University Health System

BEXAR COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS

Tuesday, September 17, 2019
2:00 p.m.
Cypress Room
University Hospital
4502 Medical Drive
San Antonio, Texas 78229
MINUTES

BOARD MEMBERS PRESENT:

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

BOARD MEMBERS ABSENT:

James R. Adams, Chair
Roberto L. Jimenez, M.D, Immediate Past Chair

OTHERS PRESENT:

George B. Hernández, Jr., President/Chief Executive Officer, University Health System
Bryan Alsip, MD, Executive Vice President/Chief Medical 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
Ted Day, Executive Vice President, Strategic Planning and Business Development, University Health System
Rob Hromas, MD, Dean, Long School of Medicine, UT Health, San Antonio
Reed Hurley, Executive Vice President/Chief Financial Officer, University Health System
Leni Kirkman, Senior Vice President, Strategic Communications and Patient Relations, University Health System
Monika Kapur, MD, President/Chief Executive Officer, University Health System
Virginia Mika, PhD, Executive Director, CareLink Financial Assistance Program, University Health System
Bill Phillips, Senior Vice President/Chief Information Officer, Information Services, University Health System
Serina Rivela, Interim Vice President/Associate General Counsel, Legal Services, University Health System
Michael Roussos, Hospital Administrator, University Hospital
Don Ryden, Vice President/Project, Design, and Construction, University Health System
Armando J. Sandoval, Chief of Police/Protective Services, University Health System
Rajeev Suri, M.D., Medical Director, Radiology Services; and President, Medical/Dental Staff, University Health System
And other attendees.
CALL TO ORDER AND RECORD OF ATTENDANCE: JIM ADAMS, CHAIR, BOARD OF MANAGERS

Mr. Smith called the meeting to order at 2:05 pm.

INVOCATION AND PLEDGE OF ALLEGIANCE

Mr. Smith introduced Chaplain Lauren Morris of University Hospital for the invocation and she led the Pledge of Allegiance.

At this time, Mr. Smith called upon Ms. Kirkman to read a letter aloud from staff member Angela L. Lake praising Mr. George Hernandez and Ms. Theresa Scepanski on behalf of her 13-year-old daughter for obtaining authorization for an out-of-network/out-of-state specialized surgery. Ms. Lake sent an email to Mr. Hernandez after 5 pm on a Friday evening the day before the family’s trip when she found out that authorization was denied. Minutes later Mr. Hernandez replied that he had enlisted Ms. Scepanski’s help, and the 13 year-old-child received the extremely specialized surgery she needed in New York City, and it was covered by the University Family Health Plan. Ms. Lake expressed gratitude for Mr. Hernandez’s leadership and approachability and Ms. Scepanski’s advocacy on her daughter’s behalf. She does not know of many CEOs who would personally take up an employee’s cause.

Ms. Barrera urged the staff to develop a method to channel both good and not so good letters received from patients. Board members and audience gave Mr. Hernandez and Ms. Scepanski a round of applause for their leadership.

APPROVAL OF MINUTES OF PREVIOUS MEETING(S): TUESDAY, JULY 23, 2019 (REGULAR MEETING):

SUMMARY: The minutes of the regular Board meeting on Tuesday, July 23, 2019, were submitted for Board approval.

RECOMMENDATION: Staff recommended approval of the minutes as submitted.

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

EVALUATION: None.

FOLLOW-UP: None.

APPROVAL OF MINUTES OF PREVIOUS MEETING(S): AND TUESDAY, JULY 30, 2019 (REGULAR MEETING):

SUMMARY: The minutes of the regular Board meeting on Tuesday, July 30, 2019, were submitted for Board approval.

RECOMMENDATION: Staff recommended approval of the minutes as submitted.

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

EVALUATION: None.

FOLLOW-UP: None.

At this time, Mr. Hernandez introduced Mr. Ricardo Villarreal, President/Chief Executive Officer, Community First Health Plans, Inc., to the Board of Managers. He joined the Health System on September 16, 2019, from Driscoll Children's Hospital & Health Plan in Corpus Christi, Texas, where he has served as Vice President of Finance since December 2007.
NEW BUSINESS:

CONSENT AGENDA – IRA SMITH, VICE CHAIR:

CONSIDERATION AND APPROPRIATE ACTION REGARDING MEDICAL-DENTAL STAFF RECOMMENDATIONS FOR STAFF MEMBERSHIP — RAJEEV SURI, M.D., PRESIDENT, MEDICAL/DENTAL STAFF

SUMMARY: Consideration and Appropriate Action Regarding Medical-Dental Staff Recommendations for Staff Membership — Rajeev Suri, M.D., President, Medical/Dental Staff - 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 as submitted.

