REGULAR BI-MONTHLY MEETING OF THE BEXAR COUNTY HOSPITAL DISTRICT BOARD OF MANAGERS

Tuesday, April 17, 2018
2:00 p.m.
Cypress Conference Room
University Hospital
4502 Medical Drive
San Antonio, Texas 78229

MINUTES

BOARD MEMBERS PRESENT:

Jim Adams, Chair
Ira Smith, Vice Chair
Dianna M. Burns, M.D., Secretary
Robert Engberg
Janie Barrera
James Hasslocher

BOARD MEMBERS ABSENT:

Roberto L. Jimenez, M.D, Immediate Past Chair

OTHERS PRESENT:

George B. Hernández, Jr., President/Chief Executive Officer, University Health System
Tommye Austin, Ph.D., Senior Vice President, Chief Nurse Executive, University Health System
Edward Banos, Executive Vice President/Chief Operating Officer, University Health System
Lourdes Castro-Ramirez, President, University Health System Foundation
Ted Day, Executive Vice President, Strategic Planning and Business Development, University Health System
Donald Finley, Director, External Communications/Corporate Communications, University Health System
Frank Garza, Chair, Board of Directors, University Health System Foundation,
Larissa Garza, Coordinator, University Health System Foundation
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System
Brian Lewis, Vice President, Quality, University Health System
Kirsten Plastino, M.D., President, Medical/Dental Staff, University Health System; and Professor,
Department of Obstetrics & Gynecology, UT Health, San Antonio
Denise Pruett, Director, University Health System Foundation
Serina Rivela, Interim Chief Legal Officer, University Health System
Michael Roussos, Hospital Administrator, University Health System
Don Ryden, Vice President/Project, Design, and Construction, University Health System
A.J. Sandoval, Chief of Police/Protective Services, University Health System
Andrew Smith, Director, Government Relations, University Health System
Travis Smith, Deputy Chief Financial Officer, University Health System
CALL TO ORDER AND RECORD OF ATTENDANCE: JIM ADAMS, CHAIR, BOARD OF MANAGERS

Mr. Adams called the meeting to order at 2:03 p.m.

INVOCATION AND PLEDGE OF ALLEGIANCE

Mr. Adams introduced Ms. Kathleen Vasquez of City Church for the invocation and he led the Pledge of Allegiance.

APPROVAL OF MINUTES OF PREVIOUS MEETING(S):

FEBRUARY 20, 2018 (REGULAR MEETING)

SUMMARY: The minutes of the regular Board meeting of Tuesday, February 20, 2018, were submitted for the Board approval.

RECOMMENDATION: Staff recommended approval of the minutes as submitted.

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

EVALUATION: None.

FOLLOW-UP: None.

NEW BUSINESS – ACTION ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR STAFF MEMBERSHIP – KRISTEN A. PLASTINO, M.D., PRESIDENT, MEDICAL/DENTAL STAFF

SUMMARY: Monthly Credentials Committee Report (listing of providers in accordance with the Health System’s Credentialing and Privileging Process); and Focused/Ongoing Professional Performance Evaluation Reports submitted to the Board of Managers for approval.

RECOMMENDATION: Staff recommends approval of the Medical/Dental Staff Recommendations for staff membership.

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

EVALUATION: None.

FOLLOW-UP: None.
CONSIDERATION AND APPROPRIATE ACTION REGARDING COMMISSIONING OF A PEACE OFFICER FOR BEXAR COUNTY HOSPITAL DISTRICT

SUMMARY: There are currently two (2) police officer vacancies within the Protective Service Department. The credentials of Miguel Trevino have been examined and certified by the Chief of Police as meeting all of the requirements of a University Health System Police Officer. Mr. Trevino will be filling position that was vacated due to promotion from within. Mr. Trevino is a recent graduate of the Middle Rio Grande Regional Law Enforcement Academy. As required of all Health System peace officers, Miguel Trevino will attend the 40-hour crisis intervention training immediately following his commissioning. This course is sponsored by The Center for Healthcare Services, San Antonio Police Department, Bexar County Sheriff’s Office, and the University Health System.

RECOMMENDATION: Staff recommends Board approval to commission Mr. Miguel Treviño as a Bexar County Hospital District Peace Officer.

