

Thursday, December 7, 2023

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
<ul style="list-style-type: none"> • Board Meeting – October 26, 2023 • HRSA Special Call Board Meeting – November 9, 2023 		
III. Announcements / Special Presentations	Dr. Andrea Caracostis	15 min
A. CEO Report Including Special Announcements – Dr. Esmail Porsa		<i>(10 min)</i>
<ul style="list-style-type: none"> • Bond Election Results • Introduction of Harris Health Strategic Fund Board Members and an Announcement of Gift 		
B. Board Member Announcements Regarding Board Member Advocacy and Community Engagements		<i>(5 min)</i>
<ul style="list-style-type: none"> • First Friday’s will Resume in February 		
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, Good Catch and Zero Harm, and Possible Action Regarding this Matter Upon Return to Open Session		<i>(10 min)</i>
– Dr. Andrea Caracostis, Dr. Steven Brass and Dr. Yashwant Chathampally		

- 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** **4 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)
- VIII. New Items for Board Consideration** **Dr. Andrea Caracostis** **60 min**
- A.** Board Officer Elections for the Positions of Chair, Vice Chair and Secretary for the 2024 Calendar Year **Dr. Andrea Caracostis** (30 min)
- B.** Consideration of Approval of the Appointment of 2024 Committee Members **Dr. Andrea Caracostis** (15 min)
- C.** Consideration of Approval of the Tentative Harris Health System 2024 Board of Trustees Calendar **Dr. Andrea Caracostis** (5 min)
- D.** Consideration of Approval of Revisions to the Joint Conference Committee Charter **Dr. Andrea Caracostis** (10 min)
- IX. Strategic Discussion** **Dr. Andrea Caracostis** **25 min**
- A.** Harris Health System Strategic Plan Initiatives
1. Presentation Regarding Harris Health Strategic Plan Update: LBJ Hospital Expansion Project – **Ms. Olga Rodriguez, Ms. Patricia Darnauer, and Mr. Patrick Casey** (10 min)
[Strategic Pillar 5: Infrastructure Optimization]

B. November Board Committee Meeting Reports:

(15 min)

- Governance Committee – **Dr. Andrea Caracostis**
- Quality Committee – **Dr. Andrea Caracostis**
- Budget & Finance Committee – **Ms. Barbie Robinson**
- Compliance & Audit Committee – **Ms. Barbie Robinson**
- Joint Conference Committee – **Dr. Andrea Caracostis**
- ASC at LBJ Governing Body – **Ms. Jennifer Tijerina**
- 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 A74) – **Mr. DeWight Dopslauf and Mr. Jack Adger, Harris County Purchasing Office**

(See Attached Expenditure Summary: December 7, 2023)

B. Consent Committee Recommendations

1. Consideration of Approval of Revisions to the Harris Health System Board Standard Operating Procedures – **Ms. Sara Thomas**
[Governance Committee]
2. Consideration of Acceptance of the Harris Health System Fourth Quarter Fiscal Year 2023 Investment Report – **Ms. Victoria Nikitin**
[Budget & Finance Committee]
3. Consideration and Acceptance of the Harris Health System Third Quarter Calendar Year 2023 Pension Plan Report – **Ms. Victoria Nikitin**
[Budget & Finance Committee]
4. Consideration of Acceptance of the Harris Health System September 2023 Quarterly Financial Report Subject to Audit – **Ms. Victoria Nikitin**
[Budget & Finance Committee]
5. Consideration of Approval for Subsidy Payments to Community Health Choice, Inc. for the Health Insurance Marketplace Non-Federal Premium Payments for Eligible Harris Health Patients for Calendar Year 2024 – **Ms. Victoria Nikitin and Ms. Pollie Martinez**
[Budget & Finance Committee]
6. Consideration of Approval of the Harris Health System FY2024 Internal Audit Charter by the Harris Health System Board of Trustees – **Ms. Errika Perkins, Chief Assistant County Auditor and Ms. Sharon Brantley Smith, Audit Director**
[Compliance & Audit Committee]
7. Consideration of Approval of Revisions to the Harris Health System Medical Staff Bylaws – **Dr. Martha Mims**
[Joint Conference Committee]

C. Consent Grant Recommendations

1. Consideration of Approval of Grant Recommendation (Items C1)
– **Dr. Amy Smith**

(See Attached Expenditure Summary: December 7, 2023)