ACTION: A MOTION for APPROVAL of staff’s recommendation was made by Ms. Barrera, SECONDED by Mr. Engberg, and PASSED UNANIMOUSLY.

EVALUATION: None.

FOLLOW-UP: None.

ACTION ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING SELECTED PURCHASING ITEMS:

CONSIDERATION AND APPROPRIATE ACTION REGARDING A GUARANTEED MAXIMUM PRICE (GMP #6) PROPOSAL FOR THE FINISH-OUT OF THE HEART/VASCULAR & ENDOSCOPY CENTER FOR THE CONSTRUCTION MANAGER AT RISK AGREEMENT WITH JOERIS/DUNN JOINT VENTURE — DON RYDEN

SUMMARY: In February 2019 the Board of Managers approved Joeris+JE Dunn GMP#1 Heart/Vascular and Endoscopy Center (HVE) – Transfusion Services. Renovation of this area is required as an enabling project for HVE and is scheduled for substantial completion on September 30, 2019. In June 2019 the Board of Managers approved Joeris+JE Dunn GMP#2 Heart/Vascular and Endoscopy Center - Early Release Package which authorized the Contract Manager (CM) to commence with demolition, interior framing, plumbing rough-in, and floor leveling of the HVE. This work is being coordinated with GMP#1 and the CM was authorized to commence work for GMP#2 on July 8, 2019. GMP#6 Heart/Vascular and Endoscopy Center Finish-Out is the final Guaranteed Maximum Pricing package for the Heart/Vascular and Endoscopy Center and is based on the completed Architectural/Engineering Construction Documents, Addendum and Bulletins. GMP#6 will authorize the CM to complete the remaining work within the HVE with a substantial completion date of September 15, 2020. GMP#6 includes the build-out cost of the Neuro and Vascular Labs. Although not originally budgeted in the scope of work, construction at this
time will allow them to become quickly operational when the medical equipment is purchased at later date. The CM has indicated that the related construction costs affiliated with these two rooms is $904,176. Joeris+JE Dunn GMP#6 – Heart/Vascular and Endoscopy Remaining Finish-Out is a Guaranteed Maximum Price (GMP) not to exceed $12,768,865. In his written report, Mr. Ryden reviewed previously approved GMPs and their respective amounts for a total of $28,276,771, including GMP #6. Costs for this GMP will be paid from Women’s and Children’s Hospital and Associated Projects’ capital funds with the $904,176 being funded from the Board designated Contingency Funds. The workforce composition for Joeris+JE Dunn was provided for the Board’s review and Mr. Ryden noted that the vendor had received 111 bids for this package. Of the 111, 31 of were SMWVBE-classified, and out of those 31, Joeris+JE Dunn is able to subcontract with 16 of them. Of the $12.7 million, almost 39.7 percent are SMWVBE subcontractors and of the $12.7 million, 98 percent goes to local subcontractors.

**EVALUATION:** Staff recommends the Board of Managers approve Joeris+JE Dunn GMP#6 Heart/Vascular and Endoscopy Center Remaining Finish-Out Package in the amount not to exceed $12,768,865 and authorize the President/Chief Executive Officer to execute the Amendment to the Joeris+JE Dunn Agreement in that amount.

**ACTION:** A MOTION for APPROVAL of staff’s recommendation was made by Mr. Hasslocher, SECONDED by Dr. Burns, and PASSED UNANIMOUSLY.

**EVALUATION:** Mr. Ryden clarified for Mr. Engberg that the amount of $904,176 will come from the Board’s capital contingency fund not a contingency fund within the project. The staff is attempting to grow the Board’s contingency account and because the Health System is having an excellent financial year, Mr. Hernandez agrees with the funding methodology for GMP#6. He assured the Board that it will not hamper staff’s efforts to grow the fund at a later date. Mr. Engberg agreed that this was an efficient way to handle GMP#6.