ACTION: A MOTION to approve staff’s recommendation was made by Mr. Hasslocher, SECONDED by Ms. Barrera, and PASSED UNANIMOUSLY.

EVALUATION: Mr. Hasslocher thanked Mr. Trevino for serving his country through the Texas National Guard and U.S. Army.

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING 2018 ANNUAL OPERATING AGREEMENTS WITH UT HEALTH SAN ANTONIO FOR PROFESSIONAL AND ADMINISTRATIVE SERVICES – ALLEN STRICKLAND

SUMMARY: The Health System compensates UT Health San Antonio for the following services through two Annual Operating Agreements: 1) administrative management of the residency programs; 2) administrative/medical direction; 3) patient care services personnel; 4) housestaff malpractice insurance; and 5) University Medicine Associates malpractice insurance. The negotiated 2018 Annual Operating Agreements total $15,360,085 compared to the 2017 agreements of $14,824,405. This represents an increase of $535,680 or 3.6 percent.

Funding for administrative management of residency programs in 2018 is budgeted for $625,000, which is equal to the 2017 agreement.

Funding for housestaff medical malpractice insurance in 2018 is budgeted for $665,672, which is equal to the 2017 agreement.

Funding for University Medicine Associates malpractice insurance in 2018 is budgeted for $61,135, which is equal to the 2017 agreement.

The Annual Operating Agreements represent two distinct areas of services: Medical Director Services and General Services.

The contract amount for Medical Director Services is $6,074,808 consisting of 19.2 FTEs vs. $5,789,808 and 18.4 FTEs in 2017. New and expanded Medical Director positions for Sports Medicine,
Orthopedic Hand Surgery, Bariatrics and the Center for Organ Recovery account for this increase.

General services consist of direct patient care services rendered to Health System patients through non-physician medical personnel employed by UT Health. These services are specifically oriented to improving the efficiency and effectiveness of the patient care delivery process. The contract amount for General Services in 2018 is $7,933,470.

Mr. Strickland’s written report summarized the duties and responsibilities performed by Medical Directors and those of the general services personnel. The workforce composition of UT Health San Antonio was provided for the Board’s review. For comparison purposes, Mr. Strickland provided Annual Operating Agreement Medical Directorship and General Service expenses for the period 2012 to 2018.

RECOMMENDATION: Staff recommends Board of Managers’ approval to execute the 2018 Annual Operating Agreements for Medical Director Services and General Services with UT Health San Antonio in the combined amount not to exceed $15,360,085.

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

EVALUATION: Mr. Adams urged better control of incentives, and additional opportunities for physicians to earn such incentives. Mr. Hernandez and Dr. Hromas will discuss this topic at one of their weekly meetings.

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED PURCHASING ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AMENDMENT TO THE LEASE WITH MASEHO, INC. FOR THE EXPANSION OF SPACE AT CORPORATE SQUARE TOWER (4801 NW LOOP 410) AND APPROVAL OF IT EQUIPMENT AND FURNITURE ACQUISITION FOR STAFFING OF THE EPIC ENTERPRISE ELECTRONIC MEDICAL RECORD SUITE PROJECT – DON RYDEN/BILL PHILLIPS

SUMMARY: The Health System does not have sufficient available office space in any of its buildings or locations to accommodate the new staff that will be hired for the Epic EMR Project and Grants Management Department. The Health System has leased space at Corporate Square since 2009 for various Health System departments. Currently, Corporate Square has available office space on the 8th floor to meet the needs as previously described. Other possible sites were investigated, but none proved to be as feasible and within fair market rental rates. In addition, there are over one hundred sixty (160) workstations that are existing in this particular suite at Corporate Square. They will be utilized by Health System staff at no additional cost over the lease term. This represents a savings in furniture costs of approximately $563,500. The Epic EMR Suite Project is expected to use 140 of the 160 workstations, saving approximately $490,000 in furniture costs. This location also allows the Health System to more easily expand its current presence because of existing I.T. infrastructure within
the building. The commencement date for the Epic Lease, an additional 13,505 rental square feet (RSF), will be the later of substantial completion of Tenant Improvements or June 1, 2018. The proposed term for this portion of Suite 800 is thirty-six (36) months commencing on June 1, 2018 thru May 31, 2021. The lease expense for the three year term is approximately $891,330 which will be an operational expense. Mr. Ryden reviewed the monthly rent rates for each year of the 36 month lease: Year 1 - $24,196.46; Year 2 – $24,759.16; and Year 3 - $25,321.87. As part of the associated costs for occupying this space, furniture will need to be purchased to supplement existing work stations that are already installed within the space. The estimated furniture costs are $214,785. In addition, associated I.T. expenditures for voice and data network cabling, computers, and telephones for this phase are estimated to be $630,200.

