

Thursday, February 29, 2024

9:00 A.M.

BOARD ROOM

4800 Fournace Place, Bellaire, TX 77401

The meeting may be viewed online: <http://harrishealthtx.swagit.com/live>.

*Notice: Some Board Members may participate by videoconference.

Mission

Harris Health is a community-focused academic healthcare system dedicated to improving the health of those most in need in Harris County through quality care delivery, coordination of care and education.

AGENDA

- | | | |
|--|-----------------------|----------|
| I. Call to Order and Record of Attendance | Dr. Andrea Caracostis | 1 min |
| II. Approval of the Minutes of Previous Meeting | Dr. Andrea Caracostis | 1 min |
| • Board Meeting – January 25, 2024 | | |
| III. Announcements / Special Presentations | Dr. Andrea Caracostis | 15 min |
| A. CEO Report Including Special Announcements – <i>Dr. Esmaeil Porsa</i> | | (10 min) |
| • New Member of the Harris Health Board of Trustees | | |
| B. Board Member Announcements Regarding Board Member Advocacy and Community Engagements | | (5 min) |
| IV. Public Comment | Dr. Andrea Caracostis | 3 min |
| V. Executive Session | Dr. Andrea Caracostis | 30 min |
| A. Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Report of the Medical Executive Board in Connection with the Evaluation of the Quality of Medical and Healthcare Services, Including the Harris Health System Quality, Safety Performance Measures, and Possible Action Regarding this Matter Upon Return to Open Session – Dr. Andrea Caracostis, Dr. Steven Brass and Dr. Yashwant Chathampally | | (10 min) |
| B. Medical Executive Board Report and Credentialing Discussion, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Consideration of Approval of Credentialing Changes for Members of the Harris Health System Medical Staff – Dr. Martha Mims and Dr. Bradford Scott | | (10 min) |

- C. [Report Regarding Harris Health System Correctional Health Quality of Medical and Healthcare, Including Credentialing Discussion and Operational Updates, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, Tex. Occ. Code Ann. §151.002 and Tex. Gov't Code Ann. §551.071 to Receive Peer Review and/or Medical Committee Report with Possible Action Upon Return to Open Session – Dr. Otis Egins](#) (10 min)
- VI. Reconvene to Open Meeting** Dr. Andrea Caracostis 1 min
- VII. General Action Item(s)** Dr. Andrea Caracostis 8 min
- A. General Action Item(s) Related to Quality: Medical Staff
1. [Consideration of Approval of Credentialing Changes for Members of the Harris Health System Medical Staff – Dr. Martha Mims](#) (2 min)
- B. General Action Item(s) Related to Quality: Correctional Health Medical Staff
1. [Consideration of Approval of Credentialing Changes for Members of the Harris Health System Correctional Health Medical Staff – Dr. Otis Egins](#) (2 min)
- C. General Item(s) Related to Community Health Choice:
1. [Review and Discussion Regarding Collaboration Initiatives Between Community Health Choice and Harris Health System, Including Hospital at Home and House Calls – Ms. Lisa Wright, CEO and Ms. Anna Mateja, CFO, Community Health Choice](#) (4 min)
- VIII. New Items for Board Consideration** Dr. Andrea Caracostis 25 min
- A. Consideration of Approval of the Appointment of Ms. Carol Paret as Chair, and Ms. Afsheen Davis as a Member of the Board of Trustees Compliance & Audit Committee Dr. Andrea Caracostis (5 min)
- B. [Consideration of Approval of Construction Manager at Risk for the Construction of the Lyndon B. Johnson Hospital Replacement Project for Harris Health System – Mr. DeWight Dopslauf, Harris County Purchasing Office and Mr. Patrick Casey](#) (5 min)
- C. [Consideration of Approval of Construction Manager at Risk for the Construction of Central Utility Plant at Lyndon B. Johnson Hospital for Harris Health System – Mr. DeWight Dopslauf, Harris County Purchasing Office and Mr. Patrick Casey](#) (5 min)
- D. [Consideration of Approval of Award for Parking Garage Demolition and Sitework at Lyndon B. Johnson Hospital for Harris Health System – Mr. DeWight Dopslauf, Harris County Purchasing Office and Mr. Patrick Casey](#) (5 min)
- E. [Consideration of Approval of Award for Construction of New Parking Garage at Lyndon B. Johnson Hospital for Harris Health System – Mr. DeWight Dopslauf, Harris County Purchasing Office and Mr. Patrick Casey](#) (5 min)

IX. Strategic Discussion**Dr. Andrea Caracostis 40 min****A. Harris Health System Strategic Plan Initiatives**

1. [Presentation Regarding Update on Strategic Facilities Plan and Debt Issuance – Ms. Paige Abernathy, Harris County Attorney’s Office and Ms. Victoria Nikitin](#) (15 min)
[\[Strategic Pillar 5: Infrastructure Optimization\]](#)
2. [Consideration of Approval of Revisions to the Harris County Purchasing Manual – Ms. Sara Thomas, Ms. Holly Gummert and Mr. DeWight Dopslauf, Harris County Purchasing Office](#) (10 min)
[\[Strategic Pillar 3: One Harris Health System\]](#)

B. [February Board Committee Meeting Reports:](#) (15 min)

- [Quality Committee – Ms. Carol Paret](#)
- [Budget & Finance Committee – Ms. Carol Paret](#)
- [Compliance & Audit Committee – Ms. Carol Paret](#)
- [DEI Committee – Ms. Marcia Johnson](#)

X. Consent Agenda Items**Dr. Andrea Caracostis 5 min****A. Consent Purchasing Recommendations**

1. [Consideration of Approval of Purchasing Recommendations \(Items A1 through A56\) – Mr. DeWight Dopslauf and Mr. Jack Adger, Harris County Purchasing Office](#)
[\(See Attached Expenditure Summary: February 29, 2024\)](#)

B. Consent Committee Recommendations

1. Consideration of Approval of the 2024 Quality Committee Reporting Schedule – **Dr. Steven Brass**
[Quality Committee]
2. Consideration of Acceptance of the Harris Health System First Quarter Fiscal Year 2024 Investment Report – **Ms. Victoria Nikitin**
[Budget & Finance Committee]
3. Consideration of Acceptance of the Harris Health System Fourth Quarter Fiscal Year 2023 Pension Plan Report – **Ms. Victoria Nikitin**
[Budget & Finance Committee]
4. Consideration of Acceptance of the Harris Health System December 2023 Quarterly Financial Report Subject to Audit – **Ms. Victoria Nikitin**
[Budget & Finance Committee]
5. Consideration of Acceptance of the Harris County Hospital District Pension Plan Investment Practices and Performance Evaluation as of the Year Ended December 31, 2023 as Required by the Texas Pension Review Board – **Mr. Cory Myers, Aon**
[Budget & Finance Committee]

6. Consideration of Acceptance of the Harris Health System Independent Auditor's Report and Financial Statements for the Year Ended September 30, 2023 – **Mr. Chris Clark, Forvis**
[Compliance & Audit Committee]
7. Consideration of Acceptance of the Harris Health System Single Audit Report of Federal and State Award Programs for the Year Ended September 30, 2023 – **Mr. Chris Clark, Forvis**
[Compliance & Audit Committee]

C. Consent Grant Recommendations

1. [Consideration of Approval of Grant Recommendation \(Items C1-C6\) – Mr. Jeffrey Baker, Mr. Omar Reid, Ms. Maureen Padilla, and Ms. Maria Cowles](#)
[\(See Attached Expenditure Summary: February 29, 2024\)](#)

D. New Consent Items for Board Approval

1. [Consideration of Approval of Agreement between Harris Health and Baylor College of Medicine at Houston for Parking at Harris Health Smith Clinic – Mr. Louis Smith and Mr. Christopher Okezie](#)
2. [Consideration of Approval to Authorize the Senior Vice President, Facilities Construction & Systems Engineering, to Sign Permit, Easement and Construction-related Administrative Applications, Forms and Ancillary Documents, as Required by the Appropriate Authorities Having Jurisdiction – Mr. Louis Smith and Mr. Patrick Casey](#)
3. [Consideration of Approval of an Interlocal Agreement Between the Harris County Hospital District d/b/a Harris Health System and Harris County Public Health Department for Delivery of Evidence-based Diabetes Prevention Program – Dr. Esperanza Galvan and Dr. Chethan Bachireddy](#)

E. Consent Reports and Updates to the Board

1. [Updates Regarding Pending State and Federal Legislative and Policy Issues Impacting Harris Health System – Mr. R. King Hillier](#)
2. [Harris Health System Council-At-Large January 8, 2024 Meeting Minutes – Dr. Jennifer Small](#)

{End of Consent Agenda}

XI. Item(s) Related to the Health Care for the Homeless Program

Dr. Andrea Caracostis 15 min

- A. [Review and Acceptance of the Following Reports for the Health Care for the Homeless Program \(HCHP\) as Required by the United States Department of Health and Human Services, which Provides Funding to the Harris County Hospital District d/b/a/Harris Health System to Provide Health Services to Persons Experiencing Homelessness under Section 330\(h\) of the Public Health Service Act – Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge](#)

(12 min)

- [HCHP February 2024 Operational Update](#)

- B. Consideration of Approval of the HCHP Change in Scope (1 min)
 – *Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge*

- C. [Consideration of Approval of the HCHP 2024 Sliding Fee Scale](#) (1 min)
 – *Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge*

- D. [Consideration of Approval of the HCHP 4th Quarter Budget Summary Report](#) (1 min)
 – *Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge*

- XII. Executive Session** **Dr. Andrea Caracostis 15 min**

- D. [Consideration of Approval of the Community Health Choice Texas, Inc. and Community Health Choice, Inc. 2024 Insurance Renewals, Pursuant to Tex. Gov’t Code Ann. §551.085, Including Possible Action Upon Return to Open Session – Ms. Lisa Wright, CEO and Ms. Anna Mateja, CFO, Community Health Choice \[Budget & Finance Committee\]](#) (5 min)

- E. Report by the Executive Vice President, Chief Compliance and Risk Officer, Regarding Compliance with Medicare, Medicaid, HIPAA and Other Federal and State Health Care Program Requirements, Including Status of Fraud and Abuse Investigations, Pursuant to Tex. Health & Safety Code Ann. §161.032 (10 min)
 – *Ms.Carolynn Jones*

- XIII. Reconvene** **Dr. Andrea Caracostis 1 min**

- XIV. Adjournment** **Dr. Andrea Caracostis 1 min**

MINUTES OF THE HARRIS HEALTH SYSTEM BOARD OF TRUSTEES

Board Meeting

Thursday, January 25, 2024

9:00 am

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATION
I. Call to Order and Record of Attendance	<p>The meeting was called to order at 9:08 a.m. by Andrea Caracostis, MD, MPH, Chair. It was noted that a quorum was present and the attendance was recorded. Dr. Caracostis stated while some of Board members are in the room with us today, others will participate by videoconference as permissible by state law and the Harris Health Videoconferencing Policy. The meeting may be viewed online: http://harrishealthtx.swagit.com/live.</p>	<p>A copy of the attendance is appended to the archived minutes.</p>
II. Approval of the Minutes of Previous Meeting	<ul style="list-style-type: none"> • Board Meeting – December 7, 2023 	<p>Motion No. 24.01-01 Moved by Mr. Jim Robinson, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve the minutes of the December 7, 2023 meeting. Motion carried.</p>
III. Announcements/ Special Presentations	<p>A. CEO Report Including Special Announcements</p> <p>Dr. Esmail Porsa, President and Chief Executive Officer (CEO), delivered the CEO Report, including special announcements. Dr. Porsa was pleased to announce that Ben Taub Hospital (BTH) ranked #1 out of 44 safety net hospitals in the NRC Patient Safety Satisfaction Survey (“Survey”) for FY2023. He noted that Lyndon B. Johnson (LBJ) Hospital ranked sixth (6th) overall in the Survey. Dr. Porsa thanked the Harris County Commissioners Court for their help in funding Harris Health’s new Gastrointestinal (GI) Suite at Quentin Mease Health Center. Additionally, Dr. Porsa shared that Harris Health launched its new Epic-based virtual care platform, designed for healthcare providers to offer patients video visits through the Epic electronic medical record system.</p>	<p>As Presented.</p>
	<p>B. Approval of Harris Health Appointments to the Harris Health Strategic Fund Board</p> <ol style="list-style-type: none"> 1. Ms. Beth Robertson, Board Chair 2. Mr. Edwin “Ed” Allday 3. Ms. Sonceria “Sonny” Messiah Jiles 4. Ms. Ginni Mithoff 5. Ms. Carol Paret, Harris Health Board Member 	<p>Motion No. 24.01-02 Moved by Dr. Cody Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item III.B. Motion carried.</p>

	6. Mr. Massey Villareal	
	<p>C. Special Announcement Regarding the Harris County Hospital District Foundation and the Harris Health Strategic Fund</p> <ul style="list-style-type: none"> Harris County Hospital District (HCHD) Foundation Presentation Regarding the \$1 Million Pledge to the Harris Health Strategic Fund. <p>Mr. Theo Franklin, HCHD Foundation Board Chair, presented a check to Ms. Beth Robertson, Harris Health Strategic Fund Board Chair, in the amount of \$1M.</p>	As Presented.
	<p>D. Board Member Announcements Regarding Board Member Advocacy and Community Engagements</p> <p>Ms. Jennifer Tijerina expressed her thanks to Mr. DeWight Dopslauf, Harris County Purchasing Agent for including apprenticeship and trade programs in the upcoming bid process related to the Harris Health Bond. Ms. Marcia Johnson expressed pleasure in seeing the Harris Health Strategic Fund and Harris County Hospital District Foundation Board working together as a team. Dr. Cody Pyke announced that she will be a featured speaker at the March meeting of the Harris County LGBTQIA+ Commission.</p>	As Presented.
IV. Public Comment		There were no public speakers registered to appear before the Board.
V. Executive Session	At 9:24 a.m., Dr. Caracostis stated that the Board would enter into Executive Session for Items V. 'A through C' as permitted by law under Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Ann. §151.002, Tex. Occ. Code. Ann. §160.007, and Tex. Gov't. Code Ann. §551.071.	
	<p>A. Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Report of the Medical Executive Board in Connection with the Evaluation of the Quality of Medical and Healthcare Services, Including the Harris Health System Quality, Safety Performance Measures, Good Catch and Zero Harm, and Possible Action Regarding this Matter Upon Return to Open Session</p>	No Action Taken.
	<p>B. Medical Executive Board Report and Credentialing Discussion, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Consideration of Approval of Credentialing Changes for Members of the Harris Health System Medical Staff</p>	No Action Taken.

	<p>C. Report Regarding Harris Health System Correctional Health Quality of Medical and Healthcare, Including Credentialing Discussion and Operational Updates, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, Tex. Occ. Code Ann. §151.002 and Tex. Gov’t Code Ann. §551.071 to Receive Peer Review and/or Medical Committee Report with Possible Action Upon Return to Open Session</p>	<p>No Action Taken.</p>
<p>VI. Reconvene to Open Meeting</p>	<p>At 9:35 a.m., Dr. Caracostis reconvened the meeting in open session; she noted that a quorum was present and that no action was taken in Executive Session.</p>	
<p>VII. General Action Item(s)</p>		
	<p>A. General Action Item(s) Related to Quality: Medical Staff</p>	
	<p>1. Approval of Credentialing Changes for Members of the Harris Health System Medical Staff</p> <p>Dr. Martha Mims, Chair, Medical Executive Board, presented the credentialing changes for members of the Harris Health System Medical Staff. For January 2024, there were forty (40) initial appointments, 112 reappointments, eight (8) change/add privileges, forty – eight (48) resignations, and eleven (11) applications for temporary privileges. A copy of the credentialing report is available in the permanent record.</p>	<p>Motion No. 24.01-03 Moved by Mr. Jim Robinson, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item VII.A.1. Motion carried.</p>
	<p>2. Approval of Revisions to Core Neurology Privileges</p>	<p>Motion No. 24.01-04 Moved by Ms. Carol Paret, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item VII.A.2. Motion carried.</p>
	<p>B. General Action Item(s) Related to Quality: Correctional Health Medical Staff</p>	
	<p>1. Approval of Credentialing Changes for Members of the Harris Health System Correctional Health Medical Staff</p> <p>Dr. Otis Eging, Chief Medical Officer, Harris Health Correctional Health, presented the credentialing changes for members of the Harris Health System Correctional Health Medical Staff. For January 2024, there were four (4) initial applications. A copy of the credentialing changes is available in the permanent record.</p>	<p>Motion No. 24.01-05 Moved by Ms. Afsheen Davis, seconded by Dr. Cody Pyke, and unanimously passed that the Board approve agenda item VII.B.1. Motion carried.</p>

	<p>C. General Action Item(s) Related to Community Health Choice</p>													
	<p>1. Approval of Reappointment of Members to the Community Health Choice, Inc. (CHC) and Community Health Choice Texas, Inc. (CHCT), collectively “Community”, Board of Directors</p> <table border="1" data-bbox="525 318 1486 454"> <thead> <tr> <th>NAME</th> <th>INITIAL APPOINTMENT DATE</th> <th>REAPPOINTMENT TERM</th> </tr> </thead> <tbody> <tr> <td>Ms. Vicki Keiser</td> <td>08/29/2013</td> <td>1/1/2024 to 12/31/2025</td> </tr> <tr> <td>Ms. Anne Clutterbuck</td> <td>05/25/2017</td> <td>1/1/2024 to 12/31/2025</td> </tr> <tr> <td>Dr. Stephen McKernan</td> <td>09/14/2007</td> <td>1/1/2024 to 12/31/2025</td> </tr> </tbody> </table>	NAME	INITIAL APPOINTMENT DATE	REAPPOINTMENT TERM	Ms. Vicki Keiser	08/29/2013	1/1/2024 to 12/31/2025	Ms. Anne Clutterbuck	05/25/2017	1/1/2024 to 12/31/2025	Dr. Stephen McKernan	09/14/2007	1/1/2024 to 12/31/2025	<p>Motion No. 24.01-06 Moved by Dr. Cody Pyke, seconded by Ms. Afsheen Davis, and unanimously passed that the Board approve agenda item VII.C.1. Motion carried.</p>
NAME	INITIAL APPOINTMENT DATE	REAPPOINTMENT TERM												
Ms. Vicki Keiser	08/29/2013	1/1/2024 to 12/31/2025												
Ms. Anne Clutterbuck	05/25/2017	1/1/2024 to 12/31/2025												
Dr. Stephen McKernan	09/14/2007	1/1/2024 to 12/31/2025												
	<p>2. Approval of Appointment of Chair and Vice Chair Positions to the Community Health Choice, Inc. (CHC) and Community Health Choice Texas, Inc. (CHCT), collectively “Community”, Board of Directors</p> <table border="1" data-bbox="663 630 1346 764"> <thead> <tr> <th>Title</th> <th>Name</th> </tr> </thead> <tbody> <tr> <td>Chairperson</td> <td>Mr. Rodney Lenfant</td> </tr> <tr> <td>Vice Chairperson</td> <td>Ms. Vicki Keiser</td> </tr> </tbody> </table>	Title	Name	Chairperson	Mr. Rodney Lenfant	Vice Chairperson	Ms. Vicki Keiser	<p>Motion No. 24.01-07 Moved by Mr. Jim Robinson, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item VII.C.2. Motion carried.</p>						
Title	Name													
Chairperson	Mr. Rodney Lenfant													
Vice Chairperson	Ms. Vicki Keiser													
<p>VIII. New Items for Board Consideration</p>														
	<p>A. Approval of CEO Evaluation Advisory Workgroup Charter</p> <p>Ms. Sara Thomas, Chief Legal Officer, delivered an overview of the CEO Evaluation Advisory Workgroup Charter, including the CEO Evaluation process. A copy of the CEO Evaluation Advisory Workgroup Charter is available in the permanent record.</p>	<p>Motion No. 24.01-08 Moved by Ms. Afsheen Davis, seconded by Dr. Cody Pyke, and unanimously passed that the Board approve agenda item VIII.A. Motion carried.</p>												
	<p>B. Approval of Appointment of Ms. Carol Paret and Mr. Jim Robinson to the Ambulatory Surgical Center at LBJ Governing Body</p>	<p>Motion No. 24.01-09 Moved by Dr. Cody Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item VIII.B. Motion carried.</p>												

<p>IX. Strategic Discussion</p>		
	<p>A. Harris Health System Strategic Plan Initiatives</p>	
	<p>1. November 7, 2023 Election Analysis Report</p> <p>Mr. Paul Rivera, Senior Vice President, Research & Strategy, Outreach Strategists, delivered a presentation regarding the November 7, 2023 election results. Mr. Rivera reported that the Bond Proposition A passed with 72.3% of the vote. Mr. Rivera presented the following demographics related to Proposition A:</p> <ul style="list-style-type: none"> • Proposition A won nearly every election precinct, and led in every political subdivision. • Demographic analysis indicates strong support for Proposition A came from every ethnic subgroup, gender, and age cohort. • Older voters across ethnic groups were the strongest supporters of Proposition A. • Black Voters and Black Neighborhoods had the strongest levels of support for Proposition A. • Hispanics were a disproportionately small portion of Harris County’s 2023 electorate. • Young people participated at very low levels. <p>Additionally, Mr. Rivera shared the following findings and recommendations:</p> <ul style="list-style-type: none"> • Harris Health has the support of the most engaged people in Harris County – active, frequent voters. • However, the earliest research indicated a general lack of awareness about Harris Health and its mission. • The electoral data indicates many of the people who benefit the most from Harris Health did not participate in the 2023 election. • Harris Health should expand engagement to the younger, more diverse audiences across the County who lack affinity with the institution – to cultivate a stronger coalition of support for the future. <p>A copy of the presentation is available in the permanent record.</p>	

B. January Board Committee Meeting Reports

Governance Committee

Dr. Cody Pyke shared that the Governance Committee met on January 12, 2024, and the following topics were covered:

- Ms. Olga Rodriguez, Vice President, Corporate Communications, Community Engagement and Board Services, delivered an update regarding 2023 Board Self-Assessment and Proposed Completion Timeline.
- The Committee discussed the 2024 Governance Committee Agenda Items, Goals and Priorities.
- The Committee recommended that the Board consider the adoption of the following four (4) goals:
 - 1) To cultivate continuing education amongst Board of Trustee members;
 - 2) Continue to refine the election process for Board officer positions;
 - 3) Continue to develop and expand the Board self-evaluation processes; and
 - 4) To develop recommendations on Harris Health’s strategic planning process to recommend to the Board.

Dr. Pyke encouraged all Committee Chairs to develop goals for the 2024 year.

Quality Committee

Dr. Andrea Caracostis stated that the following highlights were covered in open session of the Quality Committee Meeting held on January 9, 2024:

- The monthly High Reliability Organization (HRO) Video “Health Disparities” was displayed.
- The Population Health Department reported that it has started screening patients for health-related social needs (HRSN) and connecting those who want assistance to internal and external resources, which is a key activity in Harris Health’s health equity strategy. The HRSN screenings went live for all adult inpatient admissions on November 6, 2023. The HRSN screening includes asking patients about food insecurity, housing status, transportation needs, interpersonal safety, and utilities, which fulfills a new 2024 Centers for Medicare & Medicaid Services (CMS) requirement.

Joint Conference Committee

Dr. Caracostis shared that the Joint Conference Committee met on January 11, 2024, and the following topics were covered:

- The Committee received a report from the December 7, 2023 Board Meeting relating to adding Ms. Sima Ladjevardian to the Joint Conference Committee.
- The Committee made revisions to the Joint Conference Committee Charter.

	<ul style="list-style-type: none"> • The Committee received an update from Dr. Martha Mims, Chair, MEB and Dr. Kunal Sharma, Vice Chair, MEB, regarding the Medical Executive Board. • The Committee received an update from Dr. Tien Ko, Chief of Staff, LBJ and Dr. Sandeep Markan, Chief of Staff, BT, related to the System’s pavilions. • The Committee received an update from Dr. Mohammad Zare, Vice Chief of Staff, ACS and Dr. Markan (in lieu of Dr. Fareed Khan) related to Ambulatory Care Services. • Dr. Mims presented a review of the initial Harris Health Strategic Facility Plan Timeline. • The Committee discussed future agenda items, including goals for 2024. <p><u>DEI Committee</u></p> <p>Ms. Marcia Johnson noted that the Diversity, Equity, and Inclusion (DEI) Committee met on January 12, 2024, and the following topics were covered:</p> <ul style="list-style-type: none"> • Ms. Consuela Floyd, MWBE Manager, Contractor Diversity, delivered an update regarding Harris Health’s Minority/Woman-owned Business (MWBE) Enterprises. • Ms. Ashley Smith, delivered an update regarding the findings of the Harris Health Employee Engagement Survey. • Dr. Jobi Martinez, Vice President, Chief Diversity Officer, delivered a presentation regarding the Diversity, Equity and Inclusion (DEI) Analysis. • The Committee discussed the 2024 DEI reporting schedule and meeting frequency, and the Committee recommended adopting the Revised 2024 DEI Reporting Schedule, which was included as Item X. B. 2 on the Consent Agenda. 	
<p>X. Consent Agenda Items</p>		
	<p>A. Consent Purchasing Recommendations</p>	
	<p>1. Approval of Purchasing Recommendations (Items A1 through A77)</p> <p>Ms. Marcia Johnson shared comments regarding contracts procured prior to the MWBE Program. She stated that the DEI Committee is working with Harris Health leadership to ensure that no contracts are being improperly excluded from the MWBE Program. Mr. DeWight Dopslauf, Purchasing Agent, Harris County Purchasing Office, stated that his team is working with Harris Health leadership to ensure that all contracts that have the ability to re-bid are prioritized. A copy of the purchasing recommendations is available in the permanent record.</p>	<p><u>Motion No. 24.01-10</u> Moved by Ms. Afsheen Davis, seconded by Dr. Cody Pyke, and unanimously passed that the Board approve agenda item X.A.1. Motion carried.</p>

	B. Consent Committee Recommendations	
	<p>1. Approval of 2024 Governance Committee Goals</p> <ul style="list-style-type: none"> • Cultivate Continuing Education Among Board Members • Continue to Refine the Elections Process for the Board Officer Positions • Continue to Develop and Expand Board Self-Evaluation Processes • Develop Recommendations Around the Strategic Planning Process 	<p><u>Motion No. 24.01-11</u> Moved by Ms. Carol Paret, seconded by Mr. Jim Robinson, and unanimously passed that the Board approve agenda item X.B.1. through X.D.2. Motion carried.</p>
	<p>2. Approval of Revised 2024 DEI Reporting Schedule</p>	<p><u>Motion No. 24.01-11</u> Moved by Ms. Carol Paret, seconded by Mr. Jim Robinson, and unanimously passed that the Board approve agenda item X.B.1. through X.D.2. Motion carried.</p>
	C. Consent Grant Recommendations	
	<p>1. Approval of Grant Recommendations (items C1-C3)</p>	<p><u>Motion No. 24.01-11</u> Moved by Ms. Carol Paret, seconded by Mr. Jim Robinson, and unanimously passed that the Board approve agenda item X.B.1. through X.D.2. Motion carried.</p>
	D. New Consent Items for Board Approval	
	<p>1. Acceptance of the Harris Health System November 2023 Financial Report Subject to Audit</p>	<p><u>Motion No. 24.01-11</u> Moved by Ms. Carol Paret, seconded by Mr. Jim Robinson, and unanimously passed that the Board approve agenda item X.B.1. through X.D.2. Motion carried.</p>

