a 50-bed respite center and limited clinical services in addition to the relocation of administrative personnel from its Cesar Chavez building. In 2018, a portion of the Central Health Downtown Campus was leased to the 2033 LP. Under the agreement, the 2033 LP leased approximately 2.8 acres of the 14.3 acre Downtown Campus. In October 2018, the 2033 LP assigned the lease to the 2033 Higher Education Development Foundation, a Texas nonprofit corporation.

The 2033 Higher Education Development Foundation has completed construction of a new 17-story office building on the land referred to as Block 164. A portion of the campus, referred to as Block 167, is also leased to the 2033 Higher Education Development Foundation for a period of 99 years. The remaining parcel, Block 165, will be available for future redevelopment plans. The Central Health Board of Managers will contemplate future decisions regarding the ongoing redevelopment of the Central Health Downtown Campus.

## Fiscal Year 2025 Operational Highlights

- Central Health's net position increased \$77.7 million, a 9% increase compared to prior year net position.
- During the year, Central Health's total operating revenues were \$15.4 million and operating expenses were \$343.9 million. Nonoperating revenues, comprised primarily of property tax revenue, were \$406.2 million, net of nonoperating expenses.
- In order to responsibly manage financial resources, Central Health maintains reserve funds for financial security and operational stability in consideration of the risks it faces. The Emergency Reserve is maintained for unanticipated emergencies and is maintained at approximately 15% of eligible budgeted expenses set annually through adoption of the budget. In addition, Central Health maintains a Contingency Reserve to serve as a funding source for one-time expenditures or for ongoing expenditures when needed for cyclical or temporary structural deficits. Central Health also maintains a Capital Reserve to fund capital assets or projects funded through the issuance of debt, grants, or operating transfers.
- In August 2023, the Central Health Board of Managers adopted a seven year Strategic Plan, a roadmap for building a high-functioning, comprehensive safety-net healthcare system in Travis County. The Plan was adopted following an 18-month planning process that included community input, clinical and data analysis, and benchmarking against national peers. Over the next seven years, Central Health expects to invest up to \$700 million to implement the Plan.
- Central Health's Del Valle Health and Wellness Center, opened in the Spring of 2025. Central Health has contracted with CommUnityCare to provide primary care, including pediatrics and women's health, behavioral health, dental and pharmacy services.
- In July 2025, Central Health opened a medical respite center and clinic in the Continuing Education Center located in the Downtown Campus, which was previously leased to Seton. This center includes 50 beds, three day rooms, a serenity room, a dining area and tranquility garden. The clinic serves both respite and other Central Health patients.
- Construction continued throughout FY 2025 on the former Sears building located within Hancock Center. Central Health plans to open a multi-specialty clinic for a significant number of specialty areas, in addition to primary care, dental, and other ancillary services. In addition, an administrative headquarters will be constructed on the second level to co-locate certain administrative functions for Central Health, CommUnityCare, and Sendero Health Plans. It will also serve as the site for the relocation of the David Powell Clinic and the Hancock CommUnityCare Clinic.

- Central Health purchased land in Colony Park in 2022, located within the City of Austin’s master planned development in Eastern Travis County, to construct a 32,000 square foot facility that will bring vital health services and community space to Northeast Austin. Groundbreaking is expected in 2026, with doors opening to patients in Spring 2027.
- Through its partner, CommUnityCare, provided health care services to 147,018 unique patients during FY 2025.
- In 2025 Central Health continued to provide funding for a premium assistance program for high risk patients enrolled in Sendero Health Plans that served approximately 922 members.
- Central Health served as the administrator of the Local Provider Participation Fund that assessed and collected mandatory payments from hospitals in Travis County. Central Health collected \$335.1 million in mandatory payments and made intergovernmental transfers within eligible supplemental funding programs of \$329.1 million during the fiscal year.
- In January 2023, Central Health filed a lawsuit against Ascension Texas, formerly known as Seton Healthcare Family, for failing to meet its contractual obligation to provide healthcare services for Travis County residents with low income. On May 2, 2023, Ascension sent Central Health a Funding Deadlock and Governance Deadlock notice. This additional dispute was not resolved through mediation. On April 2, 2025, both parties agreed to an Agreed Motion to Abate for a period of 150 days from April 2, 2025, to August 30, 2025. On September 9, 2025, both parties executed a Court-approved Order to Extend Abatement agreement until March 31, 2026.

## **Financial Statements**

Central Health’s financial statements are prepared on an accrual basis of accounting and are accounted for as a single enterprise fund. The financial statements consist of three statements: (1) statement of net position, (2) statement of revenues, expenses, and changes in net position, and (3) statement of cash flows.

The statement of net position and the statement of revenues, expenses, and changes in net position reflect Central Health’s financial position at the end of the fiscal year and report Central Health’s net position and changes in net position as a result of Central Health’s revenues and expenses for the year. The term “net position” represents the difference between assets, or Central Health’s investment in resources, and liabilities, or Central Health’s obligation to its creditors. Increases or decreases in net position are an indicator of whether financial health is improving or deteriorating. Other nonfinancial factors should be considered, however, in evaluating financial health, such as changes in Central Health’s patient base, changes in economic conditions, taxable property values, tax rates, and changes in government legislation or required government accounting standards.

The statement of cash flows reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and financing activities. The statement summarizes the sources of cash, how it was used, and the change in cash balance during the year.

The financial statements include not only Central Health itself (known as the primary government entity), but also three legally separate entities as component units. CommUnityCare, Sendero, and Community Care Collaborative each are included as discretely presented component units as there is some financial accountability by each to Central Health. Additional information regarding the component units can be found in Note 1 of the notes to the financial statements.

## Statement of Net Position

The following table summarizes Central Health's assets, liabilities and net position as of September 30, 2025 and 2024:

**TABLE 1**  
**Condensed Statement of Net Position**

	2025	2024	% Fluctuation
Current assets	\$ 615,940,085	\$ 616,539,077	<(1%)
Noncurrent assets	544,076,237	533,952,162	2%
Capital assets	248,744,808	180,741,742	38%
Total assets	<u>1,408,761,130</u>	<u>1,331,232,981</u>	6%
Current liabilities	69,501,450	61,212,943	14%
Noncurrent liabilities	207,855,604	212,444,004	(2%)
Total liabilities	<u>277,357,054</u>	<u>273,656,947</u>	1%
Deferred inflows of resources	<u>224,199,695</u>	<u>228,071,187</u>	(2%)
Net position:			
Net investment in capital assets	127,032,703	84,621,972	50%
Restricted for capital outlay	79,857,386	43,502,791	84%
Restricted for opioid remediation efforts	2,919,365	4,664,833	(37%)
Restricted in escrow	200,000	-	100%
Unrestricted	<u>697,194,927</u>	<u>696,715,251</u>	<1%
Total net position	<u>\$ 907,204,381</u>	<u>\$ 829,504,847</u>	9%

As shown in Table 1, net position was \$907.2 million as of September 30, 2025 and \$829.5 million as of September 30, 2024. The increase in net position is a result of an increase in tax revenue of \$28.9 million and an increase in gain on disposal of capital assets of \$21.3 million.

## Statement of Revenues, Expenses, and Changes in Net Position

The following table summarizes Central Health's revenues, expenses, and changes in net position during the years ended September 30, 2025 and 2024:

**TABLE 2**  
**Condensed Statement of Revenues, Expenses, and Changes in Net Position**

	2025	2024	% Fluctuation
Operating revenues:			
Lease revenue	\$ 12,966,615	\$ 17,057,617	(24%)
Ground sublease revenue	2,392,045	2,356,885	1%
Grant revenue	84,120	-	100%
Total operating revenues	<u>15,442,780</u>	<u>19,414,502</u>	(20%)
Operating expenses:			
Health care delivery	267,990,212	199,697,169	34%
UT affiliation	35,000,000	35,000,000	0%
Administration	29,938,659	22,078,920	36%
Depreciation and amortization	10,981,672	10,165,960	8%
Total operating expenses	<u>343,910,543</u>	<u>266,942,049</u>	29%
Operating loss	(328,467,763)	(247,527,547)	33%
Nonoperating revenues, net:			
Net ad valorem tax revenue	341,040,674	312,161,403	9%
Investment income	38,129,195	44,394,284	(14%)
Net tobacco settlement revenue	6,817,278	5,194,413	31%
Opioid settlement revenue	1,108,668	4,664,833	(76%)
Interest expense	(8,424,651)	(8,719,908)	(3%)
Gain (loss) on disposal of capital assets	21,244,723	(92,435)	(23,083%)
Other revenue, net	6,251,410	112,771	5,443%
Total nonoperating revenues, net	<u>406,167,297</u>	<u>357,715,361</u>	14%
Change in net position	77,699,534	110,187,814	(29%)
Total net position - beginning of year	<u>829,504,847</u>	<u>719,317,033</u>	15%
Total net position - end of year	<u>\$ 907,204,381</u>	<u>\$ 829,504,847</u>	9%

Central Health's operating revenues were \$15.4 million for the year ended September 30, 2025, comprised primarily of \$13.0 million in lease revenue and \$2.4 million in ground sublease revenue. Central Health's operating loss was \$328.5 million for the year ended September 30, 2025. Central Health receives property tax revenues to subsidize the cost of services provided to qualified uninsured patients. Although the costs incurred to provide these services are reflected above as operating expenses, the property tax revenues levied to subsidize those costs are required to be reported as nonoperating revenues.

Nonoperating revenues, net were \$406.2 million for the year ended September 30, 2025, comprised mainly of net property taxes of \$341.0 million, investment income of \$38.1 million, gain on disposal of capital assets of \$21.2 million, and tobacco settlement revenue of \$6.8 million.

## Capital Assets

With the creation of Central Health, the City of Austin conveyed ownership of assets associated with the Downtown Campus, the Austin Women's Hospital, and medical equipment used in the health care clinics to Central Health. Travis County also conveyed medical equipment used in the health care clinics to Central Health. The City of Austin donated an office building to Central Health, which Central Health currently uses for its headquarters.

On March 1, 2009, other assets formerly owned by the City of Austin were transferred pursuant to State law to Central Health upon resolution of the FQHC status of CommUnityCare and Central Health, including the David Powell Clinic and the Montopolis Clinic. During the year ended September 30, 2016, Central Health re-conveyed one of the buildings back to the City of Austin.

During the years ended September 30, 2020 and September 30, 2019, Central Health acquired two parcels of land in eastern Travis County to build new clinic facilities to serve the Central Health covered patient population. The Hornsby Bend Health and Wellness Center was completed and began offering services in the fall of 2023. The second clinic, Del Valle Health and Wellness Clinic opened in Spring 2025.

In August 2021, Central Health acquired land and buildings (formerly the Sears building and existing CommUnityCare clinic site located in Hancock Center) located along the IH 35 corridor to expand healthcare services and consolidate administrative operations that are currently maintained at multiple leased sites. Groundbreaking of the construction was held in December 2024. The relocation of the David Powell Clinic and Hancock CommUnityCare Hancock clinic is set to be completed in Spring 2026, with the remaining facility anticipated to be completed by the end of 2026.

In April 2023, Central Health acquired land and buildings located on Cameron Road for \$14.4 million. The site, currently called Cameron Center, is the location that Central Health plans to build a permanent respite facility for people experiencing homelessness. The three-building complex at U.S. 183 and Cameron Road in northeast Austin will also include a high-risk medical clinic as well as substance use treatment.

All conveyed and donated assets were recorded at fair market value at the date of receipt based on independent third-party appraisals (if applicable). The following table summarizes Central Health's capital assets at September 30, 2025 and 2024.

**TABLE 3**  
**Capital Assets**

	<u>2025</u>	<u>2024</u>
Land	\$ 28,421,314	\$ 28,846,314
Capital projects in progress	85,587,928	29,532,645
Buildings and improvements	104,033,857	89,228,483
Equipment and furniture	23,057,620	20,449,974
Right to use leased assets	47,485,755	47,379,838
Subscription-based IT assets	<u>17,781,274</u>	<u>12,513,675</u>
Subtotal	306,367,748	227,950,929
Less accumulated depreciation and amortization	<u>(57,622,940)</u>	<u>(47,209,187)</u>
Total capital assets, net	<u>\$ 248,744,808</u>	<u>\$ 180,741,742</u>

Additional information regarding Central Health's capital assets can be found in Note 6 of the notes to the financial statements.

### Long-Term Debt

**TABLE 4**  
**Long-Term Debt**

	<u>2025</u>	<u>2024</u>
Bonds payable	\$ 1,250,000	\$ 2,485,000
Certificates of obligation	156,420,000	163,220,000
Bond premium	<u>2,401,231</u>	<u>2,536,685</u>
Total long-term debt	<u>\$ 160,071,231</u>	<u>\$ 168,241,685</u>

Central Health issued \$16,000,000 in Certificates of Obligation Taxable, Series 2011 on September 20, 2011. On May 5, 2020, Central Health issued \$7,285,000 of Limited Tax Refunding Bonds to advance refund previously issued certificates of obligation with lower interest expense resulting in \$601,684 in total savings.

On September 21, 2021, Central Health issued \$62,755,000 of Certificates of Obligation, Taxable Series 2021 (Limited Tax) and \$13,630,000 of Certificates of Obligation, Series 2021 (Limited Tax) for the construction, acquisition, improvement, renovation and equipping of buildings and land to be used as a site for the management and administration of District services and the delivery and provision of clinical and medical services.

