



University Health System

REGULAR MEETING OF THE BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Tuesday, July 26, 2011

6:00 p.m.

Board Room, University Center for Community Health
701 S. Zarzamora
San Antonio, Texas

MINUTES

BOARD MEMBERS PRESENT:

Roberto L. Jimenez, M.D., Chair
Ira Smith, Secretary
Robert Engberg
Alex Briseño
Linda Rivas
Rebecca Q. Cedillo

BOARD MEMBERS ABSENT:

James R. Adams, Vice Chair

OTHERS PRESENT:

George B. Hernández, Jr. President/Chief Executive Officer, University Health System
Tricia Aleman, Director, Corporate Communications and Marketing, University Health System
Bryan Alsip, M.D., Executive Vice President/Chief Medical Officer, University Health System
Francine Crockett, Vice President, Supply Chain Management, University Health System
Peggy Deming, Executive Vice President/Chief Financial Officer, University Health System
Theresa De La Haya, Senior Vice President, Community Health and Clinical Preventive Programs,
University Health System
Sergio Farrell, Vice President, Ambulatory Services, University Health System
Roe Garrett, Vice President/Controller, University Health System
Greg Gieseman, President/Chief Executive Officer, Community First Health Plans, Inc., and Vice
President Managed Care, University Health System
Francisco Gonzalez-Scorrano, Dean, School of Medicine, UTHSCSA
William Henrich, M.D., President, The University of Texas Health Science Center at San Antonio
Michael Hernandez, Vice President, Legal Services and Risk Management, University Health System
Sherry Johnson, Vice President/Integrity and Regulatory Services, University Health System
Leni Kirkman, Vice President, Strategic Communications and Patient Relations, University Health
System
Gary McWilliams, M.D., Executive Vice President/Chief Ambulatory Services Officer, University Health
System

Priti Mody-Bailey, M.D., President/Chief Executive Officer, Community Medicine Associates
Mary Ann Mote, Senior Vice President of Operations/Chief Revenue Officer
Bill Phillips, Vice President/Chief Information Officer, Information Services, University Health System
A.J. Sandoval, Chief of Police, University Health System
Theresa Scepaniski, Senior Vice President, Organizational and Strategic Development, University Health System
Andrew Smith, Director, Government Relations, University Health System
Jesse Trevino, Lieutenant, Protective Services, University Health System
Christann Vasquez, Executive Vice President/Chief Operating Officer, University Health System
Roberto Villarreal, M.D., Vice President, Community Initiatives, University Health System
And other attendees.

MEMBERS OF THE PRESS:

Richard Marini, San Antonio Express News

CALL TO ORDER AND RECORD OF ATTENDANCE: ROBERTO L. JIMENEZ, M.D., CHAIR, BOARD OF MANAGERS

On behalf of Dr. Jimenez, Mr. Smith called the meeting to order at 6:05 p.m.

INVOCATION AND PLEDGE OF ALLEGEANCE:

Ms. De La Torre introduced Troy Foster for the invocation and Mr. Smith led the pledge of allegiance.

QUARTERLY EMPLOYEE RECOGNITION AWARDS:

The following employees received recognition by the Board of Managers:

Professional: (Nursing)	Patrice Gibson, Patient Care Coordinator, Outpatient Surgery
Professional: (Non-Nursing) Management:	Linda Rivas, Sr. Technical Trainer, Computer Training Services Kristi Hill-Herrera, Manager Quality Management, Radiology Support
Technical:	Albert Khamis, Medical-Surgical Technician, Cat Scan
Clerical:	Diane Cantu, Administrative Assistant, Physical Medicine Administration
Service: Hospital	Benito Aguilar, Parking Enforcement Officer, Protective Services–University
Volunteer:	Michael Tovar, Volunteer, Volunteer Services
Physician: North	Heather Miller, MD, CMA Staff Physician, Community Medicine Associates-

Team: Donor Service Team: Virginia Henderson, Leticia Galaviz, Domingo Cruz, Joel Pardo, Debra Serna, Jennifer Limon, Sherrie Warner, Stephanie De Luna, Cynthia Moreno

All of this year's quarterly recipients will be special honored guests at the Annual Recognition Awards Ceremony on February 23, 2012 at the Omni Hotel. Employees of the Quarter receive a plaque, embossed pen and an opportunity to select one of numerous awards valued at \$100 on the Employee Recognition website.

Ms. Rebecca Cedillo addressed the employees on behalf of the Board. She thanked them for their hard work and dedication to public service, and encouraged their continued good work.

CITIZEN PARTICIPATION: None.