	<p>2. Approval to Enter into a Behavioral Health Constable Transportation Agreement with Harris County Constable Precinct One</p>	<p><u>Motion No. 24.01-11</u> Moved by Ms. Carol Paret, seconded by Mr. Jim Robinson, and unanimously passed that the Board approve agenda item X.B.1. through X.D.2. Motion carried.</p>
	<p>E. Consent Reports and Updates to the Board</p>	
	<p>1. Harris Health System Council-At-Large November 13, 2023 Meeting Minutes</p> <p><i>{End of Consent Agenda}</i></p>	<p>For Informational Purposes Only</p>
<p>XI. Item(s) Related to the Health Care for the Homeless Program</p>		
	<p>A. Review and Acceptance of the Following Reports for the Health Care for the Homeless Program (HCHP) as Required by the United States Department of Health and Human Services, which Provides Funding to the Harris County Hospital District d/b/a/Harris Health System to Provide Health Services to Persons Experiencing Homelessness under Section 330(h) of the Public Health Service Act</p> <ul style="list-style-type: none"> • HCHP January 2024 Operational Update <p>Ms. Tracey Burdine, Director, Health Care for the Homeless Program, delivered a presentation regarding the Health Care for the Homeless Program January 2024 Operational Update including Patient Services, Consumer Advisory Council Report, 1966 Budget Fund Grant, C8E Capital Board Changes, and Quality Management Report. Ms. Burdine reported that there were 361 new adult patients, eighteen (18) returning telehealth patients, and twelve (12) new pediatric patients associated with the Program. She stated that for the month of December, HCHP served 1,160 unduplicated patients, of which 758 patients were seen for family practice services. She also noted that there were 1,866 completed visits for the month of December.</p> <p>Ms. Burdine presented the following highlights of Council activities from August 2023 – October 2023:</p> <ul style="list-style-type: none"> • The Council was informed of the clinic schedule changes related to staffing shortages and the corrective action plan to recruit staff. • The Council was informed of new funding received from the Health Resources and Services Administration including the Bridge Access Program and the Ending the HIV Epidemic-Primary Care HIV Prevention grants. 	<p><u>Motion No. 24.01-12</u> Moved by Ms. Carol Paret, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item XI.A. Motion carried.</p>

	<ul style="list-style-type: none"> • The Council was informed that the mobile dental unit would be out of service for the rest of the year for repairs, maintenance, and refurbishment. The dental services will be provided at the Harmony House Dental satellite clinic. • The Council was informed of new collaborations with Harris Health’s Office Based Addiction Treatment (OBAT) Program and the Harris County Drug Court. <p>Ms. Burdine presented the budget report for the 1966 Restricted Donation Fund through the 2022 Employee Giving Campaign, in the amount of \$7,000, for various cervical cancer screening initiatives. She presented the budget for C8E Capital Grant funding amounts of \$77,649, which will be used to purchase new equipment to enhance delivery of care, and for the Open-Door Mission Renovation in the funding amount of \$535,530. Dr. LaResa Ridge, Medical Director, Health Care for the Homeless Program, presented the HCHP Q2 and Q3 Quality Management Report. She mentioned that five (5) quality measures fell below target goals for the second quarter of 2023; however, by the end of the third quarter, breast cancer and cervical cancer screenings met the Program’s internal and Uniform Data System (UDS) benchmark goals. The Program has implemented corrective action plans and is continuously working to improve compliance on all quality metrics. A copy of the operational update is available in the permanent record.</p>	
	<p>B. Approval of the HCHP Consumer Advisory Council Report</p>	<p><u>Motion No. 24.01-13</u> Moved by Mr. Jim Robinson, seconded by Dr. Cody Pyke, and unanimously passed that the Board approve agenda item XI.B. Motion carried.</p>
	<p>C. Approval of the HCHP 1966 Budget Fund Grant</p>	<p><u>Motion No. 24.01-14</u> Moved by Dr. Cody Pyke, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item XI.C. Motion carried.</p>
	<p>D. Approval of the HCHP C8E Capital Board Changes</p>	<p><u>Motion No. 24.01-15</u> Moved by Ms. Jennifer Tijerina, seconded by Dr. Cody Pyke, and unanimously passed that the Board approve agenda item XI.D. Motion carried.</p>

	E. Approval of the HCHP Quality Management Report	Motion No. 24.01-16 Moved by Ms. Jennifer Tijerina, seconded by Dr. Cody Pyke, and unanimously passed that the Board approve agenda item XI.E. Motion carried.
XII. Executive Session	At 10:29 a.m., Dr. Andrea Caracostis stated that the Board would enter into Executive Session for items XII. “D through G” as permitted by law under Tex. Health & Safety Code Ann. §161.032 and Tex. Gov’t Code Ann. §551.071, Tex. Gov’t Code Ann. §551.074 and Tex. Gov’t Code Ann. §551.085.”	
	D. Employment Matters Regarding Community Health Choice Texas, Inc. and Community Health Choice, Inc., Pursuant to Tex. Gov’t Code Ann. §551.085 and Tex. Gov’t Code Ann. §551.071, and Possible Action Upon Return to Open Session	No Action Taken.
	E. Consultation with Attorney Regarding Dialysis Center Governing Body Bylaws, Pursuant to Tex. Gov’t Code Ann. §551.071, and Possible Action Upon Return to Open Session, Including Consideration of Approval of Governing Body Bylaws of the Harris Health System Dialysis Center at Quentin Mease Health Center	Motion No. 24.01-17 Moved by Ms. Jennifer Tijerina, seconded by Dr. Cody Pyke, and unanimously passed that the Board approve agenda item XII.E. Motion carried.
	F. Report by the Executive Vice President, Chief Compliance and Risk Officer, Regarding Compliance with Medicare, Medicaid, HIPAA and Other Federal and State Health Care Program Requirements, Including Status of Fraud and Abuse Investigations, Pursuant to Tex. Health & Safety Code Ann. §161.032	No Action Taken.
	G. Discussion Regarding Evaluation and Employment Matters Related to the Chief Executive Officer (CEO), Pursuant to Tex. Gov’t Code Ann. §551.071 and Tex. Gov’t Code Ann. §551.074, and Possible Action Upon Return to Open Session, Including Consideration of Approval of FY2024 CEO Objectives and Approval of FY2023 CEO Evaluation	Motion No. 24.01-18 Moved by Dr. Cody Pyke, seconded by Ms. Afsheen Davis, and unanimously passed that the Board approve agenda item XII.G. Motion carried.

XIII. Reconvene	At 11:51 a.m., Dr. Andrea Caracostis reconvened the meeting in open session; she noted that a quorum was present. The Board will now take action on items “E” and “G” of the Executive Session Agenda.	
XIV. Adjournment	There being no further business to come before the Board, the meeting adjourned at 11:52 a.m.	Moved by Ms. Afsheen Davis seconded by Ms. Jennifer Tijerina, and unanimously approved to adjourn the meeting.

I certify that the foregoing are the Minutes of the Harris Health System Board of Trustees Meeting held on January 25, 2024.

Respectfully Submitted,

Andrea Caracostis, MD, MPH, Chair

Minutes transcribed by Cherry A. Pierson, MBA

Thursday, January 25, 2024

Harris Health System Board of Trustees Board Meeting – Attendance

Note: For Zoom meeting attendance, if you joined as a group and would like to be counted as present, please submit an email to: BoardofTrustees@harrishealth.org before close of business the day of the meeting.

BOARD MEMBERS PRESENT	BOARD MEMBERS ABSENT
Ms. Afsheen Davis	Ms. Barbie Robinson
Dr. Andrea Caracostis <i>(Chair)</i>	Ms. Sima Ladjevardian
Ms. Carol Paret <i>(Secretary)</i>	
Dr. Cody M. Pyke <i>(Vice Chair)</i>	
Ms. Jennifer Tijerina	
Mr. Jim Robinson	
Ms. Marcia Johnson	

EXECUTIVE LEADERSHIP/STAFF/ SPECIAL INVITED GUESTS	
Amy Smith	Jocelyn Thomas
Anthony Williams	John Matcek
Antoinette “Toni” Cotton	Jonathan Fombonne <i>(Harris County Attorney’s Office)</i>
Beth Robertson <i>(Harris Health Strategic Fund)</i>	Dr. Joseph Kunisch
Carolynn Jones	Kari McMichael
Cherry Pierson	Katie Rutherford <i>(Harris County Attorney’s Office)</i>
Daniel Smith	Kim Sterling <i>(Harris Health Strategic Fund)</i>
Derek Curtis	Dr. Kunal Sharma
Derek Holmes	LaResa Ridge
DeWight Dopslauf <i>(Harris County Purchasing Office)</i>	Lisa Wright <i>(Community Health Choice President & CEO)</i>
Elizabeth Hanshaw Winn <i>(Harris County Attorney’s Office)</i>	Louis Smith
Dr. Esmail Porsa <i>(Harris Health System President & CEO)</i>	Maria Cowles
Dr. Esperanza “Hope” Galvan	Dr. Martha Mims
Dr. Glorimar Medina	Matthew Reeder
Jack Adger <i>(Harris County Purchasing Office)</i>	Matthew Schlueter
Dr. Jackie Brock	Michael Hill
Jamie Hons	Michael Nnadi
Jeffrey Baker	Monica Carbajal
Jennifer Small	Nicholas J. Bell
Jennifer Zarate	Olga Rodriguez
Jerry Summers	Omar Reid
Jessey Thomas	Dr. Otis R. Egin

EXECUTIVE LEADERSHIP/STAFF/ SPECIAL INVITED GUESTS	
Patricia Darnauer	Dr. Sandeep Markan
Patrick Casey	Sara Thomas <i>(Harris County's Attorney's Office)</i>
Paul Rivera	Shawn DeCosta
R. King Hillier	Dr. Steven Brass
Randy Manarang	Tai Nguyen
Ray Gutierrez <i>(Houston Construction Services)</i>	Theo Franklin <i>(Harris County Hospital District Foundation)</i>
Ray Higgins	Dr. Tien Ko
Sam Karim	Tracey Burdine
Sampson Okotie <i>(UT Health)</i>	Victoria Nikitin

Public Comment Request and Registration Process

Pursuant to Texas Government Code §551.007, members of the public are invited to attend the regular meetings of the Harris Health System Board of Trustees and may address the Board during the Public Comment segment regarding an official agenda item that the Board will discuss, review, or take action upon, or regarding a subject related to healthcare or patient care rendered at Harris Health System. Public Comment will occur prior to the consideration of all agenda items. If you have signed up to attend as a Public Speaker virtually, a meeting link will be provided. Note: Public Speakers will be removed from the meeting after speaking and have the option to join the meeting live via <http://harrishealthtx.swagit.com/live>.

How to Request to Address the Board of Trustees

Members of the public must register in advance to speak at the Harris Health System Board of Trustees meetings. To register, members of the public must contact the Board of Trustees Office during core business hours, Monday through Friday between 8:00 a.m. to 5:00 p.m. Members of the public must submit the registration no later than 4:00 p.m. on the day before the scheduled meeting and may only register in one of the following manners:

1. Providing the requested information located in the “Speak to the Board” tile found at: <https://www.harrishealth.org/about-us-hh/board/Pages/public-comment-request-and-registration-process.aspx>.
2. Printing and completing the downloadable registration form found at: <https://www.harrishealth.org/about-us-hh/board/Pages/public-comment-request-and-registration-process.aspx>.
 - 2a. A hard-copy may be scanned and emailed to BoardofTrustees@harrishealth.org.
 - 2b. Mailing the completed registration form to 4800 Fournace Pl., Ste. E618, Bellaire, TX 77401.
3. Contacting staff at (346) 426-1524.

Prior to submitting a request to address the Harris Health System Board of Trustees, please take a moment to review the rules to be observed during the Public Comment Period.

Rules During Public Comment Period

The presiding officer of the Board of Trustees or the Board Secretary shall keep the time for speakers.

Three Minutes

A speaker, whose subject matter, as submitted, relates to an identifiable item of business on the agenda, will be requested by the presiding officer to come to the podium where they will be provided three (3) minutes to speak. A speaker, whose subject matter, as submitted, does not relate to an identifiable item of business on the agenda, will also be provided three (3) minutes to speak. A member of the public who addresses the body through a translator will be given at least twice the amount of time as a member of the public who does not require the assistance of a translator.

- Page 21 Was Intentionally Left Blank -

Thursday, February 29, 2024

Executive Session

Report Regarding Quality of Medical and Healthcare, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Report of the Medical Executive Board in Connection with the Evaluation of the Quality of Medical and Healthcare Services, Including the Harris Health System Quality, Safety Performance Measures, Good Catch and Zero Harm, and Possible Action Regarding this Matter Upon Return to Open Session.



Dr. Yashwant Chathampally

Associate Chief Medical Officer, Senior Vice President – Quality & Patient Safety

- Pages 23 – 24 Were Intentionally Left Blank -

Thursday, February 29, 2024

Executive Session

Medical Executive Board Report and Credentialing Discussion, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, and Tex. Occ. Code Ann. §151.002 to Receive Peer Review and/or Medical Committee Report, Including Consideration of Approval of Credentialing Changes for Members of the Harris Health System Medical Staff.



Dr. Yashwant Chathampally
Associate Chief Medical Officer, Senior Vice President – Quality & Patient Safety

- Pages 26 – 42 Were Intentionally Left Blank -

Thursday, February 29, 2024

Executive Session

Report Regarding Harris Health System Correctional Health Quality of Medical and Healthcare, Including Credentialing Discussion and Operational Updates, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §160.007, Tex. Occ. Code Ann. §151.002 and Tex. Gov't Code Ann. §551.071 to Receive Peer Review and/or Medical Committee Report with Possible Action Upon Return to Open Session.

Otis R. Ekins

Otis R. Ekins, MD, CCHP-P
Chief Medical Officer of Correctional Health

- Pages 44 – 48 Were Intentionally Left Blank -

Thursday, February 29, 2024

Consideration of Approval Regarding Credentialing Changes for
Members of the Harris Health System Medical Staff

The Harris Health System Medical Executive Board approved the attached credentialing changes for the members of the Harris Health System Medical Staff for February 2024.

The Harris Health System Medical Executive Board requests the approval of the Board of Trustees.

Thank you.

Board of Trustees



February 2024 Medical Staff Credentials Report

Medical Staff Initial Appointments: 24

BCM Medical Staff Initial Appointments - 12

UT Medical Staff Initial Appointments - 12

HCHD Medical Staff Initial Appointments - 0

Medical Staff Reappointments: 38

BCM Medical Staff Reappointments - 21

UT Medical Staff Reappointments - 17

HCHD Medical Staff Reappointments - 0

BCM/UT/Harris County Hospital District (Harris Health) Medical Staff Changes in Clinical Privileges: 1

BCM/UT/HCHD Medical Staff Resignations: 12

For Information

Temporary Privileges Awaiting Board Approval: 12

BCM/UT/Harris County Hospital District (Harris Health) Medical Staff Files for Discussion: 0

Medical Staff Initial Appointment Files for Discussion - 0

Medical Staff Reappointment Files for Discussion - 0

Thursday, February 29, 2024

Consideration of Approval of Credentialing Changes for Members of the Harris Health
System Correctional Health Medical Staff

Otis R. Ekins

Otis R. Ekins, MD, CCHP-P
Chief Medical Officer of Correctional Health

Board of Trustees



February 2024 Correctional Health Credentials Report

Medical Staff Initial Appointments: 7

Page 1

Medical Staff Reappointments: 21

Page 2

Medical Staff Resignations: 2

Page 3

Medical Staff Files for Discussion: 0

Thursday, February 29, 2024

Review and Discussion Regarding Collaboration Initiatives Between Community Health Choice and Harris Health System, Including Hospital at Home and House Calls

Community Health Choice, Inc. ("CHCI") and Community Health Choice Texas, Inc. ("CHCT") are component units of Harris Health System.

Collaboration between Community Health Choice and Harris Health System

- Community is partnering with Harris Health System to bring Hospital at Home and House Call Services to Community's members, including the STAR Plus members upon program implementation.



Anna Mateja
CFO, Community Health Choice



COMMUNITY HEALTH CHOICE

- Harris Health Partnership
- Hospital At Home & House Calls



Partnership – Harris Health and CHC

STAR-Plus Membership will present many opportunities for us to leverage our relationship and provide meaningful outcomes

STAR-PLUS Population

- Adults who have disabilities or are age 65 or older (including those dually eligible for Medicare and Medicaid)
- Age 21 or older, getting Supplemental Security Income (SSI) benefits, and able to get Medicaid due to low income
- The STAR+PLUS program combines acute care and LTSS, examples include:
 - Activities of daily living (ADLs)
 - Home modifications
 - Respite (short-term supervision) and
 - Personal assistance services(PAS)
- Age 21 or over residing in a nursing home and receiving Medicaid
- In Medicaid for Breast and Cervical Cancer program



House Call Service - Scope

- We provide in-home medical and primary care for *homebound* patients with Board Certified Geriatric, Palliative, and Family Medicine Providers
- With the help of Registered Nurse Case Managers and Social Workers, we strive to:



Prevent unnecessary suffering



Improve quality of life



Prevent frequent visits to the emergency room



Prevent frequent hospital admissions

Hospital at Home (HaH)

- HaH is an innovative care model that Harris Health is adopting to provide acute inpatient care to patients who can be treated in their home setting.
- The desired outcomes for the program include improved patient experience scores, and to provide additional bed space/capacity at Ben Taub and LBJ inpatient units.
- The target population is patients admitted through Ben Taub or LBJ Emergency Centers with an ICD-10 diagnosis of Cellulitis/Soft Tissue Infection, residing within ten (10) miles of a Harris Health Pavilion (Ben Taub or LBJ) with access to phone/internet services. The scope and criteria for the program will expand as the program grows.



Hospital at Home (HaH) and Star+Plus

- Community is discussing with Harris Health to potentially provide HaH services to low-risk Star+Plus members who can be treated at home. Each member will meet HaH criteria for this program.
- This collaboration will improve patient care, provide services in the comfortable and convenient home setting, and free up hospital beds for patients with more critical illnesses.
- Star+Plus launches September 1, 2024. We aim to have HaH contracted and up and running for these members at that time.





**DeWight Dopslauf, C.P.M., CPPO
Harris County Purchasing Agent**

February 16, 2024

[Board of Trustees](#)
[Harris Health System](#)
[Harris County, Texas](#)

RE: [Job No. 23/0368](#)

Members of the Board:

Please approve the following award on the basis of highest overall evaluation:

Description: Construction Manager at Risk for the Construction of the Lyndon B. Johnson Hospital Replacement Project for Harris Health System

Proposals Received: Three (3) on November 27, 2023 (see attached)

Vendor: McCarthy Building Companies, Inc.

Amount: See confidential attachment

MWBE Goal: 35%

Evaluated by: Evaluation Committee Harris County Purchasing

Justification: To provide a Construction Manager at Risk for Lyndon B. Johnson replacement Project.

The County Attorney's Office is preparing Agreement(s) for these services. Award is subject to execution of the Agreements. If Harris Health System and McCarthy Building Companies, Inc. are unable to agree on an executable contract then Harris Health System, at its sole discretion, may discontinue negotiations and proceed to negotiate with the next ranking offeror.

Sincerely,

DeWight Dopslauf
Purchasing Agent

MNG

Attachments

cc: Esmail Porsa, M.D., President & CEO
Patrick Casey, Healthcare Systems Engineering
Vendors w/o attachments

FOR INCLUSION ON BOARD OF TRUSTEES AGENDA FEBRUARY 29, 2024



**DeWight Dopslauf, C.P.M., CPPO
Harris County Purchasing Agent**

February 16, 2024

[Board of Trustees](#)
[Harris Health System](#)
[Harris County, Texas](#)

RE: Job No. 23/0419

Members of the Board:

Please approve the following award on the basis of highest overall evaluation:

Description: Construction Manager at Risk for the Construction of Central Utility Plant at Lyndon B. Johnson Hospital for Harris Health System

Proposals Received: Eleven (11) on November 27, 2023 (see attached)

Vendor: Tellepsen Builders, L.P.

Amount: See confidential attachment

MWBE Goal: 35%

Evaluated by: X Evaluation Committee X Harris County Purchasing

Justification: To provide a Construction Manager at Risk for the Central Utility Plant at Lyndon B. Johnson Hospital

The County Attorney’s Office is preparing Agreement(s) for these services. Award is subject to execution of the Agreements. If Harris Health System and Tellepsen Builders, L.P. are unable to agree on an executable contract then Harris Health System, at its sole discretion, may discontinue negotiations and proceed to negotiate with the next ranking offeror.

Sincerely,

DeWight Dopslauf
Purchasing Agent

MNG

Attachments

cc: Esmail Porsa, M.D., President & CEO
Patrick Casey, Healthcare Systems Engineering
Vendors w/o attachments

FOR INCLUSION ON BOARD OF TRUSTEES AGENDA FEBRUARY 29, 2024



DeWight Dopslauf, C.P.M., CPPO
Harris County Purchasing Agent

February 19, 2024

[Board of Trustees](#)
[Harris Health System](#)
[Harris County, Texas](#)

RE: Job No. 23/0499

Members of the Board:

Please approve the following award on the basis of lowest priced proposal meeting requirements:

Description: Parking Garage Demolition and Sitework at Lyndon B. Johnson Hospital for Harris Health System

Proposals Received: Two (2) on January 29, 2024 (see attached)

Vendor: O'Donnell Snider Construction, LLC

Amount: \$2,585,316 project price
500,000 owner contingency
\$3,085,316

Evaluated by: X Evaluation Committee X Harris County Purchasing

Justification: To provide general early site work to prepare for the upcoming new LBJ Hospital, North Garage, and Central Utility Plant (CUP) projects. The owner contingency provides for coverage on unanticipated costs throughout the construction project.

Sincerely,

DeWight Dopslauf
Purchasing Agent

MNG
Attachments

cc: Esmail Porsa, M.D., President & CEO
Patrick Casey, Healthcare Systems Engineering
Vendors

FOR INCLUSION ON BOARD OF TRUSTEES AGENDA FEBRUARY 29, 2024

**Competitive Sealed Proposal for Parking Garage Demolition and Sitework at Lyndon B. Johnson
Hospital for Harris Health System**

Two (2) proposals were received as follows:

<u>Vendors</u>	<u>Price</u>
O'Donnell Snider Construction, LLC	\$2,585,316
SpawGlass Civil Construction, Inc.	\$3,573,221

Evaluation Information

The Evaluation Committee consisted of representatives from Harris Health System's Facilities PMO, and a representative from the Office of the Harris County Purchasing Agent. Upon careful evaluation of the proposals, the Evaluation Committee selected O'Donnell Snider Construction, LLC on the basis of lowest priced proposal meeting the requirements and needs of Harris Health System.

O'Donnell Snider Construction, LLC received the highest overall evaluation score based on the criterion, qualifications, methodology, experience in similar projects, and pricing. The remaining vendor was eliminated due to higher pricing and lower evaluation score.

Amount

\$2,585,316 project price
500,000 owner contingency
\$3,085,316

Board Summary

Board Date: February 29, 2024

Pavilion/Department: Lyndon B. Johnson Hospital

Item Description: LBJ Hospital Expansion – Existing Parking Garage Demolition and Sitework

Purchasing Number: 23/0499

Estimated Cost: \$3,085,316 (Harris Health Bond)

Project Elaboration: The project scope includes general early site work to prepare for the upcoming new LBJ Hospital, North Garage, and Central Utility Plant (CUP) projects. The scope includes installation of site construction fencing, implementation of the Stormwater Pollution Prevention Plan (SWPPP), clearing and grubbing, demolition of existing paving, partial demolition of the existing three-level precast parking garage, relocation of some utilities, and the relocation and filling of existing detention ponds. Portions of the garage will remain that surround the existing CUP that serves the adjacent Outpatient Center (OPC) that will remain until the new CUP is completed. Site enabling scope must be completed before the start of the new hospital and CUP projects.

MWBE Participation Goal: 30%

Estimated Total Construction Cost: \$3,085,316

- **Construction Bid:** \$2,585,316
- **Owner's Contingency:** \$500,000

Contractor: O'Donnell/Snider Construction, LLC

Based on a Harris Health System Facilities Planning and Purchasing review of the Competitive Sealed Proposal (CSP) responses, O'Donnell/Snider Construction, LLC is the recommended vendor of choice based on their submission and score at 92.55% in the overall ranking based on the criterion, qualifications, methodology, experience in similar projects, and pricing.

Item	Criterion/Offer Reference	Maximum Value
a.	Firm Qualifications/Past Performance on Similar Projects	15%
b.	Firm Experience with Medical and Government Projects	15%
c.	Organization and Project Methodology	10%
d.	Safety Record	5%
e.	Fiscal and Bonding Capacity	5%
f.	Pricing	50%
	Total Score	100%

Other vendor(s) that responded to the CSP are as follows:

- O'Donnell Snider Construction, LLC - Overall ranking score of 92.55%
- SpawGlass Civil Construction, Inc.- Overall ranking score of 78.58%

Financial Analysis: Bid Tabulation



DeWight Dopslauf, C.P.M., CPPO
Harris County Purchasing Agent

February 19, 2024

[Board of Trustees](#)
[Harris Health System](#)
[Harris County, Texas](#)

RE: Job No. 23/0500

Members of the Board:

Please approve the following award on the basis of lowest priced proposal meeting requirements:

Description: Construction of New Parking Garage at Lyndon B. Johnson Hospital for Harris Health System

Proposals Received: Four (4) on February 5, 2024 (see attached)

Vendor: O'Donnell Snider Construction, LLC

Amount: \$32,675,624 project price
3,300,000 owner contingency
\$35,975,624

Evaluated by: X Evaluation Committee X Harris County Purchasing

Justification: To construct a 255,767 square foot new garage and precast parking structure that contains offices, MEP rooms, I.T. rooms, and space designated for future community retail development at LBJ Hospital. The owner contingency provides for coverage on unanticipated costs throughout the construction project.

Sincerely,

DeWight Dopslauf
Purchasing Agent

MNG

Attachments

cc: Esmail Porsa, M.D., President & CEO
Patrick Casey, Healthcare Systems Engineering
Vendors

FOR INCLUSION ON BOARD OF TRUSTEES AGENDA FEBRUARY 29, 2024

**Competitive Sealed Proposal for Construction of New Parking Garage at Lyndon B. Johnson Hospital
for Harris Health System**

Four (4) proposals were received as follows:

<u>Vendors</u>	<u>Price</u>
O'Donnell Snider Construction, LLC	\$32,675,624
Satterfield & Pontikes Construction, Inc.	\$34,792,000
Houston Security 101	\$ 326,984
Harvey Builders	

Evaluation Information

The Evaluation Committee consisted of representatives from Harris Health System's Facilities PMO, and a representative from the Office of the Harris County Purchasing Agent. Upon careful evaluation of the proposals, the Evaluation Committee selected O'Donnell Snider Construction, LLC on the basis of lowest priced proposal meeting the requirements and needs of Harris Health System.

O'Donnell Snider Construction, LLC received the highest overall evaluation score based on the criterion, qualifications, methodology, experience in similar projects, and pricing. The remaining vendors were eliminated due to higher pricing and lower evaluation scores.

Amount

\$32,675,624 project price
3,300,000 owner contingency
\$35,975,624

Board Summary

Board Date: February 29, 2024

Pavilion/Department: Lyndon B. Johnson Hospital

Item Description: LBJ Hospital Expansion – Parking Garage Construction

Purchasing Number: 23/0500

Estimated Cost: \$35,975,624 (Harris Health Bond)

Project Elaboration: The proposed garage will be a new 255,767 square foot precast parking structure that contains offices, MEP rooms, I.T. rooms, and space designated for future community retail development on the first level. A key aspect of the proposed garage and location will be providing LBJ visitors with convenient parking near the new LBJ Expansion Hospital as well as to the existing/legacy LBJ Hospital. The new parking garage will include:

- Four (4) Level Precast Parking Garage with 672 spaces and capacity for future vertical expansion of up to seven (7) total levels
- EV parking and flood prevention system.
- Approximately 2,000 square feet of enclosed office space for the Farm staff with direct access to the Farm.
- Approximately 320 square feet of enclosed office space for the Security staff.
- 10,600 square feet of shell space for future tenant

MWBE Participation Goal: 30%

Estimated Total Construction Cost: \$35,975,624

- **Construction Bid:** \$32,675,624
- **Owner's Contingency:** \$3,300,000

Contractor: O'Donnell/Snider Construction, LLC

Based on a Harris Health System Facilities Planning and Purchasing review of the Competitive Sealed Proposal (CSP) responses, O'Donnell/Snider Construction, LLC is the recommended vendor of choice based on their submission and score at 98.28% in the overall ranking based on the criterion, qualifications, methodology, experience in similar projects, and pricing.

Item	Criterion/Offer Reference	Maximum Value
a.	Firm Qualifications/Past Performance on Similar Projects	15%
b.	Firm Experience with Medical and Government Projects	15%
c.	Organization and Project Methodology	10%
d.	Safety Record	5%
e.	Fiscal and Bonding Capacity	5%
f.	Pricing	50%
	Total Score	100%

Vendor(s) that responded to the CSP are as follows:

- O'Donnell Snider Construction, LLC - overall ranking score of 98.28%
- Satterfield & Pontikes Construction, Inc. – overall ranking score of 86.02%
- Houston Security 101 – vendor did not submit the required bid bond.
- Harvey Builders – vendor did not submit the required pricing sheet.