**FOLLOW-UP:** None.

**CONSIDERATION AND APPROPRIATE ACTION REGARDING THE PROCUREMENT OF STRYKER MEDICAL EQUIPMENT FOR THE HEART/VASCULAR AND ENDOSCOPY CENTER IN SUPPORT OF THE WOMEN’S AND CHILDREN’S HOSPITAL AND ASSOCIATED PROJECTS — DON RYDEN**

**SUMMARY:** For the procurement of architectural significant fixed medical equipment (Group 1 equipment) the Health System has determined cost benchmarking analysis and use of Group Purchasing Contracts will provide the best value. During the project design for the Heart Vascular Endoscopy Center and after medical equipment planning, Stryker Communications, Inc. Stryker was invited to develop and provide a proposed equipment list and associated cost proposal to meet the functions of the project basis of design for the following systems: surgical lights, anesthesia booms, equipment utility booms, audio/video integration, room-to-room connectivity, and integration of Surgical Content with Electronic Medical Record and Broadcasting Platform systems. A series of coordination sessions and site
visits with the design team, Health System users, and healthcare providers were held to further develop the system solution to support the following spaces with the proposed Stryker Group 1 equipment. Initial design of the HVE included completion of three special procedure labs for Cardiology with two shelled rooms. Over the past two years the growth in Cardiology units has seen significant growth in Vascular and Neurovascular procedures. Leadership recommends that the additional two rooms for Neurovascular and Vascular cases be included during this construction phase. If approved, the total equipment would include:

- Five (5) special procedure Cath Labs – Cardiac, Vascular, Electrophysiology, Neuro, Hybrid operating room
- Three (3) Endoscopy procedure rooms
- Three (3) Advanced Endoscopy procedure rooms
- Two (2) Bronchoscopy rooms
- One (1) Cytology Room
- One (1) Physician Conference room

The Stryker proposals presented separate the equipment for the Neuro and Vascular special procedure rooms which were not included in the original project budget and will be requested from Board Contingency capital funds upon approval and appropriate action. The cost of the Stryker equipment is $6,309,602 which is in accordance to Premier Group Purchasing Contract pricing plus additional cost discounts incentives; Premier Contracts PP-OR-1586 (OR Lights and Booms) and PP-OR-1440 (OR Integration.) Mr. Ryden provided a list of the equipment and respective amounts in his written report, to be paid from Women’s and Children’s Hospital and Associated Projects’ capital funds in the amount of $5,291,213. The total amount for the Medical Equipment budget for HVE is $25 million and is within the project budget. Equipment recommended to be paid from Board designated capital funds for Cath Labs #2 and #3 total $1,018,389. Stryker Communications has a total of 499 employees and the workforce composition was provided for the Board’s review.

RECOMMENDATION: Staff recommends the Board of Managers approve the capital purchase request for Stryker Communications, Inc. Equipment described in this document for the Heart/Vascular and Endoscopy Center project in the amount of $6,309,602.

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

EVALUATION: Dr. Hromas agreed with the staff’s logical assessment due to volume and growth over the last two years. Dr. Anderson, the new Cardiology Chief, will arrive on November 1, 2019 and will bring three cardiology faculty members with him that will certainly use the new facilities.

FOLLOW-UP: None.
CONSIDERATION AND APPROPRIATE ACTION REGARDING AN AGREEMENT WITH UT HEALTH SAN ANTONIO FOR EPIC ELECTRONIC HEALTH RECORD PROJECT PHYSICIAN TRAINING — ED BANOS

SUMMARY: The Health System continues to maintain the standard and adherence to following the recommendations and best practice standards provided by Epic for the implementation of the new Electronic Health Record (EHR). A collaborative committee comprised of Health System and UT Health San Antonio leadership has determined that the best way to facilitate physician training for go-live is to adopt the Specialist Training Specialist (STS) model. UT Health San Antonio will dedicate faculty physicians to this phase of the training to follow the best practice methodology outlined by Epic. The best practice outlined by the STS model provides a peer-to-peer workflow-based training that is specific to the workflow of each specialty. Instead of learning the entire system, training focuses on the workflows the specialist will perform at go-live. The benefit to utilizing this model is that it focuses on the provider’s daily work, and is limited to training and information for their respective specialty. This is a request for a one-year contract with UT Health San Antonio October 1, 2019 through September 30, 2020. The total cost will not exceed $525,000. The expense for this training was included in the original budget for the Epic implementation project. UT Health San Antonio has a total of 5,245 employees and the workforce composition was provided for the Board’s review.

RECOMMENDATION: Staff recommends the Board of Managers approve an agreement with UT Health San Antonio and authorize the President/Chief Executive Officer to execute agreement in the amount not to exceed $525,000.