RECOMMENDATION: Staff recommends Board of Managers’ approval of a three year lease agreement beginning June 1, 2018, through May 31, 2021, for the office space at Corporate Square Tower located at 4801 N.W. Loop 410, the purchase of furniture, the I.T. expenditures, and related costs associated therein for the purpose of implementing the Epic EMR Suite, at a total cost of $891,330.

ACTION: A MOTION to approve staff’s recommendation was made by Mr. Hasslocher, SECONDED by Ms. Barrera, and PASSED UNANIMOUSLY.

EVALUATION: Currently, the Health System leases 21,032 square feet of office space in Corporate Square. This is comprised of the Human Resources department (8,468 square feet), Grants Management department (9,612 square feet) and the Ryan White Program (2,952 square feet). Under the existing lease, the current base rent per square foot is $20.50, plus an additional $.96 per square foot for the common area maintenance costs. The annual rental cost for all Health System space currently leased at Corporate Square is approximately $450,580. The landlord will provide a Tenant Improvement Allowance of $7.00 per square foot or $126,280 which is inclusive of architectural, engineering and code consultant to build-out. Mr. Hasslocher informed the staff that he is aware of two office buildings available on NE Loop. Ms. Barrera reminded the staff that there are also office buildings available south of Hildebrand, such as at the West Side Professional Building, and Port San Antonio.

FOLLOW-UP: None.

CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AMENDMENT TO THE LEASE WITH MASEHO, INC. FOR THE EXPANSION OF SPACE AT CORPORATE SQUARE TOWER (4801 NW LOOP 410) AND APPROVAL OF IT EQUIPMENT AND FURNITURE ACQUISITION FOR STAFFING OF THE EPIC ENTERPRISE ELECTRONIC MEDICAL RECORD SUITE PROJECT THE GRANTS MANAGEMENT DEPARTMENT – DON RYDEN/ROBERTO VILLARREAL, M.D.

SUMMARY: The Grants Management Department will require office space for approximately twenty-five (25) staff members to administer the expanding Ryan White Program. Suite 800 at Corporate Square has approximately 18,040 rental square feet (RSF). This is a request to lease the balance of the 18,040 RSF or 4,535 RSF in Suite 800 for the Grants Management Department. Corporate Square Tower, Suite 800, has approximately
18,040 RSF feet and is available to lease. The landlord will provide a Tenant Improvement Allowance of $7.00 per square foot or $126,280 which is inclusive of architectural, engineering and code consultant to build-out. Approximately 4,535 RSF of Suite 800 will be leased by the Grants Management Department and underwritten by Ryan White and related grants funds. The commencement date for this additional 4,535 RSF will be the later of substantial completion of Tenant Improvements or June 1, 2018. The proposed term for this portion of Suite 800 is thirty-six (36) months commencing on June 1, 2018 thru May 31, 2021. The lease expense for the three year term is approximately $299,310 which will be an operational cost. Mr. Ryden reviewed the monthly rent rates for each year of the 36 month lease: Year 1 - $8,125.21; Year 2 – $8,314.17; and Year 3 - $8,503.13, for a total of $299,310, an operational cost. As part of the associated costs for occupying this space, furniture will need to be purchased to supplement existing work stations that are already installed within the space. The estimated furniture costs are $132,974. In addition, associated I.T. expenditures for voice and data network cabling, computers, and telephones for this phase are estimated to be $124,614.

Staff recommends Board of Managers’ approval of a three year lease agreement for the office space at Corporate Square Tower located at 4801 N.W. Loop 410, the purchase of furniture, the I.T. expenditures, and related costs associated therein for the purpose of implementing the Epic EMR Suite at a total cost of $1,753,664.