Financial Analysis: Bid Tabulation

BOARD OF TRUSTEES

Meeting of the Board of Trustees

HARRISHEALTH
SYSTEM

Thursday, February 29, 2024

Presentation Regarding Update on Strategic Facilities Plan and Debt Issuance

Update on Strategic Facilities Plan and Debt Issuance Timeline

Paige Abernathy, HCAO

Victoria Nikitin, Chief Financial Officer

Louis Smith, Chief Operating Officer

Sara Thomas, Chief Legal Officer

Maria Cowles, Chief Strategy Officer

HARRISHEALTH

High Level Strategic Facilities Plan Timeline

LBJ Campus

Estimated Scope	Start Design/Assessment	Start Procurement	Start Construction	Estimated Duration
New Hospital (multiple phases over 4 major projects)	Completed	2023 Q4	2024 Q2	59 months
Legacy Hospital (multiple phases/projects; dependent on Behavioral Health strategy)	2024 Q1	2025 Q2	2026 Q2	57 months
Medical Office Building (currently projected based on service needs)	2028 Q3	2029 Q3	2030 Q1	24 months

Ben Taub Campus

Estimated Scope	Start Design/Assessment	Start Procurement	Start Construction	Estimated Duration
BT ICUs - 4 Phases	2023 Q4	2024 Q3	2025 Q1	48 months
BT Bed Tower (120 Beds)	2025 Q4	2026 Q4	2027 Q2	36 months

Ambulatory Care Services

Estimated Scope	Start Design/Assessment	Start Procurement (Bidding)	Start Construction	Estimated Duration
Net New Health Center (Number 1)*	2026 Q1	2026 Q4	2027 Q2	24 months
Net New Health Center (Number 2)*	2028 Q2	2029 Q1	2029 Q3	24 months
Net New Health Center (Number 3)*	2029 Q1	2029 Q4	2030 Q2	24 months

*Net New Health Centers are planned to be located one each in precincts 2, 3 and 4 in the Harris Health Identified Area of Need

High Level Debt Issuance Timeline

- Harris Health Administration continues to work closely with the Harris County Attorney's Office, Harris County Office of Management and Budget, and financial advisors Masterson and Hilltop regarding future debt issuance.
- Harris Health's financial advisors work with Administration to complete the financial modeling and then jointly collaborate with the County to ensure agreement with the model.

High Level Debt Issuance Timeline

- Harris Health anticipates going to the bond market between Fall 2024 and Spring 2025.
- Once the bonds are issued, bond proceeds must be substantially spent within 36 months, so timing of the issuance is very important.
- Harris Health will support construction activities between now and the bond issuance with interim financing and operating dollars allocated to this purpose.
- A debt transaction generally requires 3-6 months from start to finish, depending on structure and complexity.
- Harris Health Administration, together with the Harris County Attorney's Office and outside advisors, will prepare and present the following items to this Board and Commissioners Court in connection with each transaction:
 - **Go-Forward Order** to adopt plan of finance and transaction team;
 - **Bond Order** to authorize delegation of sale and specify terms, including continuing disclosure undertaking; and
 - **Ratification Order** to ratify terms of sale, final documents, and pay costs of issuance.

Next Steps – Construction Contracts

- Vendor selection (4 vendors) will occur February 2024.
- Harris Health Administration anticipates the following timeline regarding the Board's consideration of approval of construction contracts in 2024:
 - Request in March 2024 for approximately \$30M in contracts
 - Request in November 2024 for approximately \$300M in contracts

LYNDON B. JOHNSON HOSPITAL CAMPUS EXPANSION GROUNDBREAKING

May 9, 2024 • 10 a.m. – 12 p.m.
Lyndon B. Johnson Hospital

SAVE THE DATE
INVITATION TO FOLLOW



Thursday, February 29, 2024

Presentation and Consideration of Approval of Revisions to the
Harris County Purchasing Manual

HARRISHEALTH SYSTEM

Revisions to Harris Health Purchasing Policy

February 29, 2024

Background

Drivers for Change:

- Evaluation of Purchasing appropriate for Hospital & Health System
- Alignment with other urban hospital districts that do not follow County Purchasing Act
- Higher volume of procurements following successful bond proposition

Goals:

- Preservation of M/WBE Program
- Maintain transparency

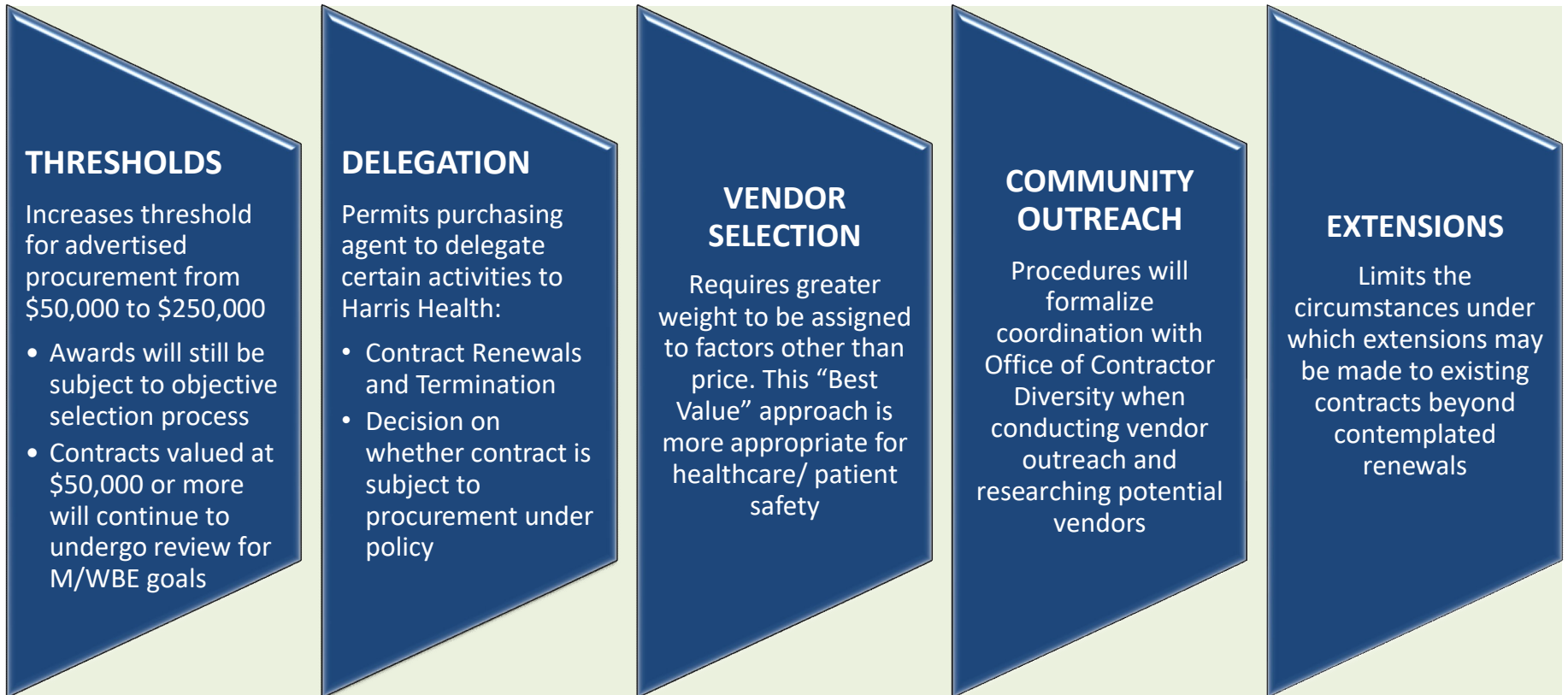
Benefits:

- Increase speed of procurement
- Develop subject matter expertise by transitioning certain responsibilities to Harris Health Administration:
 - Contracts administration will handle negotiation, execution, evaluation, and minor disputes

Current State

- Pursuant to statute, the Harris County Commissioners Court can set the method by which Harris Health makes purchases
- In 1991, Commissioners Court directed that Harris County Purchasing Agent oversee the purchasing functions of Harris Health
 - Prior to 1991, purchasing was performed by internal Harris Health department
- Existing Purchasing Manual modeled after County's purchasing policy and was never evaluated for use by a hospital system
- Manual references County Purchasing Act and diverges from practices used by other hospital districts in Texas (Parkland, UMC El Paso, University Health System)

Key Procurement Policy Changes



Anticipated Impact of Changes

- Fewer resources will be devoted to preparing competitive solicitations, freeing these resources up to carry out other sourcing responsibilities
- Purchases can be completed more efficiently, resulting in higher department satisfaction and less holdover periods
- Reduces extensions of existing contracts
 - M/WBEs will have an opportunity to earn business sooner than they would have under existing policy

Future Purchasing Items– through Fiscal Year 2024

- March: Harris County Commissioners Court considers policy
- June: Purchasing Agent distributes quarterly informational report on purchases of more than \$100,000
- August: Board authorizes execution of an interlocal cooperation contract with Harris county for purchasing office
- Fall 2023: Purchasing agent adopts procedures to implement new purchasing policy in coordination with Harris Health administration and legal

Questions and Acknowledgments

A big thank you to:

- Dewight Dopslauf, Harris County Purchasing Agent
- Jack Adger, Assistant Harris County Purchasing Agent
- Michael Hill, Special Consultant to the CEO
- Louis Smith, Chief Operating Officer
- Monica Carbajal, Chief Administrative Officer
- Maria Cowles, Chief Strategy Officer
- Nathan Bac, Assistant County Attorney



**PURCHASING POLICY
OF
HARRIS HEALTH SYSTEM**

Approval by Harris Health System Board of Trustees X.XX.XX

Commissioners Court X.XX.XX

FOREWORD

This Purchasing Policy (the “Policy”) has been approved and adopted by official action of the Harris Health Board of Trustees (the “Board”) and the Harris County Commissioners Court (the “Commissioners Court”). It is intended to establish the standards to be observed when employees of Harris Health or the Harris County Purchasing Agent make Purchases on Harris Health’s behalf. It does not apply to the following: certain Ad Hoc Contracts, including Revenue Contracts related to the provision of treatment or research activities by Harris Health; federally-funded purchases; or Purchases made through a cooperative purchasing or Group Purchasing Organization.

Readers should note this policy is current as of the date of publication. Should circumstances dictate, this document will be revised and submitted for re-approval by the Board and Commissioners Court. Re-approval shall not be required if a revision is made to conform this Policy with Board-adopted policies or applicable federal, state or local ordinances, statutes, regulations, rules, policies, or guidelines.

This document dated March 26, 2024, supersedes all previous Harris Health procurement manuals or policies.

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GLOSSARY OF TERMS

Ad Hoc Contract	A contract that is expressly authorized by Texas statute or necessary to fulfill Harris Health’s statutory mandate to provide medical aid with a Vendor that is selected without involving the Office of the Purchasing Agent. For purposes of this Policy, Ad Hoc Contracts include the following contracts: real property leases, employment contracts, contracts for Professional Services that are not listed in Tex. Gov’t Code Chapter 2254, Interlocal Agreements for Items other than purchasing services, medical school affiliation agreements, and agreements with accreditation bodies.
Advertised Competitive Procurement	The process in which the Purchasing Office procures Items through the development of specifications and the solicitation of bids or proposals through advertisement within the legal time frame. This process is utilized when the anticipated expenditure exceeds the competitive bid limit (currently \$250,000 for Harris Health departments).
Amendment	A legally enforceable modification to an existing Contract that is prepared or reviewed by legal counsel for Harris Health.
Best Value	An approach to evaluating Offerors that is characterized by greater autonomy and flexibility than the lowest bid standard and that typically involves consideration of a number of relevant factors that are clearly identified in the Advertised Competitive Procedure. These factors may include quality, reliability, delivery and warranty terms, prior Vendor performance and financial resources, anticipated economic impact, patient satisfaction, and such other factors as are outlined in applicable statute(s).
Bidder (non-resident)	A person or entity submitting a bid whose principal place of business is not in the State of Texas, including a contractor whose ultimate parent company or majority owner whose principal place of business is not in the State of Texas.
Bidder (Texas resident)	A person or entity submitting a bid whose principal place of business is in the State of Texas, including a contractor whose ultimate parent company or majority owner has its principal place of business in the State of Texas.
Calamity	An event causing great and often sudden damage or distress.
Capital Assets	Real or personal property that has a value equal to or greater than \$5,000 and an estimated life of at least one year. Capital assets may include: Buildings and building improvements • Construction in progress • Leasehold improvements • Fixed Equipment • Major

	Movable Equipment • Vehicles, and Right-of-Use Assets for Facilities, Equipment, and Subscription-Based Assets. All Purchases of land and land improvements are Capital Assets.
Competitive Procurement Threshold	Value at which Advertised Competitive Procurement Procedure must be followed. The current threshold value is \$250,000.
Construction Projects	Projects carried out in connection with the construction, alteration, conversion, improvement, refurbishment, rehabilitation, repair, decommissioning, demolition, or dismantling of a new or existing structure that is owned, leased or operated by Harris Health.
Contract	Any written agreement that binds Harris Health into a relationship with another party and states the terms, conditions, pricing, and responsibilities of each party. A stand-alone Purchase Order issued to a Vendor at the conclusion of an Invitation for Bid or pursuant to a GPO agreement is also a Contract. Whenever the context so permits or requires, the use of the word Contract shall not be construed to include an Ad Hoc Contract.
Cooperative Purchasing Program	As permitted by Texas Government Code § 271.102, a program that allows Harris Health to contract with vendors whom other local governments or cooperative organizations have selected pursuant to a competitive procurement process. Purchases from a Cooperative Purchasing Program do not require the local government to seek its own competitive bids.
Governing Authority	Harris Health System Board of Trustees or the Commissioners Court of Harris County, Texas.
Group Purchasing Organization (“GPO”)	A group purchasing organization (“GPO”) is an organization whose members (hospitals, clinicians, physicians, technicians, government entities, etc.) have joined together to realize savings and efficiencies by aggregating purchasing volume and using that leverage to negotiate discounts with manufacturers, suppliers and distributors. A GPO provides its members with access to Items at the lowest cost through national and locally negotiated contracts.
Interlocal Agreement	A contract between governmental agencies to ensure efficiency and effectiveness in performing governmental functions and services as such term is defined by Texas Government Code (TGC) §§ 791.001 et seq.
Item	Any service, equipment, goods, or other tangible or intangible personal property.

Offeror	A general term for a person or entity that submits a bid, proposal, statement of qualifications, or any other submittal in response to a competitive selection procedure managed by the Purchasing Agent, no matter which competitive selection procedure is utilized.
Personal Services	Services which are only performable by one or more individuals, whether as a sole proprietor or employee of a company or corporation; provided, however if, the individuals are employees, they must be named in the Contract as the only individuals authorized to perform the services.
Professional Services	Services which require (a) labor and skill that is predominantly mental or intellectual or (b) a person with special knowledge or attainment of either (i) a high order of learning and technical skill or (ii) professional license to perform the services. Professional Services that are prescribed by Texas Government Code §§ 2254.001 et seq are referred to as “Chapter 2254 Professional Services”.
Purchase	Any acquisition of an Item; all purchases using public funds must be made by the Purchasing Agent as provided in this manual.
Purchase Order	An official document issued by the Purchasing Agent to a Vendor authorizing the expenditure of funds for Items.
Renewal	The continuation of a Contract for an additional term, the total number and duration of which is specified in the Contract. A Renewal is not the same as an extension.
Requisition	An electronic document initiated by User Departments to submit a request to the Purchasing Office for the Purchase of an Item.
Revenue Contract	A Contract with a third party that defines the terms under which Harris Health will receive revenue from the third party for services that are not directly performable by Harris Health or related to treatment or research. Examples of Revenue Contracts include gift shop and concession contracts, vending machine contracts, and equipment reprocessing contracts.
Standardized Item	An Item or group of Items that has been evaluated by an authorized Harris Health standardizing body, approved and adopted as the standard Item of its type. A Standardized Item is the only one of its type approved for general use under special circumstances.
Unadvertised Competitive Procurement	The process used by the Purchasing Office when an Advertised Competitive Procurement Procedure is not required by law. Generally, this process is used for Revenue Contracts, Purchases less

	than the Competitive Procurement Threshold, and for Purchases utilizing state contracts or cooperatives.
User Department	Generally, a Harris Health department requiring the acquisition of Items by the Purchasing Office.
Vendor	A person or business that is under Contract with Harris Health to provide an Item. Another term for Vendor is supplier or contractor.

I. OVERVIEW

Consistent with good business management and its commitment to support the practice of equal opportunity, the Harris Health Board of Trustees adopts this Policy to promote ethical and effective procurement. The primary purpose of this Policy is to establish rules for Purchases that embody the following principles:

- Purchases are made in compliance with applicable laws;
- Items are procured efficiently and within any timeframes established by Harris Health in an Interlocal Agreement for the services of the Purchasing Agent or through procurement planning;
- Items are procured in a manner that that aligns with Harris Health’s mission, vision, and values, and that benefits Harris Health and the taxpayers of Harris County, Texas;
- Offerors are fairly and equitably treated; and
- Competition in contracting.

This Policy does not confer any rights on actual or potential Offerors, Vendors, or any other person.

A. GOVERNING AUTHORITY AND DELEGATION

This Policy implements the authority of (1) the Harris Health Board of Trustees to manage, control, and administer the hospital system pursuant to Texas Health & Safety Code Section 281.047 and (2) the Harris County Commissioners Court to prescribe the method by which a hospital district makes Purchases. As permitted by Texas Health & Safety Code Section 281.049, the Harris County Commissioners Court previously appointed the Purchasing Agent to direct the procurement activities of Harris Health and is hereby delegating to Harris Health the power to supervise the Purchasing Agent in the performance of the functions described in Article II (when performed on Harris Health’s behalf).

In addition, on the date of this Policy’s initial adoption, the Commissioners Court issued a resolution delegating to the Board of Trustees its power to prescribe the method by which Purchases of Items necessary to fulfill Harris Health’s statutory mandate to provide medical aid are made to the Board of Trustees. The delegation in this paragraph shall extend to the Purchase of Capital Assets and Construction Projects.

B. BACKGROUND LAW AND ELECTIONS

This Policy reflects several applicable state and local laws and regulations, including:

- Texas Health and Safety Code Chapter 281 – Hospital Districts in Counties of at Least 190,000
- Texas Government Code Chapter 2251 – Prompt Payment Act
- Texas Government Code Chapter 2252 – Contracts with Governmental Entity
- Texas Government Code Chapter 2253 – Public Work Performance and Payment Bonds
- Texas Government Code Chapter 2254 – Professional and Consulting Services
- Texas Government Code Chapter 2269 – Contracting and Delivery Procedures for Construction Projects

- Texas Local Government Code Chapter 271 – Purchasing and Contracting Authority of Municipalities, Counties, and Certain Other Local Governments
- Texas Local Government Code Chapters 171 and 176 – Conflicts of Interest and Disclosure Requirements
- Texas Health & Safety Code Section 361.426 – Governmental Entity Preference for Recycled Products
- Texas Government Code Chapter 791 – Interlocal Cooperation

C. APPLICABILITY

This Policy applies to the procurement of all Items to be purchased with non-federal funds; additional and/or distinct requirements and policies may apply to the procurement of Items with federal funds. All procurement will be done in accordance with applicable background law.

II. THE ROLE OF THE PURCHASING AGENT

A. GENERAL RESPONSIBILITIES

The Purchasing Agent is responsible for the Purchase of all Items that must be competitively bid or are subject to a competitive proposal process, excepting Purchases (1) associated with Ad Hoc Contracts or (2) for Items essential to Harris Health’s operations that, if subject to Advertised Competitive Procurement, would substantially impair or inhibit operations. Further, the Purchasing Agent shall supervise all Purchasing Office employees, uphold the Code of Conduct, and ensure that Purchases are in compliance with this Policy and any other Harris Health policies and procedures which are referenced in Part VII of this Policy. The Purchasing Agent may delegate his or her authority under this Policy, and in circumstances where time is of the essence to purchase Items and the Purchasing Agent is unable to efficiently procure such Items, shall delegate his or her authority to persons specified in writing by the President and Chief Executive Officer or the Board of Trustees.

B. PROCUREMENT ACTIVITIES

The duties of the Purchasing Agent include, but are not limited to, the following broad categories of procurement activities that are carried out by the Purchasing Office in consultation with various Harris Health departments and legal counsel, when noted:

1. Establish Procedures

The Purchasing Agent establishes procedures that govern the Purchase of Items. Such procedures shall ensure openness, fairness and integrity in the purchasing process, and are designed so that User Departments are able to obtain needed Items in a timely, cost-effective manner in accordance with applicable state laws. All procedures are maintained by the Purchasing Office and are for internal use.

2. Procurement Planning

The Purchasing Office participates in routine meetings with Harris Health’s Contracts Administration and User Departments to discuss and monitor progress towards (a) setting procurement goals that align with Harris Health’s strategic plan and expressed operational needs; (b) completing necessary procurement activities; (c) optimizing resources to achieve

procurement goals; and (d) effectuating the procedures outlined in Article II.B.1 and any Contract requirements.

3. Select Competitive Procurement Method

The Purchasing Office identifies the method of procurement that will enable Harris Health to honor the principles set forth in Article I. Generally, this duty involves identifying whether a Purchase (a) will be made through an informal “unadvertised” procurement or (b) a formal “advertised” procurement and (c) whether an exemption is available.

a. Unadvertised Competitive Procurement Procedure

This method is appropriate for Purchases of Items valued at or below the Competitive Procurement Threshold and purchases made through a GPO, federal or state agency, or a Cooperative Purchasing Program (Refer to Section III.C).

b. Advertised Competitive Procurement Procedure

This method is required for the purchase of Items valued above the Competitive Procurement Threshold that are not eligible for exemption. Purchases that fit this criterion must be advertised and comply with all applicable Advertised Competitive Procurement requirements (Refer to Section III), including notice.

4. . Research and Source Potential Vendors

The Purchasing Office researches and, in collaboration with the Harris Health Office of Contract Diversity as further described in paragraph HG, sources potential Vendors for Items that meet User Department requirements. When State laws allow procurement through federal, state, and local governmental agencies as well as cooperative and Group Purchasing Organizations, the Purchasing Agent or his designee is the authorized representative of Harris Health to make Purchases through such agencies or organizations. The Purchasing Agent is also the authorized representative to initiate requests for the development of Interlocal Agreements for purchasing services.

5. Administer Local Preference Program

The Purchasing Office shall decide whether local preference should be given under Local Government Code § 271.905 and may consider doing so on a case-by-case basis. In relevant situations, the Purchasing Office shall use the following criteria in determining whether to recommend a higher bid from a local Offeror:

- a. the employment of residents of Harris Health created through the award of the bid to the local Offeror; and
- b. any increase in tax revenue created through the award of the bid to the local Offeror.

6. Report on Unadvertised Competitive Procedure and Group Purchase Organization Expenditures

To provide transparency of Harris Health purchasing activities for the prior year, the Purchasing Office submits a report to the Board of Trustees following the close of each fiscal year. Additionally, quarterly reports of Purchases of more than \$100,000 made following an Unadvertised Competitive Procedure and actual GPO activity during the year will be provided to the Board of Trustees as an informational report.

C. CONSOLIDATE AND AVOID SEQUENTIAL PURCHASES

The Purchasing Office shall: (i) seek to consolidate procurements of the same Item to achieve economies of scale whenever feasible and approved by the impacted User Department(s); (ii) ensuring that an analysis of leases versus purchase alternatives has been performed by the appropriate User Department; and (iii) conducting other appropriate analyses as further described in paragraph D. The Purchasing Office shall not break down requirements into multiple Purchases (commonly called “bid splitting” or “unbundling”) merely to permit use of micro or small purchase procedures or avoid any competitive procurement requirements that apply. However, larger requirements may be broken into smaller ones to afford small, woman and minority businesses, including HUBs as defined by state law, the opportunity to participate in Harris Health’s procurements.

D. VALUE ENGINEERING

The Purchasing Office in conjunction with the applicable User Department may use value engineering methods for Construction Projects of sufficient size to offer reasonable opportunities for cost reductions. The practice of value engineering includes a certain amount of expense which must be justified by potential cost savings. Accordingly, the Purchasing Office and applicable User Department shall justify the need for value engineering and must be able to demonstrate that there is a distinct opportunity for financial benefit to warrant the added cost of a value engineering effort.

E. EVALUATION OF COST AND PRICE

The Purchasing Office shall ensure the Purchase of Items are completed at a fair and reasonable price and, where applicable, the Purchase provides the Best Value. A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

1. Independent Cost Estimate

An Independent Cost Estimate (ICE) is the estimated cost of a proposed expenditure. An ICE assists in evaluating the cost reasonableness of a contractor’s proposed costs or prices on an objective basis.

Before issuing a solicitation in connection with an Advertised Competitive Procurement, Harris Health may develop an ICE for the Items to be purchased. If the solicitation will require a breakdown of estimated costs, the ICE should be broken down into the various cost elements.

2. Price and Cost Analysis

The Purchasing Office may recommend that Harris Health perform a price or cost analysis in connection with its procurement actions to determine cost reasonableness. A price analysis involves examination of the total proposed price without consideration of its separate cost elements and proposed profit. Price analysis shall be used to verify that the overall price offered is fair and reasonable. A cost analysis is the review and evaluation of any separate cost elements (e.g., labor, material, administrative) and profit or fee in an Offeror’s bid or proposal, as needed to determine a fair and reasonable price and to determine the degree to which the Offeror’s proposed costs represent the cost of performance of the contract, assuming reasonable economy and efficiency and to ensure

the costs are allowable, allocable, and related to the requirements. The decision to undertake an analysis of cost and price is made by the User Department.

F. FOSTER COMPETITION

The Purchasing Office shall conduct all procurement in a manner that provides an open and fair process for all Offerors. In order to ensure objective selection and eliminate unfair competitive advantage, Harris Health shall not accept bids or proposals from Offerors that develop or draft requirements or scopes of work that are prepared on Harris Health's behalf for incorporation into invitations for bid or requests for proposals.

To the greatest extent feasible Harris Health shall also avoid situations considered to be restrictive of competition, which include, but are not limited to, the following:

- Placing unreasonable requirements on Offerors in order for them to qualify to do business;
- Requiring excessive bonding;
- Encouraging noncompetitive pricing practices between entities or between affiliated companies;
- Making noncompetitive awards to consultants that were previously awarded Contracts to assess and provide recommendations that may be implemented under a new Contract; and
- Specifying only a brand name product instead of allowing an equal product to be offered and describing the performance or other relevant requirements of the procurement.

G. COORDINATE WITH OFFICE OF CONTRACTOR DIVERSITY ON M/WBE PROGRAM

Pursuant to the Harris Health Minority- and Woman-Owned Business Enterprise Program Policy, as adopted by the Board of Trustees and amended from time to time, the Purchasing Office shall coordinate with the Office of Contractor Diversity to incorporate M/WBE goals into Advertised Competitive Procurements. This duty will require the Purchasing Office to incorporate MWBE goals in Advertised Procurements. Additionally, the Purchasing Office shall participate in several local events and seminars alongside the Office of Contract Diversity to aid and promote opportunities for small and M/WBE businesses.

H. ISSUE PURCHASE ORDERS

Whenever possible, Purchase Orders are issued prior to the delivery of goods, equipment or personal property, the provision of services by a Vendor, or the expenditure of Harris Health funds. The purpose of this requirement is to assure that the Purchasing Agent, Office, or, in the case of Ad Hoc Contracts, the Contracts Administration Department has reviewed each transaction and has deemed it to be in compliance with this Policy and further that, when appropriate, Contracts have been reviewed by Harris Health's legal counsel and executed by an authorized signatory.

Emergency situations may arise that require a Purchase Order to be issued after delivery of goods or performance of services; such situations will be handled on a case-by-case basis. A representative of the Purchasing Office should be contacted as soon as possible when an

emergency occurs. For example, if an emergency occurs after 5 pm or on a weekend or holiday, the Purchasing Office should be notified on the next business day.

I. MODIFICATION OF ADVERTISED COMPETITIVE PROCUREMENT DOCUMENTATION

After selection of a Vendor but before a Contract is entered, the Purchasing Agent may negotiate a modification of the requirements if the modification is confirmed by the User Department or Harris Health executive leadership to be in the best interests of Harris Health and does not substantially change the scope of the anticipated Purchase or, when an Invitation for Bid (IFB) is used, cause the selected Vendor's pricing to exceed the next lowest bid.