On August 8, 2023, Central Health issued \$8,385,000 of Certificates of Obligation, Series 2023A (Limited Tax) for renovations to the Rosewood Zaragoza multispecialty clinic and \$90,965,000 of Certificates of Obligation, Taxable Series 2023B (Limited Tax) for the purchase and renovation of the Cameron Center buildings. Additional information regarding Central Health's long-term debt can be found in Note 7 of the notes to the financial statements.

## **Economic Conditions and Plan for Fiscal Year 2026**

In planning for fiscal year 2026, there are a number of factors Central Health will need to consider, including the following:

- The expiration of enhanced premium tax credits under the Affordable Care Act may increase the number of uninsured or underinsured Travis County residents, driving higher demand for Central Health supported services and straining clinic access and appointment availability.
- Ongoing challenges in the availability of specialty and primary care healthcare providers, has required Central Health to engage external services to support recruitment and hiring, which also affects access to care. Central Health will continue collaborating with CommUnityCare, Sendero, Ascension and the Dell Medical School at The University of Texas at Austin and other community partners to ensure the provision of quality health services for residents of Travis County.
- Federal funding cuts have reduced resources for local nonprofit partners, increasing funding pressure on the overall local and regional systems of care. Central Health is pursuing integration initiatives with CommUnityCare and Sendero to support cost efficiency and improve the patient experience by reducing duplicative services and improving coordination across entities.
- Funding requirements of HMO risk-based capital reserves and financial capacity for Sendero (a community-based health plan and a component unit of Central Health), including continued funding for an expanded premium assistance program for low income Travis County residents. Actual payments will be based on risk-based capital requirement levels as determined by the Texas Department of Insurance.
- The Central Health Board of Managers adopted a total tax rate of \$0.118023 per \$100 valuation of real and personal property for fiscal year 2025 that balances affordability and sustainability of current and future healthcare services.

## **Contacting Central Health Financial Management**

The financial report is designed to provide the taxpayers and Central Health's customers, creditors, and suppliers with a general overview of Central Health's finances and to demonstrate Central Health's accountability for the funds it receives. If you have questions about this report or need additional financial information, contact Central Health's financial offices as follows:

By mail: Travis County Healthcare District, 1111 E. Cesar Chavez, Austin, Texas 78702  
Attention: Deputy Chief Financial Officer

By telephone: 512.978.8000, Travis County Healthcare District  
Attention: Deputy Chief Financial Officer

# Travis County Healthcare District dba Central Health

## Statements of Net Position September 30, 2025

	Primary Government	Component Units		
	Business-type Activities	CommUnityCare	Sendero (December 31, 2024)	Community Care Collaborative
<b>Assets</b>				
<b>Current assets:</b>				
Cash and cash equivalents	\$ 6,410,577	\$ 12,062,288	\$ 21,107,381	\$ 75
Cash restricted in escrow	200,000	-	-	-
Cash restricted for Local Provider Participation Fund (Note 16)	25,519	-	-	-
Short-term investments	548,227,316	13,247,101	3,470,922	-
Ad valorem taxes receivable, net of allowance for uncollectible taxes of \$5,766,003	3,434,873	-	-	-
Accounts receivable, net of allowance for doubtful amounts of \$12,785,017	-	13,919,871	5,302,666	-
Reinsurance recoverables	-	-	884,907	-
Grants receivable	-	1,662,482	-	-
Lease receivable	165,123	-	-	-
Other receivables	56,567,692	-	55,526,649	83,962
Inventory	-	711,158	-	-
Prepaid expenses and other assets	908,985	1,510,743	780,232	-
<b>Total current assets</b>	<b>615,940,085</b>	<b>43,113,643</b>	<b>87,072,757</b>	<b>84,037</b>
<b>Noncurrent assets:</b>				
Investments restricted for capital acquisition	79,857,386	-	-	-
Investments restricted for Local Provider Participation Fund (Note 16)	8,675,691	-	-	-
Investments restricted for facilities	91,090,475	-	-	-
Investments restricted for Opioid Abatement Fund	2,919,365	-	-	-
Long-term receivables	4,000,000	-	-	-
Investment in Sendero	83,000,000	-	-	-
Sendero surplus debenture	37,083,000	-	-	-
Lease receivable	237,450,320	-	-	-
Goodwill	-	17,849,487	-	-
<b>Capital assets:</b>				
Land	28,421,314	-	-	-
Right to use leased assets - land	42,921,307	-	-	-
Capital projects in progress	85,587,928	-	-	-
Buildings and improvements	104,033,857	7,641,825	-	-
Right to use leased assets - buildings	4,564,448	-	637,344	-
Equipment and furniture	23,057,620	5,420,695	38,215	-
Subscription-based IT assets	17,781,274	-	-	-
Less accumulated depreciation and amortization	(57,622,940)	(3,169,307)	(528,366)	-
<b>Total capital assets, net</b>	<b>248,744,808</b>	<b>18,540,950</b>	<b>147,193</b>	<b>-</b>
<b>Total noncurrent assets</b>	<b>792,821,045</b>	<b>36,390,437</b>	<b>147,193</b>	<b>-</b>
<b>Total assets</b>	<b>1,408,761,130</b>	<b>79,504,080</b>	<b>87,219,950</b>	<b>84,037</b>
<b>Liabilities and Deferred Inflows of Resources</b>				
<b>Current liabilities:</b>				
Accounts payable	17,940,762	5,815,783	1,334,863	-
Unpaid losses, loss adjustment expenses and risk adjustment payable	-	-	14,013,203	-
Claims payable	-	-	1,179,489	-
Medical loss ratio rebate	-	-	975,436	-
Salaries and benefits payable	13,100,719	11,172,461	-	-
Accrued interest	3,306,122	-	-	-
Other accrued liabilities	21,505,661	568,401	4,715,538	82,500
Bonds and certificates of obligations payable	8,320,000	-	-	-
Premium tax payable	-	-	1,029,675	-
Lease payable	1,203,519	2,395,903	153,467	-
Subscription-based IT payable	4,124,667	-	-	-
Unearned revenue	-	367,880	2,527,196	-
Surplus debenture	-	-	37,083,000	-
Due to Central Health	-	1,261,947	30,833,826	-
<b>Total current liabilities</b>	<b>69,501,450</b>	<b>21,582,375</b>	<b>93,845,693</b>	<b>82,500</b>
<b>Noncurrent liabilities:</b>				
Bonds and certificates of obligations payable	151,751,231	-	-	-
Due to Local Provider Participation Fund (Note 16)	8,701,210	-	-	-
Lease payable	42,865,096	6,391,819	-	-
Subscription-based IT payable	4,538,067	-	-	-
Due to Central Health	-	4,000,000	-	-
<b>Total noncurrent liabilities</b>	<b>207,855,604</b>	<b>10,391,819</b>	<b>-</b>	<b>-</b>
<b>Total liabilities</b>	<b>277,357,054</b>	<b>31,974,194</b>	<b>93,845,693</b>	<b>82,500</b>
<b>Deferred inflows of resources-</b>				
Leases	224,199,695	-	-	-
<b>Total liabilities and deferred inflows of resources</b>	<b>501,556,749</b>	<b>31,974,194</b>	<b>93,845,693</b>	<b>82,500</b>
<b>Net position</b>				
Net investment in capital assets	127,032,703	-	-	-
Restricted for capital acquisition and facilities	79,857,386	-	-	-
Restricted for opioid remediation efforts	2,919,365	-	-	-
Restricted for HMO	-	-	83,000,000	-
Restricted in escrow	200,000	-	-	-
Unrestricted	697,194,927	47,529,886	(89,625,743)	1,537
<b>Total net position</b>	<b>\$ 907,204,381</b>	<b>\$ 47,529,886</b>	<b>\$ (6,625,743)</b>	<b>\$ 1,537</b>

The notes to the financial statements are an integral part of these statements.

# Travis County Healthcare District dba Central Health

## Statements of Revenues, Expenses, and Changes in Net Position Year Ended September 30, 2025

	Primary	Component Units		
	Government		Sendero	Community Care
	Business-type	CommUnityCare	(December 31, 2024)	Collaborative
	Activities			
Operating revenues:				
Lease revenue	\$ 12,966,615	\$ -	\$ -	\$ -
Ground sublease revenue	2,392,045	-	-	-
Net patient service revenue	-	210,940,288	-	-
Premium revenue, net	-	-	145,825,466	-
Grant revenue	84,120	14,223,962	-	-
Foundation grant revenue	-	2,349,873	-	-
Revenue received from Central Health	-	21,752,781	-	-
Revenue received from Seton Affiliation	-	266,490	-	-
<b>Total operating revenues</b>	<b>15,442,780</b>	<b>249,533,394</b>	<b>145,825,466</b>	<b>-</b>
Operating expenses:				
Health care delivery	267,990,212	-	-	-
Program services	-	214,401,019	-	-
Medical expenses, net of reinsurance	-	-	115,764,767	-
Supporting services	-	37,630,212	-	-
Administration	29,938,659	-	11,612,089	-
Salaries and benefits	-	-	4,323,601	-
Outsourced services	-	-	4,527,987	-
UT Affiliation	35,000,000	-	-	-
Depreciation and amortization	10,981,672	-	-	-
<b>Total operating expenses</b>	<b>343,910,543</b>	<b>252,031,231</b>	<b>136,228,444</b>	<b>-</b>
Operating income (loss)	(328,467,763)	(2,497,837)	9,597,022	-
Nonoperating revenues (expenses):				
Ad valorem tax revenue	344,514,330	-	-	-
Tax assessment and collection expense	(3,473,656)	-	-	-
Tobacco settlement revenue, net	6,817,278	-	-	-
Opioid settlement revenue	1,108,668	-	-	-
Investment income	38,129,195	-	-	-
Interest expense	(8,424,651)	-	-	-
Gain on sale of capital assets	21,244,723	-	-	-
Other revenue, net	6,251,410	896,632	23,067	-
<b>Total nonoperating revenues, net</b>	<b>406,167,297</b>	<b>896,632</b>	<b>23,067</b>	<b>-</b>
Change in net position	77,699,534	(1,601,205)	9,620,089	-
Total net position - beginning of year	829,504,847	49,131,091	(16,245,832)	1,537
Total net position - end of year	\$ 907,204,381	\$ 47,529,886	\$ (6,625,743)	\$ 1,537

The notes to the financial statements are an integral part of these statements.

# Travis County Healthcare District dba Central Health

## Statement of Cash Flows Year Ended September 30, 2025

Cash flows from operating activities:	
Cash received for leases	\$ 8,921,016
Cash payments for health care delivery	(23,595,163)
Cash payments to administrative employees	(16,358,630)
Cash payments for goods and services	(5,623,040)
Net cash used in operating activities	<u>(336,655,817)</u>
Cash flows from noncapital financing activities:	
Ad valorem taxes received	344,140,635
Payments for tax assessment and collection	(3,473,656)
Tobacco settlement received, net	6,817,278
Opioid settlement revenue	1,108,668
Other nonoperating expenses paid, net	6,251,410
Cash received for Local Provider Participation Fund	335,087,911
Cash payments on behalf of Local Provider Participation Fund	(329,101,507)
Receipts from Affiliates, net	3,810,886
Net cash provided by noncapital financing activities	<u>364,641,625</u>
Cash flows from investing activities:	
Receipts of interest income	37,079,190
Net proceeds from sales and purchases of investment pools	79,353,003
Purchase of investment securities	(399,713,080)
Proceeds from maturities of investment securities	324,209,551
Purchase of capital assets	(74,538,352)
Proceeds from sale of capital assets	21,999,999
Payments on lease obligations	(1,458,585)
Payments on subscription based IT obligations	(4,897,894)
Principal payments on bonds	(8,170,454)
Interest paid on certificates of obligation and bonds and lease obligations	(7,796,724)
Net cash used in investing activities	<u>(33,933,346)</u>
Net decrease in cash and cash equivalents	(5,947,538)
Cash, cash equivalents and restricted cash, beginning of year	12,583,634
Cash, cash equivalents and restricted cash, end of year	<u>\$ 6,636,096</u>
Reconciliation of operating loss to net cash used in operating activities:	
Operating loss	\$ (328,467,763)
Adjustments to reconcile operating loss to net cash used in operating activities:	
Depreciation and amortization expense	10,981,672
Changes in operating assets and liabilities that provided (used) cash:	
Lease receivables	218,640
Other receivables	(23,473,863)
Prepaid expenses and other assets	1,545,942
Accounts payable	(265,610)
Salaries and benefits payable	4,225,992
Other accrued liabilities	2,450,665
Deferred inflows of resources - leases	(3,871,492)
Net cash used in operating activities	<u>\$ (336,655,817)</u>
Non-cash investing activities-	
Right to use leased assets and lease liability	<u>\$ 5,201,662</u>

The notes to the financial statements are an integral part of this statement.

# Travis County Healthcare District dba Central Health

## Notes to Financial Statements Year Ended September 30, 2025

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### 1. Organization and Mission

Travis County Healthcare District (dba and hereinafter referred to as (“Central Health”) was created by authorization of the legislature of the State of Texas and subsequent approval by the voters of Travis County, Texas (“Travis County”) in May 2004.

In August 2004, Travis County and the City of Austin, Texas (the “City of Austin”) appointed members to serve on the Board of Managers (the “Board”) of Central Health, which is composed of nine members. The Board consists of four appointees from Travis County, four from the City of Austin, and one selected jointly.

Prior to the issuance of Governmental Accounting Standards Board (“GASB”) Statement No. 61, Central Health was presented as a discrete component unit of Travis County. However, under GASB Statement No. 61, Central Health is no longer presented as a component unit of Travis County as Central Health is a legally separate entity from Travis County, and Travis County does not provide any funding to Central Health, hold title to any of Central Health’s assets, or have any rights to any surpluses of Central Health.