ACTION: A MOTION for APPROVAL of staff’s recommendation was made by Ms. Barrera, SECONDED by Dr. Burns, and PASSED UNANIMOUSLY.

EVALUATION: The School of Medicine leadership has identified 73 physicians that will be trained to train other physicians on Epic. The Health System performed a fair market value assessment of what the rate of pay for physician trainers ought to be on an hourly basis. Epic is very descriptive of the hours required by physicians in module learning, online learning, and hands-on in a classroom. The Health System needs almost 1,000 physicians trained. From the hours calculated, staff estimates the cost to have the physicians trained and out of their clinical environment is $525,000. Health System staff and School of Medicine leadership worked together to develop this agreement. In addition, Mr. Banos informed the Board that each clinical service line will have its own training module. Dr. Suri added that physician training requires 26-40 hours of different scenarios in both inpatient and ambulatory depending on the specialty. After physician training is concluded, proctors (physician trainers) will serve as subject matter experts.

FOLLOW-UP: None.

PRESENTATIONS AND EDUCATION:

ANNUAL CARELINK REPORT — VIRGINIA MIKA, PH.D./ROBERTO VILLARREAL, M.D.

SUMMARY: CareLink is a financial assistance program for Bexar County residents that
creates a payment plan for services received within the University Health System and its network of providers. It is not an insurance plan, but has a defined Provider Network. All members select a primary care provider (PCP) at the time of enrollment and patient responsibility is a cornerstone of this program. CareLink staff assists new members with scheduling their first PCP appointment to establish the patient-physician relationship. Dr. Mika provided a written report and high level overview of enrollment, demographics, cost of care, collections (average $37 per member/per month), primary care, medical management, case management, pharmacy services, outreach and education services, and business services. She described several initiatives in which CareLink staff has established partnerships with other organizations such as City Public Service, San Antonio Water System, the San Antonio Food Bank, and the Supplemental Nutrition Assistance Program (SNAP). These partnerships have allowed the staff to develop close working relationships with these organizations on behalf of CareLink patients. Dr. Mika explained that after the initial decline in membership experienced when the Affordable Care Act was implemented in 2014, the membership has remained stable for the past few years. Average monthly membership in 2018 was approximately 25,400. Dr. Mika compared 2018 membership to prior years through 2014 when CareLink had approximately 40,000 members. There has been recent small increase in category “C” members which are at the higher end of the Federal Poverty Level (FPL) but 86 percent of the members are below 138 percent of the FPL (for one person that is an annual income of $16,000 and for a family of four it is an annual income of $35,000. While the Health System’s per member/per month (PMPM) cost has increased over time primarily due to the rising costs of healthcare and a shrinking CareLink population, staff continues to see rates better than Medicaid when looking at the average cost for Medicaid for adults in expansion states. In 2014, the Health System PMPM cost was $220 while Adult Medicaid PMPM cost was $491. In 2018, the Health System’s PMPM was $297 while Adult Medicaid PMPM cost was $481. It is also important to note that since 2002, CareLink members have contributed over $260 million in member payments. For population health management purposes, CareLink staff share data with primary care provider groups within the Health System to identify patients in need of care. While membership remains stable, CareLink is still experiencing increases in Emergency Department (ED) visits and admissions by members who enroll when disease has progressed to serious levels. Staff continues to work with UMA physicians to align activities. CareLink members average about five (5) PCP visits per year, but only approximately four (4) percent have ED visits and eight (8) percent are admitted. CareLink rates are better than Medicaid rates in terms of ED utilization and admissions. Staff monitors ED visits and admissions on a weekly basis to identify patients who need to be case managed. Case management is actively involved in identifying those most in need of assistance. Dr. Mika reviewed total ED visits and total admissions for CareLink members for 2018 and years prior through 2014, for comparison purposes. In conclusion, the CareLink program continues to provide a medical home to uninsured residents of Bexar County. The staff strives to help patients improve their health by providing a holistic, patient-centered approach while recognizing the
importance of addressing social determinants of health.

**RECOMMENDATION:** This report was provided for informational purposes only.

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

**EVALUATION:** None.

**FOLLOW-UP:**

**ADJOURNMENT:**

There being no further business, Mr. Smith adjourned the Board meeting at 3:55 p.m.

Ira Smith  
Vice Chair, Board of Managers

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

Sandra D. Garcia, Recording Secretary