A MOTION to approve staff’s recommendation was made by Dr. Burns, SECONDED by Ms. Barrera, and PASSED UNANIMOUSLY.

As indicated during the prior discussion for the office space related to the Epic Enterprise Electronic Medical Record Suite Project.

None.

PRESENTATIONS AND EDUCATION:

UNIVERSITY HEALTH SYSTEM FOUNDATION ANNUAL REPORT – FRANK GARZA, CHAIR, LOURDES CASTRO-ROMAREZ

Mr. Frank Garza and Ms. Castro-Ramirez provided a 2017 year-end review and current state of affairs at the University Health System Foundation. He reported that in 2017, a total of $1,045,836 was raised:
- 68 percent from Community and Corporate Gifts
- 17 percent from Employee Giving
- 10 percent from Grants and Partnerships
- 6 percent from Interest Accrued/Other

The Foundation secured two new partners in 2017 - Southwest Airlines and United Way, and it had a total of 221 donors. Net revenue grew by 30 percent from three main events, from $242,973 to $315,982:
- Medical Miracles Gala, $243,059 (19 percent increase)
- Golf Tournament for Nursing/Allied Health Scholarships, $60,957 (95 percent increase)
- Texas Diabetes Wall of Honor, $11,965 (82 percent increase)

Also, Ms. Castro-Ramirez reported that the Baby Box Program became a free city and expanded state wide in 2017. The purpose of this program is to provide education on safe sleep among other topics to prevent infant
mortality by causes that can be prevented such as unsafe sleep practices for babies. This includes death by suffocation/strangulation due to bed sharing/co-sleeping, too many items in a crib, and a baby not sleeping on his/her back as recommended by the American Association of Pediatrics. This program was piloted in January 2016 with 104 families and has received funding from the Baptist Health Foundation, Junior League of San Antonio, North Central Rotary Club of San Antonio and the Foundation.

The collaborative approach from staff and the Foundation led to approximately $5,000 raised for Hurricane Harvey victims. The Foundation Board approved approximately $28,000 to assist victims from the devastating earthquake in Mexico.

Nursing Scholarship Program - In November, the Education committee presented nine (9) nursing and four (4) allied health applications with a total investment of $100,500 for approval. Currently, there are 25 nursing scholars and three 3 allied health scholars attending school to obtain advanced degrees.

Our Sons and Daughters - A total of eleven (11) $1,500 scholarships were awarded in 2017, total $16,500. Since inception, a total of $76,500 has been awarded to employee dependents. $71,500 in scholarships to nursing professional pursuing a degree. $100,500 to new scholars. $74,000 in grants to Health System departments for special projects and programs.

Other – Foundation’s Investment Committee successfully invested $2.5 million in the fidelity account

The Foundation invested a total of $503,640 in 2017 as follows:
- 47 percent – Adult Health & Wellness
- 23 percent – Children’s Health & Healing
- 22 percent – employee Education/Advancement
- 8 percent – Community Health, Spiritual Care, General

2017 Financial Recap - The Foundation raised a little over $1 million (unaudited) in new revenue in 2017 and is slightly below 2016 new revenue total of $1.1 (audited). In 2017, a total of $1,045,836 was raised from the Community and Corporate Gifts (68 percent), Employee Giving (17 percent), Grants and Partnerships (10 percent), and Interest Accrued/Other (6 percent). Of the $1,045,836 raised, the Foundation invested $503,640 to support Adult Health, Children’s Health, Employee Education, and General Projects and Programs.