Central Health’s primary responsibility is to provide medical and hospital care to and coordinate care for the safety net population of Travis County. All activities conducted by Central Health are directly associated with the furtherance of this mission and, therefore, are considered to be operating activities.

On October 1, 2004, Central Health began operations with the transfer of \$10,700,000 from the City of Austin. Thereafter, \$2,560,807 was transferred from Travis County. Effective October 1, 2004, certain assets, obligations and rights of the City of Austin were transferred to Central Health, including title to the land and buildings of Brackenridge/Children’s Hospital and Austin Women’s Hospital, which were located on the Central Health Downtown Campus. In addition, the responsibility, obligations and rights of the City of Austin and Travis County to provide health care to their respective indigent population transferred to Central Health. Certain assets associated with the Federally Qualified Health Centers (“health clinics”) of the City of Austin and Travis County also transferred to Central Health.

Central Health provides patient care to the safety net population of Travis County primarily through its network of hospital, specialty, primary care and post-acute providers, including Central Texas Community Health Centers, Inc. (doing business as and herein after referred to as “CommUnityCare”), its contractual relationship with Ascension Texas (“Seton”), and on a limited basis through the Community Care Collaborative (the “CCC”), which is a 501(c)(3) District formed on October 4, 2012, pursuant to the Master Agreement between Central Health and Seton. The CCC is a separate legal entity with the Central Health Board appointing a majority of its governing board, although it has certain approval requirements for material and reserved items. Due to certain powers reserved to Seton in the Master Agreement, Central Health cannot impose its will on the CCC. The CCC does not meet any of the GASB criteria for blended reporting and, therefore, is presented as a discrete component unit in these financial statements. See Note 10 for further information about the CCC and the Master Agreement with Seton.

As the co-applicant governing board, CommUnityCare is a separately incorporated 501(c)(3), but Central Health and CommUnityCare are joint holders of the Federally Qualified Health Center status that allows clinics operated by CommUnityCare to receive an enhanced level of Medicaid reimbursement and to participate in the Federal 340B program for reduced-cost prescription medicines. In addition, CommUnityCare’s economic resources are primarily for the benefit of Central Health’s constituents, Central Health has the ability to access a majority of the economic resources of CommUnityCare, and those resources are significant to Central Health. Accordingly, CommUnityCare is presented in this report as a discrete component unit of Central Health.

Sendero Health Plans, Inc. (“Sendero”) is also presented in this report as a discrete component unit of Central Health. Sendero is legally separate from Central Health and is a single-member 501(c)(3) District, wholly owned by Central Health. The Central Health Board appoints members to the Sendero Board of Directors. There is a financial benefit/burden relationship between Central Health and Sendero in that Central Health has historically provided financial support to Sendero in the form of funding for risk-based capital levels established by the Texas Department of Insurance. Sendero provides services related to the Affordable Care Act in an eight-county service area. Sendero is expected to pay any debts it incurs with its own resources. Central Health has determined it is appropriate and in compliance with generally accepted accounting principles to present financial statement information for Sendero as of and for the year ended December 31st, which is Sendero’s fiscal year end.

## 2. Summary of Significant Accounting Policies

**Basis of Accounting** - For financial reporting purposes, Central Health is accounted for as a single enterprise fund; the accompanying financial statements are prepared on the accrual basis of accounting.

In accordance with GASB Statement No. 34, *Basic Financial Statements - and Management’s Discussion and Analysis - for State and Local Governments*, Central Health’s financial statements include a statement of net position, a statement of revenues, expenses, and changes in net position, and a statement of cash flows.

**Use of Estimates** - The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reported period. Actual results could differ from those estimates.

**Fair Value Measurements** - Central Health complies with GASB Statement No. 72, *Fair Value Measurement and Application*, which defines fair value of certain assets or liabilities as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction. Fair value accounting requires characterization of the inputs used to measure fair value into a three-level fair value hierarchy as follows:

- Level 1 inputs are based on unadjusted quoted market prices for identical assets or liabilities in an active market the entity has the ability to access.
- Level 2 inputs are observable inputs that reflect the assumptions market participants would use in pricing the asset or liability developed based on market data obtained from sources independent from the entity.
- Level 3 inputs are unobservable inputs that reflect the entity's own assumptions about the assumptions market participants would use in pricing the asset or liability developed based on the best information available.

There are three general valuation techniques that may be used to measure fair value:

- Market approach - uses prices generated by market transactions involving identical or comparable assets or liabilities.
- Cost approach - uses the amount that currently would be required to replace the service capacity of an asset (replacement cost).
- Income approach - uses valuation techniques to convert future amounts to present amounts based on current market expectations.

**Cash and Cash Equivalents** - Central Health defines cash and cash equivalents as cash and investments that are highly liquid with less than three-month maturities when purchased.

**Investments** - Investments, which include short-term and those restricted for capital acquisition, facilities, the Local Provider Participation Fund, and the Opioid Abatement Fund, consisted of investments in external local government investment pools, governmental agencies and municipal bonds. The external local government investment pools are recognized at amortized cost as permitted by GASB Statement No. 79, *Certain External Investment Pools and Pool Participants*. Any changes in fair value as well as the difference between historical cost and the proceeds received from the sale of the investments are reported in the statements of revenues, expenses, and changes in net position as investment income.

**Capital Assets** - Capital assets are carried at historical cost if purchased or fair market value at the time of donation (except for intangible right-to-use assets which are measured based on the information in the Leases accounting policy below and subscription-based IT assets which are measured based on the information in the Subscription-Based Information Technology Arrangements accounting policy below). Central Health capitalizes outlays for new facilities and equipment that substantially increase the useful life of existing capital assets which have an initial, individual cost of \$5,000 or more. Ordinary maintenance and repairs are expensed when incurred. Disposals are removed at carrying cost less accumulated depreciation and amortization, with any resulting gain or loss included in other nonoperating revenue or expense.

Depreciation and amortization are recorded on the straight-line method over the estimated useful lives of the assets. Estimated useful lives for buildings and improvements are 20 to 50 years and equipment and furniture are 3 to 20 years. Estimated useful lives for land right-of-use assets is 73 years and buildings right-of-use assets are 30 to 39 months. Estimated useful lives for subscription-based IT assets are 24 to 73 months.

**Compensated Absences** - Central Health maintains a paid-time-off plan for absences from work for illness or vacation. Under the plan, the cost of all compensated absences is accrued at the time the benefits are earned. At the time of termination, unused paid-time-off benefits may be paid up to a maximum of 240 hours for administrative staff, 280 hours for provider staff, and 450 hours for executive staff.

**Long-Term Debt** - General obligation bonds and certificates of obligation, which have been issued to fund capital projects, are to be repaid from tax revenues of Central Health.

Long-term debt and other long-term obligations are reported as liabilities in the statement of net position. Obligation premiums and discounts are deferred and amortized over the life of the obligations using the straight-line method. Issuance costs are expensed in the period incurred. Bonds and certificates of obligation payable are reported net of the applicable bond premium or discount.

**Leases** - Central Health is a lessee for noncancellable leases of land and buildings. Central Health recognizes a lease liability and an intangible right-to-use lease asset in the financial statements. Central Health recognizes lease liabilities with an initial, individual value of \$5,000 or more.

At the commencement of a lease, Central Health initially measures the lease liability at the present value of payments expected to be made during the lease term and the lease liability is reduced by the principal portion of lease payments when made. The intangible right-to-use lease asset is initially measured at the initial amount of the lease liability and is amortized on a straight-line basis over its useful life.

The key estimates and judgements related to leases include how Central Health determines the discount rate used to discount the expected lease payments to present value, lease term, and lease payments. Central Health uses its estimated incremental borrowing rate as the discount rate for leases. The lease term includes the noncancellable period of the lease and lease payments included in the measurement of the lease liability are comprised of fixed payments.

Central Health monitors changes in circumstances that would require a remeasurement of its leases and will remeasure the intangible right-to-use lease asset and lease liability if certain changes occur that are expected to significantly affect the amount of the lease liability.

Central Health is a lessor for noncancellable leases of land and buildings. Central Health recognizes a lease receivable and a deferred inflow of resources in the financial statements.

At the commencement of a lease, Central Health initially measures the lease receivable at the present value of payments expected to be received during the lease term and the lease receivable is reduced by the principal portion of lease payments when received. The deferred inflow of resources is initially measured at the initial amount of the lease receivable and is recognized as revenue over the life of the lease term.

The key estimates and judgements related to leases include how Central Health determines the discount rate used to discount the expected lease receipts to present value, lease term, and lease receipts. Central Health uses its estimated incremental borrowing rate as the discount rate for leases. The lease term includes the noncancellable period of the lease and lease receipts included in the measurement of the lease receivable are comprised of fixed payments from the lessee.

Central Health monitors changes in circumstances that would require a remeasurement of its leases and will remeasure the lease receivable and deferred inflows of resources if certain changes occur that are expected to significantly affect the amount of the lease receivable.

**Subscription-Based Information Technology Arrangements** - Central Health recognizes subscription-based information technology arrangement (“SBITA”) liabilities with an initial, individual value of \$250,000 or more and a contract term longer than twelve months.

At the commencement of a subscription, Central Health initially measures the SBITA liability at the present value of payments expected to be made during the subscription term and the SBITA liability is reduced by the principal portion of subscription payments when made. The SBITA asset is initially measured at the initial amount of the SBITA liability and is amortized on a straight-line basis over its useful life.

The key estimates and judgements related to SBITAs include how Central Health determines the discount rate used to discount the expected subscription payments to present value, subscription term, and subscription payments. Central Health uses its estimated incremental borrowing rate as the discount rate for subscriptions. The subscription term includes the noncancellable period of the subscription and subscription payments included in the measurement of the SBITA liability are comprised of fixed payments.

Central Health monitors changes in circumstances that would require a remeasurement of its subscription and will remeasure the SBITA asset and SBITA liability if certain changes occur that are expected to significantly affect the amount of the SBITA liability.

**Statements of Revenues, Expenses, and Changes in Net Position** - For purposes of display, transactions deemed by management to be ongoing, major, or central to the provision of health care services are reported as revenues and expenses. Operating revenues consist of lease payments generated from the lease of specific properties on the Central Health Downtown Campus. In addition, Central Health subleases the site of the Dell Seton Medical Center at the University of Texas (“UT”) through a lease agreement with UT. Nonoperating revenues consist of those revenues that are related to financing types of activities, which are primarily the result of property tax revenues and interest income from investments.

**Statement of Cash Flows** - For purposes of the statement of cash flows, Central Health considers temporary investments with original maturities of three months or less to be cash equivalents.

**Ad Valorem Tax Revenue** - Ad valorem tax revenue is recorded as a nonoperating revenue in the year for which the taxes are levied, net of provisions for uncollectible amounts. Central Health levies a tax as provided under state law with the approval of the Travis County Commissioners Court. The taxes are collected by the Travis County Tax Assessor-Collector and are remitted to Central Health as received. Taxes are levied and become collectible from October 1 to January 31 of the succeeding year. Subsequent adjustments to the tax rolls, made by the Travis Central Appraisal District (“Appraisal District”), are included in revenues in the period such adjustments are made by the Appraisal District. Allowances for uncollectibles are based upon historical experience in collecting property taxes. Uncollectible personal property taxes are periodically reviewed and written off, but Central Health is prohibited from writing off real property taxes without specific statutory authority from the Texas Legislature.

**Tobacco Settlement Revenue** - Tobacco settlement revenue is the result of a settlement between various counties and hospital districts in Texas and the tobacco industry for tobacco-related health care cost. Central Health recognized \$6,817,278 associated with the settlement during the calendar year ended December 31, 2024. Settlement revenues for fiscal year 2025 are based on the investment earnings and the proportionate amount of eligible expenses to the entire pool of eligible expenses of the tobacco settlement fund as administered by the Comptroller’s Office of the State of Texas. Central Health is unable to estimate the continuance or level of future distributions.

During the year ended September 30, 2025, Central Health recognized its tobacco settlement revenue net of amounts distributed to Seton and to Travis County, which were \$1,041,213 and \$564,810, respectively, and are able to participate through a joint expense eligibility submission process through Central Health. Such amounts represent their respective share of total eligible local healthcare expenses claimed for the year ended September 30, 2025.

**Opioid Settlement Revenue** - Opioid settlement revenue is the result of settlements involving the State of Texas and various companies that had roles in contributing to the opioid crisis and opioid-related health care cost. The Texas Opioid Abatement Fund Council (“O AFC”) was formed to ensure that amounts recovered as a result of these settlements is allocated to put an end to the opioid crisis in Texas. O AFC provides a portion of the recovered amounts to healthcare entities such as Central Health, which are restricted for the purpose of remediating the opioid crisis, including the treatment and coordination of care, prevention and public safety, recovery support services, and workforce development and training. Central Health recognized \$1,108,668 associated with the settlement during the year ended September 30, 2025, all of which remained restricted for opioid remediation efforts as of September 30, 2025.

**Codification of Accounting and Financial Reporting Guidance** - Central Health complies with GASB Statement No. 62, *Codification of Accounting and Financial Reporting Guidance Contained in Pre-November 30, 1989 FASB and AICPA Pronouncements*, which incorporates into GASB’s authoritative literature certain accounting and financial reporting guidance issued by the Financial Accounting Standards Board and the American Institute of Certified Public Accountants on or before November 30, 1989, which does not conflict with or contradict GASB pronouncements.