APPROVAL OF MINUTES OF PREVIOUS MEETINGS OF THE BOARD OF MANAGERS:

JUNE 21, 2011 – SPECIAL BOARD MEETING:

SUMMARY: The minutes of the special Board meeting of June 21, 2011, were submitted for approval by the Board of Managers.
RECOMMENDATION: Dr. Jimenez recommended approval of the minutes as submitted.
ACTION: A **MOTION** for approval of the recommendation was made by Ms. Cedillo, **SECONDED** by Ms. Rivas, and **PASSED UNANIMOUSLY**.
EVALUATION: None.
FOLLOW-UP: None.

JUNE 28, 2011 – REGULAR BOARD MEETING:

SUMMARY: The minutes of the regular Board meeting of June 28, 2011, were submitted for approval by the Board of Managers.
RECOMMENDATION: Dr. Jimenez recommended approval of the minutes as submitted.
ACTION: A **MOTION** for approval of the recommendation was made by Mr. Briseno, **SECONDED** by Mr. Engberg, and **PASSED UNANIMOUSLY**.
EVALUATION: None.
FOLLOW-UP: None.

REPORT FROM THE PRESIDENT OF THE HEALTH SCIENCE CENTER – WILLIAM HENRICH, M.D.:

SUMMARY: Dr. Henrich yielded the floor to Dr. Gonzalez-Scoranno. He reported that the School of Medicine had hosted 221 new medical students, their families, and friends at this year's White Coat ceremony on Sunday, July 24, 2011. The white coat, worn for a century by physicians, earns students the privilege and duty of caring for others. The ceremonial tradition begun in 1910. This is the last class that will study under the original curriculum. Staff is actively working to implement a new medical school curriculum for next year. Total enrollment for the School of Medicine at this time is approximately 900. Dr. Gonzalez-Scoranno acknowledged the physician leaders present.

RECOMMENDATION: This report was provided for information purposes only.
ACTION: None.
EVALUATION: Dr. Roberto Jimenez arrived during Dr. Gonzalez-Scoranno's report.
FOLLOW-UP: None.

NEW BUSINESS

CONSENT AGENDA – ROBERTO JIMENEZ, M.D.:

Consideration and Appropriate Action Regarding Medical-Dental Staff Recommendations for Staff Membership – *Nicolas Walsh, M.D., President, Medical/Dental Staff*

Consideration and Appropriate Action Regarding Appointments/Reappointments to the Board of Trustees of The Center for Health Care Services—*Jim Adams, Chair, Nominating Committee*

Consideration and Appropriate Action Regarding Commissioning of Peace Officers for Bexar County Hospital District—*Richard Rodriguez*

Consideration and Appropriate Action Regarding 2nd Quarter 2011 Investment Report—*Peggy Deming*

Consideration and Appropriate Action Regarding University Health System Policy No. 9.19, Interpreter Services—*Leni Kirkman*

Consideration and Appropriate Action Regarding Purchasing Activities (See Attachment A) - *Francine Crockett*

SUMMARY: Mr. Hernandez pulled UHS Policy No. 9.19, Interpreter Services, for further review by staff. The proposed policy will be re-submitted for Board approval at the August Board meeting.

RECOMMENDATION: Staff recommends approval of the remaining items on the consent agenda.

ACTION: A **MOTION** to approve staff's recommendation for the items listed on the consent agenda was made by Ms. Cedillo, **SECONDED** by Ms. Rivas, and **PASSED UNANIMOUSLY**.

EVALUATION: Chief of Police Sandoval introduced the newly commissioned peace officers all slated to hold designated positions in the Emergency Department at University Hospital.

FOLLOW-UP: None.

ITEMS RELATED TO PLANNING & OPERATIONS – LINDA RIVAS, CHAIR, PLANNING & OPERATIONS COMMITTEE

UPDATE ON DIGITAL MAMMOGRAPHY MOBILE UNIT AND CERTIFICATION FROM THE NATIONAL QUALITY MEASURES FOR BREAST CENTERS (NQMBC) – THERESA DE LA HAYA/CHRISTANN VASQUEZ

SUMMARY: In November of 2010, the Board of Managers approved the purchase of a mobile mammography vehicle which is scheduled to arrive on August 19, 2011, and is part of the Health System's effort to become a Certified

Breast Center of Excellence Program with certification from the National Quality Measures for Breast Center (NQMBC). Staff anticipates obtaining certification in August when the vehicle arrives. Certification has been received from the American College of Radiology.

The business plan model developed assures the highest and best use of the vehicle. Best practice for successful clinical use of mobile mammography services requires careful consideration of various clinical and operational factors, which Ms. De La Haya reviewed with the Board in detail.