RECOMMENDATION: This report was provided for informational purposes only.
ACTION: No action was required by the Board of Managers.
EVALUATION: Mr. Smith congratulated and thanked Foundation staff and Board members for their service. He asked Ms. Castro Ramirez to let the Board of Managers know how they can contribute to the Foundation’s success.
FOLLOW-UP: None
SUMMARY:

The 2018-2020 Strategic Imperatives for the University Health System Foundation have an underlying goal to become the best-in-class health care philanthropy to meaningfully advance the mission of the Health System. She reviewed the membership of Foundation Board of Directors Executive Committee:

- Francisco Garza, Chairman
- Randy Harig, Chair-Elect
- John H. Calhoun, MD, Vice Chair
- George B, Hernández Jr., Secretary/Treasurer
- Laurence Kurth, Immediate Past Chair

A Great New Addition

- Jason Fraser, Senior Vice President-Strategy, Public Policy & Investor Relations at Valero Energy

The Foundation’s Board is comprised of 27 directors serving in 2018

- 100 percent Giving

In 2017, the Health System Foundation adopted a 3-year strategic plan for the future of the Foundation that was approved by the Foundation Board at their February 1, 2018 meeting. Ms. Castro-Ramirez reviewed the Foundation’s Strategic Journey:

- May 2017- Several Board members and staff traveled to Dallas for a visit with the Parkland Hospital and Parkland Foundation leadership.
- September 2017- Strategic planning retreat with the University Health System Foundation Board, Health System executive leadership, and Foundation staff.
- November 2017- The Foundation adopted the Strategic Imperatives Plan and developed an annual work plan with six specific goals.

**Strategic Imperative One: Telling Our Story** - The Foundation strives to tell who we are, why we exist, and the impact of giving to support employees, patients, and the community mission.

**Sharing Our Story**
- External: Social Media, Website, Annual Report
- Internal: Employee Giving, InfoLine, and Intranet
- Board: President’s Update, Board Meetings

**Expanding Our Reach**
- Vision, Mission and Brand Refresh
- Foundation E-Newsletter to Donors
- Improved Foundation Website

**President’s Update** - A bi-weekly newsletter to keep Foundation Board members and hospital leadership informed of the projects underway and the connections we are making to elevate the Foundation.

**Creative Noggin** - The Foundation has engaged with an award-winning advertising and branding agency to facilitate communication and rebranding effort including the redesign our website by July 2018.

**Strategic Imperative Two: Major Gifts** – Goal is to implement a comprehensive, relationship-based major gift program to support the mission of University Health System

**Key Action Steps:**
- Established a Major Gifts Committee led by the Foundation’s Chair-Elect, Randy Harig.
- Developing a robust prospect list.
Creating programmatic elements and collateral to support donor investment.
Connecting prospective donors to priority projects.
**Funding Goal** - $2 million in 2018

Pending requests: Charity Ball Association and Junior League of San Antonio.

**Strategic Imperative Three: Grateful Patient Program** - Gratitude for compassionate, excellent care remains the most powerful motivator for patients to support health care institutions.

**Key Action Steps:**
- Develop a program to connect grateful patients to the Health System’s mission.
- Facilitate physician and staff engagement.
- Build internal staff capacity.
- Develop a plan and timeline for implementation.

**Strategic Imperative Four: Women’s and Children’s Tower Campaign** - The Foundation will lead a philanthropic campaign that will appeal to current and future donors and highlight the unique opportunity to be a supporter.

**Key Action Steps:**
- Develop a plan that includes community influencers, advocates and donors.
- Determine physical and programmatic areas for donor support.
- Create unique proposals for prospective donors.

**RECOMMENDATION:** This item is presented for informational purposes only.

**ACTION:** No action was requested by the Board of Managers.

**EVALUATION:** None.

**FOLLOW-UP:** Mr. Adams asked Ms. Castro-Ramirez to provide him with a list of the Junior League’s Board of Directors.

**DSRIP 2.0: EVOLUTION OF THE DELIVERY SYSTEM REFORM INCENTIVE PAYMENT (DSRIP) PROGRAM FROM PROJECT-LEVEL REPORTING TO PROVIDER CORE ACTIVITIES SUPPORTING TARGETED OUTCOMES – TED DAY/CAROL HUBER**