**Deferred Outflows and Deferred Inflows of Resources** - Central Health complies with GASB Statement No. 63, *Financial Reporting of Deferred Outflows of Resources, Deferred Inflows of Resources, and Net Position*, which provides guidance for reporting the financial statement elements of deferred outflows of resources, which represent the consumption of Central Health's net position that is applicable to a future reporting period, and deferred inflows of resources, which represent Central Health's acquisition of net position applicable to a future reporting period.

Central Health complies with GASB Statement No. 65, *Items Previously Reported as Assets and Liabilities*, which establishes accounting and financial reporting standards that reclassify, as deferred outflows of resources or deferred inflows of resources, certain items that were previously reported as assets and liabilities and recognizes, as outflows of resources or inflows of resources, certain items that were previously reported as assets and liabilities. Deferred inflows of resources as of September 30, 2025 consisted of amounts related to leases.

**Recently Issued Accounting Pronouncement** - In May 2024, the GASB issued GASB Statement No. 103, *Financial Reporting Model Improvements*, effective for fiscal years beginning after June 15, 2025. The objective of GASB Statement No. 103 is to improve key components of the financial reporting model to enhance its effectiveness in providing information that is essential for decision making and assessing an entity's accountability. GASB Statement No. 103 impacts the following areas: (1) Management's discussion and analysis - information is limited to topics discussed in five sections which include a) overview of the financial statements, b) financial summary, c) detailed analysis, d) significant capital asset and long-term financial activity, and e) currently known facts, decisions, or conditions. Information included in the detailed analysis should explain why balances and results of operations changed; (2) Unusual or infrequent items - these items are limited to transactions that are either unusual in nature or infrequent in occurrence and are displayed as the last presented flow of resources prior the net change in resource flows; (3) Proprietary funds - the statement of revenues, expenses, and changes in net position is now required to separately report noncapital subsidies and present a subtotal for operating income (loss) and noncapital subsidies before reporting nonoperating revenues and expenses. It also defines what constitutes a subsidy; (4) Major component unit information - each major component unit is required to be presented separately in the statement of net position and statement of activities unless it reduces the readability of the statements; (5) Budgetary comparison information - this is now required to be presented as required supplemental information and also must present variances between original and final budget amounts and variances between final budget and actual amounts. Management is evaluating the effects that the full implementation of GASB Statement No. 103 will have on its financial statements for the year ending September 30, 2026.

### 3. Deposits and Short-Term Investments

Central Health has developed a formal investment policy that is in compliance with the Texas Public Funds Investment Act. Central Health uses the “prudent investor rule” in investment decisions. The objectives of Central Health’s investment policy are to ensure the safety of the principal, maintain adequate liquidity, and receive yield to the highest possible return subject to the first two principles.

Central Health’s depository agreement with JPMorgan Chase Bank requires collateralization with a fair market value equal to at least 105% of Central Health funds in excess of \$250,000 on deposit in the bank. The depository agreement states that collateral shall consist of one or more of the following: U.S. Treasury securities, Federal National Mortgage Association (“FNMA”) securities, pools or REMIC CMO’s, Federal Farm Credit Bank (“FFCB”) securities, Federal Home Loan Bank (“FHLB”) agencies, Federal Home Loan Mortgage District (“FHLMC”) pools or REMIC CMO’s, Government National Mortgage Association (“GNMA”) pools, obligations of states, agencies, counties, cities, and other political subdivisions of any state that are rated not less than “A” or its equivalent. The REMIC CMOs must not have variable rates or original maturities longer than ten years.

However, for the year ended September 30, 2025 collateral was maintained through a letter of credit from the FHLB, which in the case of default by JPMorgan Chase will act as agent for Central Health. During fiscal year 2025, collateral coverage was more than the 105% of bank balances, except for on one day during the year, occurring on October 11, 2024. The collateral balances were increased immediately the next business day to the required amount of collateral. As of September 30, 2025, Central Health’s bank balances in excess of federal depository insurance were fully collateralized.

Deposits are stated at cost plus accrued interest, if any, and the carrying amounts are displayed on the statement of net position as cash and cash equivalents.

Central Health is authorized to purchase, sell, and invest its funds and funds under its control in accordance with the Texas Public Funds Investment Act, Government Code Chapter 2256 and its subsequent amendments. During the fiscal period, investments consisted of U.S. government agencies securities, municipal bonds, commercial paper, and participation in three external local government investment pools (TexPool, TexSTAR and Texas Range). The carrying amount of investments as of September 30, 2025, is displayed on the statement of net position as short-term and restricted investments.

Texas Local Government Investment Pool (“TexPool”) operates in a manner consistent with the SEC’s Rule 2a7 of the Investment Company Act of 1940. TexPool uses amortized cost rather than market value to report net assets to compute share prices. Accordingly, the fair value of the position in TexPool is the same as the value of TexPool shares. The State Comptroller of Public Accounts exercises oversight responsibility over TexPool. Oversight includes the ability to significantly influence operations, designation of management and accountability for fiscal matters. Additionally, the State Comptroller has established an advisory board composed of both participants in TexPool and other persons who do not have a business relationship with TexPool. The advisory board members review the investment policy and management fee structure.

Texas Short Term Asset Reserve Program (“TexSTAR”) is administered by Hilltop Securities Inc. and JPMorgan Asset Management Inc. TexSTAR is overseen by a five-member governing board made up of three participants and one of each of the program’s professional administrators. The responsibility of the board includes the ability to influence operations, designation of management and accountability for fiscal matters. In addition, TexSTAR has a Participant Advisory Board which provides input and feedback on the operations and directions of the program on a quarterly basis, as well as reviewing the Standard and Poor’s ratings of the holdings, to ensure the pool’s compliance with its rating requirements. TexSTAR’s investment policy stipulates that it must invest in accordance with the Texas Public Funds Investment Act.

The Texas Range Investment Program (“Texas Range”), formerly known as TexasTERM Local Government Investment Pool (“TexasTERM”), is organized in conformity with Texas Government Code 2256.016 & .019 (Texas Public Funds Investment Act). Among its local government investment pool portfolios are TexasTERM, fixed-rate, fixed term investment for a period of 60 days to one year, and TexasDAILY and TexasDAILY Select, portfolios seeking to maintain a \$1.00 net asset value and offering daily liquidity to its investors. An advisory board, composed of participants in Texas Range and other parties who do not participate in the Texas Range investment products, maintains oversight responsibility for the pool, including formulation and implementation of its investment and operating policies. PFM Asset Management LLC (recently purchased by U.S. Bancorp Asset Management, Inc.) is a leading national financial and investment advisory firm and is the investment advisor to Texas Range.

The government agency securities and municipal bonds are valued using Level 2 inputs that are based in market data obtained from independent sources. The investments are reported by Central Health at fair value in accordance with GASB Statement No. 72. Balances in the external local government investment pools are stated at amortized cost, in accordance with GASB Statement No. 79, *Certain External Investments Pools and Pool Participants*. In accordance with GASB Statement No. 79, the external local government investment pools do not have any limitations and restrictions on withdrawals such as notice periods or maximum transaction amounts. These pools do not impose any liquidity fees or redemption gates.

As of September 30, 2025, Central Health had the following investments:

Type	Fair Value	Weighted Average Maturity (Days)
Local government investment pools	\$ 318,490,488	1
Government agencies	375,532,205	1,048
Municipal bonds	<u>36,747,540</u>	669
Total fair value	<u>\$ 730,770,233</u>	
Portfolio weighted average maturity		572

**Interest Rate Risk** - In accordance with its investment policy, Central Health manages its exposure to declines in fair values by limiting the weighted average maturity of its investment portfolio to two and one-half years or less. Individual security types are limited as well, with the longest permitted maturity being four years for government treasuries and government agencies.

**Credit Risk** - State law limits investment in municipal bonds to an A rating or its equivalent by a nationally recognized investment rating firm. Central Health’s investment policy requires at least an A rating by a nationally recognized investment firm. For commercial paper, state law limits investments to a rating not less than A-1 by Standard & Poor’s or P-1 by at least two nationally recognized credit rating agencies. Central Health’s investment policy limits commercial paper to a rating not less than A-1 by Standard & Poor’s and P-1 by Moody’s Investors Service.

For investments in government agencies, Central Health’s investment policy requires at least an A rating by a nationally recognized investment firm. Central Health’s investments in government agencies carry the implicit guarantee of the U.S. government. Central Health’s investment policy requires that certificates of deposits be either federally insured or collateralized.

Investments at September 30, 2025	Standard & Poor’s or Moody’s Rating
Local government investment pools	AAAm
Government agencies	AA+
Municipal bonds	AAA, AA+, AA, AA-, A+, Aa2, A1

**Concentration of Credit Risk** - Concentration of credit risk is the risk of loss attributable to the magnitude of investments in a single issuer. Central Health’s investment policy limits the percentage of the combined portfolios for each type of eligible investment to reduce the risk of principal loss.

Investments at September 30, 2025:	Percentage of Portfolio	Portfolio Limit
Local government investment pools	44%	80%
Government agencies	51%	75%
Municipal bonds	5%	20%

Information regarding investments in any one issuer that represents five percent or more of Central Health’s total investments must be disclosed under GASB Statement No. 40, excluding investments issued or explicitly guaranteed by the U.S. government. As of September 30, 2025, Central Health’s investments which require disclosure are as follows:

Investments at September 30, 2025:	Fair Value	Percentage of Portfolio
Federal Home Loan Bank	\$ 148,226,839	20%
Federal Farm Credit Banks	\$ 104,112,463	14%
Federal National Mortgage Association	\$ 68,619,997	9%
Federal Agricultural Mortgage Corporation	\$ 42,541,875	6%

#### 4. Disaggregation of Receivable Balances

Central Health's receivables, (including taxes receivable, risk adjustment receivables, other receivables, long-term receivables and the applicable allowances), are comprised of the following as of September 30, 2025:

	Taxes	Due from Component Units	Other	Total
Total	\$ 9,200,876	43,025,852	17,829,494	70,056,222
Less:				
Allowance for uncollectibles	(1,576,624)	-	(287,654)	(1,864,278)
Allowance for long-term collections	(4,189,379)	-	-	(4,189,379)
Total, net	<u>\$ 3,434,873</u>	<u>43,025,852</u>	<u>17,541,840</u>	<u>64,002,565</u>
Amounts not scheduled for collection during the subsequent year	<u>\$ -</u>	<u>4,000,000</u>	<u>-</u>	<u>4,000,000</u>

As of September 30, 2025, due from component units consists of short-term operational cash-clearing amounts that includes a Sendero balance of \$1,137,646 in intercompany receivables, a CommUnityCare balance of \$5,261,947, which includes \$4,000,000 in noncurrent assets, and \$36,626,259 in claims financing receivable related to the Central Health Premium Assistance Program ("CHAP") advances to Sendero. As of September 30, 2025, the other receivable balance is comprised of \$12,942,269 in interest receivable on leases, \$4,133,615 accrued interest on investments, \$304,043 in miscellaneous receivables, \$152,286 in medical premiums receivable, and \$9,627 in net patient receivable.

#### 5. Sendero Surplus Debenture

Effective April 22, 2020, Central Health amended and restated the previously issued surplus debenture to Sendero, in the amount of \$8,000,000, with an additional amount of \$9,083,000 for a total of \$17,083,000. During the year ended September 30, 2019, Central Health issued an additional surplus debenture to Sendero in the amount of \$20,000,000. The par value and carrying value of the debenture is \$37,083,000 with interest accruing at 1.00%. Interest will not be a legal or financial statement liability of Sendero or a claim on the assets of Sendero unless the following are satisfied: (i) as of the payment date, the amount of accrued and unpaid interest must equal or exceed the debenture's scheduled payment and (ii) Sendero's surplus that is in excess of the debenture's surplus floor must equal or exceed the debenture's scheduled payment. The surplus floor is defined as the greater of: (i) \$1,500,000 or (ii) 500% of risk-based capital for three consecutive years. Subject to the requirements of Chapter 427 of the Texas Insurance Code and terms of the debenture, principal is to be paid in annual installments on September 30th of each year, commencing on December 1, 2019 with the last payment being on September 1, 2045.

Principal will not be a legal or financial statement liability for Sendero or a claim on its assets unless the following are satisfied: (i) as of the payment date, the amount of unpaid principal must equal or exceed the debenture's scheduled payment; (ii) Sendero's surplus that is in excess of the debenture's surplus floor must equal or exceed the debenture's scheduled payment; (iii) immediately after the scheduled payment, Sendero will continue to have surplus equal to or in excess of the required minimum required by law; and (iv) Sendero's Board of Directors shall have authorized the scheduled payment.

In the event of the voluntary or involuntary liquidation of Sendero, the debenture is intended to become a fully matured due and payable liability of Sendero but subordinated to claims and rights of policyholders and policy beneficiaries of Sendero. Additionally, in the event of liquidation, any payment of interest or principal will be made in accordance with Chapter 443 of the Texas Insurance Code.

No interest or principal payments have been received or accrued for from the effective date of the debenture due to Sendero's not meeting the requirements stated above.