J. CONTRACT RENEWALS

The Purchasing Agent may renew an existing Contract without seeking approval of the Board of Trustees, provided:

1. the Contract is renewed without any change in the terms and conditions, including pricing, that are not already contemplated in the Contract, and
2. the renewal option was included in the Advertised Competitive Procurement materials, if applicable, and Harris Health's right to exercise the renewal option is stated in the Contract, and
3. the amount of the Renewal is allocated in the relevant fiscal year budget, as evidenced by an approved Requisition or verification from the Finance Department; and
4. any increase in the overall Contract value is less than \$250,000.

Any Renewal that does not satisfy all of the above elements shall require the approval of the Board of Trustees.

K. CONTRACT EXTENSIONS

The Purchasing Office shall minimize the use of extensions, which serve to keep a Contract active beyond the initial term and any optional renewal periods stated in the Contract. Notwithstanding the foregoing, the Purchasing Agent may extend an existing Contract without seeking approval of the Board of Trustees under the following circumstances:

1. The extension is necessary to address an immediate operational or service delivery need of Harris Health or qualifies for a Discretionary Exemption (see Article III.D); and
2. The extension is limited in duration and cost to not more than one additional option period, as defined in the Advertised Competitive Procurement or Contract, or
3. If the Advertised Competitive Procurement does not contain a defined option period, the extension is limited to one year.

III. PROCUREMENT METHODS

The Purchasing Office shall select the proper method of procurement depending on the anticipated expenditure amounts and the type of Items being procured in accordance with the requirements below. Once a procurement method is selected, the Purchasing Office will generate the

procurement documents, advertise, receive, and facilitate evaluation of the responses received and make an award recommendation to the Board of Trustees.

A. INFORMAL PROCUREMENTS

Informal procurements, otherwise known as Unadvertised Competitive Procurements, are used by the Purchasing Office when Advertised Competitive Procurement is not required by law. Generally, this process is used for Purchases less than the Competitive Procurement Threshold or for Purchases utilizing state contracts or cooperatives. However, Harris Health reserves the right to advertise for bids or proposals for Purchases of any amount.

The Purchasing Agent will allow for as much competition as practical, consistent with Purchasing Office procedures, User Department requirements, the dollar value of procurement, and, with respect to Purchases of Items related to direct patient care, patient welfare. Typically, pricing and delivery terms can be requested and confirmed by email, telephone, or fax, if advertised solicitations are not required.

1. Micro Purchases

Micro purchases are acquisitions of Items whose aggregate price does not exceed the micro purchase threshold, which is set at \$10,000. To the extent practicable, Harris Health shall distribute micro purchases equitably among qualified Offerors. Micro purchases may be awarded without soliciting competitive quotations if Harris Health considers the price to be reasonable based on research, experience, purchase history or other information, and documents its files accordingly.

2. Small Purchases

Small purchases are acquisitions of Items whose aggregate price is more than the micro purchase threshold but does not exceed the Competitive Procurement Threshold of \$250,000. If small purchase procedures are used, price or rate quotations must be obtained from an adequate number of qualified sources unless the Purchasing Agent instructs otherwise. The Purchasing Agent may, in his or her discretion, award purchases without soliciting competitive quotations if the price is considered to be reasonable based on research, experience, purchase history or other information provided by User Departments. Although not required, User Departments may include quotes to aid the buyer in satisfying this section.

B. FORMAL PROCUREMENT METHODS

Formal procurements, also known as Advertised Competitive Procurements, are used by the Purchasing Office when Purchases are estimated to be in excess of the Competitive Procurement Threshold and are not exempt under Article III, Part C. The Purchasing Agent may determine which Advertised Competitive Procurement method to use: either sealed bidding, a competitive proposal procedure described below, the reverse auction procedure, or the methods described by Texas Government Code Chapter 2269.

With the exception of procurement of Construction Manager At Risk services, the Purchasing Office is authorized to publish notice of an Advertised Competitive Procurement in accordance with this Policy or other applicable law and does not need to obtain prior approval of the notice, procurement requirements and/or specifications from the Board of Trustees. The Purchasing Office is also authorized to extend the due date for Offeror response when the extension is

necessary due to errors in the notice or procurement documents, to receive procurement responses, and to prepare an award recommendation letter for presentation to the Board of Trustees. Award recommendation letters must include a summary of responses.

1. Sealed Bids

Sometimes known as “competitive bids”, the sealed bid method requires the Purchasing Office to publicly solicit bids, through an Invitation for Bid (IFB), and award a Contract (lump sum or unit price) to the responsible Bidder whose bid, conforming with all the material terms and conditions of the IFB, is responsive and the lowest in price. This process may be undertaken only under the supervision of the Purchasing Agent.

The sealed bid method is appropriate when the following conditions are present:

- A complete, adequate, and realistic specification or purchase description is available;
- Two or more responsible Bidders are willing and able to compete effectively for the business; and
- The procurement lends itself to a firm fixed price contract and the selection of the successful Bidder can be made principally on the basis of price.

If sealed bids are used, the following requirements apply:

- Bids must be solicited from an adequate number of known suppliers, providing them sufficient response time prior to the date set for opening the bids. The IFB must be advertised at least once a week in a local newspaper of general circulation in the county, with the first publication occurring before the 14th day before the date of bid opening;
- The IFB, which will include any specifications and pertinent attachments, must define the Items in order for the Bidder to properly respond;
- Bids shall be received in a fair and confidential manner;
 - The Purchasing Office shall accept bids in hard-copy format or through electronic transmission.
- All bids will be opened at the time and place prescribed in the IFB. All bids must be opened at the same time;
- Opened bids shall be kept on file and available for inspection by anyone desiring to see them until the first anniversary of the date of opening. Opened bids are subject to disclosure under Chapter 552, Government Code;
- A firm fixed price contract award will be made in writing to the lowest responsive and responsible Bidder. Where specified in bidding documents, factors such as discounts, transportation cost, and life cycle costs will be considered in determining which bid is lowest. Payment discounts will only be used to determine the low bid when prior experience indicates that such discounts are usually taken advantage of; and
- All bids may be rejected for any reason. If a particular bid is rejected, the Purchasing Office shall document the reason for rejection.

2. Competitive Proposals

Also called contracting by negotiation, competitive proposals are used by the Purchasing Office when negotiation of pricing and payment methodology is desired, when factors other than price are to be evaluated, requirements cannot be described by detailed specifications, or the Offeror is expected to provide innovative ideas. The competitive proposals process may be undertaken only under the supervision of the Purchasing Office.

When competitive proposals are deemed appropriate, Harris Health shall utilize one of three competitive proposal forms: Competitive Sealed Proposals (“CSP”), a Request for Proposal (“RFP”), or a Request for Qualifications (“RFQ”). A CSP is a form of procurement used for Construction Projects in which both qualifications and price may be requested and used as evaluation factors to select a Vendor. An RFP is a form of procurement in which both qualifications and price are requested and used as evaluation factors. An RFQ is a form of procurement in which only technical qualifications are evaluated and price is not requested as part of the initial response nor used as an evaluation factor. In any case, the Purchasing Office shall coordinate and facilitate the appointment of a committee responsible for evaluation and negotiation of CSP, RFP, and RFQ responses. Members of an evaluation committee shall include at least one person from the Purchasing Office, one person from the User Department(s), and one or more persons from the Information Technology and/or Information Security Department, if applicable; others may be appointed as appropriate. The Evaluation Committee members shall be required to comply with Harris Health’s Evaluation Committee Guidelines.

Each type of competitive proposal method is described in further detail below.

a. Competitive Sealed Proposals (CSP)

Competitive Sealed Proposals (CSP) may be used for Construction Projects (e.g., the alteration, rehabilitation, or repair of a facility) that are expected to exceed the Competitive Procurement Threshold. The Purchasing Office shall publicly solicit for the CSP, the Evaluation Committee shall evaluate and select the responsible Bidder who provides the Best Value and overall highest ranking to Harris Health. This process may be undertaken only under the supervision of the Purchasing Agent.

If this method is used, the following requirements shall apply:

- An architect or engineer shall prepare construction documents for the project;
- The CSP shall include construction documents, selection criteria and the weighted value for each criterion, estimated budget, project scope, estimated project completion date, and other information that a contractor may require to respond to the request;
- The criteria in the CSP shall include price, and may also include: (1) the Offeror’s experience and reputation; (2) the quality of the Offeror’s Items; (3) the impact on the ability of Harris Health to comply with rules relating

to historically underutilized businesses; (4) the Offeror's safety record; (5) the Offeror's proposed personnel; (6) whether the Offeror's financial capability is appropriate to the size and scope of the project; and (7) any other relevant factor specifically listed in the CSP;

- The weighted value assigned to price must be at least 50 percent of the total weighted value of all selection criteria; provided, however, that if the Purchasing Agent determines that assigning a lower weighted value to price may be in the public interest, the Purchasing Agent may request Board of Trustees' approval to assign to price a weighted value of not less than 36.9 percent of the total weighted value of all selection criteria;
- Public notice of the time and place the response to CSP will be received and opened must be published in a newspaper of general circulation in Harris County once each week for at least two weeks before the deadline for receiving CSP responses;
- Purchasing Office shall receive, publicly open, and read aloud the names of the Offerors and any monetary proposals made by the Offerors;
- Within 45 days after the date on which the proposals are opened, the Evaluation Committee shall evaluate and rank each proposal submitted in relation to the published selection criteria;
- The Purchasing Agent shall facilitate the negotiation of a Contract with the selected Offeror;
- If a satisfactory Contract is not negotiated with the selected Offeror, the Purchasing Agent shall, formally and in writing, end negotiations with that Offeror and proceed to the next Offeror in the order of the selection ranking until a Contract is reached or all proposals are rejected; and
- Not later than the seventh business day after the date the Contract is awarded, Harris Health shall make the evaluations public, including any scores, and provide them to all Offerors.

b. Request for Proposal (RFP)

The Purchasing Agent may follow either: (i) the Alternative Multistep Competitive Proposal procedures or (ii) the Alternative Competitive Proposal Procedure for the Purchase of insurance, high technology Items, landscape maintenance, travel management, recycling, or other Items. An RFP is generally appropriate to obtain services such as consulting, construction management, estimating, or other technical or specialized services.

If this method is used, the following requirements shall apply:

- Public notice for the RFP must be made in the same manner as sealed bidding, except that the notice may include a general description of the Item to be purchased instead of the specifications describing the Item and may request the submission of unpriced proposals;

- RFPs shall identify all evaluation criteria and factors for award and their relative importance.
- Any response to publicized requests for proposals shall be considered to the maximum extent practical;
- On the date specified in the public notice, the Purchasing Office shall open the proposals and either: (i) for Purchases performed under the Alternative Multistep Competitive Proposal procedures, request pricing from qualified Offerors; or (ii) for Purchases performed under the Alternative Competitive Proposal procedures, conduct discussions and demonstrations with responsible Offerors who submit proposals determined to be reasonably susceptible of being selected for award;
- Harris Health shall have a written method for conducting technical evaluations of the proposals received and for selecting participants in the pricing phase of the selection;
- Offerors must be accorded fair and equal treatment with respect to any opportunity for discussion and revision of proposals, and revisions may be permitted after submission and before Contract award for the purpose of obtaining best and final offers.
- The award of the Contract shall be made to the responsible and responsive Offeror whose proposal conforms with all material requirements and is determined to be the lowest and best evaluated offer resulting from negotiation; and

All proposals that have been submitted shall be available and open for public inspection after the Contract is awarded, and a summary score sheet shall be provided to each Offeror to demonstrate Award was made to the responsive and responsible Offeror whose proposal is most advantageous to Harris Health, considering the relative importance of price and other evaluation factors.

c. Request for Qualifications (RFQ) / Qualifications-Based Procurement

When procuring Chapter 2254 Professional Services, Harris Health shall conduct its procurements in accordance with the Professional Services Procurement Act (the “Act”). Professional Services are defined by such Act to include, but are not limited to, accounting, architecture, landscape architecture, land surveying, medicine, optometry, professional engineering, real estate appraising, professional nursing or forensic science. Harris Health may not select a provider of Professional Services or award a Contract for Professional Services on the basis of competitive bids submitted for the Professional services, but shall make the selection and award:

- On the basis of demonstrated competence and qualifications to perform the services; and
- After selection, upon confirming a fair and reasonable price.

In procuring and contracting for architectural, engineering, or land surveying services, the Purchasing Office shall ensure compliance with Texas Government

Code Section 2254.004 and other applicable law. If this method is used, the following requirements shall apply:

- RFQs shall be publicized and identify all evaluation criteria and factors for award and their relative importance;
- Any response to publicized requests for qualifications shall be considered to the maximum extent practical;
- Harris Health shall have a written method for conducting technical evaluations of the qualifications received and for selecting recipients;
- An Offeror shall be selected on the basis of demonstrated competence and qualifications to perform the services; and
- The professional fees due under the Contract may not exceed any maximum provided by law.

C. ALTERNATIVE PROCUREMENT METHODS

1. Job Order Contracting

Job Order Contracting is a procurement method used for maintenance, repair, alteration, renovation, remediation, or minor construction of buildings when the work is of a recurring nature, but the delivery times, type, and quantities of work required are indefinite. Harris Health shall use a Job Order Contract only when a recurring need is anticipated.

A Job Order Contract outlines pre-established tasks and prices for these tasks, specifications, and general contract conditions, as well as a minimum and maximum quantity of services. Each job, task, or Purchase Order issued after Contract award and having a value of \$500,000 or more shall require Board approval.

Job Order Contracts may be awarded using Sealed Bids or Competitive Sealed Proposals as appropriate. Harris Health shall establish the maximum aggregate contract price when it advertises the contract opportunity. The Board of Trustees shall approve each job, task, or Purchase Order that exceeds \$500,000. The base term for a Job Order Contract may not exceed two years, and Harris Health may renew the Contract annually for not more than three additional years.

2. Alternates

Harris Health should generally not request “alternate” bids, i.e., two different systems or types of projects. However, in an effort to remain flexible in the bidding process for Construction Projects, Harris Health may set in place alternative deductibles or alternate add-ons.

When necessary, because of limited available funding, Harris Health may implement alternative deductibles by specifying the most expensive system as the base bid, and then listing deductive alternates in inverse priority order. Thus, in the case of limited funding, deductive alternates may be taken in numerical order as listed until the award can be made with available funds. These items must be clearly marked as such and, in the event of bids received over budget, may be “deducted” from the scope of the project.

Conversely, Harris Health may specify a list of potential “add-on” items to the base bid. These add-on items may be added to the scope of the project if sufficient funding is available. Regardless of the method used, all alternative deductibles/additions must be assigned a number in order of preference to be either eliminated or added. Offerors may not eliminate or add items from a bid process if they were not initially indicated as an alternative deductible or alternate add-on. Alternate deductibles should include, but not be limited to, items Harris Health may be able to complete on its own or items that would not have an adverse effect on the project if omitted.

3. Design-Build, Construction Manager-Agent, and Construction Manager-at-risk Alternatives for Public Works Projects

Pursuant to Texas Government Code Chapter 2269, Harris Health may procure certain services for public works projects using the design-build method, construction manager-agent method, or construction manager-at-risk method. The Purchasing Agent is authorized to use these alternative procurement methods in place of the CSP method.

a. Design-Build method

Harris Health may use the design-build method through a Contract with a single entity to provide both design and construction services for the construction, rehabilitation, alteration, or repair of a facility. A design-build firm must be a sole proprietorship, partnership, corporation, or other legal entity or team that includes an architect or engineer and a construction contractor.

Harris Health shall select or designate an architect or engineer who is independent of the design-build firm to act as Harris Health’s representative for the duration of the project.

Harris Health shall prepare a request for qualifications that includes general information on the project site, project scope, budget, special systems, selection criteria and the weighted value for each criterion, and other information that may assist potential design-build firms in submitting proposals for the project. Harris Health shall also prepare the design criteria package that includes more detailed information on the project. If the preparation of the design criteria package requires architectural or engineering services that constitute the practice of architecture or the practice of engineering within the meaning of the Texas Occupations Code, those services shall be provided in accordance with the applicable law.

The design criteria package must include a set of documents that provides sufficient information, including criteria for selection, to permit a design-build firm to prepare a response to Harris Health's request for qualifications and to provide any additional information requested. The design criteria package must specify criteria Harris Health considers necessary to describe the project and may include, as appropriate, the legal description of the site, survey information concerning the site, interior space requirements, special material requirements, material quality standards, conceptual criteria for the project, special equipment requirements, cost or budget estimates, time schedules, quality assurance and quality control requirements, site development requirements, applicable codes and ordinances, provisions for utilities, parking requirements, and any other requirement.

Harris Health may not require offerors to submit architectural or engineering designs as part of a proposal or a response to a request for qualifications.

For each design-build firm that responded to the request for qualifications, Harris Health shall evaluate the firm's experience, technical competence, and capability to perform, the past performance of the firm and members of the firm, and other appropriate factors submitted by the firm in response to the request for qualifications, except that cost-related or price-related evaluation factors are not permitted. Each firm must certify to Harris Health that each architect or engineer that is a member of the firm was selected based on demonstrated competence and qualifications, in the manner provided by Section 2254.004.

Harris Health shall qualify a maximum of five responders to submit proposals that contain additional information and, if Harris Health chooses, to interview for final selection. Harris Health shall evaluate the additional information submitted by the offerors on the basis of the selection criteria stated in the request for qualifications and the results of any interview. Harris Health may request additional information regarding demonstrated competence and qualifications, considerations of the safety and long-term durability of the project, the feasibility of implementing the project as proposed, the ability of the offeror to meet schedules, or costing methodology. As used in this subsection, "costing methodology" means an offeror's policies on subcontractor markup, definition of general conditions, range of cost for general conditions, policies on retainage, policies on contingencies, discount for prompt payment, and expected staffing for administrative duties. The term does not include a guaranteed maximum price or bid for overall design or construction.

The Evaluation Committee shall rank each proposal submitted on the basis of the criteria set forth in the request for qualifications.

Harris Health shall select the design-build firm that submits the proposal offering the Best Value for Harris Health on the basis of the published selection criteria and on its ranking evaluations. Harris Health shall first attempt to negotiate a Contract with the selected firm. If Harris Health is unable to negotiate a satisfactory Contract with the selected firm, Harris Health shall, formally and in writing, end all negotiations with that firm and proceed to negotiate with the next firm in the order of the selection ranking until a Contract is reached or negotiations with all ranked firms end. Not later than the seventh day after the date the Contract is awarded, Harris Health shall make the rankings public.

The selected design-build firm's engineers shall submit all design elements and construction documents in the time and form provided by law; provided, however, that all design elements shall be submitted to Harris Health prior to construction. Payment and performance bonds shall be provided in accordance with applicable law; provided, however, that no performance or payment bond is required for the portion of a design-build Contract that includes design services only.

b. Construction Manager-Agent method (CMA)

The "construction manager-agent method" is a delivery method by which Harris Health contracts with an entity to provide consultation, administrative, or project management

services during the design and construction phase and to manage multiple contracts with various construction prime contractors. A CMA represents Harris Health in a fiduciary capacity as an agent. The Contract with the CMA may require the CMA to provide administrative personnel, equipment necessary to perform duties under the proposal, on-site management, and other services specified in the Contract. A CMA may not: (i) self-perform any aspect of the construction, rehabilitation, alteration, or repair of the facility; (ii) be a party to a construction subcontract for the construction, rehabilitation, alteration, or repair of the facility; or (iii) provide or be required to provide performance and payment bonds for the construction, rehabilitation, alteration, or repair of the facility. The architect or engineer on a project may not serve, alone or in combination with another person, as the CMA unless the architect or engineer is hired to serve as the CMA under a separate or concurrent selection process conducted in accordance with Texas Government Code Chapter 2269, Subchapter E. When using the CMA method, Harris Health shall procure a general contractor, or trade contractors who will serve as the prime contractor for their specific portions of the work, and require performance and payment bonds in accordance with applicable laws. Harris Health shall select a CMA on the basis of demonstrated competence and qualifications in the same manner that an architect or engineer is selected under Texas Government Code Chapter 2254. A CMA shall maintain professional liability or errors and omissions insurance in the amount of at least \$1 million for each occurrence.

c. Construction Manager-at-Risk method (CMAR)

The "construction manager-at-risk method" is a delivery method by which Harris Health contracts with an architect or engineer for design and construction phase services and contracts separately with a construction manager-at-risk (CMAR) to serve as the general contractor and to provide consultation during the design and construction, rehabilitation, alteration, or repair of a facility. A CMAR assumes the risk for the project at the contracted price as a general contractor and provides consultation to Harris Health regarding construction during and after the design of the project. The contracted price may be a guaranteed maximum price. The architect or engineer on a project, or an entity related to the architect or engineer on the project, may not serve, alone or in combination with another person, as the construction manager-at-risk.

The CMAR shall be selected in a one-step or two-step process. The purchasing office shall prepare a single RFP, in the case of a one-step process, and an initial RFQ, in the case of a two-step process, that includes: (i) a statement as to whether the selection process is a one-step or two-step process; (ii) general information on the project site, project scope, schedule, selection criteria and the weighted value for each criterion, and estimated budget and the time and place for receipt of the proposals or qualifications; and (iii) other information that may assist in selection of a CMAR. The RFQ or RFP shall state the selection criteria. In an RFP, proposed fees and prices may be requested as part of the proposal. In the two-step process, price or fees may not be requested as part of the RFQ; however, five or fewer selected Offerors (selected solely on the basis of qualifications) may be requested to provide additional information, including the construction manager-at-risk's proposed fee and prices for fulfilling the general conditions. At each step, the Purchasing Office shall publicly open, and read aloud the names of the Offerors and the proposed fees and prices, if applicable to that step. Not

later than the 45th day after the date on which the final proposals are opened, the Purchasing Agent shall have the proposals evaluated and ranked in relation to the criteria set forth in the RFP. The Purchasing Agent shall follow the same process as with a Competitive Sealed Proposal for award of a Contract by the Board of Trustees, including facilitating the negotiation of a final Contract with a CMAR.

A CMAR shall publicly advertise for bids or proposals from trade contractors or subcontractors for the performance of all major elements of the work other than the minor work that may be included in the general conditions, but may seek to perform portions of the work itself by submitting a bid or proposal and being chosen as the Best Value in the same manner as any other trade contractor or subcontractor. The CMAR shall review all trade contractor or subcontractor bids or proposals in a manner that does not disclose the contents of the bid or proposal during the selection process to a person not employed by the CMAR, CM-Agent (if applicable), architect, engineer, or Harris Health. If the CMAR reviews, evaluates, and recommends a bid or proposal from a trade contractor or subcontractor but Harris Health requires another subcontractor bid or proposal to be accepted, Harris Health shall compensate the CMAR by a change in price, time, or guaranteed maximum cost for any additional cost that the CMAR incurs. If a selected trade contractor or subcontractor defaults in the performance of its work, the CMAR may itself fulfill, without advertising, the Contract requirements or select a replacement trade contractor or subcontractor.

D. NONCOMPETITIVE PROCUREMENTS

Noncompetitive procurements may be used only when one or more of the following circumstances apply:

1. **Inadequate competition:** If the competitive bidding requirements were followed, but the Purchasing Office received no responsive bids, the Purchasing Office may choose to procure the Item through other means necessary.
2. **Sole Source:** For an Item that is available only from a single source, the Board of Trustees may grant a sole source designation, usually valid for the term of the Contract, at the request of the Purchasing Agent. The Purchasing Agent will review requests, conduct further research as required, and make a sole source determination. Examples of sole source designations include manuscripts, books, monopolies, captive replacement parts or components, utility services, maintenance or repairs provided by the manufacturer of purchased medical equipment, and software maintenance/license fees.
3. **Calamity:** A Purchase necessary to relieve the necessities of the citizens or to preserve the property of Harris Health, and the Calamity will not permit a delay resulting from Advertised Competitive Procurement.
4. **Health & Safety:** The Purchase of an item necessary to preserve (i.e., keep unimpaired) or protect the public health or safety of the residents of Harris County, provided that such item, if timely procured, would be effective to serve such purpose. The use of this exemption is only allowed when “prompt and unrestrained action” is required “to remedy a situation” which threatens the health of the residents. This exemption shall not be used to justify a prompt purchase solely because the User

Department or Purchasing failed to adequately prepare and purchase the item in a timely manner.

5. Discretionary exemptions: The Purchase falls under “discretionary exemptions” or other express exemption under state law.

- Personal Services.
- Professional Services: Legal counsel for Harris Health must render an opinion that the services qualify as Professional Services. Such opinion may be requested by the Purchasing Office or Contracts Administration.
- Food: When the exemption for an Item of food is granted by the Board of Trustees or designee, the Purchasing Agent will attempt to solicit at least three informal bids biannually, quarterly, or on a more frequent basis as appropriate. A record of these bids will be maintained for at least one year.
- Standardized Item.

IV. CONTRACT AWARD AND PROTESTS

Before awarding a Contract, the Purchasing Agent must be satisfied that: (1) the Offeror is responsible; (2) the Offeror’s bid or proposal complies with the specifications and other solicitation documents; and (3) the Offeror is a qualified Vendor. If an Offeror who otherwise would have been awarded a Contract is found non-responsible, the Purchasing Agent shall issue a written determination of non-responsibility setting forth the basis of the finding. A copy of the determination shall be sent promptly to the non-responsible Offeror.

A. RESPONSIBILITY

Subject to approval of Harris Health’s Board of Trustees, award shall only be made to responsible Offerors possessing the ability to perform successfully under the terms and conditions of a proposed Contract. Consideration shall be given to such matters as contractor integrity, record of past performance, and financial and operational resources or such other criteria that may be included in the request for bids or proposal documents.

A responsible Offeror should:

- Have adequate financial resources to perform the Contract, or the ability to obtain them;
- Have the necessary experience and skills, or the ability to obtain them;
- Have the necessary production, construction, and technical equipment and facilities, or the ability to obtain them;
- Be able to comply with the required or proposed delivery or performance schedule, taking into consideration all the Offeror’s existing commercial and governmental business commitments;
- Have a satisfactory performance record;
- Have a satisfactory record of integrity and business ethics; and
- Be otherwise qualified and eligible to receive an award under applicable laws and regulations, including not be suspended or debarred. To be eligible, an Offeror may not:

- be debarred, suspended or otherwise excluded from or ineligible for participation in Federal assistance programs (as defined by Executive Order 12459);
- commit, threaten to commit, or support terrorism in violation of Executive Order 13224;
- engage in business with Iran, Sudan, or a foreign terrorist organization; or
- boycott Israel, energy companies, or the firearm and ammunition industry if the anticipated Contract value is equal to or exceeds \$100,000.

Harris Health and the Purchasing Agent shall conduct research to determine that an Offeror is responsible.

B. RESIDENCY STATUS

The Purchasing Office shall not award a Contract for general construction, improvements, services, or public works projects or for the Purchase of supplies, materials, or equipment to a Non-Resident Bidder unless the Non-Resident Bidder's bid is lower than the lowest bid submitted by a responsible Resident Bidder by the same amount that a Resident Bidder would be required to underbid a Non-Resident Bidder to obtain a comparable contract in the state in which the Non-Resident Bidder's principal place of business is located, or a state in which the Non-Resident Bidder is a resident manufacturer.

C. PROTESTS

Any interested party having a direct economic interest in the outcome of a procurement, where economic interest means the party's business is adversely affected by the award of a Contract to a different Offeror, may protest the award to the Protest Committee and appeal any adverse decision in accordance with the provisions of the Harris Health Protest Policy & Procedures. Interested parties are encouraged to seek resolution of their complaint initially with the Purchasing Office. Any such complaint must be made in writing and submitted per the submission instructions outlined in the Harris Health Protest Policy & Procedures, found on the Harris County Purchasing Office website

If the protest does not comply with the requirements of the Harris Health Protest Policy & Procedures, Harris Health may reject the protest without further review. If the protest is timely and complies with the Harris Health Protest Policy & Procedures, the Purchasing Agent, or other designated Harris Health staff member, shall review the protest and all other relevant information. The Purchasing Agent will provide a written decision to the protestor.

The procedure and time limits set forth in the Harris Health Protest Policy & Procedures are mandatory and are the sole and exclusive remedy in the event of a protest. Failure to comply with the procedures shall constitute a failure to exhaust administrative remedies and a waiver of any right to further pursue the protest, including filing a legal proceeding.