In preparation for the new mobile unit, staff has developed partnerships with corporations/businesses, school districts and church communities. These partnerships will the opportunity to locate the mobile unit on various sites to screen women for breast cancer. Staff will continue to work with other organizations such as Rack space, City of San Antonio and Bexar County to develop additional partnerships.

A primary focus is to decrease the time it takes to receive results. Pre-registration will occur prior to all scheduled partner events. On line scheduling will be offered to workplace employees so participants can receive a convenient assigned appointment time. Walk-ins will be taken at scheduled events if space permits. A physician referral is not required. Pre-event educational seminars will be conducted to ensure all women are up to date with breast screening recommendations.

Staff will pilot the mobile unit screening process by offering screening events to Health System employees. A community event to introduce the mobile unit will be planned and includes the launching of a website for the mobile mammography. The mobile unit will be used 100% of the time for mammography screenings.

The operational cost for the mobile unit will be covered by grant funds (75%) and (25%) by downstream revenue from diagnostics and biopsy procedures. These grant funds are secured from the Susan G. Komen Foundation and the Cancer Prevention and Research Institute of Texas (CPRIT). In order to break even, the plan is to perform 2,629 mammogram screenings annually which is only half the amount of screenings we anticipate scheduling

RECOMMENDATION:	This report was provided for informational purposes only.
ACTION:	None.
EVALUATION:	Dr. Jimenez urged Ms. De La Haya to consider development of a program focused on educating high school-aged females on the importance of mammography screenings.
FOLLOW-UP:	None.

**ITEMS BEING RECOMMENDED BY THE BUDGET AND FINANCE COMMITTEE – ALEX
BRISENO FOR ROBERT ENGBERG, CHAIR, BUDGET & FINANCE COMMITTEE**

**REPORT ON THE ESTIMATED FISCAL IMPACT OF THE 82ND LEGISLATIVE
SESSION ON UNIVERSITY HEALTH SYSTEM — PEGGY DEMING**

SUMMARY:

Since the last Board meeting, there have been several administrative developments resulting from the Legislative direction given the Texas Health and Human Services Commission (HHSC). This is an on-going process that staff continues to monitor and discuss with HHSC leadership. On July 7th and July 18th staff actively participated in two half day meetings with HHSC leadership and the leadership of the Dallas, Harris and Tarrant hospital districts.

Ms. Deming's update addressed three significant items: The Standard Dollar Amount (SDA) rate and a proposed Texas Medicaid waiver pursuant to Section 1115 of the Social Security Act, hereinafter called the "1115 Waiver," were flagged last month. In addition, because the 1115 Waiver impacts the Texas Medicaid Disproportionate Share Program (DSH), staff believes that the State will also ask the Federal government for authority to make DSH program changes that foster health system transformation similar to that proposed in the 1115 Waiver.

Ms. Deming informed the Board the Community First Health Plans staff had presented an impact analysis as a result of the 82nd Texas Legislative Session to its Board on July 22, 2011. HHSC has informed CFHP that it will reduce premium payments for administrative costs and for medical costs. The amount of projected premium reductions for medical costs mirror provider SDA reductions to providers. The exact impact of the premium rate reductions will not be certain until the SDA hospital rates have been confirmed at the end of August. However, CFHP is committed to mitigating the negative impact and is actively engaged in doing a more comprehensive analysis of provider costs, developing negotiation strategies and looking at ways to further reduce administrative costs. The major impact related to proposed reductions ranging from 4.7% to 13.6% was made to the premium rates for CHIP Perinate, CHIP and Medicaid enrollees.

While there are many unresolved issues at hand, staff is actively engaged in identifying and implementing initiatives to mitigate the impact of the legislative and administrative cuts. While the exact amount is not totally known, it is clear that the impact will be generally negative. Accordingly, Health System staff continues to work on a variety of management initiatives to mitigate the negative impact. Ms. Deming presented a summary of the ongoing management initiatives related to 1) Expense Reductions and Cost Management; 2) Revenue Cycle Enhancements and Other Revenue Improvements; 3) Healthcare Transformation and Quality Improvement (1115 Waiver); and 4) Physician Alignment

Strategies, some of which have already been implemented. She informed the Board that additional details on these initiatives would be provided as part of the tax rate budget currently being developed.