## 6. Capital Assets

Central Health's capital assets are comprised of the following as of September 30, 2025:

	Beginning Balance <u>(as restated)</u>	<u>Additions</u>	Retirements/ Transfers	Ending Balance
Capital assets not being depreciated and amortized:				
Land	\$ 28,846,314	-	(425,000)	28,421,314
Capital projects in progress	<u>29,532,645</u>	<u>73,847,974</u>	<u>(17,792,691)</u>	<u>85,587,928</u>
Total capital assets not being depreciated and amortized	58,378,959	73,847,974	(18,217,691)	114,009,242
Capital assets being depreciated and amortized:				
Building and improvements	89,228,483	-	14,805,374	104,033,857
Equipment and furniture	20,449,974	656,770	1,950,876	23,057,620
Right to use leased assets - land	42,921,307	-	-	42,921,307
Right to use leased assets - buildings	4,458,531	105,917	-	4,564,448
Subscription based IT assets	<u>12,513,675</u>	<u>5,267,599</u>	<u>-</u>	<u>17,781,274</u>
Total capital assets being depreciated and amortized	169,571,970	6,030,286	16,756,250	192,358,506
Less accumulated depreciation and amortization for:				
Building and improvements	(23,028,067)	(3,119,286)	-	(26,147,353)
Equipment and furniture	(17,137,089)	(1,247,617)	-	(18,384,706)
Right to use leased assets - land	(1,763,889)	(587,963)	-	(2,351,852)
Right to use leased assets - buildings	(2,004,667)	(1,421,869)	-	(3,426,536)
Subscription based IT assets	<u>(3,275,475)</u>	<u>(4,037,018)</u>	<u>-</u>	<u>(7,312,493)</u>
Total accumulated depreciation and amortization	<u>(47,209,187)</u>	<u>(10,413,753)</u>	<u>-</u>	<u>(57,622,940)</u>
Total capital assets being depreciated and amortized	<u>122,362,783</u>	<u>(4,409,553)</u>	<u>16,756,250</u>	<u>134,735,566</u>
Capital assets, net	<u>\$ 180,741,742</u>	<u>69,464,507</u>	<u>(1,036,441)</u>	<u>248,744,808</u>

With the creation of Central Health, the City of Austin conveyed ownership of assets associated with the Central Health Downtown Campus (formerly the Brackenridge/Children’s Hospital until 2007 and University Medical Center Brackenridge until 2017) and medical equipment used in the health care clinics to Central Health. Travis County conveyed medical equipment used in the health care clinics to Central Health. The City of Austin also donated an office building to Central Health. The conveyed and donated assets were recorded at fair value at the date of receipt.

With the granting of the Federally Qualified Healthcare Center status to Central Health and CommUnityCare jointly on March 1, 2009, ownership of certain assets formerly owned by the City of Austin were deeded from the City of Austin to Central Health in fiscal year 2009.

In 2017, construction of the Dell Seton Medical Center at UT was completed and hospital operations were moved from Brackenridge Hospital located on the Downtown Brackenridge Campus to the new facility. After the move was completed, the Brackenridge Hospital facility was demolished and the site has been prepared for future development. Seton is leasing the existing hospital parking garage adjoining Dell Seton Medical Center at UT, but has terminated the lease of the Clinical Education Center effective October 1, 2024. In 2018, The 2033 Higher Education Development Foundation (“ The 2033”) and Central Health agreed to a long-term ground lease of two parcels within the Downtown Campus. The 2033 has completed construction of a new 17-story office building on the site formerly known as Block 164.

In August 2021, Central Health acquired property and buildings (formerly Sears building and existing CommUnityCare Clinic site) located in Hancock Center. Central Health intends to provide Healthcare Services and consolidate administrative operations for Central Health, CommUnityCare, and Sendero into this facility from multiple locations throughout Travis County. The building, almost 200,000 square feet, will serve as a healthcare hub for Central Health and CommUnityCare patients, including primary care, dental, specialty, and other ancillary services. The relocation of the David Powell Clinic and the CommUnityCare Hancock Clinic is anticipated to be opened in the spring of 2026, with the remaining facility to be completed by December 2026.

Construction of two new clinic facilities, Hornsby Bend Health and Wellness Center and Del Valle Health and Wellness Center began in 2022. Hornsby Bend Health was completed in 2024 and Del Valle Health and Wellness Center was completed in FY 2025. In addition, the Rosewood Zaragosa site, leased from the City of Austin, has undergone significant renovations to serve as a multi-specialty clinic that opened in the fall of 2024.

Central Health purchased an additional tract of land from the City of Austin in the Colony Park master development and is planning to construct a primary care health and wellness center to provide needed healthcare services.

In April 2023, Central Health purchased the Cameron Center, which consists of three buildings of approximately 116,000 square feet. Significant renovations will be required over the next few years to provide planned clinical services at this site.

In September 2024 Central Health began renovations on the Clinical Education Center for clinical and administrative use. The renovations were completed in July 2025, with the opening of a 50-bed medical respite center, in addition to the completion of administrative office space.

## 7. Long-Term Obligations

The following is a summary of changes in long-term obligations for the year ended September 30, 2025:

	Beginning Balance	Additions	Retirements	Ending Balance
Certificates of obligation	\$ 163,220,000	-	(6,800,000)	156,420,000
General obligation bonds	2,485,000	-	(1,235,000)	1,250,000
Premium on bonds	2,536,685	-	(135,454)	2,401,231
Total debt payable	<u>168,241,685</u>	<u>-</u>	<u>(8,170,454)</u>	<u>160,071,231</u>
Leases payable	45,421,284	100,090	(1,452,759)	44,068,615
Subscription-based IT payable	8,464,882	4,367,215	(4,169,363)	8,662,734
Total	<u>\$ 222,127,851</u>	<u>4,467,305</u>	<u>(13,792,576)</u>	<u>212,802,580</u>

Bonded debt consists of the following at September 30, 2025:

Series	Date of Issue	Amount of Original Issue	Matures Through	Interest Rate	Outstanding at 9-30-25	Due Within One Year
2020	5-5-2020	\$ 7,285,000	2026	1.26%	\$ 1,250,000	\$ 1,250,000
				2.00% -		
2021	9-21-2021	13,630,000	2041	5.00%	11,735,000	530,000
2021				1.05% -		
Taxable	9-21-2021	62,755,000	2041	2.65%	51,835,000	2,850,000
2023A	8-8-2023	8,385,000	2033	5.00%	7,045,000	735,000
				4.936% -		
2023B	8-8-2023	90,965,000	2043	5.587%	85,805,000	2,955,000
Total		<u>\$ 183,020,000</u>			<u>\$ 157,670,000</u>	<u>\$ 8,320,000</u>

The True Interest Cost Rate for the Certificates of Obligation Series 2021 (Limited Tax) \$13,630,000 and Taxable Series 2021 (Limited Tax) \$62,755,000 was 1.8% and 2.1%, respectively.

The True Interest Cost Rate for the Certificates of Obligations Series 2023 (Limited Tax) \$8,385,000 and Taxable Series 2023 (Limited Tax) \$90,965,000 was 3.157% and 5.33%, respectively.

As of September 30, 2025, the debt service requirements of indebtedness to maturity are as follows:

Year Ended September 30,	Principal	Interest	Total
2026	\$ 8,320,000	6,142,325	14,462,325
2027	7,325,000	5,875,155	13,200,155
2028	7,590,000	5,616,839	13,206,839
2029	7,870,000	5,341,886	13,211,886
2030	8,165,000	5,049,796	13,214,796
2031-2035	43,635,000	20,370,745	64,005,745
2036-2040	49,430,000	11,502,072	60,932,072
2041-2043	25,335,000	1,799,348	27,134,348
Total	\$ 157,670,000	61,698,167	219,368,167

The general obligation bonds are secured by and payable from the proceeds of a limited ad valorem tax levied against taxable property within Central Health’s taxing jurisdiction. Central Health maintains an Aa2 Rating by Moody’s and was recently rated AA+ by Kroll Bond Ratings Agency.

During the year ended September 30, 2020, the Central Health Board approved a line of credit for furniture, fixtures, and equipment in the amount of \$10 million. The credit line is secured by a lien to the personal property or software subscription financed. Fixed rates are established at the time of the draw request at variable interest rates above the existing Interest Rate Swap Rate, as defined. As of September 30, 2025, Central Health has not drawn on the line of credit.

**8. Leases**

Central Health complies with GASB Statement No. 87, which specifies the required reporting of leases within the financial statements.

Lessee

On October 15, 2014, Central Health approved a ground lease (the “ground lease”) with UT to lease a parcel of UT land for the site of the new teaching hospital (the “site”). Effective October 17, 2014, the site was approved for sublease to Seton (the “sublease”) to construct and operate the teaching hospital affiliated with the Dell Medical School at UT. The term of the ground lease is for 60 years with two 10-year renewals and established an initial annual base rent amount of \$877,621 due in monthly installments. The sublease has the same term and payment amount as the ground lease. The property must be used for hospital operations and to fulfill Central Health’s requirement of providing safety net hospital services for low income or uninsured residents of Travis County.

The base rent amount will be adjusted annually by an amount proportional to the percentage increase in the CPI-U during the preceding year; however, the annual increase shall not be less than one percent (1%). Every 15<sup>th</sup> year of the ground lease, an appraisal shall be performed to determine the fair market value and the base rent amount shall be adjusted accordingly.

As of September 30, 2025, the value of the lease liability is \$42,841,107. The lease has an implicit interest rate of 3.83%, which was the incremental borrowing rate for Central Health. The value of the right to use asset as of September 30, 2025 is \$40,569,455, net of accumulated amortization of \$2,351,852.

On April 11, 2023, Central Health entered into a lease as a lessee for the use of office space on Airport Blvd. The term of the lease is for 39 months with a renewal period through December 31, 2026 and establishes an initial monthly base rent amount of \$107,291. The base rent amount will be adjusted annually at an expected rate increase of 3.0%.

An initial lease liability was recorded in the amount of \$4,044,219. As of September 30, 2025, the value of the lease liability is \$1,018,550. The lease has an interest rate of 3.76%, which was the incremental borrowing rate for Central Health. The value of the right to use asset as of September 30, 2025 is \$933,283, net of accumulated amortization of \$3,110,936.

On November 20, 2023, the company entered into a lease as a lessee for a clinic site located in Capital Plaza. The initial term of the agreement is 18 months, with two 6-month optional renewal terms. Under the agreement, Central Health will make monthly payments of \$14,583 during the initial term and any optional renewal period.

An initial lease liability was recorded in the amount of \$414,312. As of September 30, 2025, the value of the lease liability is \$114,696. The lease has an interest rate of 4.56%, which was the incremental borrowing rate for Central Health. The value of the right to use asset as of September 30, 2025 is \$110,483, net of accumulated amortization of \$303,829.

On July 14, 2025, the company entered into a lease as a lessee for a clinic site located in Oakwood Arbors Medical Park. The initial term of the agreement is 18 months. Under the agreement, Central Health will make monthly payments of \$3,816 during the first twelve months and \$3,956 for the remainder of the lease.

An initial lease liability was recorded in the amount of \$105,917. As of September 30, 2025, the value of the lease liability is \$94,262. The value of the right to use asset as of September 30, 2025 is \$94,148 inclusive of accumulated amortization of \$11,769.

Future minimum lease payments as of September 30, 2025, were as follows:

Year Ended September 30,	Principal	Interest	Total
2026	\$ 1,203,519	1,131,123	2,334,642
2027	23,989	1,137,519	1,161,509
2028	-	1,162,545	1,162,545
2029	-	1,188,121	1,188,121
2030	-	1,214,260	1,214,260
2031-2055	-	40,780,011	40,780,011
2056-2080	-	70,261,880	70,261,880
2081-2094	42,841,107	16,798,647	59,639,753
Total	\$ 44,068,615	133,674,106	177,742,721

Lessor

Effective June 1, 2013, Central Health and Seton entered into a lease for certain facilities located on the Downtown Campus, in addition to a ground sublease at the site of the Dell Seton Teaching Hospital that is leased from UT.

As noted above, Central Health entered into the sublease with Seton to construct and operate the teaching hospital affiliated with the Dell Medical School at UT. The terms of the sublease are the same as the ground lease. The property must be used for hospital operations and to fulfill Central Health's requirement of providing safety net hospital services for low income or uninsured residents of Travis County. As of September 30, 2025, the value of the lease receivable is \$42,841,106. The value of the deferred inflows of resources as of September 30, 2025 was \$40,569,455.

With the opening of the new teaching hospital, Seton and Central Health negotiated a new lease for the Downtown Campus parking garage, Clinical Education Center ("CEC") building, and the CEC parking garage. The new lease was executed in December 2017 with an initial term of May 22, 2017 through September 30, 2024, with renewal options for seven additional terms each for 120 months thereafter for the Downtown Campus parking garage. The agreement reflects the relocation of hospital services previously provided at Brackenridge Hospital and the opening of the new Teaching Hospital located in close proximity. As of September 30, 2025, the value of the lease receivable is \$123,981,401. The value of the deferred inflows of resources as of September 30, 2025 was \$114,909,369. Central Health is in the process of renegotiating the Downtown Campus parking garage lease. The CEC building and CEC parking garage leases expired without renewal.

In August 2018, Central Health entered into a lease with a local limited partnership named The 2033 LP, established for the benefit of UT and Dell Medical School at UT, to lease approximately 2.8 acres on the Central Health Downtown Campus. The term of the lease is 99 years. In October 2018, 2033 LP assigned the lease to The 2033, a Texas nonprofit corporation. As of September 30, 2025, the value of the lease receivable is \$70,627,813. The value of the deferred inflows of resources as of September 30, 2025 was \$68,559,807.

In August 2021, Central Health acquired land and buildings (formerly the Sears building and existing CommUnityCare clinic site) located in Hancock Center. As part of the transaction transferring ownership of the Leased Premises, Central Health received an assignment of the lease of the CommUnityCare clinic building located on the premises. The lease was terminated during 2025 and as a result no deferred inflows of resources existed as of September 30, 2025.