V. CONTRACT REQUIREMENTS

A. CONSTRUCTION SPECIFIC

Additional requirements for Construction Project Contracts are set forth here:

1. Workers' Compensation

When entering into a construction Contract that is not encompassed by Harris Health's Owner Controlled Insurance Program, Harris Health shall require the Vendor to certify, in writing, that the Vendor provides workers' compensation insurance coverage for each employee of the Vendor employed on the Construction Project. Vendors shall be required to represent to Harris Health that all employees of the Vendor, who will provide services on the project, will be covered by workers' compensation coverage for the duration of the Construction Project, that the coverage will be based on proper reporting of classification codes and payroll amounts, and that all coverage agreements will be filed with the appropriate insurance carrier or, in the case of a self-insured, with the division.

The Vendor shall provide coverage, based on proper reporting of classification codes and payroll amounts and filing of any coverage agreements, which meets the statutory requirements of Texas Labor Code, Section 401.011(44) for all employees of the Vendor providing services on the Construction Project, for the duration of the Contract.

2. Bonds / Guarantees

The Purchasing Office and all Vendors shall comply with all applicable bonding requirements. Bonding companies used by a Vendor to provide payment and bonds must be listed with the Department of the Treasury's Listing of Approved Sureties. Performance and Payment Bonds required by Texas Government Code Section 2253.021 must be executed by a corporate surety in accordance with Section 1, Chapter 87, Acts of the 56th Legislature, Regular Session, 1959 (Article 7.19-1, Vernon's Texas Insurance Code).

a. Bid Bonds

For construction Contracts or subcontracts expected to exceed \$100,000, Harris Health shall require the Offeror to furnish a good and sufficient bid bond or cashier's check in the amount of five percent of the bid price. A bid bond must be executed with a surety company authorized to do business in this state.

b. Performance Bonds

For a construction Contract, contractors are required to provide a performance bond prior to the start of work if the Contract is in excess of \$100,000. Such performance bond shall be in an amount valued at 100 percent of the Contract cost. A "performance bond" is one executed in connection with a Contract to secure fulfillment of all the Vendor's obligations under such Contract. The performance bond is:

- Solely for the protection of Harris Health;
- In the entire amount of the Contract or subcontract, as applicable; and
- Conditioned on the faithful performance of the work in accordance with the plans, specifications, and Contract documents.

c. Payment Bonds

For construction contracts, contractors are required to provide a payment bond if the Contract is in excess of \$25,000. The payment bond is solely for the protection and use of payment bond beneficiaries who have a direct contractual relationship with the prime

contractor or a subcontractor to supply public work labor or material. The payment bond is:

1. In the entire amount of the Contract or subcontract, as applicable; and
2. Solely for the protection and use of payment bond beneficiaries who have a direct contractual relationship with the prime contractor or a subcontractor to supply public work labor or material.

If a payment bond is required per the stipulations above, contractors must furnish a payment bond with good and sufficient sureties, for 100 percent of the Contract price, and such bond, among other conditions, must assure payment as required by law for any and all labor and materials, incorporated, consumed or used in connection with the Contract, whether by subcontractor or otherwise.

A bond executed for construction Contracts must be payable to Harris Health and its form must be approved by the Purchasing Agent. A bond executed for construction contracts with a governmental entity, such as Harris Health, must be payable to and its form must be approved by the awarding governmental entity.

If the Contract is for \$50,000 or less, Harris Health may provide in the bid notice or request for proposals that no money will be paid to the Vendor until completion and acceptance of the work or the fulfillment of the purchase obligation to Harris Health

3. Prevailing Wages

When applicable, for any Contract involving a Construction Project paid for in whole or in part from public funds, without regard to whether the work is done under public supervision or direction, Harris Health shall comply with the prevailing wage requirements under Texas Government Code Section 2258.

In accordance with the statute, for each Contract subject to prevailing wages, Vendors must pay the prevailing wage rates for building construction for each craft or type of worker or mechanic employed in the execution of any building construction or repair under the Contract in accordance with Texas Government Code Section 2258. A worker employed on a public work by or on behalf of the state or a political subdivision of the state shall be paid:

- a. Not less than the general prevailing rate of per diem wages for work of a similar character in the locality in which the work is performed;
- b. Not less than the general prevailing rate of per diem wages for legal holiday and overtime work; and
- c. In accordance with the Davis Bacon prevailing wage rates and definitions.

When prevailing wages have been determined to be applicable, the Purchasing Office shall place a copy of the current prevailing wage determination in the Advertised Competitive Procurement. The decision to award a Contract or subcontract must be conditioned upon the acceptance of the wage determination. Harris Health shall report all suspected or reported violations to the appropriate agency.

Harris Health supports the purpose of the MWBE program to promote full and equal business opportunities for all businesses in an effort to remedy disparity in procurement

and contracting. The Harris Health Office of Contractor Diversity works with the Purchasing Office to ensure that MBEs and WBEs have an equal opportunity to participate in County Contracts. The entire Minority-and Woman-Owned Business Enterprise Program Policy can be found at the following link on the Harris County Purchasing Office website.

4. Skilled Trade Protections for Bond-Funded Construction Projects

All Advertised Competitive Procurements and Contracts for Construction Projects meeting the applicability requirements set forth by the Harris Health Workers Protection Policy shall include provisions mandating: (1) a minimum of either a \$15/hour wage or a wage that meets the requirements of the Davis-Bacon Act, whichever is higher; (2) a minimum of 10% of total project hours be completed by individuals enrolled or graduated from an approved apprenticeship training program; and (3) the usage and tracking of employer safety records, including OSHA Safety Training of every individual who works on the job site. The entire policy for Skilled Trade Protections for Bond-Funded Construction Contracts and can be found on the Harris County Purchasing Office website.

B. TAXES AND OTHER DEBTS

Harris Health may refuse to enter into a Contract with a person indebted to Harris Health. The policy requires Vendor's taxes be current as of the date bids/proposals are due. Vendors with delinquent taxes on the due date will not be eligible for award. If, during the performance of this Contract, a Vendor's taxes become delinquent or Vendor becomes otherwise indebted to Harris County, Harris Health reserves the right to provide notice to the Auditor or Treasurer pursuant to Texas Local Government Code Section 154.045.

Whether or not a Vendor's taxes are delinquent will be determined by an independent review of the Tax Office records. Vendors are encouraged to visit the Tax Office website at www.hctax.net, set up a portfolio of their accounts and make their own initial determination of the status of their tax accounts. Vendors who believe a delinquency is reflected in error must contact the Tax Office to correct any errors or discrepancies prior to submitting their bid in order to ensure that their bid will be considered. At its discretion, the Board of Trustees may grant a waiver of technicality when it is in the best interest of Harris Health to do so.

C. TERMINATION RIGHTS

All Contracts must include a termination for non-appropriations clause. Additionally, to the extent possible, all Contracts should include a provision that allows Harris Health to terminate without cause upon the giving of reasonable time (e.g., 30, 60, or 90 days).

VI. MISCELLANEOUS PROVISIONS

A. CONTRACT ASSIGNMENT

Assignment occurs when one party to a contract (the "Assignor") transfers its rights and/or obligations under a contract to another party (the "Assignee"). Contract law generally permits assignments; however, the Purchasing Office shall consult with legal counsel for Harris Health to determine (1) whether the Contract allows assignment and under what conditions, (2) whether the Vendor is assigning the entire Contract to the assignee, or is only assigning certain aspects of the Contract to the assignee, which should be carefully reviewed to determine the risk to Harris Health. Further, where a buyout or sale of all or substantially all of the Vendor's

assets occurs, it is the duty of the Purchasing Agent to perform due diligence to evaluate the Assignee's eligibility and ability to perform under the Contract. This will require the Purchasing Office to request and seek legal review of M&A transaction documents executed between the Vendor and Assignee. A Contract may not be assigned to an Assignee until the Purchasing Office completes this evaluation and has obtained an assurance that the Assignee will sign a Contract known as a novation agreement to acknowledge that all rights and responsibilities under the original Contract between Assignor and Harris Health will be transferred to Assignee. Assignment is not the same as a name change.

B. CODE OF CONDUCT

The Purchasing Agent is responsible for the integrity of procurements, to ensure it is expended in full accordance with federal, state, and local law. The Purchasing Agent shall remind any employee, agent or representatives who requests the Purchase of an Item on behalf of Harris Health of their obligation to comply with the Harris Health Code of Conduct, available at <https://harrishealthcoc.org/>. These employees, agents and representatives may not:

- Participate in any decision to award a Contract, including by giving their approval, recommendation or advice, if the officer, employee, agent or representative, or a member of their immediate family, has an actual or potential financial interest in the Contract, including prospective employment;
- Solicit or accept money, credit, gifts, favors, or employment from an Offeror or Vendor;
- Separate or make sequential or component Purchases with the intent of avoiding the competitive procurement requirements;
- Knowingly disclose confidential information for personal gain; or
- Engage in questionable practices, such as "bid shopping" or the extended free use of products under the guise of "demos".

C. CONFLICT OF INTEREST

1. Local Government Officers

Employees, agents and representatives who conduct business on behalf of Harris Health shall comply with Texas Local Government Code, Chapters 171 and 176, and any policies adopted by Harris Health related to conflicts of interest. These sources generally prohibit individuals who exercise discretion in the planning, recommending, selecting, or contracting process from participating in any Purchase in which they (or a member of their immediate family) may obtain a financial interest. Although the law distinguishes between substantial and nominal interests, no Harris Health System employee, agent or representative may participate in the selection, Award, or administration of a Contract if a conflict-of-interest, real or apparent, would be involved. By way of example only:

- An actual conflict would arise when an employee, agent, representative, or any member of the foregoing's immediate family is employed by or derives more than 10% of their gross income from the recommended or selected Offeror.

- A potential conflict would arise when an employee, agent, representative, or any member of the foregoing's immediate family has a partial ownership in or derives some income or personal benefit from the recommended or selected Offeror.

Harris Health may impose penalties, sanctions or other disciplinary actions on any employees, agents, or representatives for violations of these conflict of interest standards.

2. Offerors

In the event an Offeror submits a bid or proposal to Harris Health, and the Offeror was a previous contributor to the development of requirements or the scope of work that were included in the Advertised Competitive Procedure, then the bids or proposals from that Offeror shall be disqualified on the basis of conflict of interest.

D. REPORTING VIOLATIONS

Harris Health operates its business ethically and in compliance with the law. Employees of Harris Health or Vendors who believe he or she has witnessed any suspected ethical violation or fraud should immediately report to the Corporate Compliance Officer at 346-426-0181, the confidential Compliance Hotline at 844-565-0621 or visit the Corporate Compliance Hotline website. Employees or Vendors who report suspected ethical violations or fraud can do so without fear of retaliation. Retaliating against any employee or Vendor for reporting suspected ethical violations or fraud is strictly prohibited.

E. RECORDKEEPING & RECORDS RETENTION

The Purchasing Office or designated Harris Health Department shall maintain records sufficient to detail the history of each procurement action. These records shall include, but are not limited to, the following:

- Rationale for the method of procurement;
- Selection of contract type (e.g., lump sum or cost-reimbursement);
- Contractor selection or rejection; and
- The basis for the Contract price.

The Purchasing Office shall abide by the Harris Health Records Control Schedule which requires the retention of records for a minimum of five (5) years. If a local, federal, or state statute or regulation specifies a longer retention period for any records series received, created, or maintained by an agency, the statute or regulation overrides this schedule. All purchasing transactions shall be thoroughly documented and provide an audit trail, including but not limited to evaluation and ranking documents and justifications for a construction Contract procured under Texas Government Code Chapter 2269. Purchasing shall determine the location of official purchasing records, and shall maintain records in accordance with the requirements of the Texas Records Retention law under Texas Government Code Section 441.151 et seq.

F. PUBLIC INFORMATION REQUESTS

Harris Health is subject to the Texas Public Information Act, Chapter 552 of Texas Government Code. Requests for information pertaining to Purchasing Office records must be in writing and specific enough that information requested is easily identifiable. If an Offeror

seeks portions of another Offeror's response to an Advertised Competitive Procurement (the latter Offeror, a "Submitting Offeror") that are identified as confidential by such Offeror, Harris Health is required to provide notice to the Offeror and shall rely on advice, decisions and opinions of the Attorney General of the State of Texas relative to the disclosure of data or information.

Request must be emailed to: TPIArequests@harrishealth.org or delivered to [insert address] to be considered properly received. Pursuant to Texas Government Code 552.234, neither Harris Health nor the Purchasing Agent is required to respond to a written request for public information unless the request is received at the above-identified addresses. The Purchasing Agent may, but shall not be obligated to, remind a requestor of the designated address for Public Information Act requests.

G. SIGNATURE AUTHORITY

The authority to execute Contracts on behalf of Harris Health is outlined in Harris Health Policy 3.03, entitled Signature Authority on Contract Policy, and is generally restricted to the following:

- Chair of the Board of Trustees after Board of Trustees approval;
- Harris Health President and CEO, after or in accordance with Board of Trustees previous approval or delegation, respectively;
- The Purchasing Agent (contracts not exceeding \$250,000) and/or;
- Other individuals as may be designated in writing by the President and CEO within the written constraints established by the Board of Trustees or by the Purchasing Agent.

In the event a Contract subject to the Board of Trustees approval under Policy 3.03 must be executed without such approval to address an immediate operational or service delivery need, the Contract may be executed by the President and CEO (or designee) if: (1) the Contract's continued effectiveness is conditioned upon ratification by the Board of Trustees and (2) the Contract is presented to the Board of Trustees at the next regularly scheduled Board meeting following execution. The preceding sentence is not intended and shall not be construed to authorize the President and CEO to execute a Contract that the Board of Trustees is required to approve pursuant to relevant law.

H. CONTRACT TERMINATION

All termination requests require the review of Contracts Administration and legal counsel for Harris Health to determine what, if any, additional steps are required, including, but not limited to, Board of Trustees approval. User Departments and the Purchasing Office shall follow these steps prior to initiating termination:

1. notification from the User Department to the Purchasing Office and Contracts Administration describing in detail the need for termination,
2. confirmation and concurrence from Contracts Administration,
3. review by legal counsel and approval of the Chief Operating Officer or other executive,

4. notice from Harris Health to the Vendor using the address set forth in the Contract, which notice shall stipulate the effective date of termination in accordance with Contract terms.

VII. REFERENCES

Harris Health Minority- and Woman-Owned Business Enterprise Program Policy

Harris Health Skilled Trade Protections for Bond-Funded Construction Contracts

Harris Health Evaluation Committee Guidelines

Harris Health Protest Policy & Procedures

Harris Health Signature Authority on Contracts and Commissioners Court Approval

Harris Health Contracts Administration, Monitoring, and Quality Metrics

[Thursday, February 29, 2024](#)

[February Board Committee Reports](#)

February Board Committee Meetings:

- Quality Committee – February 13, 2024 (Summary attached for your review)
 - HRO Safety Message – Video: Systems Approach
- Budget & Finance Committee – February 15, 2024
- Compliance & Audit Committee – February 15, 2024
- DEI Committee – February 16, 2024

Board of Trustees – Executive Summary
Patient Safety & Quality Programs – Open Session
February 29, 2024



Please refer to the reports presented at the Quality Committee Executive Session on February 13, 2024 for additional details.

HRO Safety Message – Video: Systems Approach

High-reliability Organizations (HROs) are those that successfully complete their missions despite massive complexity and high risk. Examples include the Federal Aviation Administration’s Air Traffic Control system, aircraft carriers, and nuclear power plants. In each case, even a minor error could have catastrophic consequences. Yet, adverse outcomes in these organizations are rare. Five principles of a High Reliability Organization (HRO) are: (1) Preoccupation with failure; (2) Reluctance to simplify interpretations; (3) Sensitivity to operations; (4) Commitment to resilience; and (5) Deference to expertise.

CONFIDENTIAL & PRIVILEGED INFORMATION

Confidential, legally privileged, and protected from disclosure pursuant to Chapter 161 of the Texas Health and Safety Code and Chapters 151 and 160 of the Texas Occupations Code.



**DeWight Dopslauf, C.P.M., CPPO
Harris County Purchasing Agent**

January 19, 2024

Board of Trustees Office
Harris Health System

RE: Board of Trustees Meeting – February 29, 2024
Budget and Finance Agenda Items

The Office of the Harris County Purchasing Agent recommends approval of the attached procurement actions. All recommendations are within the guidelines established by Harris County and Harris Health System.

Sincerely,

DeWight Dopslauf
Purchasing Agent

JA/ea
Attachments



Budget and Finance Agenda Items for the Harris County Hospital District dba Harris Health System - Board of Trustees Report

Expenditure Summary: February 29, 2024 (Approvals)

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A1	Sierra7, Inc. (HCHD-1071) MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Virtual Patient Observation (VPO) System for Harris Health - To correct the previous term of One (1) year with four (4) one-year renewals to a five (5) year term. <i>HCHD-1071</i>	Corrected amount and term Public Health or Safety	Maureen Padilla		\$ 11,200,000
A2	SCH Services, Inc. dba Supplemental Health Care (HCHD-650) MWBE Goal: 30%	Temporary Nursing and other Clinical Personnel for Harris Health System - To continue providing temporary staff for Harris Health Correctional Facilities. <i>Public Health or Safety Exemption, Board Motion 23.08-130</i>	Renewal Public Health or Safety Exemption March 01, 2024 through February 28, 2025	Kiki Teal	\$ 8,473,331	\$ 8,400,000
A3	Campos Engineering, Inc. MWBE Goal: 15%	Professional Services to Provide Testing and Balancing Services for the Lyndon B. Johnson Hospital Expansion Construction Project for Harris Health System - To provide testing and balancing services for the Lyndon B. Johnson Hospital expansion. <i>Job No. 230274</i>	Award Most qualified vendor(s) meeting requirements	Babak Zare		\$ 8,200,000
A4	Best Care EMS, LTD (HCHD-659) MWBE Goal: 100%	Ambulance Services for Harris Health System - The term is being extended to allow Harris Health to continue providing ambulance services for Correctional Health. Additional funds are required to cover the remainder of the current term as well as the extended term. <i>Public Health or Safety Exemption, Board Motion 23.01-08</i>	Ratify Additional Funds Extension Public Health or Safety Exemption March 01, 2024 through February 28, 2025	Kiki Teal	\$ 900,000	\$ 3,572,292
A5	General Datatech, L.P. (DIR-TSO-4167; DIR-TSO-4288) MWBE Goal: 2%	Firewall and VPN hardware Technology Purchase - Upgrading to the next generation firewall technologies is an essential investment that enhances network security, simplifies management, and ensures scalability. By adopting next generation Firewall technologies, Harris Health can better protect their network, data, and reputation against increasingly sophisticated cyber threats. <i>State of Texas Department of Information Resources (DIR) Cooperative Contract</i>	Purchase Low quote	Antony Kilty		\$ 3,036,803
A6	AndWell LLC (PP-SV-322) (HCHD-609) MWBE Goal: Exempt GPO	Advertising and Marketing Services - To act as Harris Health's "media buyer" to purchase the necessary traditional and digital media for various campaigns. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 23.12-176</i>	Ratify Funding Yr. 2 January 01, 2024 through December 31, 2024	Amanda Callaway	\$ 2,336,447	\$ 2,336,447
A7	AMN Healthcare MWBE Goal: Exempt GPO	WorkforceSolutions-ManagedService Providers- To provide a platform through which Harris Health submits available shifts to be filled by contracted staffing vendors. The platform manages vendors based on contracted positions and rates. ShiftWise will charge the temporary staffing vendors a 3.75% fee for the use of the service. This fee is passed through to Harris Health System by the staffing vendors as part of the vendor's billable rate. <i>Premier Healthcare Alliance, L.P. Contract</i>	Award Best Contract(s) One (1) year initial term with four (4) one-year renewal options	Russel, Pamela		\$ 2,079,499

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A8	Favorite Healthcare Staffing (HCHD-858) MWBE Goal: 30%	Temporary Nursing Personnel for Harris Health System - To continue to provide temporary nursing services at Harris Health Correctional Health facilities. <i>Professional Services Exemption, Board Motion 23.12-176</i>	Ratify Renewal Professional Services Exemption September 02, 2023 through September 01, 2024	Trinette Larks	\$ 2,454,286	\$ 2,000,000
A9	Hill-Rom Company, Inc. (AD-NS-1566) MWBE Goal: Exempt GPO	Patient Beds, Mattresses and Therapeutic Surfaces - Rental - To continue to provide rental of patient beds for Harris Health System. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 23.02-24</i>	Renewal Funding Yr. 3 March 01, 2024 through February 28, 2025	Charles Motley	\$ 1,484,544	\$ 1,484,544
A10	Oracle America, Inc. (DIR-TSO-4158) (HCHD-180) MWBE Goal: Exempt Sole Source	Annual Software Maintenance Renewal for the entire suite of Oracle PeopleSoft Applications for Harris Health System. - This is the annual software maintenance renewal for the entire suite of Oracle PeopleSoft applications. The functionality within Oracle includes Payroll, Human Resources, eDevelopment, eRecruitment, Benefits, Requisitioning, Purchasing, Inventory, Accounts Payable, Asset Management, General Ledger, and ePerformance <i>Sole Source Exemption, Board Motion 23.02-24</i>	Purchase Sole Source Exemption March 01, 2024 through February 28, 2025	Ronald Fuschillo		\$ 1,155,646
A11	SHC Services, Inc. dba Supplemental Health Care MWBE Goal: 30%	Temporary Nursing and Other Clinical Personnel staffing services for Harris Health System - Additional funds are required due to increase in utilization of staff from SHC Services to fill shifts at Harris Health Correctional Facilities. <i>Public Health or Safety Exemption, Board Motion 23.08-130</i>	Ratify Additional Funds Public Health or Safety Exemption March 01, 2023 through February 29, 2024	Kiki Teal	\$ 7,400,000	\$ 1,073,332
A12	Arup Texas, Inc. MWBE Goal: 24%	Professional Architectural and Engineering Services for Various Projects for Harris Health System - To provide architectural and engineering services for projects of various size and scope for Harris Health System. <i>Job No. 220099, Board Motion 22.06-83</i>	Ratify Renewal February 24, 2024 through February 23, 2025	Patrick Casey	\$ 500,000	\$ 1,000,000
A13	Sage Products, LLC (AD-NS-1585) MWBE Goal: Exempt GPO Medline Industries (PP-NS-1584) MWBE Goal: Exempt GPO Bard Medical Division (AD-NS-1600) MWBE Goal: Exempt GPO	General Urological Products - To continue to provide general urological products including catheters, urine meters, drainage bags and irrigation trays for Harris Health System. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 23.08-130</i>	Funding Yr. 2 March 01, 2024 through February 28, 2025	Douglas Creamer	\$ 865,861	\$ 865,861

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A14	Carco Group, Inc. dba PreCheck, Inc. (PP-SV-418) (HCHD-1084) MWBE Goal: 0% Non-Divisible	Background Screening Services for Harris Health System - To provide pre and post-employment background screening services for Harris Health System. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.09-146	Funding Yr. 2 March 01, 2024 through February 28, 2025	Keith Manis	\$ 800,000	\$ 800,000
A15	US MED-EQUIP, LLC (PP-NS-1662) MWBE Goal: Exempt GPO	Peak Use Rental Equipment - To continue providing infusion, monitoring, respiratory, and central supply peak use rental equipment for Harris Health. Premier Healthcare Alliance, L.P. Contract	Ratify Funding Yr. 2 December 01, 2023 through November 30, 2024	Douglas Creamer	\$ 107,927	\$ 744,046
A16	Oracle America, Inc. (DIR-TSO-4158) MWBE Goal: Exempt Sole Source	Oracle Database Maintenance Renewal for Harris Health System - To provide annual software maintenance for the following Oracle products: Database Enterprise, Access Manager, Identity Governance Suite, Active Data Guard, Diagnostics Pack, Real Application Clusters, Tuning Pack, Advanced Compression, Database Lifecycle Management Pack and Partitioning. Sole Source Exemption, Board Motion 23.02-24	Purchase Sole Source Exemption March 01, 2024 through February 28, 2025	Ronald Fuschillo		\$ 732,226
A17	Becton, Dickinson and Company, through its BD Life Sciences – Integrated Diagnostic Solutions Business Unit (GA-06041) MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Integrated Platform for Microbiology Automation, Blood Culture, Identification and Susceptibility including Analyzer(s), Reagents, Consumables and Services for Harris Health System - To provide for continued microbiology automation for blood culture, identification and susceptibility testing for Harris Health System. Job No. 130120, Board Motion 23.03-41	Renewal March 05, 2024 through March 04, 2025	Michael Nnadi	\$ 664,241	\$ 722,443
A18	Best Care EMS, LTD (HCHD-715) MWBE Goal: 100%	Ambulance Services for the Harris Health System - To continue providing ambulance services for patients to and from various Harris Health System facilities and clinics as well as other locations. Public Health or Safety Exemption, Board Motion 23.03-41	Renewal Public Health or Safety Exemption April 01, 2024 through March 31, 2025	Amy Smith	\$ 454,116	\$ 600,000
A19	Acadian Ambulance Services, Inc. (HCHD-677) MWBE Goal: Exempt Public Health or Safety	Ambulance Services for Harris Health System - The term is being extended to add renewal option(s) under the same terms and conditions. Additional funds are required to allow for outstanding invoices to be paid and cover the extended term. Public Health or Safety Exemption, Board Motion 23.04-58	Ratify Additional Funds Extension Public Health or Safety Exemption March 01, 2024 through February 28, 2025	Trinette Larks	\$ 600,000	\$ 600,000
A20	Dell Marketing, L.P. (DIR-TSO-3763) MWBE Goal: 0% Specialized, Technical, or Unique in Nature	VM Ware Software Maintenance Renewal - This is the maintenance renewal for the VM Ware software, which provides the ability to virtualize servers and reduce the need for physical servers installed in the Harris Health System Datacenters. State of Texas Department of Information Resources (DIR) Cooperative Contract, Board Motion 23.03-41	Renewal March 01, 2024 through February 28, 2025	Antony Kilty Jin Lee	\$ 580,980	\$ 580,980

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A21	Nestle Healthcare Nutrition, Inc. MWBE Goal: Exempt Public Health or Safety	Medical Nutrition Products – Enteral Nutrition - To provide nutritional/disease specific formulas for patients of Harris Health System Premier Healthcare Alliance, L.P. Contract	Best ASCEND Contract August 01, 2023 through July 31, 2024	Michael Nnadi	\$ 1,277,525	\$ 520,120
A22	Sterling Staffing Solutions (HCHD-1011) MWBE Goal: 100%	Temporary Nursing and Allied Health Staffing for Harris Health System - To provide registered nurses, licensed vocational nurses and phlebotomists in support of Harris Health Correctional Facilities. Public Health or Safety Exemption, Board Motion 23.05-73	Renewal Public Health or Safety Exemption March 01, 2024 through February 28, 2025	Kiki Teal	\$ 0	\$ 500,000
A23	Alpha Testing, LLC MWBE Goal: 24%	Professional Architectural and Engineering Services for Various Projects for Harris Health System - To provide architectural and engineering services for projects of various size and scope for Harris Health System. Job No. 220099, Board Motion 22.06-83	Ratify Renewal February 17, 2024 through February 16, 2025	Patrick Casey	\$ 500,000	\$ 500,000
A24	Quality Response Medical Staffing (HCHD-1012) MWBE Goal: 100%	Temporary Nursing and Allied Health Staffing for Harris Health System - To provide registered nurses, licensed vocational nurses and phlebotomists in support of Harris County Correctional Facilities. Public Health or Safety Exemption, Board Motion 23.05-73	Renewal Public Health or Safety Exemption March 01, 2024 through February 28, 2025	Kiki Teal	\$ 0	\$ 500,000
A25	Frontline Nurse Staffing (HCHD-1009) MWBE Goal: 100%	Temporary Nursing and Allied Health Staffing for Harris Health System - To provide registered nurses, licensed vocational nurses and phlebotomists in support of Harris Health Correctional Facilities. Public Health or Safety Exemption, Board Motion 23.05-73	Renewal Public Health or Safety Exemption March 01, 2024 through February 28, 2025	Kiki Teal	\$ 0	\$ 500,000
A26	Five Starr Health Care (HCHD-1010) MWBE Goal: 100%	Temporary Nursing and Allied Health Staffing for Harris Health System - To provide registered nurses, licensed vocational nurses and phlebotomists in support of Harris County Correctional Facilities. Public Health or Safety Exemption, Board Motion 23.05-73	Renewal Public Health or Safety Exemption February 29, 2024 through February 28, 2025	Kiki Teal	\$ 0	\$ 500,000
A27	Acadia Workforce DBA Nursing Group (HCHD-1008) MWBE Goal: 100%	Temporary Nursing and Allied Health Staffing for Harris Health System - To provide registered nurses, licensed vocational nurses and phlebotomists to support Harris Health Correctional Facilities patients. Public Health or Safety Exemption, Board Motion 23.05-73	Renewal Public Health or Safety Exemption March 01, 2024 through February 28, 2025	Kiki Teal	\$ 0	\$ 500,000
A28	UpToDate, Inc. (GA-07111) MWBE Goal: 0% Specialized, Technical, or Unique in Nature	On-Line Clinical Resource Information Annual Subscription Renewal for Harris Health System - To continue to provide access to the UpToDate clinical information database, which is a medical reference guide for all of our physicians. Job No. 130236, Board Motion 22.10-141	Ratify Renewal November 01, 2023 through October 31, 2024	Ronald Fuschillo	\$ 422,270	\$ 443,384