D. New Consent Items for Board Approval

1. Consideration of Acceptance of the Harris Health System YTD Ended October 31, 2023 Financial Report Subject to Audit – **Ms. Victoria Nikitin**
2. Consideration of Approval of the Harris Health System Investment Policy
– **Ms. Victoria Nikitin**
3. Consideration of Approval to Amend the Lease with Farha International, Inc. for the Monroe Health Center, Located at 8539 Gulf Freeway, Houston, Texas 77017 – **Mr. Patrick Casey**

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 October 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 Report(s) 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**

(13 min)

- HCHP December 2023 Operational Update

- B. Consideration of Approval of the HCHP Budget Summary Report
– **Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge**

(1 min)

- C. Consideration of Approval of the HCHP Patient Satisfaction Report
– **Dr. Jennifer Small, Ms. Tracey Burdine and Dr. LaResa Ridge**

(1 min)

XII. Executive Session

Dr. Andrea Caracostis 60 min

- D. Consideration of Approval of the 2024 Operating and Capital Budget for Community Health Choice Texas, Inc. and Community Health Choice, Inc., Pursuant to Tex. Gov't Code Ann. §551.085 Upon Return to Open Session
– **Ms. Lisa Wright, CEO and Ms. Anna Mateja, CFO, Community Health Choice**

(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, Including Consideration of Approval of the Compliance Program Audit Plan and Internal Quality Audit Plan Upon Return to Open Session (20 min)
– **Ms.Carolynn Jones**

- F. Consideration of Approval of the Harris County Auditor’s FY2024 Internal Audit Plan, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code Ann. §151.002, Tex. Gov’t Code Ann. §418.183 and Tex. Gov’t Code Ann. §551.089 Upon Return to Open Session – **Ms. Errika Perkins, Chief Assistant County Auditor and Ms. Sharon Brantley Smith, Audit Director** (5 min)

- G. Discussion and Consultation with Attorney Regarding the 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 (30 min)
– **Board of Trustees**

- 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, October 26, 2023
9:00 am

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATION
I. Call to Order and Record of Attendance	<p>The meeting was called to order at 9:00 a.m. by Ewan D. Johnson, MD, PhD, Chair. It was noted that a quorum was present and the attendance was recorded. Dr. Johnson 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 – September 28, 2023 	<p><u>Motion No. 23.10-155</u> Moved by Mr. Jim Robinson, seconded by Dr. Andrea Caracostis, and unanimously passed that the Board approve the minutes of the September 28, 2023 meeting. Motion carried.</p>
III. Announcements/ Special Presentations	<p>A. CEO Report Including Special Announcements</p> <ul style="list-style-type: none"> • First Friday Tour – October 6, 2023 <p>Dr. Esmail Porsa, President and Chief Executive Officer (CEO), delivered the CEO Report, including special announcements. He noted that on October 6, 2023, the Board Office hosted its monthly First Friday Tour. Harris Health Executive Leadership, staff and Harris County Commissioner’s Aides and Interns participated in the tour. The group toured Harris Health’s Ambulatory Surgical Center, Lyndon B. Johnson (LBJ) Specialty Clinics, OPS, Margo Hillard, and Settegast Health Center. The next First Friday Tour is scheduled for November 3, 2023, and will spotlight Harris Health’s Dental Center and Martin Luther King (MLK) Health Center. On October 25, 2023, Dr. Porsa participated in the 2023 Harris Health System Annual Pink Out Event, where Harris Health acknowledged and celebrated its breast cancer survivors. Last month, Dr. Porsa reported that Ben Taub Hospital (BTH) ranked #1 out of 44 safety net hospitals in the NRC Patient Satisfaction Survey for the second quarter of 2023, and that LBJ ranked sixth (6th) overall in the survey. Dr. Porsa was pleased to announce that BTH ranked #2 out of 154 hospitals nationwide that participated in the 2023 Vizient Scorecard Review. A copy of the presentation is available in the permanent record.</p>	<p>As Presented.</p>