RECOMMENDATION: This report was provided for informational purposes only.
ACTION: None.
EVALUATION: None.
FOLLOW UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING REPORT FOR JUNE 2011 FINANCIAL STATEMENTS – ROE GARRETT

SUMMARY: For the month, activity was down 3.9% for the Clinical Services (as measured based on discharges adjusted for outpatient activity). Community First Health Plans (CFHP) fully-insured membership was down 1.5%. From operations, the Health System experienced a gain of \$1.9 million which was \$873,000 higher than the budgeted gain of \$1.0 million due to lower operating expense. Investment income was over budget by \$166,000 due to higher interest rates than budgeted. An unrealized market loss of \$332,000 was recorded due to an increase in interest rates as the economy continues to show signs of weakness. The bottom line gain in excess of expenses excluding debt service was \$2.1 million for the month which was \$707,000 higher than the budgeted gain of \$1.4 million. Included in the above results is CFHP which experienced an \$821,000 bottom line gain (\$506,000 better than the budgeted gain of \$315,000). Debt service revenue was \$3.6 million which is equal to the budgeted portion of the Debt Service payment of \$3.6 million. Notable increases or decreases from the Consolidated Balance Sheet were reviewed in detailed by Mr. Garrett

RECOMMENDATION: Staff recommended acceptance of the financial statements for June 2011, subject to audit.

ACTION: A **MOTION** to approve staff's recommendation was made by Mr. Engberg, **SECONDED** by Mr. Briseno, and **PASSED UNANIMOUSLY**.

EVALUATION: Dr. Jimenez requested an update regarding the impact of the military trauma closure at Lackland AFB and trauma reductions at Brook Army Medical Center to the civilian population in San Antonio. It has been approximately one year since the closure and reductions. Mr. Gieseman introduced Barbara Holmes, CFO/VP at CFHP. Ms. Holmes arrived seven weeks ago from Parkland Community Health Plan in Dallas where she was director of financial services for 10 years. She brings knowledge and expertise in managed care, managed Medicaid, managed Medicaid in Texas, and in working with large health systems.

FOLLOW UP: Trauma update as requested by Dr. Jimenez.

REPORT ON RECENT RECOGNITIONS AND UPCOMING EVENTS—LENI KIRKMAN

SUMMARY: Ms. Kirkman provided a detailed written report on recent recognitions received by the Health System and media highlights as well as upcoming events.

RECOMMENDATION: This report was provided for information purposes only.

ACTION: None.

EVALUATION: None.

FOLLOW-UP: None.

INFORMATION ONLY ITEMS:

REPORT REGARDING YEAR 2010 MEDICAL/DENTAL STAFF COMMITTEE AND DEPARTMENTS – NICOLAS WALSH, M.D.

SUMMARY: Dr. Walsh submitted detailed, written reports, as required by Joint Commission Medical Standard 02.01.01, from each of the following: Infection Control Committee, Invasive Procedures Review Committee, Ophthalmology Department, and Obstetrics/Gynecology Department.

RECOMMENDATION: These reports were submitted for informational purposes only.

ACTION: None.

EVALUATION: None.

FOLLOW-UP: None.

REPORT ON NURSE STAFFING EFFECTIVENESS FOR SAFE OUTCOMES – NANCY RAY

SUMMARY: Co-Chairs Nancy Ray and Rand Murphey, RN submitted a written report regarding the Nurse Staff Advisory Committee's evaluation of unit staffing through the following reports:

- National Database for Nursing Quality Indicators (NDNQI) Registered Nurse (RN) Survey Data;
- Concerns and issues reported directly to the committee or by committee members;
- Risk Management Department reports related to staffing; and
- Quantitative data analysis of productivity, staffing, quality, customer and nurse satisfaction.

The recommendations have been communicated to the Shared Governance Councils. Due to the hard work of the members of the Nurse Advisory Council, clinical nursing units are much more aware of nursing care outcomes in relations to the staffing and more importantly the practice environment. Most of the units are making steady improvements in the areas of pressure ulcer, patient fall and hospital acquired infections. It is premature to draw definitive conclusions from the limited data. The Nurse Advisory Committee members will continue to look closely at the correlations between reported events/clinical outcomes/patient satisfaction and staffing patterns. A major goal in the

next six months is to promote the practice environment around sunrise and its most recent upgrade. The Nurse Satisfaction Survey indicates a need to decrease nurse's time charting and increase the nurse's time at the bedside. Achievement of this goal is critical to the achievement of a positive practice environment in light of declining revenue and increasing patient acuity.

RECOMMENDATION:	This report was submitted for informational purposes only.
ACTION:	None.
EVALUATION:	None.
FOLLOW-UP	None.

ADJOURNMENT:

There being no further business, Dr. Jimenez adjourned the public meeting at 8:05 p.m.

Robert L. Jimenez, M.D.
Chair, Board of Managers

Ira Smith
Secretary, Board of Managers

Sandra D. Garcia, Recording Secretary