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A29	SHI Government Solutions, Inc. MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Tableau Server License for Harris Health System - To provide the Tableau server license that allows users to gain better data visualization insights into various data sets and gives the users unlimited Viewers and Explorer licenses. This supports the strategic Tableau project roadmap by various service lines within Harris Health System. State of Texas Department of Information Resources (DIR) Cooperative Contract	Ratify Purchase Only quote	Ronald Fuschillo		\$ 428,790
A30	Gartner, Inc. (HCHD-1203) MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Information Technology Consulting Services for Harris Health System - To support Harris Health IT Department with research and advise on technology trends, industry strategies, best practices, product evaluations, and ad-hoc reporting on a variety of IT topics. State of Texas Department of Information Resources (DIR) Cooperative Contract	Ratify Award Only quote February 01, 2024 through January 31, 2025 with one (1) one- year renewal options	Antony Kilty		\$ 355,094
A31	Hill-Rom Company, Inc. (AD-NS-1566) MWBE Goal: Exempt GPO	Patient Beds, Mattresses and Therapeutic Surfaces - Rental - Additional funds are needed due to an increase in utilization of rental beds and an increase in the duration of the rental. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.02-24	Ratify Additional Funds March 01, 2023 through February 29, 2024	Charles Motley	\$ 884,544	\$ 600,000
A32	Windsor EMS, Inc. (HCHD-812) MWBE Goal: Exempt Public Health or Safety	Ambulance Services for Harris Health System - To continue providing ambulance services for patients to and from various Harris Health facilities and clinics as well as other locations. Public Health or Safety Exemption, Board Motion 23.03-41	Renewal Public Health or Safety Exemption April 01, 2024 through March 31, 2025	Ruth Russell,	\$ 350,000	\$ 350,000
A33	Set Solutions, Inc. [Choice Partners #21/031KN-55] MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Code42 Subscription - The purpose is to enhance our data loss prevention solution to prepare for cloud strategy, and to also protect privacy and other sensitive data. The reason for this purchase is because the current DLP (Data Loss Prevention) tool isn't giving us the information we need to protect our most sensitive data. This is meant to be an upgrade. Choice Partners, a division of Harris County Department of Education Cooperative Program	Ratify Purchase Low quote February 28, 2024 through February 27, 2025	Jeffrey Vinson		\$ 339,900
A34	Axogen Corporation (HCHD-550) MWBE Goal: Exempt Public Health or Safety	Avance Nerve Grafts for Harris Health System - To continue providing nerve grafts used in surgical repair of peripheral nerve damage throughout the body. Public Health or Safety Exemption, Board Motion 23.08-130	Renewal Public Health or Safety Exemption April 01, 2024 through March 31, 2025	Charles Motley	\$ 336,275	\$ 336,275
A35	SHI Government Solutions, Inc. (DIR-TSO-4356) (HCHD-616) MWBE Goal: 100%	Symantec Veritas Cloud Enterprise Vault Software for Harris Health System - To provide for Symantec Veritas Cloud Enterprise Vault email management software used for archiving and legal discovery process. State of Texas Department of Information Resources (DIR) Cooperative Contract, Board Motion 23.01-08	Renewal April 03, 2024 through April 02, 2025	Ronald Fuschillo	\$ 327,854	\$ 327,854

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A36	Oracle America, Inc. (DIR-TSO-4158) MWBE Goal: Exempt Sole Source	Oracle Exadata Software Maintenance for Harris Health System - To continue to provide maintenance and support for Exadata Software which is a fully integrated database-computing platform. Sole Source Exemption	Purchase Sole Source Exemption April 01, 2024 through March 31, 2025	Ronald Fuschillo		\$ 304,940
A37	Strawn Pickens, LLP (HCHD-738) MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Legal Services for Harris Health System - Legal services related to Harris County jail detainee claims and litigation brought against Harris Health System. Professional Services Exemption	Renewal Professional Services Exemption March 01, 2024 through February 28, 2025	Sara Thomas	\$ 200,000	\$ 250,000
A38	Carahsoft Technology Corporation [DIR- TSO-4288] MWBE Goal: 0%	SAP Business Objects Software Maintenance Renewal - Provide maintenance for the Business Objects software assists in performance and information management, planning, reporting, query and analysis used in organizational decision making. State of Texas Department of Information Resources (DIR) Cooperative Contract	Purchase Low quote March 16, 2024 through March 15, 2025	Antony Kilty		\$ 238,694
A39	Set Solutions, Inc. [Choice Partners #21/031KN-55] MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Axonious - Asset Intelligence and Cyber Asset Attack Surface Management - This solution will help to identify where all of our security controls are on the information systems. Currently Information Security has no visibility into how our tools are deployed across the organization. This tool will help to identify where our solution are deployed. Choice Partners, a division of Harris County Department of Education Cooperative Program	Purchase Low quote March 01, 2024 through February 28, 2025	Jeffrey Vinson		\$ 220,037
A40	Evoqua Water Technologies, LLC (HCHD-1180) MWBE Goal: Exempt Public Health or Safety	Deionized Water Services for Harris Health System - To provide deionized water services, including equipment, supplies, and support services for various Harris Health System facilities. Public Health or Safety Exemption	Ratify Purchase Public Health or Safety Exemption One (1) year initial term	James Young		\$ 210,084
A41	Chastang Ford MWBE Goal: 0% Non-Divisible	Repair Parts, Labor and Related Items for Ford Automobiles and Light Duty Trucks for Harris County - To allow Harris Health to utilize the contract to provide repair parts, labor, and related items for Ford automobiles and light duty trucks for Harris Health System. Job No. 210266	Ratify November 01, 2023 through October 31, 2024	Peka Owens		\$ 200,000
A42	Pitney Bowes MWBE Goal: 0% Drop Shipped	Mailroom Equipment and Supplies for Harris Health System - To provide Mail & Package Tracking Equipment, Maintenance, Mail Sorting Services and Related Software for Harris Health System. Texas Multiple Award Schedule (TXMAS) Cooperative Program	Ratify Award Best quote meeting specifications	Charles Motley		\$ 196,694
A43	Becton, Dickinson and Company, through its BD Diagnostics – Integrated Diagnostic Solutions Business Unit (HCHD-457) MWBE Goal: Exempt Sole Source	BD Service Agreement for Harris Health System - To provide for continued service to the Kiestra equipment. Sole Source Exemption, Board Motion 23.03-41	Renewal Sole Source Exemption March 01, 2024 through February 28, 2025	Michael Nnadi	\$ 155,000	\$ 177,500

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A44	DIH Technology, Inc. MWBE Goal: Exempt Sole Source	Virtual Reality-Enhanced Gait Training System - To replace one (1) existing virtual reality-enhanced gait training system with a new unit for Harris Health System. Sole Source Exemption	Award Sole Source Exemption	Patrick Casey		\$ 160,900
A45	New South Texas Surgical Services, LLC (HCHD-0492) MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Allied Health Professionals providing Mobile Lithotripsy Services - To continue providing mobile lithotripsy services used at the Ambulatory Surgical Centers for Harris Health System. Public Health or Safety Exemption	Renewal Public Health or Safety Exemption August 06, 2024 through August 05, 2025	Pedro Saldana	\$ 150,000	\$ 150,000
A46	Houston Marriott Marquis (GA-07501) MWBE Goal: 0% Minimal MWBE Availability	Venue for Annual Nurses' Recognition Event for Harris Health System - To extend the current contract ninety days and allow for the additional amount needed for venue and catering for the 2024 Nursing Awards and Gala. Job No. 180307, Board Motion 23.01-08	Ratify Additional Funds Extension February 21, 2024 through May 20, 2024	Pamela Russell	\$ 120,000	\$ 130,000
A47	Zoll Medical Corporation MWBE Goal: Exempt GPO	Patient Temperature Management Products and Accessories - To replace two (2) intravascular patient temperature management units past their expected useful life with new units for Harris Health System. Premier Healthcare Alliance, L.P. Contract	Award Best Offer(s) Meeting Requirements	Patrick Casey		\$ 121,440
A48	Cotton Commercial USA, Inc. (R191605) MWBE Goal: 0% Emergency Procurement	DNV Inspection Preparation - To pay outstanding invoice for DNV inspection preparation and cleaning services received in April of 2023 without a purchase order. OMNIA Partners, Public Sector Cooperative Purchasing Program	Ratify Purchase Only quote	Steven Williams		\$ 116,572
A49	CDW Government, LLC [PP-IT-242] MWBE Goal: 0% Drop Shipped	Pharmacy Point of Sale (POS) Equipment Technology Purchase for the Epic Willow Ambulatory (WAM) POS Project - The equipment used for the existing pharmacy point of sale system have reached their end of life and needs to be replaced. The new equipment will also allow for migration to the Epic Willow Ambulatory Pharmacy point of sale software application. Premier Healthcare Alliance, L.P. Contract	Award Lowest Offer	Antony Kilty		\$ 116,400
A50	GE Precision Healthcare LLC MWBE Goal: Exempt GPO	Ultrasound Machine - To provide elastography and fatty liver analysis capabilities to the existing seven (7) GE ultrasound machines through the purchase of the Hepatic Assistant package for Harris Health System. Premier Healthcare Alliance, L.P. Contract	Award Best Offer(s) Meeting Requirements	Patrick Casey		\$ 115,500
A51	Alcon Laboratories, Inc. MWBE Goal: Exempt Sole Source	Phacoemulsification Unit - To add a phacoemulsification unit required to meet the volume demand for procedures at Ambulatory Surgery Center. Sole Source Exemption	Award Sole Source Exemption	Patrick Casey		\$ 110,857

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A52	General Datatech, L.P. (DIR-TSO-4167) MWBE Goal: 6%	Network Switches for Ben Taub Hospital NPC Project - Network switches for the Harris Health Outpatient Psychology Clinic relocation. This is to purchase Network equipment to support the new NPC floor build out at Ben Taub Hospital which will enable access to Clinical applications such as Epic and enable Voice and Wireless connectivity which serve our patient and clinical care team. <i>State of Texas Department of Information Resources (DIR) Cooperative Contract</i>	Ratify Purchase Low quote	Jimmie Crowl Mohammad Manekia		\$ 110,689
A53	Best Care EMS, LTD (HCHD-778) MWBE Goal: 100%	Air Transportation Services for Harris Health System - To provide air transportation services to the patients of Harris Health System. <i>Professional Services Exemption, Board Motion 22.10-141</i>	Ratify Renewal Professional Services Exemption January 19, 2024 through January 18, 2025	Amy Smith	\$ 26,000	\$ 100,000
A54	New South Texas Surgical Services, LLC (HCHD-0492) MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Allied Health Professionals providing Mobile Lithotripsy Services - Additional funds for mobile lithotripsy services used at the Ambulatory Surgical Center for Harris Health System. <i>Public Health or Safety Exemption</i>	Ratify Additional Funds Public Health or Safety Exemption August 06, 2023 through August 05, 2024	Pedro Saldana	\$ 50,000	\$ 100,000
A55	Advanced Air Ambulance Corporation (HCHD-685) MWBE Goal: Exempt Public Health or Safety	Air Transportation Services for Harris Health System - To continue providing air ambulance transportation services for patient repatriation throughout Harris Health System. <i>Professional Services Exemption, Board Motion 23.01-08</i>	Ratify Renewal Professional Services Exemption February 24, 2024 through February 23, 2025	Amy Smith	\$ 0	\$ 100,000
A56	Strawn Pickens, LLP (HCHD-738) MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Legal Services for Harris Health System - Additional funds will cover for an unexpected higher demand of legal services from the Vendor. <i>Professional Services Exemption</i>	Ratify Additional Funds Professional Services Exemption March 01, 2023 through February 29, 2024	Sara Thomas	\$ 100,000	\$ 100,000
					Total Expenditures	\$ 61,215,843
					Total Revenue	\$ (0)

Budget and Finance Agenda Items for the Harris County Hospital District dba Harris Health System - Board of Trustees Report

Expenditure Summary: February 29, 2024 (Transmittals)

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
B1	Spok, Inc [GA-05723] MWBE Goal: Exempt Sole Source	Renewal Maintenance and Support for the Amcom Paging System and Single Sign-On Software for Harris Health System - This renewal is for the annual maintenance and support of the Spoke paging system and single sign-on software. The Amcom Paging System provides critical emergency paging for patient care, code alerts, and IT major incidents. Sole Source Exemption	Renewal Sole Source Exemption March 01, 2024 through February 28, 2025	Antony Kilty	\$ 75,339	\$ 94,881
B2	Datix (USA), Inc [GA-04787] MWBE Goal: Exempt Sole Source	V Survey Suite Licenses - Software License for Medical Records Audit and Accreditation System for Harris Health System - To provide for continued use of Verge Solutions (VSuiteTM/VSurveyTM software) electronic regulatory tracking and management system and website containing regulatory information for the medical profession. The system serves as a central location for collection, management, and reporting data related to regulatory standards. Sole Source Exemption	Renewal Sole Source Exemption September 01, 2023 through August 31, 2024	Vivian Ho-Nguyen	\$ 76,834	\$ 79,063
B3	Siemens Medical Solutions USA, Inc. MWBE Goal: Exempt Public Health or Safety	Emergency repairs for Harris Health System - The MAGNETOM Sola MRI system at LBJ Hospital was damaged due to a water leak. Public Health or Safety Exemption	Purchase Public Health or Safety Exemption	Tim Tatum		\$ 78,248
B4	ABIOMED INC (HCHD-1168) MWBE Goal: Exempt Sole Source	Preventative and Corrective Maintenance for Ventricular Heart Pumps for Harris Health System - Temporary right ventricular heart pumps are needed at Ben Taub Hospital to provide treatment of acute right heart failure or decompensation caused by complications related to COVID-19 including pulmonary embolism. Sole Source Exemption	Purchase Sole Source Exemption Three-year initial term	Tim Tatum		\$ 75,000
B5	Set Solutions, Inc. (HCHD-362) (Choice Partners 21/031KN-55) MWBE Goal: 0% Specialized, Technical, or Unique in Nature	Maize Patient Privacy Monitoring Software Renewal for Harris Health System - This is the license renewal for Maize Analytics Privacy Monitoring SaaS (Software as a Service) Solution which is used to ensure proactive monitoring of patient privacy and adhere to our HIPAA privacy standards. Choice Partners, a division of Harris County Department of Education Cooperative Program	Renewal February 04, 2024 through February 03, 2025	Jeffrey Vinson	\$ 74,995	\$ 74,970
B6	Fujifilm Medical Systems, USA, Inc. (GA-05737) MWBE Goal: Exempt Sole Source	Service and Maintenance for Computed Radiography Equipment for Harris Health System - To provide scheduled and unscheduled service and maintenance for the Fujifilm Computed Radiography Equipment throughout Harris Health System. Sole Source Exemption, Board Motion 23.03-41	Renewal Sole Source Exemption March 01, 2024 through February 28, 2025	James Young	\$ 113,652	\$ 70,686
B7	BTE Technologies, LLC MWBE Goal: Exempt Sole Source	Occupational Therapy Dynamometer - To replace one (1) existing dynamometer that is past its expected useful life with a new unit at Lyndon B. Johnson Hospital. Sole Source Exemption	Award Sole Source Exemption	Patrick Casey		\$ 69,210

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
B8	General Datatech, L.P. (DIR-TSO-4167) MWBE Goal: 4%	IT Equipment for LBJ Parking Garage - This purchase of the network infrastructure hardware will provide connectivity to the new LBJ parking garage. The connectivity will help secure the parking garage by enabling parking garage gates, security cameras and badge readers. <i>State of Texas Department of Information Resources (DIR) Cooperative Contract</i>	Purchase Low quote	Antony Kilty		\$ 67,220
B9	Santa Maria Hostel, Inc. (HCHD-352) MWBE Goal: Exempt Sole Source	Support Services for the Maternal Opioid Misuse (MOM) Model for Harris Health System - To continue providing support services to pregnant and postpartum women with opioid use disorder and their infants to improve the quality and availability of care. <i>Sole Source Exemption, Board Motion 262.024</i>	Renewal Sole Source Exemption January 01, 2024 through December 31, 2024	Suzanne Lundeen	\$ 62,256	\$ 62,256
B10	Welch Allyn, Inc. through Henry Schein MWBE Goal: Exempt GPO	Auditory and Visual Exam Diagnostics and Systems - To add thirty-one (31) wall mounted integrated diagnostic sets to meet the equipment needs of the new observation bays throughout Harris Health System. <i>Premier Healthcare Alliance, L.P. Contract</i>	Award Lowest Offer	Patrick Casey		\$ 53,441
					Total Expenditures	\$ 724,975
					Total Revenue	\$ (0)

Thursday, February 29, 2024

Consideration of Approval of Grant Recommendations (Items C1 through C6)

Grant recommendations:

C1. Harris County Hospital District Foundation, funded by Roots & Wings Foundation Grant – Grant Agreement

- Term: March 1, 2024 – February 29, 2026
- Award Amount: \$390,000.00
- Project Owner: Dr. Suzanne Lundeen

C2. Workforce Solutions – Ratification of Grant Agreement to provide on-the-job apprenticeship training for Patient Care Assistants (PCA)

- Term: One year after execution of agreement
- Award Amount: Up to \$216,000.00
- Project Owner: Gary Marsh

C3. Texas Office of the Governor, funded by the SAFE-Ready Facilities Program – Grant Agreement to provide Forensic Nursing Services

- Term: September 1, 2023 – August 31, 2024
- Award Amount: Shall not exceed \$50,000.00
- Project Owner: Maureen Padilla

C4. Texas Office of the Governor, funded by the Violence Against Women Formula Grants – Grant Agreement to provide Forensic Nursing Services

- Term: October 1, 2023 – September 30, 2024
- Award Amount: Shall not exceed \$58,975.20
- Project Owner: Maureen Padilla

C5. Harris County, funded by State and Federal American Rescue Plan Act of 2021 – Interlocal Sub-recipient Agreement to Support Expansion of Harris Health’s Food Rx and Food Pharmacy Program

- Term: December 19, 2023 – March 19, 2026
- Award Amount: \$497,358.00
- Project Owner: Denise LaRue

C6. Harris County, funded by State and Federal American Rescue Plan Act of 2021 – Interlocal Sub-recipient Agreement for Gastroenterology Lab at Quentin Mease Health Center

- Term: December 19, 2023 – March 19, 2026
- Award Amount: \$8,998,327.00
- Project Owner: Matthew Reeder

Grant Agenda Items for the Harris County Hospital District dba Harris Health System, Board of Trustees Report
Grant Agreement Summary: February 29, 2024

No.	Grantor	Description/Justification	Action, Basis of Recommendation	Term	Project Owner	Award Amount
C1	Harris County Hospital District Foundation	Consideration of Approval of a Grant Agreement between Harris Health System and the Harris County Hospital District Foundation, through a Grant from Roots & Wings Foundation, benefiting the following two Harris Health programs below. 1. Doula Program: \$360,000.00 for the In-Hospital doula program at Ben Taub Hospital for 4 full time doulas to improve patient care before, during and shortly after childbirth. 2. Prenatal Education and Support: \$30,000.00 to support the prenatal education program on what to expect and how to best be prepared during pregnancy, targeted to improve outcomes.	Grant Agreement	March 1, 2024 through February 29, 2026	Dr. Suzanne Lundeen	\$ 390,000
C2	Workforce Solutions	Consideration of Approval to Ratify a Grant Agreement between the Harris County Hospital District d/b/a Harris Health System and Workforce Solutions to fund on-the-job Apprenticeship Training for Patient Care Assistants (PCA). • This grant agreement will fund each PCA apprentice at a rate of \$17.49 per hour for an estimated 640 hours of work up to \$10,800 per apprentice. Harris Health plans to enroll approximately twenty (20) PCA apprentices. • This grant agreement expires on the anniversary of the date the agreement is executed or on the last day of an employee's on-the-job training plan begun under this agreement.	Ratification of a Grant Agreement	One year after execution of agreement	Gary Marsh	\$ 216,000
C3	Texas Office of the Governor	Consideration to approve a Texas Office of the Governor Grant Application Submission and Award for Grant Project Number 3942105 (Texas Office of the Governor – Criminal Justice Division (CJD)).	Grant Agreement	September 1, 2023 through August 31, 2024	Maureen Padilla	\$ 50,000
C4	Texas Office of the Governor	Consideration to approve a Texas Office of the Governor Grant Application Submission and Award for Grant Project Number 4773401 (Texas Office of the Governor – Criminal Justice Division (CJD)).	Grant Agreement	October 1, 2023 through September 30, 2024	Maureen Padilla	\$ 58,975.20
C5	Harris County	Consideration of Approval of an Interlocal Subrecipient Agreement Between Harris County and Harris Health System using 2021 American Rescue Plan Act Funds to Support Expansion of Harris Health's Food Rx and Food Pharmacy Program.	Interlocal Subrecipient Agreement	December 19, 2023 through March 19, 2026	Dr. Chethan Bachireddy	\$ 497,358.00
C6	Harris County	Consideration of Approval for an Interlocal Subrecipient Agreement Between Harris County and Harris Health System using 2021 American Rescue Plan Act Funds to Support the Gastroenterology Lab at Quentin Mease Health Center.	Interlocal Subrecipient Agreement	December 19, 2023 through December 19, 2025	Matthew Reeder	\$ 8,998,327.00
TOTAL AMOUNT:						\$ 10,210,660.20



Exhibit A

Fund Amount: \$390,000.00

Terms: 2 Years

Contract Monitor: Dr. Suzanne Lundeen, Administrative Director of Nursing

Grant Purpose: 1) Doula Program: \$360,000.00 for the In-Hospital doula program at Ben Taub for 4 full-time doulas to improve patient care before, during and shortly after childbirth.
2) Prenatal Education and Support: \$30,000.00 to support the prenatal education program on what to expect and how to best be prepared during pregnancy, targeted to improve outcomes.

Thursday, February 29th 2024

Consideration of Approval to Ratify a Grant Agreement between the Harris County Hospital District d/b/a Harris Health System and Workforce Solutions

Executive Summary

Harris Health System is a recipient to a Workforce Solutions grant to fund On-The-Job Apprenticeship Training for Patient Care Assistants (PCA). This grant is related to Harris Health's Apprenticeship Program Agreement with Houston Community College.

- This grant agreement will fund each PCA apprentice at a rate of \$17.49 per hour for an estimated 640 hours of work up to \$10,800 per apprentice. Harris Health plans to enroll approximately twenty (20) PCA apprentices.
- This grant agreement expires on the anniversary of the date the agreement is executed or on the last day of an employee's on-the-job training plan begun under this agreement.

Thursday, February 29th, 2024

Consideration to Ratify a Grant Agreement Between the Harris County Hospital District
d/b/a Harris Health System and the Texas Office of the Governor

Executive Summary

Harris Health System is a recipient of a grant from the Texas Office of the Governor grant to fund Forensic Nursing Services:

- "Enhancement of a Community SAFE-Ready Facility (FY2024)", grant number 3942105, is funded by the SAFE-Ready Facilities Program. The total reimbursement amount for this grant shall not exceed \$50,000.00 for the term of September 1, 2023 through August 31, 2024.

STATE OF TEXAS
COUNTY OF HARRIS

MOTION NO. _____

On February 29, 2024, the Harris County Hospital District d/b/a Harris Health System (Harris Health) Board of Trustees convened in regular session at its regular meeting place. The following members of the Board were present:

		Present	Absent
Andrea Caracostis, MD, MPH	Chair	<input type="checkbox"/>	<input type="checkbox"/>
Cody M. Pyke, MD, JD, LLM, FCLM	Vice Chair	<input type="checkbox"/>	<input type="checkbox"/>
Carol Paret, BS	Secretary	<input type="checkbox"/>	<input type="checkbox"/>
Afsheen Davis, JD, MPH	Board Member	<input type="checkbox"/>	<input type="checkbox"/>
Ingrid Robinson	Board Member	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Tijerina, MS	Board Member	<input type="checkbox"/>	<input type="checkbox"/>
Jim Robinson, MA, CFE	Board Member	<input type="checkbox"/>	<input type="checkbox"/>
Marcia Johnson, JD	Board Member	<input type="checkbox"/>	<input type="checkbox"/>
Sima Ladjevardian, JD	Board Member	<input type="checkbox"/>	<input type="checkbox"/>

The Board determined that a quorum was present. Among other business, a resolution on the following matter was considered:

Consideration to approve a Texas Office of the Governor Grant Application Submission and Award for Grant Project Number 3942105 (Texas Office of the Governor – Criminal Justice Division (CJD)).

_____ introduced the resolution and made a motion that it be adopted. _____ seconded the motion for adoption. The motion, carrying with it the adoption of the resolution, prevailed by the following vote:

	Yes	No	Abstain	Absent
Andrea Caracostis, MD, MPH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cody M. Pyke, MD, JD, LLM, FCLM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carol Paret, BS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afsheen Davis, JD, MPH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ingrid Robinson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Tijerina, MS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jim Robinson, MA, CFE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marcia Johnson, JD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sima Ladjevardian, JD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The adopted resolution reads as follows:

WHEREAS, The Harris Health System Board of Trustees finds it in the best interest of the citizens of Harris County, Texas that the SAFE-Ready Facilities Program be operated for the Grant Period September 1, 2023 – August 31, 2024; and

WHEREAS, The Harris Health System Board of Trustees agrees that in the event of loss or misuse of the Office of the Governor funds, The Harris Health System Board of Trustees assures that the funds will be returned to the Office of the Governor in full.

WHEREAS The Harris Health System Board of Trustees designates Esmail Porsa, MD, President/CEO as the grantee’s authorized official. The authorized official is given the power to apply for, accept, reject, alter or terminate the grant on behalf of the applicant agency.

NOW THEREFORE, BE IT RESOLVED that The Harris Health System Board of Trustees approves submission of the grant application for the SAFE-Ready Facilities Program to the Office of the Governor.

PASSED AND APPROVED this 29 of February, 2024.

Andrea Caracostis, MD, MPH, Chair

Attest:

Carol Paret, BS, Secretary

Grant Number: 3942105

Thursday, February 29th, 2024

Consideration to Ratify a Grant Agreement Between the Harris County Hospital District
d/b/a Harris Health System and the Texas Office of the Governor

Executive Summary

Harris Health System is a recipient of a grant from the Texas Office of the Governor grant to fund Forensic Nursing Services:

- "Expanding Forensic Nursing Services in Response to Violence in Harris County (FY2024)", grant number 4773401, is funded by Violence Against Women Formula Grants. The total reimbursement amount for this grant shall not exceed \$58,975.20 for the term of October 1, 2023 through September 30, 2024.

STATE OF TEXAS
COUNTY OF HARRIS

MOTION NO. _____

On February 29, 2024, the Harris County Hospital District d/b/a Harris Health System (Harris Health) Board of Trustees convened in regular session at its regular meeting place. The following members of the Board were present:

		Present	Absent
Andrea Caracostis, MD, MPH	Chair	<input type="checkbox"/>	<input type="checkbox"/>
Cody M. Pyke, MD, JD, LLM, FCLM	Vice Chair	<input type="checkbox"/>	<input type="checkbox"/>
Carol Paret, BS	Secretary	<input type="checkbox"/>	<input type="checkbox"/>
Afsheen Davis, JD, MPH	Board Member	<input type="checkbox"/>	<input type="checkbox"/>
Ingrid Robinson	Board Member	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Tijerina, MS	Board Member	<input type="checkbox"/>	<input type="checkbox"/>
Jim Robinson, MA, CFE	Board Member	<input type="checkbox"/>	<input type="checkbox"/>
Marcia Johnson, JD	Board Member	<input type="checkbox"/>	<input type="checkbox"/>
Sima Ladjevardian, JD	Board Member	<input type="checkbox"/>	<input type="checkbox"/>

The Board determined that a quorum was present. Among other business, a resolution on the following matter was considered:

Consideration to approve a Texas Office of the Governor Grant Application Submission and Award for Grant Project Number 4773401 (Texas Office of the Governor – Criminal Justice Division (CJD)).