In March 2023, Central Health acquired land and buildings known as the Cameron Center and entered into an agreement with a property management company to operate and service the property as well as manage the existing leases. The terms of the agreement are for twelve months with an additional one-year renewal period unless terminated by either party. The leasing arrangement was terminated during 2024 and no lease revenue was recognized in 2025.

In October 2024, Central Health entered into a lease with a company to lease medical office space in the CEC building. As of September 30, 2025, the value of the lease receivable is \$165,123. The value of the deferred inflows of resources as of September 30, 2025 was \$161,064.

The following is a summary of Central Health’s lease revenue for the year ended September 30, 2025:

Lease revenue:	
Building	\$ 4,425,073
Land	<u>1,412,505</u>
Total lease revenue	5,837,578
Interest revenue	<u>9,521,082</u>
Total	<u>\$ 15,358,660</u>

Future lease revenue for long-term lease agreements as of September 30, 2025, was as follows:

Year Ended September 30,	Principal	Interest	Total
2026	\$ 165,123	6,711,083	6,876,205
2027	-	6,851,948	6,851,948
2028	-	6,999,161	6,999,161
2029	-	7,149,542	7,149,542
2030	-	7,303,159	7,303,159
2031-2117	<u>237,450,320</u>	<u>684,587,947</u>	<u>922,038,268</u>
Total	<u>\$ 237,615,443</u>	<u>719,602,840</u>	<u>957,218,283</u>

**9. Subscription Based Information Technology Arrangements (“SBITAs”)**

Central Health complies with GASB Statement No. 96, which specifies the required reporting for SBITAs within the financial statements. As of September 30, 2025, Central Health has entered into SBITAs involving:

- Contract lifecycle management software
- Data management and data sharing
- IT service desk platform and support
- Enterprise Resource Planning (“ERP”) software product containing core accounting modules
- Private cloud and colocation hosting
- Construction management software
- Online medical learning and training software
- Cloud-based interface software and automation
- Cloud computing migration for IT environment
- Patient identity platform and support

The ending terms of the SBITAs range from February 2026 through December 2029 and payments on the SBITAs are due either monthly, annually, or biennially based on the agreements. The SBITAs are discounted at rates ranging from 3.60-4.72%, which represent the incremental borrowing rates for Central Health. The value of the SBITA asset as of September 30, 2025 is \$10,468,781, net of accumulated amortization of \$7,312,493.

Future minimum subscription payments as of September 30, 2025, were as follows:

Year Ended September 30,	Principal	Interest	Total
2026	\$ 4,124,667	321,969	4,446,636
2027	1,956,608	183,058	2,139,666
2028	1,595,484	97,446	1,692,930
2029	985,975	39,319	1,025,294
Total	<u>\$ 8,662,734</u>	<u>641,792</u>	<u>9,304,526</u>

**10. Central Health/Seton Master and Ancillary Agreements**

Effective June 1, 2013, Central Health and Seton entered into a Master Agreement and ancillary agreements including: a lease for the Downtown Campus and an Omnibus Services Agreement. Through the Master Agreement, Central Health and Seton formed the CCC, a 501(c)(3) District that was created to provide a framework for participating in the Texas Healthcare and Quality Improvement Program, a statewide Medicaid 1115 waiver program. The CCC is a performing provider that carries out the Delivery System Reform Incentive Payment (“DSRIP”) program through the Medicaid 1115 waiver.

The Omnibus Services Agreement (“Omnibus Agreement”) specifies the services to be provided by Seton including but not limited to, Seton’s charity care program as described in Annex A of the Omnibus Agreement, the Medical Access Program (“MAP”) Healthcare Services as described in Annex C of the Omnibus Agreement, and other applicable charity care programs, as well as the funding mechanism for the provision of Seton healthcare services and the shared decision making of Central Health and Seton over the MAP program. Pursuant to Section 5.5 of the Omnibus Agreement, the intention of the Omnibus Agreement is to memorialize the current arrangement between the parties regarding the scope, availability and current value of Covered Healthcare Services currently provided by Seton to Covered Beneficiaries. Under the Master Agreement, Seton must meet the safety-net services obligation and provide this baseline level of service for the initial 25 year term of the agreement. Upon termination of the Master Agreement, Seton must continue to provide the same level of inpatient and outpatient services to the Covered Population for an initial one-year period after the termination notice, an additional five year period under the same terms of the existing agreement, and an option for Central Health to purchase an additional five years thereafter.

On September 3, 2020, Central Health sent a Notice of Breach to Seton, which was abated by agreement until May 1, 2022. The Notice of Breach specifies deficiencies in certain obligations required of Seton during the term of the existing Agreements between the parties.

On May 2, 2022, Seton sent a notice of dispute in response to Central Health’s Notice of Breach. On May 10, 2022, Seton sent a notice of breach to Central Health and Central Health responded with its notice of dispute. Both parties invoked the dispute-resolution process set forth in Section 7 of the Master Agreement.

On January 24, 2023, the formal mediation and dispute-resolution process ended and Central Health filed suit against Seton related to the material breaches. Seton responded by filing its own lawsuit against Central Health. On May 2, 2023, Seton sent Central Health a Funding Deadlock and Governance Deadlock notice. The parties mediated on October 19, 2023 and did not resolve the Funding Deadlock or the Governance Deadlock. On April 2, 2025, both parties agreed to an Agreed Motion to Abate for a period of 150 days from April 2, 2025, to August 30, 2025. On September 9, 2025, both parties executed a Court-approved Order to Extend Abatement agreement until March 31, 2026.

## **11. Appraisal District and Ad Valorem Taxes**

The Texas Legislature in 1979 adopted a comprehensive Property Tax Code (the “Code”) which established a county-wide appraisal district and an appraisal review board in each county in the State. The Appraisal District is responsible for the recording and appraisal of all property in Central Health’s taxing jurisdiction. Under the Code, Central Health sets the tax rates on property with the approval of the Travis County Commissioner’s Court. The Travis County Tax Assessor-Collector provides tax collection services. The Appraisal District is required under the Code to assess property at 100% of its appraised value. Further, real property must be reappraised at least every three years. Under certain circumstances, taxpayers and taxing units, including Central Health, may challenge orders of the Appraisal District’s review board through various appeals and, if necessary, legal action.

Property taxes are levied as of October 1 in conformity with Subtitle E, Texas Property Tax Code. Taxes are due on receipt of the tax bill and are delinquent if not paid before February 1 of the year following the year in which it was imposed. On January 1 of each year, a tax lien attaches to property to secure the payment of all taxes and penalties and interest that are ultimately imposed.

The Central Health FY 2025 tax levy was \$351,363,193. Central Health levied taxes based on January 1, 2024 assessed values at a tax rate of \$0.107969 per \$100 of assessed valuation.

## **12. Interlocal Agreement with the City of Austin**

Central Health entered into several leases of mixed-use facilities from the City of Austin for primary care (clinic) sites that, pursuant to State law, did not convey to Central Health. The mixed-use facility leases may remain in place until February 28, 2034, if not terminated earlier by either party. Rental expense to Central Health is comprised only of the operating and maintenance expense for each facility.

## **13. Interlocal Agreements with Travis County**

Central Health entered into an Interlocal agreement with Travis County in which Travis County provides legal, investment and other services for Central Health along with the tax collection services discussed in Note 11. Central Health also entered into several leases of mixed-use facilities from Travis County for primary care (clinic) sites that, pursuant to State law, did not transfer to Central Health. The mixed-use facility leases are in effect until September 30, 2029, if not terminated earlier by either party. There is minimal expense to Central Health. CommUnityCare is responsible for the clinics and the associated operating and maintenance expense for each facility.

#### **14. Agreement with CommUnityCare**

Effective March 1, 2009, Central Health and CommUnityCare were approved by the Health Resources and Services Administration (HRSA) as co-applicants under a public entity model. Under the approved Agreement, Central Health holds the Federally Qualified Health Center (FQHC) designation, while CommUnityCare manages the operations of the clinics. Central Health also owns assets utilized by CommUnityCare under an equipment and facilities agreement. Central Health has a contractual agreement with CommUnityCare to provide clinical services to qualifying Travis County residents under the Medical Access Program (MAP) and MAP Basic programs. During the year ended September 30, 2025, CommUnityCare provided services in the amount of \$76 million.

Central Health and CommUnityCare also operate under a space allocation agreement for certain facilities where CommUnityCare agrees to be solely responsible for the day-to-day operations of clinic space and other healthcare related activities with financial support from Central Health.

#### **15. The University of Texas Affiliation Agreement**

On July 10, 2014, Central Health, the CCC, and UT entered into an affiliation agreement under which UT will assist Central Health and the CCC in the support of the Integrated Delivery System including:

- Serving low-income communities by training residents in community based settings;
- Developing appropriate levels of clinical services at community clinics;
- Promoting effective and efficient medical practice by training professionals to work together in multi-disciplinary teams;
- Providing medical care and clinical services with a focus on preventative health care and factors that impact health outcomes and utilizing data to educate physicians and patients on methods to achieve better health outcomes and reduce disparities; and
- Providing women's health services.

Pursuant to the affiliation agreement, the CCC funds may only be used by UT to fund Permitted Investments consistent with the mission of Central Health. Permitted Investments are defined as the continuing investment in programs, projects, operations and providers that furthers the missions of the CCC and Central Health, benefits UT and complies with all Laws that apply to each party, and shall include, but not be limited to:

- The enhancement of medical services for residents of Travis County;
- Directly or indirectly increasing health care resources available to provide services to Travis County residents;
- The discovery and development of new procedures, treatments, drugs, and medical devices that will augment the medical options available to Travis County residents;
- Development and operation of collaborative and integrated health care for Travis County residents; and

- Direct operating support to UT to be used for:
  - The development, accreditation, and ongoing operation of the Dell Medical School and its administrative infrastructure;
  - Recruitment, retention and work of Dell Medical School faculty, residents, medical students, researchers, administrators, staff and other clinicians; and
  - Related activities and functions as described in the affiliation agreement.

The CCC paid UT annual Permitted Investment Payments in the amount of \$35 million each year from 2014 to 2022. In FY 2023, of the \$35 million due to UT, CCC paid \$12,570,000 and Central Health paid \$22,430,000. In FY 2024 and FY 2025, CCC did not have sufficient funds to make the required annual Permitted Investment Payments, which in this event becomes the responsibility of Central Health, to the extent it is permitted to do so by the Constitution and the Laws of the State of Texas. The initial term of the affiliation agreement is 25 years from the effective date, with an automatic renewal for a successive 25 year term.

## **16. Legislation Changes**

During fiscal year 2019, a Local Provider Participation Fund (the “LPPF”) in Travis County was created by the Texas Legislature. Central Health acts as the administrator of the LPPF by assessment and collection of mandatory payments from inpatient hospital facilities in Travis County. These payments are to be used to fund the local share of certain supplemental hospital funding programs and Central Health holds these funds in a fiduciary capacity.

During the year ended September 30, 2025 Central Health collected \$335,087,911 in mandatory payments from participating hospitals and made intergovernmental transfers of \$329,101,507. As of September 30, 2025, Central Health held \$8,701,210 in mandatory payments that will be used for future funding of eligible supplemental payment programs.

During the 86<sup>th</sup> Legislature, the State of Texas passed Senate Bill (SB) 1142 which provides Central Health the authority to appoint, contract for or employ physicians to provide direct medical care to patients. Since then, Central Health has embarked on building a comprehensive system that delivers direct clinical care to its patients through directly employed physicians.

Central Health is currently providing direct clinical services to patients at the East Clinic, Capital Plaza, Rosewood Zaragosa, ENT Clinic, and Medical Respite Center. Additional clinical sites are being constructed at Hancock Center, Colony Park and Cameron Center, with opening dates planned in the next one to three years.

## **17. Deferred Compensation Plan**

Central Health offers its employees a deferred compensation plan established in accordance with Internal Revenue Code Section 457. Central Health matches one-half of the employee's contribution, up to a maximum of 2%. Assets and income of Central Health's plan are administered by a private Trustee under contract with Central Health and are held for the exclusive benefit of the participants and their beneficiaries. Accordingly, the plan's assets and liabilities are not recorded in Central Health's financial statements. During the year ended September 30, 2025, Central Health contributed \$338,622 to the plan under Central Health's deferred compensation matching program.

## **18. Retirement Plan**

In October 2007, Central Health began offering its employees a defined contribution 401(a) plan established in accordance with Internal Revenue Code Section 401(a). After an initial 120 days of employment, a mandatory 6% is deducted pre-tax from employee earnings. Central Health matches 100% of the 6% employee deduction. Assets and income of Central Health's plan are administered by a private Trustee under contract with Central Health and are held for the exclusive benefit of the participants and their beneficiaries. Accordingly, the plan's assets and liabilities are not recorded in Central Health's financial statements. During the year ended September 30, 2025, Central Health contributed \$3,275,483 to the plan under Central Health's retirement program.

## **19. Health Care Coverage**

Central Health manages a self insured plan for health insurance benefits for employees. Central Health contributes to employee's health insurance at the same rates for all individual and family plans, however, employee and employer contributions were used to begin to establish the necessary reserves to fund claims. In addition, Central Health uses a licensed insurer as third-party administrator to provide the same network of health coverage programs, administer claims and administer stop loss coverage for claims over a set threshold, limiting Central Health's risk for high dollar claims. On average, Central Health contributed \$814 per month per employee to the plan during the entire year ended September 30, 2025. As of September 30, 2025 the incurred but not reported liability was \$3,357,800 with claims payments of \$24,453,271. During the year ended September 30, 2025, Central Health designated \$2.0 million of unrestricted net position for the funding of the plan.