**SUMMARY:**
Mr. Day introduced and yielded the floor Ms. Carol Huber, University Health System’s Regional Director for Regional Healthcare Partnership 6. She reported that in December 21, 2017, the Centers for Medicare and Medicaid (CMS) approved the second five-year renewal of Texas’ 1115 Transformation Waiver from October 2017, through September 2022. This renewal includes the continuation of the DSRIP program with four years of federal matching dollars. This second phase of DSRIP prioritizes the achievement of outcome measures at the system level, transitions to alternative payment models, and the sustainability of healthcare transformation after the waiver authority ends. Consistent with the initial term, participation eligibility, funding allocations, and program rules are established by Health & Human Services Committee (HHSC) through official protocols approved by CMS. Earned incentives are jointly funded with federal and state matching dollars. The state match is provided by local government entities, such as public hospital districts, with funds derived from taxes, assessments, levies, investments, and other public revenues, known as Intergovernmental Transfers (IGT). Under the original authorization for the Waiver, HHSC established geographic boundaries for 20 Regional Healthcare Partnerships (RHPs) across the state. The Health
System was chosen to lead RHP Region 6, which is comprised of 20 south Texas counties. As the “Anchoring Entity” (Anchor), the Health System accepted responsibility to coordinate RHP 6 DSRIP activities and serve as the liaison between HHSC and the hospitals and other providers participating in DSRIP. This includes leading the development, submission, and implementation of RHP plans that describe community needs, targeted outcomes, collaborative learning opportunities, and strategic approaches to transform care delivery and improve health outcomes for Medicaid and indigent patients. Through these efforts, 23 providers in RHP 6, including all major hospitals, four community mental health centers, UT Health San Antonio, and the San Antonio Metropolitan Health District are working together to achieve the Triple Aim goals of improving patient experiences, increasing quality of care and managing the per capita cost of care. RHP 6 is addressing these six community needs:

1. Improve the quality and safety of care delivered in clinical settings;
2. Prevent and/or improve the management of chronic conditions;
3. Improve access to medical and dental care;
4. Improve access to and integration of behavioral healthcare;
5. Improve maternal and child health; and

New DSRIP Model (October, 2017 – September, 2022) - On January 19, 2018, CMS approved DSRIP protocols which established the new DSRIP model for years 7 and 8 and became effective October 1, 2017. Hospitals and other eligible providers are currently developing a regional plan that will be submitted to HHSC by University Health System no later than April 30, 2018. Stakeholders have been engaged in the development of this plan through public forums held in September, 2017 and March, 2018 and two web-based surveys. In this new model, up to 85 percent of incentives in Years 7 and 8 are earned for achievement of outcomes which are measured across a provider’s entire system of care. For hospitals, these measures are grouped into standard “measure bundles” to promote greater alignment between providers in the areas where they are focusing their efforts. Next, providers will describe “core activities” they intend to implement or expand to achieve these outcomes. There are no incentives tied to implementation of projects or specific initiatives. The remaining incentives are earned for maintaining the number of Medicaid and Low Income or Uninsured patients served within the providers’ systems and reporting on other population health measures. Protocols for the final two years (9 and 10) of the DSRIP program have not yet been proposed. HHSC intends to begin working with stakeholders to develop these plans in the fall of 2018.

The total pool of funds available for distribution under the Waiver is comprised of both DSRIP and Uncompensated Care (UC) pool incentives. For this new renewal period, Texas has received approval for $24.8B in funding opportunity over five years, which includes four years for the DSRIP program, valued at $11.6B. As a public hospital district, the Health System also serves as an IGT entity, meaning that the Health System provides the local matching funds for DSRIP payments earned for ourselves as a performing provider and for five other hospitals. During the first six years of the Waiver, the Health System provided approximately $340M in IGT in support of the DSRIP program. Over the last six years, RHP 6 providers have earned 96 percent of DSRIP incentives, valued at $1.3B through successful achievement of the project milestones. RHP 6’s
maximum allocation for the next two years is $683M. As a performing provider, the Health System has the opportunity to earn incentives for successfully achieving performance goals and outcome measures under the DSRIP program through a series of new initiatives, details of which will be shared in later presentations to the Board of Managers.

RECOMMENDATION: This item was presented for informational purposes only.

ACTION: No action by the Board of Managers is required

EVALUATION: None.

FOLLOW-UP: None.

ADJOURNMENT:

There being no further business, Mr. Adams adjourned the public Board meeting at 3:42 p.m.

Jim Adams  
Chair, Board of Managers

Dianna M. Burns, M.D.  
Secretary, Board of Managers

Sandra D. Garcia, Recording Secretary