_____ introduced the resolution and made a motion that it be adopted. _____ seconded the motion for adoption. The motion, carrying with it the adoption of the resolution, prevailed by the following vote:

	Yes	No	Abstain	Absent
Andrea Caracostis, MD, MPH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cody M. Pyke, MD, JD, LLM, FCLM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carol Paret, BS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afsheen Davis, JD, MPH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ingrid Robinson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Tijerina, MS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jim Robinson, MA, CFE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marcia Johnson, JD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sima Ladjevardian, JD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The adopted resolution reads as follows:

WHEREAS, The Harris Health System Board of Trustees finds it in the best interest of the citizens of Harris County, Texas that the Expanding Forensic Nursing Services in Response to Violence in Harris County project be operated for the Grant Period October 1, 2023 – September 30, 2024; and

WHEREAS, The Harris Health System Board of Trustees agrees that in the event of loss or misuse of the Office of the Governor funds, The Harris Health System Board of Trustees assures that the funds will be returned to the Office of the Governor in full.

WHEREAS, The Harris Health System Board of Trustees designates Esmail Porsa, MD, President/CEO as the grantee’s authorized official. The authorized official is given the power to apply for, accept, reject, alter or terminate the grant on behalf of the applicant agency.

NOW THEREFORE, BE IT RESOLVED that The Harris Health System Board of Trustees approves submission of the grant application for the Expanding Forensic Nursing Services in Response to Violence in Harris County project to the Office of the Governor.

PASSED AND APPROVED this 29 of February, 2024.

Andrea Caracostis, MD, MPH, Chair

Attest:

Carol Paret, BS, Secretary

Grant Number: 4773401

January 25, 2024

Consideration of Approval for an Interlocal Subrecipient Agreement Between Harris County and Harris Health System using American Rescue Plan Act of 2021 Funds to Support Expansion of Harris Health's Food Rx and Food Farmacy Program

Executive Summary

Administration requests approval of an interlocal agreement between Harris County and Harris Health System for the purpose of expanding Harris Health's Food Rx and Food Farmacy Programs to El Franco Lee, Gulfgate, and Martin Luther King, Jr. Health Centers. If approved, the agreement will result in Harris Health receiving a payment of \$497,358 from State and Federal American Rescue Plan Act of 2021 funds awarded to Harris County. The funds will specifically be applied to the salaries of additional community health workers and the purchase of Food Farmacy related equipment at the above-named ambulatory clinic locations.

The agreement will end on March 19, 2026, at which time Harris Health will be solely responsible for supporting operation of these three Food Farmacies with its operating budget.

January 25, 2024

Consideration of Approval for an Interlocal Subrecipient Agreement Between Harris County and Harris Health System using American Rescue Plan Act of 2021 Funds to Support the Gastroenterology Lab at Quentin Mease Health Center

Executive Summary

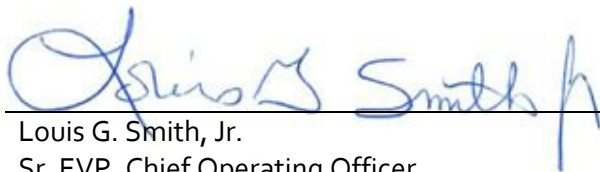
Administration requests approval of an interlocal agreement between Harris County and Harris Health System for the purpose of funding clinical staff salaries and the purchase of equipment to be installed in the new Gastroenterology Lab at Quentin Mease Health Center. If approved, this agreement would result in Harris Health receiving a payment of \$8,998,327 from State and Federal American Rescue Plan Act of 2021 funds awarded to Harris County. Harris Health anticipates the new Gastroenterology Lab will provide additional capacity to perform colonoscopies, improve colorectal cancer screening rates, and reduce delays in colorectal cancer diagnoses.

The agreement will end on December 19, 2025, at which time Harris Health will be solely responsible for supporting the operation of the Gastroenterology Lab with its operating budget.

Thursday, January 25, 2023

Consideration of Approval of Agreement between Harris Health and Baylor College of
Medicine at Houston for Parking at the Harris Health Smith Clinic

1. Provides for a formal agreement to allow Baylor staff approved by the Baylor parking office to utilize the Harris Health Smith Clinic parking garage.
2. Allows for Baylor staff that do not need Ben Taub Parking garage access with access to the Smith clinic parking garage and other Harris Health parking facilities.
3. Provides for a registration of vehicles and permit issuance to approved Baylor staff.
4. Clearly defines responsibilities of the staff requesting parking access, the Baylor Parking Office, and Harris Health Department of Public Safety operations.



Louis G. Smith, Jr.
Sr. EVP, Chief Operating Officer

BOARD OF TRUSTEES

Meeting of the Board of Trustees

HARRISHEALTH
SYSTEM

Thursday, February 29, 2024

Consideration of Approval to authorize the Senior Vice President, Facilities Construction & Systems Engineering to sign permit, easement, and construction-related administrative applications, forms and ancillary documents, as required by the appropriate authorities having jurisdiction

Harris Health System's Healthcare Systems Engineering department works with city, county, and federal offices to secure permits and consent related to Board-approved construction, renovations, and real property conveyances. Local jurisdictions require permit application(s), accompanying declarations, and related documents, including easement dedications and encroachments, be executed either by an individual elected, appointed, or designated by the entity's governing body or who is authorized to sign such documents. Currently, no member of the Healthcare Systems Engineering department has authority to sign these documents, which may result in delays to time-sensitive construction projects.

Administration recommends that the Senior Vice President, Facilities Construction & Systems Engineering be granted authority to sign permit, easement, and construction-related administrative applications, forms and ancillary documents as an authorized representative of Harris Health System.

DocuSigned by:

Patrick Casey

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Patrick Casey
SVP, Facilities Construction & Systems
Engineering

Thursday, February 29, 2024

Consideration of Approval of an Interlocal Agreement Between the Harris County Hospital District d/b/a Harris Health System and Harris County for delivery of an evidence-based Diabetes Prevention Program

Diabetes is the seventh-leading cause of death in the United States and one of the most prevalent diseases seen in Harris Health patients. In an effort to prevent the progression of diabetes in Harris Health patients diagnosed with pre-diabetes, Harris Health requested that the Harris County Public Health Department make its evidence-based Diabetes Prevention Program available at two Harris Health clinics. The Board's approval of this Interlocal Agreement would enable HCPH to conveniently deliver the Program to Harris Health System patients at risk of Type 2 Diabetes onset.

The material terms of the agreement are:

- Length – 1 year with unlimited annual renewals
- Services – HCPH will assist Harris Health to create standard operating procedures and stakeholder engagement strategies for Ambulatory Care Services and will assign certified lifestyle coaches to deliver its Diabetes Prevention Program onsite at two Harris Health Ambulatory Care sites
- Cost – None. The program is currently available free-of-charge to eligible Harris County residents and will be delivered free of charge to Harris Health patients as well

Administration recommends approval of this Interlocal Agreement between the Harris County Hospital District d/b/a Harris Health System and Harris County for implementation of the Diabetes Prevention Program by HCPH at Harris Health Ambulatory Care sites.

Chethan Bachireddy

Chethan Bachireddy

Senior Vice President – Chief Health Officer, Population Health

Thursday, February 29, 2024

Harris Health System Legislative Initiatives

Updates Regarding Pending State and Federal Legislative and Policy Issues Impacting Harris Health System.



King Hillier
V.P., Public Policy & Government Relations

February 29, 2023 Board of Trustees Monthly Report

Federal Update

Fiscal Year 2024 Budget Update: In early January an agreement between Republicans and Democrats on topline spending levels for the current federal fiscal year was reached, lawmakers now turn to sorting out the details of various health care issues, including a looming \$8 billion cut to Medicaid disproportionate share hospital (DSH) funding.

The deal between House Speaker Mike Johnson (R-La.) and Senate Majority Leader Chuck Schumer (D-N.Y.), which lessened the odds of a partial government shutdown on Jan. 20, set a cap of \$1.59 trillion for 12 annual spending bills. But it left negotiations on details up to the appropriations committees in both chambers.

Both chambers of Congress passed a short-term measure on Jan 18 to fund the federal government past Friday – after which, in the absence of a deal, a partial shutdown would have occurred, and long-delayed cuts to Medicaid disproportionate share hospital (DSH) funding would go into effect.

Both the Senate and House passed the funding agreement that afternoon, sending it to President Joe Biden’s desk for his signature. As a result of a stair-stepped process agreed to in November 2023, the congressional appropriations process was divided into two continuing resolutions. The portion including the DSH cuts was extended until Jan. 19. Other parts are funded until Feb. 2, including the federal health and human services agency.

The new bill, which originated in the Senate, would extend the two-part funding structure, making the new deadlines March 1 and March 8, with funding for Medicaid DSH and other priority health programs —Community Health Centers, National Health Service Corps, Teaching Health Centers Graduate Medical Education (GME), and the Special Diabetes Program — extended to the latter date.

Advocacy efforts are underway for Congress to scrap the DSH cuts outright; over 2024 and 2025, they would cost safety-net hospitals nationwide \$16 billion. In December 2023, the House passed the Lower Costs, More Transparency Act (H.R. 5378) which would eliminate the \$8 billion DSH cut in both fiscal year (FY) 2024 and FY 2025. The month before, the Senate Committee on Finance approved the bipartisan Better Mental Health Care, Lower Drug Cost, and Extenders Act that also eliminates the FY 2024 and FY 2025 DSH cuts.

Looking ahead, lawmakers still must consider further action to eliminate Medicaid DSH cuts. They also will revisit funding for community health centers, teaching health centers' GME, National Health Service Corps and the special diabetes programs; and policies on site-neutral payments, hospital pricing transparency, pharmacy benefit manager reforms, and reauthorization of measures to address the nation's opioid use disorder crisis.

Congress must also consider several items that were temporarily extended under the previous continuing resolution, including the Pandemic and All-Hazards Preparedness Act (PAHPA), which continues to have House and Senate versions with no clear path forward to a final bill.

State Update:

Postpartum Medicaid Coverage Extension Approved Effective March 1: Pregnant women in Texas Medicaid will have one year of continuous postpartum coverage beginning March 1 after federal approval of the [state plan amendment](#) to implement that coverage.

The approval by the Centers for Medicare & Medicaid Services (CMS) is a major step in Texas for incremental coverage expansion towards targeted populations which was passed by the Texas Legislature as [House Bill 12](#) during last year's regular session.

Federal approval of the state plan amendment was the final obstacle to extending postpartum Medicaid coverage for Texas mothers beyond the current two-month limit. In 2021, lawmakers passed an extension of coverage to six months postpartum, but CMS did not approve the resulting state plan amendment for that bill, prompting the Legislature to take another run at coverage extension last year. As of November 2023, [according to CMS](#), 40 states had extended coverage to one year postpartum.

Petition to TMB Requests Rules on Abortion Exceptions: With many advocates recently citing a lack of clarity on exceptions to Texas' abortion ban, two Austin attorneys have [petitioned the Texas Medical Board](#) (TMB) and submitted proposed rules for TMB to consider to provide that clarity.

Amy and Steve Bresnen of Bresnen Associates asked TMB to begin the rulemaking process, saying the board's response to calls for clarity has been "insufficient." Texas law contains narrow exceptions allowing an abortion to save the life of the pregnant mother. But since the U.S. Supreme Court's 2022 decision in *Dobbs v. Jackson Women's Health Organization* overturned *Roe v. Wade*, and Texas' subsequent implementation of an abortion ban, the parameters of that exception have been repeatedly contested both in court and in the court of public opinion, as in the [Kate Cox case](#) in late 2023.

"The statutory 'medical emergency exceptions' ... to our State's near total ban on abortions are regarded by people on both sides of the abortion divide as leaving zero doubt that justice and public safety demand TMB rulemaking under the circumstances," the Bresnens wrote in their Jan. 16 petition. "Pregnant females in life-threatening situations and the health care providers otherwise willing to save their lives simply cannot be required to stand idly in the void when the

TMB has the authority to act and the duty to regulate medicine in this state in the public interest.”

The attorneys’ proposed rules include a provision allowing a physician to perform an abortion “when, in the exercise of reasonable medical judgment, the pregnant female ... has a life-threatening physical condition aggravated by, caused by, or arising from a pregnancy that places the female at risk of death or poses a serious risk of substantial impairment of a major bodily function unless the abortion is performed or induced.” The rules contain a list of 17 specific conditions that “without limitation” may be covered by an exception, and a section on “reasonable medical judgment” would state that the pregnant person’s death would not need to “be imminent absent an abortion.”

[The petition](#) noted that in the Cox case, the Texas Supreme Court “expressly called for TMB action” to respond to prevailing confusion over the law. The Bresnens’ petition also asserted that “regulatory delay in providing brighter lines is exacerbating litigation.” TMB has 60 days after the date of submission of a petition to either deny it in writing and state its reasons for denial, or to initiate rulemaking.

Hospital at Home Rule Finalized: On Jan 19, HHSC [adopted](#) its final rules concerning Hospital at Home Application and Operational Requirements, which implement House Bill 1890 from last year’s regular session of the Texas Legislature. The bill allows a licensed hospital to operate a hospital-at-home program with approval from the Centers for Medicare & Medicaid Services (CMS) and HHSC.

HHSC finalized the rules with changes to the proposal it published last October, and the changes incorporate many of the comments submitted by industry stakeholders for additional flexibility. For example, the limiting of hospital at home services to “residential” settings may be too restrictive if that would preclude patients residing in assisted living or other non-residential settings. HHSC agreed and removed the word “residential,” and commented that the hospital is responsible for determining which home settings may participate in the program.

Other revisions resulted from a comment that rather than prohibiting outright disruptions in utility and other services which are not under the control of the hospital, that the hospital should have policies for addressing such disruptions if they occur in the home. HHSC agreed, deciding to require the hospital to identify in its policies how it will address such disruptions

HHSC was also asked to modify language related to hospital personnel entering the home only “at designated times,” which may preclude the hospital from entering in emergency situations or at other times that are in the best interests of the patient. HHSC modified the language in the rule to allow entry “as needed.”

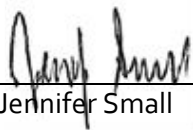
The finalized rules went into effect Jan 25.

[Thursday, February 29, 2024](#)

[Harris Health System Council-At-Large January 8, 2024 Meeting Minutes](#)

Harris Health System Council-At-Large Meeting Minutes

- January 8, 2024



Jennifer Small

Executive Vice President, Ambulatory Care Services

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
January 8, 2024**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
I. Call to Order	<p>The WebEx meeting was called to order by Fadine Roquemore at 5:00pm.</p> <p>Council Members in Attendance:</p> <ul style="list-style-type: none"> • Casa: Alicia Reyes, Daniel Bustamante • Gulfgate: Patricia Shepherd, Teresa Recio • Homeless: Ross Holland • LBJH: Velma Denby • MLK: Fadine Roquemore • Thomas St: Josh Mica • Vallbona: Cynthia Goodie, Penny Williams <p>Harris Health System Attendees: Dr. Esmail Porsa, Louis Smith, Dr. Fareed Khan, Dr. Jennifer Small, Sunny Ogonnaya, Jon Hallaway, Patrick Casey, Omar Reid, Lydia Rogers, Binta Baudy, Lady Barrs, Gloria Glover, Melvin Prado, Dawn Jenkins, Jenny Mondragon, Tracey Burdine, Precious Udensi, John Jabeen, Esperanza Galvan, Robin Lockett, Nina Jones</p>	
II. Moment of Silence	<p>Moment of Silence observed.</p>	
III. Approval of Minutes	<p>Motion to approve November minutes as written approved and second.</p>	
IV. Council Reports	<p>Acres Home – No Representative</p> <p>Baytown – No Representative</p> <p>Casa de Amigos – Daniel Bustamante</p> <ul style="list-style-type: none"> • The council did not have a meeting in December. The next meeting will be in January. • Staff is very excited, they have already started utilizing Phase I renovations (Pharmacy, Laboratory). • We want to thank everyone involved in the renovations. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
January 8, 2024**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Council Reports (continued)</p> <p>Gulfgate – Theresa Recio & Patricia Shepherd</p> <ul style="list-style-type: none"> • The Advisory council did not meet today due to weather and lack of meeting quorum. • We want to acknowledge the Gulfgate staff, volunteers and council members for their support of the Annual Holiday event. Santa Claus was present and took pictures with 70 children and their families. It was a wonderful event. <p>Homeless – Ross Holland</p> <ul style="list-style-type: none"> • Enjoyed being at the holiday party in December. • The Council met on December 5th. -Discussed the Mobile Unit being prepared for use some time in February. -Interviews will be conducted for a driver of the Dental Mobile Unit. • I do not have the quality reports in front of me. There was a meeting on January 2nd in which I was unable to attend due to work commitments. <p>MLK – Fadine Roquemore</p> <ul style="list-style-type: none"> • No report at this time. <p>Thomas Street – Josh Mica</p> <ul style="list-style-type: none"> • The council did not meet in December. • We held a Toy Drive and for the first time was able to give away over 1000 toys. • The Thanksgiving feast was also successful. • We look forward to growing in this upcoming year. <p>Vallbona – Cynthia Goodie</p> <ul style="list-style-type: none"> • No report for Vallbona Clinic. • I have been voted in as Chairperson of the nominating committee for the Council at large. We are now recruiting for a new Chairman, Vice Chairman, Secretary and Parliamentarian. • The nominating members are I, Cynthia Goodie, Daniel Bustamante and Theresa Recio. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
January 8, 2024**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Council Reports <i>(continued)</i></p> <p>If you are interested in serving in one of the voluntary positions, please let your voice be heard. Myself, Mr. Bustamante and Mrs. Recio can be reached by phone or by email. As the Bylaws state in writing all terms are a two-year limit. Nominations will be held in February 2024. The new term begins March.</p> <p>Ben Taub Hospital – No Representative</p> <p>Lyndon B. Johnson Hospital – Velma Denby</p> <ul style="list-style-type: none"> • No report at this time. 	
V. Old Business	No Old Business	
VI. Updates/Guest	No Updates/Guest	
VII. Community Medicine	<p>Dr. Fareed Khan</p> <p><i>Primary Care Operations Scorecard:</i></p> <ul style="list-style-type: none"> • We are doing very well. We are meeting the average cycle time. The red on the screen has improved. We have available appointments for OB in most of our clinics. Also, in Pediatrics and newborn. By in large, everyone can get in. <p><i>Primary Care Pediatric Scorecard:</i></p> <ul style="list-style-type: none"> • Pediatric no-show rate seems to be high. The average cycle time is taking a little longer. We do have access at most of our clinics but the most challenging is getting newborn and new patient appointments. Beyond that, our established patients can get in quickly. <p>Questions/Comments:</p> <p>Mrs. Reyes asked what programs do we have in place to address accessibility.</p> <p><i>Dr. Khan responded I know we’ve talked about this in general terms. There are no specifics at this time. We need less no-show rate which will increase access.</i></p>	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
January 8, 2024**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Community Medicine <i>(continued)</i></p> <p><i>Some insurances are not being accepted. Patients get appointments but then find out we can't see them. Operations is going to look at the overall insurances. Beyond that, we can tweak templates. I will speak to Lydia and Heena to help with that.</i></p> <p><i>Jenny Mondragon stated I am the Operations Manager of Strategic Program for the Pediatric Service line. We have been combining our competing slots, so that they are now being fully utilized so we can provide more access to our Pediatric patients. We are looking very closely at how this is being reported at our sites so we can modify the template.</i></p> <p><i>We are also changing a few items on the scorecard. We would like to know what is the 1st available, or how many days when the 1st available appointment occurs between well child and adolescents. We are working closely with the ACS reporting team to assist us with that information.</i></p> <p>Mrs. Reyes commented she attended a community town hall meeting last year and the public had some real concerns about the availability for children's services in the Settegast community. This has been a continuous problem in that community and we need to address this in a more holistic way and these number don't reflect that.</p> <p><i>Dr. Khan stated I have spoken with Dr. Small and we are definitely looking to expand at the Cypress location and at some point, Pasadena will move to a new location. Whether that alone solves the problem, I don't know but we are looking into this.</i></p> <p><i>Dr. Small stated Pasadena is one of the locations that we are looking to expand pediatric services because we know there is a demand and need at that location. At Danny Jackson, last year we transitioned and opened up pediatrics at that site because of the need in the Katy market. To add clarity, we set our own internal target for well child at 45 days, this is not the normal. In the community, it takes 3 months or more to</i></p>	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
January 8, 2024**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Community Medicine <i>(continued)</i></p> <p><i>get well child visits. We set 45 days as a standard to ensure our patients have timely access to care. But I do want you to know yes, we are looking at the information. We do recognize in particular with CEO that there is a need for additional pediatric and its one of those services we will be looking at in terms of requesting additional support from the medical schools.</i></p> <p><i>Binta Baudy stated the analysis is underway as mentioned in the November meeting by Dr. Mahmood. There are conversations happening around expansion. As we close out, one of the opportunities we have when looking at a template for clinical practice is the new and return appointments. We have a lot of access with our return appointment (see report), and there is opportunity to transition some of those appointments so we can see more new patients. This is what the team will be looking at and next month and when we report, we'll share some of the work that's been done and what you'll see moving forward as a result of those changes. We can further solidify expansion plans and will provide those updates as well.</i></p> <p>Mr. Bustamante commented, Mrs. Reyes I join you in your concerns about the underserved communities. I have seen over the years certain communities have been neglected by policy and Settegast is one of those. But it deserves a lot of attention from everybody (housing, open ditches, etc.).</p> <p>HEDIS Scorecard Data Reporting Period:</p> <ul style="list-style-type: none"> • There is no red on this report. For hemoglobin testing, we have beat our own goal and reached stretch goal, 96.4%. Hemoglobin A1C we want it to be less. High blood pressure control along with diabetes control leads to lower mortality and morbidity and our patients have better quality of life. Screening eye disease, we are beyond stretch goal. Diabetic foot exam we are meeting goals. We haven't reached the stretch goal for dialysis but we are meeting the Harris Health goal which is greater than 95.1%. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
January 8, 2024**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Community Medicine (continued)</p> <ul style="list-style-type: none"> • We are tightening the diabetic control. Breast Cancer screening is ongoing. We are catching breast cancer early and there aren't many patients falling through the cracks. We are at goal for blood pressure. Cervical Cancer we are exceeding goal. Childhood immunizations, we are way above goal. Colorectal screening, we are meeting goal. As the Quentin Mease suites open, we will be doing much better. Immunizations for adult we are at 90%. <p>Questions/Comments: None</p> <ul style="list-style-type: none"> ○ Josh Mica asked about HIV patients and how many patients are still detectable? He stated, I just want to see what the stats are since Community Health Choice went to their 2 -tier system. I don't agree with how they are treating people living with HIV differently. <p><i>Dawn Jenkins responded; I know that our stats are not included in the HEDIS but we can present that information quarterly. I will talk with Dr. Serpa to ensure we can report next month.</i></p> <p><i>Dr. Khan responded; it's an excellent question. It points out how much more we do than other entities outside and around us. The council should feel comfortable with us presenting this data and if there are any follow-ups, we'll definitely work with it.</i></p> <p>Mr. Bustamante asked for an update of the COVID/Flu/Respiratory in Harris County?</p> <p><i>Dr. Khan responded; I do know it's on the rise. There seems to be more patients with the flu and cold. January is when flu is on the rise. I know that the viral data is showing one of the highest spikes but the good news is people are not getting as sick.</i></p> <p><i>Dr. Porsa responded, Dr. Khan you are right about the stats of the waste water load. It's not as high as it's been in recent years but obviously a 100% increase. We anticipate the numbers go up as the weather gets colder. We are not seeing an increase in hospitalizations or deaths as it relates to Covid.</i></p>	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
January 8, 2024**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
Administration	<p>Dr. Esmaeil Porsa, President/CEO</p> <ul style="list-style-type: none"> Dr. Porsa thanked Harris Health staff and medical staff for a job well done. He also commended the council at large members for advocating for the communities. As part of our bond proposal. We told the public our goal is to raise 100 million dollars over the next ten years to help pay for improvements. I’m excited to report almost two months after the passage of the bond we have 15 million dollars in the bank. <p>Questions/Comments: None</p> <p>Dr. Jennifer Small, Executive Vice President, Ambulatory Care Service</p> <ul style="list-style-type: none"> Thank you to all of you that was able to attend the holiday celebration and thank Angelique Martinez, my assistant who work to ensure everything was planned and coordinated. Quentin Mease is now providing colonoscopy. We are excited to have that facility open. At the end of December, Nursing received pathway to excellence designation from the American Nurses Credentialing Center. This designation is the first step that’s needed before we can be listed as a magnet for ambulatory care services. This designation means were meeting the essential elements of providing a positive place to practice. We are one of two health systems in the nation to receive this designation for ambulatory care services and the only one that has the designation for outpatient clinics. When you visit the clinic, please commend your nursing team. Healthcare for the Homeless program has done a fine job in receiving additional quality badges from HRSA. HRSA is the entity from the federal government that provides funding to the healthcare for the homeless program. They also provide quality badges to recognize them for quality care and our healthcare for the homeless was tied with another institution in the state of Texas to receive 5 quality badges out of over 70 within the state. <p>Questions/Comments: None</p>	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
January 8, 2024**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Administration (<i>continued</i>)</p> <p>Dr. Sunny Ogbonnaya, Admin. Director Outpatient Pharmacy & Pharmacy Business</p> <ul style="list-style-type: none"> Pharmacy Service highlight: <ul style="list-style-type: none"> -Meds-To-Bed: This program provides discharge medication and medication education to our inpatients. We also make follow-up calls with patients diagnosed with MI (Heart Attack), CHF (Congestive Heart Failure) and COPD (Chronic Obstructive Pulmonary Disease) within 24 to 72 hours of discharge to find out how they are doing and offer any opportunity to answer any medication questions. - We have a system that is able to call or text message our patients letting them know to come pick their prescription or it has been shipped. These messages go out daily between 8am and 7pm Monday through Friday for all sites. In the month of December, we filled 162, 000 prescriptions, 68% were delivered to our patient’s home. We received and processed over 45,000 refill requests from MyHealth. This number represents 76% of all refill request received and process in December. We thank our patients for using MyHealth. <p>Questions/Comments:</p> <p>Josh Mica asked what’s the wait time for a prescription? What is the goal for someone who gets a new prescription (outpatient)? Over an hour wait is ridiculous.</p> <p><i>Dr. Ogbonnaya responded our goal is to have the prescription complete within an hour. Based on volume, we may go past that hour.</i></p> <p>Josh Mica commented, that’s not really happening in most situations. I would like to see a report on the number. I recently experienced this myself. Waiting over an hour is very inefficient.</p> <p><i>Dr. Ogbonnaya responded, well taken Josh. We will review our policy to make sure we continue to improve on wait time.</i></p>	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
January 8, 2024**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Administration (continued)</p> <p>Jon Hallaway, Program Director, Department of Public Safety (DPS)</p> <ul style="list-style-type: none"> Please to report we had a quiet holiday season. We are excited about the new expansion at Casa and looking forward to seeing the fifth floor coming online very soon at Quentin Mease. <p>Questions/Comments:</p> <p>Patrick Casey, SVP Facilities, Construction & Systems Engineering</p> <ul style="list-style-type: none"> Shared with council Casa De Amigos Expansion Project overview (see attached). <p>Questions/Comments: None</p> <p>Mr. Bustamante thanked Mr. Casey and team for all the work they are doing.</p> <p>Mrs. Reyes also thanked Mr. Casey for the work they are doing and asked if he is involved in the food pharmacy renovations?</p> <p><i>Mr. Casey responded, yes, we manage all the capital improvements and construction in planning. Also, the procurement of the architects and contractors.</i></p> <p>Mrs. Reyes asked if he could give an update at the next CAL meeting.</p> <p><i>Mr. Casey responded he would be happy to report.</i></p> <p>Omar Reid, Executive Vice president, Chief People Officer, Human Resources</p> <ul style="list-style-type: none"> In November we completed our employee engagement survey. Over 7,200 employees participated in the survey. We had over 4,000 comments from employees. Were very encouraged and currently reviewing results to make necessary improvement to our organization. Employee turnover continues to trend downward. We finished 2023 at a good number, 14% overall turnover. Nursing continues to show stability. Everything is moving in a positive direction. <p>Questions/Comments: None</p>	<p>Mrs. Roquemore asked Mr. Casey to send a copy of his presentation to Ms. Jones to be included in the CAL packet.</p>

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
January 8, 2024**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
<p>VIII. Updates/New Business</p>	<p>Mrs. Roquemore stated we will accept nominations for new CAL representative.</p> <p>Ms. Goodie responded I am on the nomination committee and we will be seeing if anyone is interested in being the new Chairman, Vice Chairman, Parliamentarian and Secretary. Hopefully, we will have all of the information ready in the February meeting.</p> <p>Josh Mica asked are there currently any nominations, is there a slate of people at the moment?</p> <p>Ms. Goodie responded not at this time.</p> <p>Mr. Bustamante commented we just want to encourage everybody on the call to think about providing this service to the council at large. We will be there to help. If your interested, please reach out to Ms. Goodie, myself and to Mrs. Recio.</p> <p>Mrs. Recio reminded the council to look at the by-laws.</p> <p>Lydia Rogers commented the By-laws have been sent to the Senior Operations Managers/Directors so they can print them and distribute at their next health center advisory council meeting.</p> <p>Hope Galvan stated she heard the request for Mr. Casey to present at the next council meeting an update on the food pharmacy. I gave an update in November and its apart of the meeting minutes. Is this more of a construction update?</p> <p>Mrs. Reyes stated she just want a construction/ follow up update.</p>	
<p>IX. Adjournment</p>	<p>Motion to adjourn the meeting granted at 6:07pm.</p>	<p>Next Meeting: February 12, 2024</p>

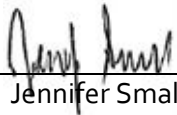
Thursday, February 29, 2024

Review and Acceptance of the Following Report for the Healthcare for the Homeless Program as Required by the United States Department of Health and Human Services Which Provides Funding to the Harris County Hospital District d/b/a/Harris Health System to Provide Health Services to Persons Experiencing Homelessness under Section 330(h) of the Public Health Service Act

Attached for review and acceptance:

- **HCHP Operational Updates**

Administration recommends that the Board accept the Healthcare for the Homeless Program Report as required by the United States Department of Health and Human Services which provides funding to the Harris County Hospital District d/b/a/ Harris Health System to provide health services to persons experiencing homelessness under Section 330 (h) of the Public Health Service Act.