## **20. Risk Management**

Central Health's risk management program includes coverage through third party insurance providers for general liability, property damage, officers' professional liability, workers compensation, cyber, and other types of insurance as appropriate. During the year ended September 30, 2025, there were no reductions in insurance coverage from the prior year that were outside of current industry standards and there have been no claims filed other than routine claims for property damage, workers compensation, and employment matters, none of which were significant.

## **21. Commitments and Contingencies**

Central Health is obligated to provide health care assistance to eligible county residents under Chapter 61, Section 61.022 of the Texas Health and Safety Code. Generally, Central Health is obligated, at a minimum, to provide healthcare services to county residents at or below 21 percent of the federal poverty level based on the federal Office of Management and Budget poverty index or other eligibility criteria as established within Chapter 61.

Per Section 3.2 of the Affiliation Agreement between UT, Central Health, and the CCC, Central Health shall be responsible for any portion of the annual \$35 million Affiliation Payment, subject to the terms of the Affiliation Agreement and to the extent the CCC is unable to fund the annual payment amount. During FY 2025, Central Health paid \$35 million of the Affiliation Payment and has budgeted the entire \$35 million Affiliation Payment in FY 2026 as the guarantor to the extent permitted by the Constitution and the Laws of the State of Texas.

Article IV of the Omnibus Services Agreement establishes an Agreed Value of Services in consideration of Covered Healthcare Services provided by Seton. Both parties have agreed that the initial Value of Services amount is \$73.6 million and beginning October 1, 2019 shall be increased annually by the annual increase of the published CPI-Medical Care index. Uncompensated Care (UC), Disproportionate Share (DSH) program, and payments from the CCC and received by Seton shall offset and reduce the Value of Services amount. In the event these amounts do not equal or exceed the annual Value of Services, Seton shall be entitled to offset amounts due and payable by Seton to Central Health or the CCC.

Central Health is involved in litigation arising in the normal course of business. After consultation with legal counsel, management does not anticipate a material impact to Central Health's future financial position or results from operations.

Central Health continues to manage its operations to maintain positive cash flow, and management believes that Central Health has sufficient liquidity and financial resources to sustain operations and meet obligations as they become due.

## **23. Subsequent Events**

Central Health evaluated subsequent events through MONTH XX, 2026 (the date the financial statements were available to be issued).

In December 2025, the District issued \$248,855,000 of Series 2025 bonds maturing on March 1, 2055. The proceeds will be used to purchase, construct and renovate various properties for clinical and administrative purposes.

In November 2025, the District purchased a building for administrative offices in Promontory Point for \$14,000,000. Also, in December 2025, the District purchased a building for clinical services in Northview for \$21,075,000.

**Independent Auditors’ Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with Government Auditing Standards**

To the Board of Managers of  
Travis County Healthcare District:

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the business-type activities and the aggregate discretely presented component units of the Travis County Healthcare District (dba and hereinafter referred to as “Central Health”), as of and for the year ended September 30, 2025, and the related notes to the financial statements, which collectively comprise Central Health’s basic financial statements, and have issued our report thereon dated **Month XX, 2026**.

**Report on Internal Control Over Financial Reporting**

In planning and performing our audit of the financial statements, we considered Central Health’s internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Central Health’s internal control. Accordingly, we do not express an opinion on the effectiveness of Central Health’s internal control.

*A deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. *A material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity’s financial statements will not be prevented, or detected and corrected on a timely basis. *A significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

## **Report on Compliance and Other Matters**

As part of obtaining reasonable assurance about whether Central Health's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

### **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Austin, Texas

Month XX, 2026



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*Innovation* - We create solutions to improve healthcare access.

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## **BOARD MEETING**

**March 25, 2026**

## **REGULAR AGENDA ITEM 7**

Discuss and take appropriate action on the required documentation of closed sessions of Central Health Board of Managers and committee meetings. <sup>3</sup> (*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 3/25/26

Who will present the agenda item? (Name, Title) David Duncan and Perla Cavazos

General Item Description Discuss and take appropriate action on the recording of closed sessions

Is this an informational or action item? Action item

Fiscal Impact N/A

Recommended Motion (if needed – action item) Approve the policy on recording of Central Health closed sessions

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

- 1) Travis County Attorneys will provide a closed session briefing on the legal considerations of documenting closed sessions of Central Health board meetings and committees.
- 2) A draft policy is attached for board review, discussion, and possible action.
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Draft policy on Recording of Central Health Board Closed Sessions

Estimated time needed for presentation & questions? 1 hour

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

Form Prepared By/Date Submitted: Perla Cavazos, Chief Governance and Government Affairs Officer

<b>Policy Title:</b> Recording of Central Health Board Closed Sessions
<b>Policy #:</b> BD-XXXP
<b>Effective Date:</b> WORKING DRAFT
<b>Revision Dates:</b> N/A
<b>Board Last Approval Date:</b> PENDING
<b>Policy Owner:</b> Chief Governance Officer
<b>Executive Sponsor:</b> CEO
<b>Attachments:</b>

**I. PURPOSE**

This policy sets out the Central Health Board’s direction on keeping a record of closed sessions in a manner consistent with the Texas Open Meetings Act.

**II. SCOPE**

This policy applies to Central Health Board Managers and staff supporting Board meetings.

**III. DEFINITIONS**

**IV. POLICY**

The Central Health Board directs staff to develop procedures as needed and to implement this policy to digitally record closed sessions of the Central Health Board of Managers and Committees formed by the Board. The policy and procedures must comply with the Texas Open Meetings Act.

The procedures will be attached to this policy and will go into effect after providing written notice to the board of managers.

Attorney-client executive sessions under Texas Government Code §551.071 regarding litigation, anticipated litigation, and human resource matters will not be recorded. Unlike other closed session exceptions, a certified agenda or recording is not required for closed sessions, or portions thereof, under Texas Government Code §551.071.

Access to the digital recordings shall be available to board managers in person by contacting Central Health’s Board Governance staff to coordinate a time to listen to the digital recordings.

Central Health staff will maintain recordings under this policy for two (2) years and then destroy such recordings in accordance to the Central Health records retention policy (RM-001P).

**V. RELEVANT STATUTES, REGULATIONS OR GUIDANCE**

Texas Government Code §§551.103 (Certified Agenda or Recording Required), 551.104 (Certified Agenda or Recording; Preservation; Disclosure).

Texas Health & Safety Code §§281.026 (Administrator; Duties); 281.047 (Management, Control, Administration).

Central Health Bylaws Section 8.14 (Record of Meetings).

**VI. RELATED POLICIES AND PROCEDURES**

N/A

**VII. PROCESS**

This policy will be reviewed biennially as required by the Policy on Policies (CMP-011P).

DRAFT

<b>Policy Title:</b> Policies and Standard Operating Procedure Management AKA the Policy on Policies and Standard Operating Procedures Management	
<b>Policy #:</b> CMP-011P	
<b>Effective Date:</b> January 2019	
<b>Last Review Date:</b> April 2025	
<b>Policy Owner:</b> Chief Compliance and Risk Officer	
<b>Executive Sponsor:</b> Chief Compliance and Risk Officer	
<input checked="" type="checkbox"/> <b>Central Health Specific</b>	<input type="checkbox"/> <b>Enterprise Included</b>

**PURPOSE**

The purpose of this policy is to outline the essential elements of a policy and standard operating procedure program for Central Health to ensure consistency, continuous development, approval, communication, monitoring, and oversight and guidance of published policies and standard operating procedures.

**I. SCOPE**

This policy applies to all Central Health employees and operations. The application includes Board of Managers, officers, interns, volunteers, and temporary employees. For CommUnityCare and Sendero guidance on Deviation from Central Health policies or procedures that care jointly applicable, see Section V, Paragraph 7, below.

**II. DEFINITIONS**

**Policy** – Adopted statement document communicating Central Health’s adherence to or commitment to a specific process.

**Standard Operating Procedure** – Detailed document that expands upon a Central Health policy to provide additional clarity on the implementation of a policy in daily operations. Also, referred to as a standard operating procedure (SOP).

**Desktop Procedures** – Operational reference materials to further detail a Central Health Policy or SOP to aid employees in training and executing the task. Also, referred to as a Job Aid.

**III. RELEVANT FEDERAL AND STATE STATUTES**

**IV. RELATED POLICIES AND SOPS**

**V. PROCEDURE**

Central Health is committed to establishing a process for the development, approval, communication, monitoring and enforcement of operational policies and SOPs.

The policy and SOP program includes, at a minimum, the following components:

### **1) Consistency**

Policies and SOPs published by Central Health shall be standardized to ensure organizational expectations and requirements are communicated to employees in a concise and consistent manner. Every effort will be made to avoid processes which are cumbersome or diminish the employee's ability to access or understand the policies and/or SOPs. This includes the use of a standard template, clarity in language and style, and easy to access their storage location.

#### **Style guidelines:**

- a. Best effort should be used to write policies and SOPs in clearly understandable language. A definition should be provided when using a complex subject or industry terms.
- b. Titles and headers will be in Calibri 12-point font. They may be bolded as well.
- c. Paragraphs, lists and other text will be Calibri 12-point font. This text should not be bolded.
- d. Policies must be created using the *Policy Template – Attachment A*.
- e. Standard Operating Procedures (SOPs) must be created using the *Standard Operating Procedure Template – Attachment B*.
- f. Desktop Procedures (DTP) must be created using the *Desktop Procedures Template – Attachment C*.
  - Desktop protocols do not need to comply with the above style guidelines (a-c). Supervisors and leadership are permitted to create additional training materials or reference documents to support daily operations beyond formal policies or SOPs.
- g. Relevant forms, agreements or documents referenced in a policy or SOP may be referenced and should be included as attachments.
- h. Naming conventions and records are managed by the Policy Manager Administrator.
- i. Policies, SOPs and Desktop procedures shall be named as such:
  - a. For a Policy: ABC - ###P
  - b. For an SOP: ABC - ###SOP
  - c. For a Desktop Procedure: ABC-###SOP-DTP

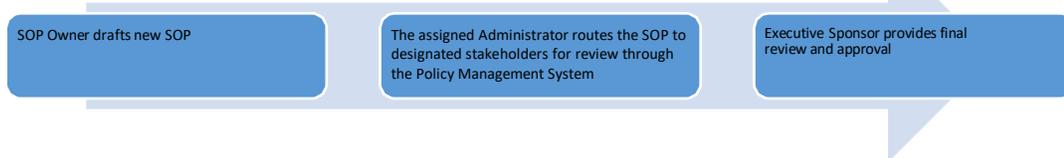
### **2) Approval Authority and Workflow**

Clearly identified levels of authority for policies and SOPs are essential for the maintenance of a policy program. By implementing a delineation of authority, business processes are not adversely impacted by an approval workflow.

#### **Policy Workflow (New/Revised/Annual Review):**



**SOP Workflow (New/Revised/Annual Review):**



**Desktop Procedures (New/Revised/Annual Review):**



The Central Health Board of Managers have delegated operational policy approval to the Chief Executive Officer (CEO) per the Board By-Laws.

The Chief Compliance Officer is responsible for oversight and adherence to this policy. The Compliance Committee’s role is to support adherence to this policy. Employees are responsible for understanding any Policy, SOP, or Desktop Procedures identified to their functional area. Supervisors and leadership are expected to communicate the expectations of a new or revised Policy, SOP, and/or Desktop Procedures to their employees.

**3) Policy Ownership**

All policies and SOPs require a Policy/SOP Owner, as well as an Executive Sponsor. The Policy/SOP Owner, under the oversight of the Executive Sponsor, will be responsible for ensuring the policy, SOP, or Desktop Procedure is relevant, accurate and current with review timeframes. The Policy/SOP Owner should be an individual knowledgeable of the content and processes related to the policy, SOP, or Desktop Procedures. They should also be aware of any relevant regulatory and statutory requirements the policy or SOP needs to address. The Executive Sponsor will be responsible for reviewing the policy, SOP, or Desktop Procedure’s content, confirming the accuracy of, formally approving, and communicating upward any newly created policy or SOPs or any significant changes to the appropriate oversight committee/s.

**4) Timeframes for review/revision**

To ensure the accuracy and relevance of Central Health policies with current business operations, as well as applicable laws and regulations, all Central Health policies and SOPs

will be reviewed at least biennially. The review reminder will be sent from the Policy Management Software A/K/A the Central Health Policy Manager.

Policy/SOP Owners or Executive Sponsors may elect to deviate from the last review due date only in circumstances where a review or revision is conducted *prior to* the due date previously captured for the applicable year. Examples of circumstances requiring a deviation include changes in organizational structure or business processes, acquisition or creation of new entities, changes in regulations or laws affecting Central Health.

The approval and review dates of all policies, SOPs, and Desktop Procedures will be captured within the Policy Management.

#### **5) Publication and communication of policies and SOPs**

Following the approval of a policy or SOP, impacted individuals must be informed. This applies for new policies, SOPs, and Desktop Procedures as well revised policies, SOPs, and Desktop Procedures when the revision is deemed significant. If appropriate, formal training on the standards and requirements outlined in a policy, SOP, or Desktop Procedures may be required.

Specific Central Health policies may require an acknowledgement of receipt and understanding such as the *Standards of Conduct (HR2-008P)*, *Code of Conduct and Ethics (CMP-002P)* or specific Finance policies and/or procedures.