Jennifer Small

Executive Vice President / Ambulatory Care Services

HARRIS HEALTH SYSTEM

Health Care for the Homeless Monthly Update Report – February 2024

Jennifer Small AuD, MBA, CCC-A, Executive Vice President, Ambulatory Care Services
Tracey Burdine, Director, Health Care for the Homeless Program

Agenda

- Operational Update
 - Patient Services
 - Change In Scope
 - 2024 Sliding Fee Scale
 - Q4 Budget Summary Report

Patients Served

Telehealth Visits

- Telehealth New Patients: 0
- Telehealth Return Patients: 21

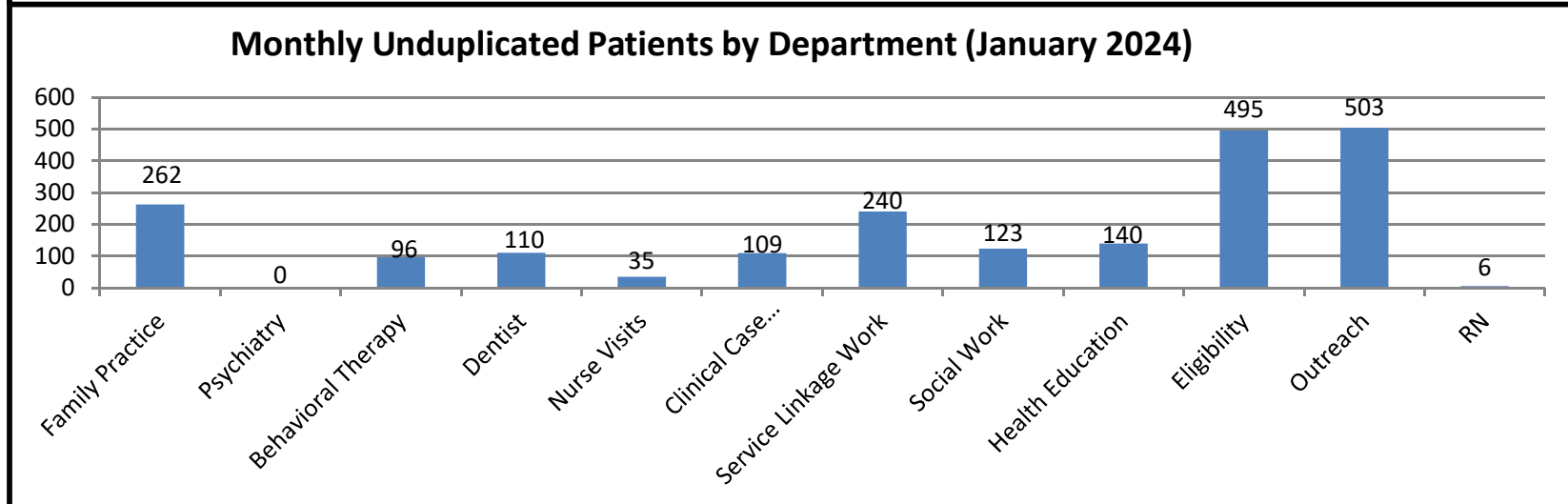
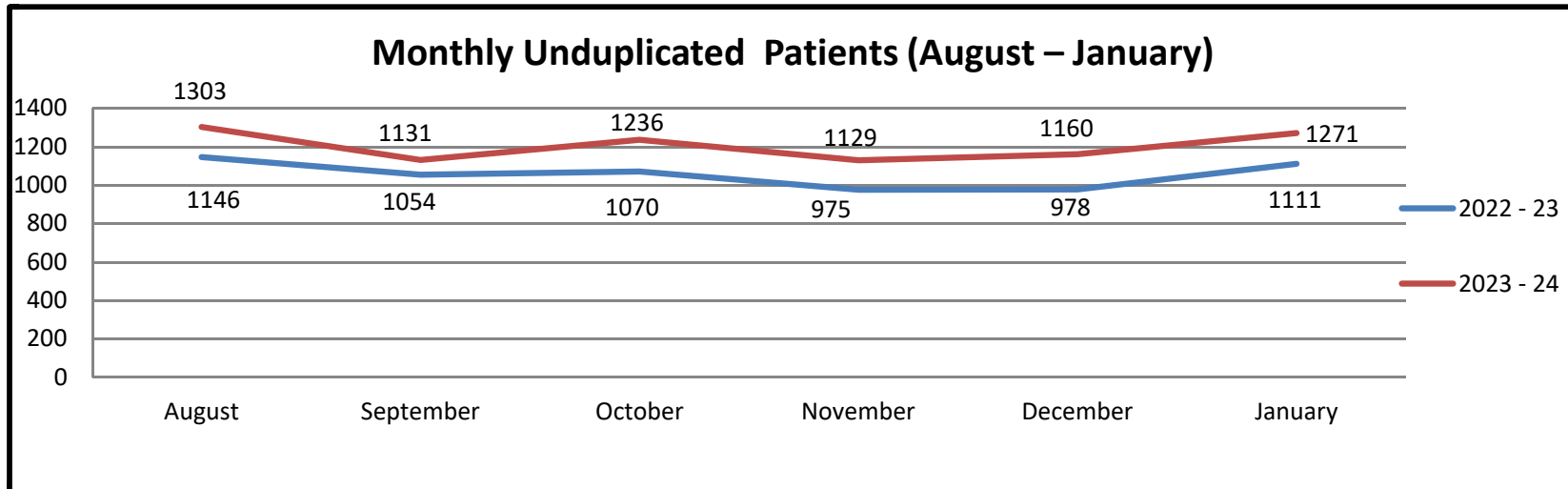
New Patient Visits

- Adult New Patients: 392
- Pediatric New Patients: 18

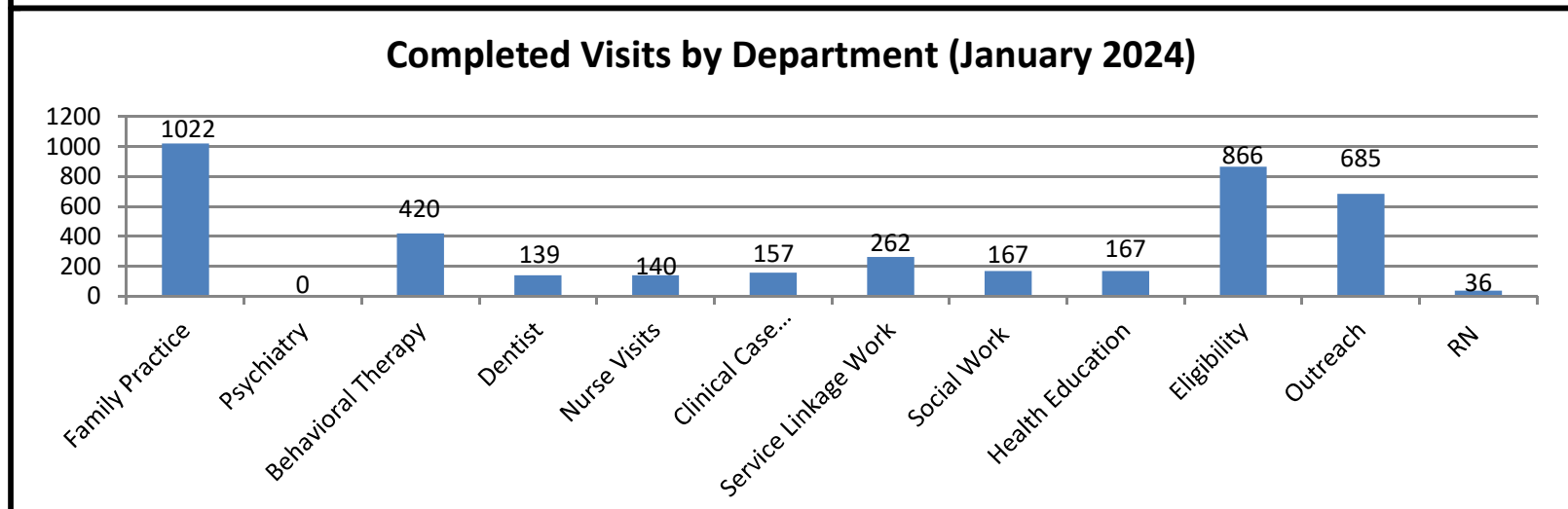
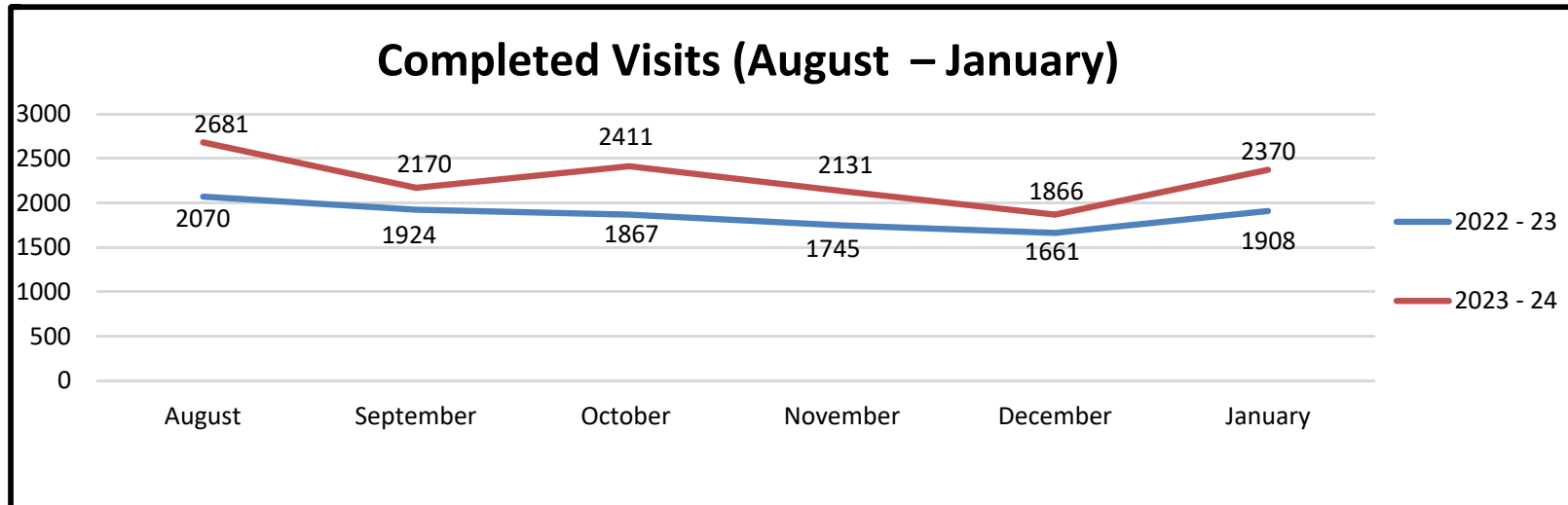
HRSA Target: 9775

- Unduplicated Patients: 688
- Total Complete Visits: 2,370

Operational Update



Operational Update



Operational Update

Change In Scope

1) Change of address for the medical mobile unit at 5656 Kelley St, Houston, TX 77026 to 3550 Swingle Rd, Houston, TX 77047.

a. Delete medical mobile unit at 5656 Kelley St, Houston, TX 77026 from the scope.

b. Add the following Medical Mobile units to scope at 3550 Swingle Rd, Houston, TX 77047:

- Mobile Unit #1
- Mobile Unit #2
- Mobile Unit #3
- Specialty Mobile Medical Unit

c. Each Mobile Unit will operate 32 hours a week

2024 HCHP Sliding Fee Scale

- We are modifying the Health Care for the Homeless Program Sliding Fee Scale based on the 2024 Federal Poverty Guidelines issued on January 17, 2024.
- The modified Sliding Fee Scale will be effective March 1, 2024.
- This sliding fee scale only applies to the ***Health Care for the Homeless Program***

2024 Sliding Fee Scale

Health Care for the Homeless Program

Effective March 1, 2024

HARRIS HEALTH SYSTEM - HEALTH CARE FOR THE HOMELESS PROGRAM - FAP																		
Family Size	HCHP Assistance Category A (100%)			HCHP Assistance Category B (150%)			HCHP Assistance Category C (185%)			HCHP Assistance Category D (200%)			Self-pay					
	Flat Fee Amount -- \$0			Flat Fee Amount -- \$3			Flat Fee Amount -- \$5			Flat Fee Amount -- \$7								
	Min income	Max income	FPL	Min income	Max income	FPL	Min Income	Max Income	FPL	Min Income	Max Income	FPL	Min Income	FPL				
1	0	\$ 1,255	0%	100.00%	\$ 1,255.01	\$ 1,883	100.01%	150.00%	\$ 1,883.01	\$ 2,322	150.01%	185.00%	\$ 2,232.01	\$ 2,510	185.01%	200.00%	\$ 2,510.01	200.01% and >
2	0	\$ 1,703	0%	100.00%	\$ 1,703.01	\$ 2,555	100.01%	150.00%	\$ 2,555.01	\$ 3,151	150.01%	185.00%	\$ 3,151.01	\$ 3,407	185.01%	200.00%	\$ 3,407.01	200.01% and >
3	0	\$ 2,152	0%	100.00%	\$ 2,152.01	\$ 3,228	100.01%	150.00%	\$ 3,228.01	\$ 3,981	150.01%	185.00%	\$ 3,981.01	\$ 4,303	185.01%	200.00%	\$ 4,303.01	200.01% and >
4	0	\$ 2,600	0%	100.00%	\$ 2,600.01	\$ 3,900	100.01%	150.00%	\$ 3,900.01	\$ 4,810	150.01%	185.00%	\$ 4,810.01	\$ 5,200	185.01%	200.00%	\$ 5,200.01	200.01% and >
5	0	\$ 3,048	0%	100.00%	\$ 3,048.01	\$ 4,573	100.01%	150.00%	\$ 4,573.01	\$ 5,639	150.01%	185.00%	\$ 5,639.01	\$ 6,097	185.01%	200.00%	\$ 6,097.01	200.01% and >
6	0	\$ 3,497	0%	100.00%	\$ 3,497.01	\$ 5,245	100.01%	150.00%	\$ 5,245.01	\$ 6,469	150.01%	185.00%	\$ 6,469.01	\$ 6,993	185.01%	200.00%	\$ 6,993.01	200.01% and >
7	0	\$ 3,945	0%	100.00%	\$ 3,945.01	\$ 5,918	100.01%	150.00%	\$ 5,918.01	\$ 7,298	150.01%	185.00%	\$ 7,298.01	\$ 7,890	185.01%	200.00%	\$ 7,890.01	200.01% and >
8	0	\$ 4,393	0%	100.00%	\$ 4,393.01	\$ 6,590	100.01%	150.00%	\$ 6,590.01	\$ 8,128	150.01%	185.00%	\$ 8,128.01	\$ 8,787	185.01%	200.00%	\$ 8,787.01	200.01% and >
9	0	\$ 4,842	0%	100.00%	\$ 4,842.01	\$ 7,263	100.01%	150.00%	\$ 7,263.01	\$ 8,957	150.01%	185.00%	\$ 8,957.01	\$ 9,683	185.01%	200.00%	\$ 9,683.01	200.01% and >
10	0	\$ 5,290	0%	100.00%	\$ 5,290.01	\$ 7,935	100.01%	150.00%	\$ 7,935.01	\$ 9,787	150.01%	185.00%	\$ 9,787.01	\$ 10,580	185.01%	200.00%	\$ 10,580.01	200.01% and >
11	0	\$ 5,738	0%	100.00%	\$ 5,738.01	\$ 8,608	100.01%	150.00%	\$ 8,608.01	\$ 10,616	150.01%	185.00%	\$ 10,616.01	\$ 11,477	185.01%	200.00%	\$ 11,477.01	200.01% and >
12	0	\$ 6,187	0%	100.00%	\$ 6,187.01	\$ 9,280	100.01%	150.00%	\$ 9,280.01	\$ 11,445	150.01%	185.00%	\$ 11,445.01	\$ 12,373	185.01%	200.00%	\$ 12,373.01	200.01% and >
13	0	\$ 6,635	0%	100.00%	\$ 6,635.01	\$ 9,953	100.01%	150.00%	\$ 9,953.01	\$ 12,275	150.01%	185.00%	\$ 12,275.01	\$ 13,270	185.01%	200.00%	\$ 13,270.01	200.01% and >
14	0	\$ 7,083	0%	100.00%	\$ 7,083.01	\$ 10,625	100.01%	150.00%	\$ 10,625.01	\$ 13,104	150.01%	185.00%	\$ 13,104.01	\$ 14,167	185.01%	200.00%	\$ 14,167.01	200.01% and >
15	0	\$ 7,532	0%	100.00%	\$ 7,532.01	\$ 11,298	100.01%	150.00%	\$ 11,298.01	\$ 13,934	150.01%	185.00%	\$ 13,934.01	\$ 15,063	185.01%	200.00%	\$ 15,063.01	200.01% and >

Patient responsibility for categories A = \$0, B = \$3, C = \$5, D = \$7

Poverty level based on 2024 Federal Poverty Guidelines issued 01/2024.

Income figures represent gross monthly income.

This sliding scale applies only to patients of the Health Care for the Homeless Program.

Operational Update

Homeless -Primary Grants and Harris Health Funding					
	Period: January 1, 2023 – December 31, 2023				
	YTD December 2023				
	Line Item	Multiple Award Year Budget	YTD Total Expense	Remaining Balance (budget-projected expense)	%Used YTD
Operating	Personnel/Fringe	\$5,781,577	\$4,190,312	\$1,591,265	72.4%
	Travel	\$20,150	\$4,499	\$15,651	22.3%
	Supplies	\$1,026,863	\$577,548	\$449,315	56.2%
	Equipment	\$1,389,922	\$443,754	\$946,168	31.9%
	Contractual	\$260,675	\$183,497	\$77,178	70.4%
	Other	\$513,193	\$70,073	\$443,119	6.2%
	Total	\$8,992,380	\$5,469,684	\$3,522,696	56.9%
Capital	Other	\$613,179.00	\$0.00	\$613,179	0%
Total		\$9,605,559	\$5,469,684	\$4,135,875	56.9%

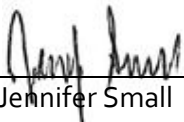
Thursday, February 29, 2024

Review and Acceptance of the Following Report for the Healthcare for the Homeless Program as Required by the United States Department of Health and Human Services Which Provides Funding to the Harris County Hospital District d/b/a/Harris Health System to Provide Health Services to Persons Experiencing Homelessness under Section 330(h) of the Public Health Service Act

Attached for review and acceptance:

- **HCHP 2024 Sliding Fee Scale**

Administration recommends that the Board accept the Healthcare for the Homeless Program Report as required by the United States Department of Health and Human Services which provides funding to the Harris County Hospital District d/b/a/ Harris Health System to provide health services to persons experiencing homelessness under Section 330 (h) of the Public Health Service Act.



Jennifer Small

Executive Vice President / Ambulatory Care Services

HARRIS HEALTH SYSTEM - HEALTH CARE FOR THE HOMELESS PROGRAM - FAP

Family Size	HCHP Assistance Category A (100%)				HCHP Assistance Category B (150%)				HCHP Assistance Category C (185%)				HCHP Assistance Category D (200%)				Self-pay	
	Flat Fee Amount -- \$0				Flat Fee Amount -- \$3				Flat Fee Amount -- \$5				Flat Fee Amount -- \$7				Min Income	FPL
	Min income	Max income	FPL		Min Income	Max Income	FPL		Min Income	Max Income	FPL		Min Income	Max Income	FPL			
1	0	\$ 1,255	0%	100.00%	\$ 1,255.01	\$ 1,883	100.01%	150.00%	\$ 1,883.01	\$ 2,322	150.01%	185.00%	\$ 2,232.01	\$ 2,510	185.01%	200.00%	\$ 2,510.01	200.01% and >
2	0	\$ 1,703	0%	100.00%	\$ 1,703.01	\$ 2,555	100.01%	150.00%	\$ 2,555.01	\$ 3,151	150.01%	185.00%	\$ 3,151.01	\$ 3,407	185.01%	200.00%	\$ 3,407.01	200.01% and >
3	0	\$ 2,152	0%	100.00%	\$ 2,152.01	\$ 3,228	100.01%	150.00%	\$ 3,228.01	\$ 3,981	150.01%	185.00%	\$ 3,981.01	\$ 4,303	185.01%	200.00%	\$ 4,303.01	200.01% and >
4	0	\$ 2,600	0%	100.00%	\$ 2,600.01	\$ 3,900	100.01%	150.00%	\$ 3,900.01	\$ 4,810	150.01%	185.00%	\$ 4,810.01	\$ 5,200	185.01%	200.00%	\$ 5,200.01	200.01% and >
5	0	\$ 3,048	0%	100.00%	\$ 3,048.01	\$ 4,573	100.01%	150.00%	\$ 4,573.01	\$ 5,639	150.01%	185.00%	\$ 5,639.01	\$ 6,097	185.01%	200.00%	\$ 6,097.01	200.01% and >
6	0	\$ 3,497	0%	100.00%	\$ 3,497.01	\$ 5,245	100.01%	150.00%	\$ 5,245.01	\$ 6,469	150.01%	185.00%	\$ 6,469.01	\$ 6,993	185.01%	200.00%	\$ 6,993.01	200.01% and >
7	0	\$ 3,945	0%	100.00%	\$ 3,945.01	\$ 5,918	100.01%	150.00%	\$ 5,918.01	\$ 7,298	150.01%	185.00%	\$ 7,298.01	\$ 7,890	185.01%	200.00%	\$ 7,890.01	200.01% and >
8	0	\$ 4,393	0%	100.00%	\$ 4,393.01	\$ 6,590	100.01%	150.00%	\$ 6,590.01	\$ 8,128	150.01%	185.00%	\$ 8,128.01	\$ 8,787	185.01%	200.00%	\$ 8,787.01	200.01% and >
9	0	\$ 4,842	0%	100.00%	\$ 4,842.01	\$ 7,263	100.01%	150.00%	\$ 7,263.01	\$ 8,957	150.01%	185.00%	\$ 8,957.01	\$ 9,683	185.01%	200.00%	\$ 9,683.01	200.01% and >
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11	0	\$ 5,738	0%	100.00%	\$ 5,738.01	\$ 8,608	100.01%	150.00%	\$ 8,608.01	\$ 10,616	150.01%	185.00%	\$ 10,616.01	\$ 11,477	185.01%	200.00%	\$ 11,477.01	200.01% and >
12	0	\$ 6,187	0%	100.00%	\$ 6,187.01	\$ 9,280	100.01%	150.00%	\$ 9,280.01	\$ 11,445	150.01%	185.00%	\$ 11,445.01	\$ 12,373	185.01%	200.00%	\$ 12,373.01	200.01% and >
13	0	\$ 6,635	0%	100.00%	\$ 6,635.01	\$ 9,953	100.01%	150.00%	\$ 9,953.01	\$ 12,275	150.01%	185.00%	\$ 12,275.01	\$ 13,270	185.01%	200.00%	\$ 13,270.01	200.01% and >
14	0	\$ 7,083	0%	100.00%	\$ 7,083.01	\$ 10,625	100.01%	150.00%	\$ 10,625.01	\$ 13,104	150.01%	185.00%	\$ 13,104.01	\$ 14,167	185.01%	200.00%	\$ 14,167.01	200.01% and >
15	0	\$ 7,532	0%	100.00%	\$ 7,532.01	\$ 11,298	100.01%	150.00%	\$ 11,298.01	\$ 13,934	150.01%	185.00%	\$ 13,934.01	\$ 15,063	185.01%	200.00%	\$ 15,063.01	200.01% and >

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Poverty level based on 2024 Federal Poverty Guidelines issued 01/2024.
 Income figures represent gross monthly income.

This sliding scale applies only to patients of the Health Care for the Homeless Program.

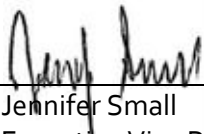
Thursday, February 29, 2024

Review and Acceptance of the Following Report for the Healthcare for the Homeless Program as Required by the United States Department of Health and Human Services Which Provides Funding to the Harris County Hospital District d/b/a/Harris Health System to Provide Health Services to Persons Experiencing Homelessness under Section 330(h) of the Public Health Service Act

Attached for review and acceptance:

- **HCHP Q4 Budget Summary Report**

Administration recommends that the Board accept the Healthcare for the Homeless Program Report as required by the United States Department of Health and Human Services which provides funding to the Harris County Hospital District d/b/a/ Harris Health System to provide health services to persons experiencing homelessness under Section 330 (h) of the Public Health Service Act.



Jennifer Small

Executive Vice President / Ambulatory Care Services

	Line Item	Annual Budget	YTD Total Expense	Remaining Balance(Budget-YTD Expenses)	% Used YTD
Grand Total	Salary	\$ 4,632,309.16	\$ 3,393,126.09	\$ 1,239,183.07	73.2%
	Benefits	\$ 1,149,267.88	\$ 797,186.11	\$ 352,081.77	69.4%
	Travel	\$ 20,150.44	\$ 4,498.81	\$ 15,651.63	22.3%
	Supplies	\$ 1,026,862.58	\$ 577,547.98	\$ 449,314.60	56.2%
	Equipment	\$ 1,389,922.00	\$ 443,754.28	\$ 946,167.72	31.9%
	Contractual	\$ 260,674.93	\$ 183,497.28	\$ 77,177.65	70.4%
	Other	\$ 513,192.63	\$ 70,073.25	\$ 443,119.38	6.2%
	Capital	\$ 613,179.00		\$ 613,179.00	
	Total	\$ 9,605,558.62	\$ 5,469,683.80	\$ 4,135,874.82	56.9%

note: funds are intended to be utilized through full life of grant.

1. Capital expense of 613,179 reduced from other and added as new category based on recommendation from Grants accounting *
2. Two mobile medical vehicles will be expensed in January for ARP totaling \$813,724.00
3. Dental chairs totaling 24,782.13 will be expensed in January under ARP 1599
4. Supplies totaling 2,352.09 will be expensed in January to project 2741
5. Travel will be expensed in January in the amount of \$2,316.30 under project 2678

Thursday, February 29, 2024

Executive Session

Consideration of Approval of the Community Health Choice Texas, Inc. and Community Health Choice, Inc., 2024 Insurance Renewals, Pursuant to Tex. Gov't Code Ann. §551.085, Including Possible Action Upon Return to Open Session.



Anna Mateja
CFO, Community Health Choice

- Pages 173 – 175 Were Intentionally Left Blank -