**All final policies and SOPs will be maintained and housed within the Policy Management Software A/K/A the Central Health Policy Manager.**

If not obtained from the Policy Management Software, any physical or electronic version of a policy or SOP will be considered a copy. While not encouraged, if individuals choose to save copies in any location (physical or electronic), the documents should be clearly identified as a “copy”.

#### **6) Enforcement**

Central Health will enforce compliance with policies and SOPs through various methods, to include, but are not limited to:

- Auditing and monitoring activities overseen by the Chief Compliance Officer.
- Auditing and monitoring activities conducted by appropriate functional areas.
- Auditing and monitoring activities conducted by external entities or consultants.
- Employee performance review activities.
- Monitoring of Compliance and Ethics Hotline reports regarding violations of Central Health policies and SOPs.

#### **7) Deviation (*Sendero and CommUnityCare, specifically*)**

Any deviations from Central Health must adhere to Section 2.5: Staffing of the Administrative Equipment, and Facilities (first amendment) between The Travis County

Healthcare District and Central Texas Community Health Centers signed 02/26/2009, unless updated. In addition, all deviations from Central Health must also adhere to Section 10: Policies and Procedures of the Co-Applicant Agreement between Travis County Healthcare District and Central Texas Community Health Centers signed 10/04/2007, unless updated.

**8) Medical Executive Board**

Pursuant to Chapter 281 of the Texas Health and Safety Code, specifically Sec. 281.02815 (f), the Central Health medical executive board adopts, maintains, and enforces policies and procedures to ensure that a physician employed by Central Health exercises the physician's independent medical judgment in providing care to patients.

<b>Policy Title:</b> Record Retention and Management Policy	
<b>Policy #:</b> RM-001P	
<b>Effective Date:</b> August 2024	
<b>Last Review Date:</b> February 2026	
<b>Policy Owner:</b> Records Manager Officer	
<b>Executive Sponsor:</b> Chief Compliance Officer	
<b>Attachments:</b>	
<input checked="" type="checkbox"/> <b>Central Health Specific</b>	<input type="checkbox"/> <b>Enterprise Included</b>

**I. PURPOSE**

The purpose of this policy is to provide for efficient, economical, and effective controls over the creation, distribution, organization, maintenance, use and disposition of all Records of Central Health through a comprehensive system of integrated procedures for the management of Records from their creation to their ultimate disposition, consistent with the requirements of both state and federal regulations, as well as accepted Records management practices.

**II. SCOPE**

This policy applies to all of Central Health’s workforce, including the Board of Managers, officers, consultants, contractors, vendors, interns, volunteers, and temporary employees.

**III. DEFINITIONS**

**Essential Record** – means any Central Health Record necessary to the resumption or continuation of operations in an emergency or disaster, to the re-creation of the legal and financial status of Central Health, or to the protection and fulfillment of Central Health’s obligations to of Travis County residents.

**Legal Hold** - means a hold that the legal department may issue regarding certain documents and electronic information, which must be preserved and not destroyed. When a Legal Hold is issued, the instructions in the Legal Hold take precedence over all policies. Records and electronic information subject to a Legal Hold cannot be altered or destroyed without the prior consent of legal counsel or their designee.

**Obsolete record** – means any Record no longer created or received by Central Health whose Retention Periods on a records retention schedule issued by the Texas State Library and Archives Commission have expired and that Central Health wishes to destroy.

**Record** - means any document, paper, letter, book, map, photograph, sound or video recording, microfilm, magnetic tape, electronic medium (including text message), or other information recording medium, regardless of physical form or characteristic and regardless of whether public access to it is open or restricted under the laws of Texas, created or received by Central Health or any of its officers or employees pursuant to law, including an ordinance, or in the transaction of public business as part of Central Health. Each department should identify which documents created during the regular course of business operations constitute a record in accordance with this policy. The term does not include:

- a) Extra identical copies of documents created only for convenience of reference or research by officers or employees of Central Health;
- b) Notes, journal, diaries, and similar documents created by an officer or employee of Central Health for the officer's or employee's personal convenience;
- c) Blank forms;
- d) Stocks of publications;
- e) Copies of documents in any media furnished to members of the public to which they are entitled under Chapter 552 of the Texas Government Code (the Public Information Act), or other Texas law; or
- f) Any Records, correspondence, notes, memoranda, or documents, other than a final written agreement resulting from an alternative dispute resolution procedure conducted under Texas Government Code § 2009.054(c), associated with a matter conducted under an alternative dispute resolution procedure in which personnel of a Texas department or institution, local government, special district, or other political subdivision of Texas participated as a party, facilitated as an impartial third party, or facilitated as the administrator of a dispute resolution system or organization.

**Records Custodian ("Custodian")** – means a person appointed to be in charge of a department or area that creates or receives Central Health Records.

**Records Management** – means the application of management techniques to the creation, use, maintenance, retention, preservation, and disposal of records for the purposes of reducing the costs and improving the efficiency of recordkeeping. The term includes the development of records control schedules, the management of filing and information retrieval systems, the protection of essential and permanent records, the economical and space-effective storage of inactive records, control over the creation and distribution of forms, reports, and correspondence, and the management of micrographics and electronic and other records storage systems.

**Records Management Officer** – means the person designated under Tex. Gov. Code § 203.025 as the records management officer.

**Retention Period** – means the minimum time that must pass after creating, recording, or receiving a Record, or the fulfillment of certain actions associated with a Record before it is eligible for destruction.

#### IV. POLICY

- a. It is Central Health's policy to apply effective and cost-efficient techniques (1) to manage and maintain complete, accurate, and high-quality Records, and (2) to avoid the cost and burden of storage and retention by routinely disposing of documentation that does not serve an ongoing business purpose and is not otherwise required to be maintained by law or regulation. *Records are to be kept according to all applicable laws and regulations and this policy.*
- b. Records will be managed responsibly, and retention schedules and destruction procedures and methods will be developed applicable to Central Health's Records.
- c. All Central Health employees and agents are responsible for ensuring that the Records they create, receive or use, are created, used, maintained, preserved, and destroyed in accordance with this policy.
- d. Records containing confidential and/or proprietary information will be securely maintained, controlled, and protected to prevent unauthorized access.

- e. All Records and non-Records generated and received by Central Health are the property of Central Health. No Central Health employee, by virtue of their position, has any personal or property right to such Records even though they may have developed or compiled them.
- f. No one may falsify or inappropriately alter information in any Record or document.
- g. Reporting
  - The unauthorized destruction, removal or use of Records is prohibited and must be reported immediately to the Chief Compliance Officer.
  - Employees with information pertaining to the unauthorized destruction, removal or use of Central Health Records or regarding falsifying or inappropriately altering information in a Record or document should report such information to the employee's supervisor, a member of management, the Chief Compliance Officer or to the Central Health Compliance and Ethics Hotline at 833-770-0080 or online at: [www.lighthouse-services.com/centralhealth](http://www.lighthouse-services.com/centralhealth)

#### **V. RELEVANT STATUTES, REGULATIONS OR GUIDANCE**

- Texas Local Government Code, Title 6, Subtitle C, Chapters 201, 202, 203, 205
- Texas Local Government Bulletin B - Electronic Records Standards and Procedures
- Texas Local Government Bulletin C - Inventorying and Scheduling Records
- Texas Local Government Bulletin D - Local Government Records Act
- Texas Local Government Bulletin F - Records Storage Standards

#### **VI. RELATED POLICIES AND PROCEDURES**

None.

#### **VII. PROCESS**

##### **a) GENERAL DUTIES OF RECORDS STAFF**

- Records Management Officer shall:
  - assist in establishing and developing policies and procedures for the Records Management program;
  - administer the Records Management program and provide assistance to Custodians for purposes of reducing the costs and improving the efficiency of recordkeeping;
  - in cooperation with the Records Custodians, prepare the Records Retention schedules and list of Obsolete Records;
  - in cooperation with the Records Custodians, identify and take adequate steps to protect Central Health Essential Records and preserve Central Health Records that are of permanent value;
  - in cooperation with Records Custodians, executive team and department leadership, ensure that the maintenance, preservation, destruction, or other disposition of Records is carried out in accordance with Central Health's policies and procedures and applicable laws and regulations;
  - disseminate to the Central Health Board of Managers, executive leadership, and Records Custodians information concerning state laws, administrative rules, and Central Health policies pertaining to Central Health Records; and

- in cooperation with Records Custodians, the executive team and department leadership, establish procedures to ensure that the handling of Records in any context of the Records Management program by the Records Management Officer or those under the Record Management Officer's authority is carried out with due regard for the duties and responsibilities of Records Custodians that may be imposed by law and the confidentiality of information in Records to which access is restricted by law.
  - Records Custodian shall:
    - cooperate with the Records Management Officer in carrying out the policies and procedures established by Central Health for the efficient and economical management of Records and in carrying out the requirements of applicable law;
    - adequately document Central Health transactions, services, programs, and duties for which the Records Custodian and the Custodian's staff are responsible; and
    - maintain the Records in the Custodian's care and carry out their preservation, destruction, or other disposition in accordance with Central Health policies and procedures and the requirements of applicable law.
  - Records Support Staff shall:
    - support the Records Management Officer and Records Custodians in all aspects of the Records Management program to facilitate the efficient and effective maintenance of the Records Management Program.
  - All Staff shall:
    - be familiar with and adhere to the Records Management and retention policies and procedures within the organization and within their respective department.
- b) **RECORD TYPES AND RESPONSIBLE PARTIES**
- Records within different departments will be managed by the designated Records Custodian for each Central Health Department, as outlined in **Appendix A.**
- c) **RETENTION SCHEDULES**
- The Chief Compliance Officer, the Records Management Officer, and as applicable the Travis County Attorney's Office (TCAO) will review and approve Retention Schedules.
- d) **RECORDS ACCESS**
- Subpoena Requests received by any Central Health staff shall be forwarded to the Compliance Department who will coordinate with TCAO to ensure that all valid requests are responded to in a timely manner.
  - Records requested via public information requests shall be processed through Travis County Attorney's Office in compliance with applicable laws, including TX Gov. Code § 552 *et. Seq.*
- e) **DESTRUCTION OF RECORDS**
- Obsolete Records and Records that have satisfied their required Retention Period, and that are not subject to a Legal Hold or an unresolved request under TX Gov. Code § 552 *et. Seq.*, will be destroyed in an appropriate manner in accordance with applicable law.

**ATTACHMENT A: Table of Record Types and Custodians**

<b>RECORD TYPE</b>	<b>RECORDS CUSTODIAN (TITLE)</b>	<b>RECORDS SUPPORT STAFF</b>
<b>Finance (Accounting)</b>	VP, CFO	Designated Admin
<b>Finance (Procurement)</b>	VP, Chief Strategy and Planning Office	Designated Admin
<b>CEO (Administrative)</b>	President, CEO	Designated Admin
<b>Board Admin</b>	Chief Governance and Government Affairs Officer	Designated Admin
<b>Joint Tech</b>	Chief Information Officer	Designated Admin
<b>Compliance</b>	Chief Compliance Officer	Designated Admin
<b>Legal</b>	Chief Legal Officer	Designated Admin
<b>Human Resources</b>	Chief People Officer	Designated Admin
<b>Operations</b>	Chief Operating Officer	Designated Admin
<b>Realty</b>	VP Enterprise Alignment and Coordination Health and Wellness Operations	Designated Admin
<b>Communications</b>	Chief Communications Officer	Designated Admin
<b>Facilities &amp; Security</b>	VP Enterprise Alignment and Coordination Health and Wellness Operations	Designated Admin
<b>Billing</b>	Director of Revenue Cycle	Designated Admin
<b>Medical Records (HIM)</b>	HIM Manager	Designated Admin
<b>Claims</b>	Director of Provider Reimbursement and Network Services	Designated Admin
<b>MAP Applications</b>	VP of Operations	Designated Admin
<b>Education &amp; Training</b>	Chief People Officer	Designated Admin
<b>Devices</b>	Chief Information Officer	Designated Admin



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*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**

**March 25, 2026**

## **REGULAR AGENDA ITEM 8**

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 and services provided by faculty and residents of The University of Texas at Austin Dell Medical School in support of Central Health's mission.<sup>3</sup> (*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 March 25, 2026

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 Dr. Patrick Lee*, Cause No. D-1-GN-17-005824 in the 345th District Court of Travis County and services provided by faculty and residents of The University of Texas at Austin Dell Medical School in support of Central Health's mission.

Is this an informational or action item? Informational

Fiscal Impact N/A

Recommended Motion (if needed – action item) N/A

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

- Briefing with legal counsel as needed. Please note that this agenda item will be taken up at the discretion of the chair based on status of the situation at the time of the meeting.
- 1) discretion of the chair based on status of the situation at the time of the meeting.
  - 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/ March 17, 2026



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## **BOARD MEETING**

**March 25, 2026**

## **REGULAR AGENDA ITEM 9**

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.<sup>3</sup> (*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 March 25, 2026

Who will present the agenda item? (Name, Title) \_\_\_\_\_

General Item Description 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.

Is this an informational or action item? Informational

Fiscal Impact \_\_\_\_\_

Recommended Motion (if needed – action item) N/A

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

- 1) Brief update in closed session.
- 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? 15 minutes

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

Form Prepared By/Date Submitted: Briana Harris/ March 17, 2026



**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 MEETING**

**March 25, 2026**

## **REGULAR AGENDA ITEM 10**

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



## AGENDA ITEM SUBMISSION FORM

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Agenda Item Meeting Date March 25, 2026

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

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

1) This item will be taken up in closed session.

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: Briana Harris/March 3, 2026



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## **BOARD MEETING**

**March 25, 2026**

## **REGULAR AGENDA ITEM 9**

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