	<p>B. Board Member Announcements Regarding Board Member Advocacy and Community Engagements</p> <p>Dr. Cody M. Pyke shared that a forum was held among leadership at Harris Health and Community Health Choice (CHC) as well as various advocacy groups, to discuss how the HIV formulary has been affected at CHC, and to address ways to improve education, access, and to ensure that stakeholders are heard.</p>	As Presented.
IV. Public Comment	<p>Ms. Cynthia Cole, Executive Director, Local #1550 – AFSCME, American Federation of State, County, and Municipal Employees, addressed the Board regarding employee matters related to the Harris Health grievance process. Mr. Sebastian Moore, former Harris Health employee of thirty-one (31) years, addressed the Board regarding an alleged wrongful termination. Dr. Arthur W. Bracey, former Chair of the Harris Health System Board of Trustees, addressed the Board in support of Proposition A, Harris Health’s \$2.5 Billion Bond Referendum on the November 7, 2023 Election Ballot.</p>	As Presented.
V. Executive Session	<p>At 9:18 a.m., Dr. Johnson stated that the Board would enter into Executive Session for Items ‘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>	
	<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 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>	No Action Taken.
VI. Reconvene to Open Meeting	<p>At 9:51 a.m., Dr. Johnson reconvened the meeting in open session; he noted that a quorum was present and that no action was taken in Executive Session.</p>	
VII. General Action Item(s)	<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 October 2023, there were thirty (30) initial appointments, 157 reappointments, seven (7) change/add privileges, and six (6) resignations. A copy of the credentialing report is available in the permanent record.</p>	<p><u>Motion No. 23.10-156</u> Moved by Dr. Andrea Caracostis, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item VII.A.1. 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 Egin, Chief Medical Officer, Harris Health Correctional Health, presented the credentialing changes for members of the Harris Health System Correctional Health Medical Staff. For October 2023, there were seven (7) initial appointments. A copy of the Correctional Health credentialing report is available in the permanent record.</p>	<p><u>Motion No. 23.10-157</u> Moved by Dr. Andrea Caracostis, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item VII.B.1. Motion carried.</p>
<p>VIII. Strategic Discussion</p>	<p>A. Harris Health System Strategic Plan Initiatives</p>	
	<p>1. Update Regarding the Harris Health System’s Strategic Communications Plan</p> <p>Ms. Amanda Callaway, Associate Administrator, Mission Advancement, delivered a presentation regarding the Harris Health System’s Strategic Communications Plan. Harris Health engaged an external consultant to perform an assessment centered around a brand awareness campaign. Ms. Callaway shared that 80% of Harris County residents had either heard of Harris Health or used Harris Health’s services. She discussed Harris Health’s targeted approaches, such as community engagement activities and paid media, including print publications, digital, social media, and television commercials. A copy of the presentation is available in the permanent record.</p>	<p>As Presented.</p>

	<p>B. October Board Committee Meeting Reports:</p> <p><u>Governance Committee</u> Dr. Andrea Caracostis shared that the Governance Committee met on October 12, 2023, and the following topics were covered:</p> <ul style="list-style-type: none"> • Ms. Elizabeth Winn, Harris County Attorney’s Office and member of Harris Health’s Legal Team, delivered an overview regarding the revisions to Harris Health Policy No. 2.02, Participation in Board and Committee Meetings via Videoconference Call. The main purpose of the policy edits was to clarify that the presiding officer is required to attend meetings in person while presiding over Harris Health Board and Committee meetings. • Ms. Olga Rodriguez, Vice President, Corporate Communications & Board Services, led the discussion regarding the Board of Trustees 2024 Calendar. Continued discussions related to the 2024 Board Calendar will be placed on the November Governance Committee Agenda. • Ms. Elizabeth Winn provided additional Board Member parliamentary procedure training and delivered a presentation entitled “Maximizing Motions For Productive Meetings”. Board members should review the training materials and the recording of the training on Diligent. <p>Ms. Elizabeth Winn provided recommendations to the Committee related to the role of the Governance Committee with respect to the nominations process for the 2024 Board Officer Elections. The Committee extensively deliberated on the matter and voted to recommend the adoption of a formal nominations process, including the option to take nominations from the floor, to the Board for future use, which is Item IX. B. (3) on today’s consent agenda. The Committee’s recommended process consists of the Board Office sending out a communication on behalf of the Governance Committee to all Board members to solicit interest in running for the Offices of Chair, Vice Chair and Secretary, along with a description of the duties and required qualifications, if any, including the deadline to submit nominations to the Governance Committee Chair.</p> <p><u>Quality Committee</u> Dr. Caracostis noted that the following topics were covered in open session at the Quality Committee meeting on October 12, 2023:</p> <ul style="list-style-type: none"> • The monthly High Reliability Organization (HRO) Video on “Good Catches” was displayed. • The Harris Health Medical Staff Credentialing Overview summarized the role of the Board of Trustees in Credentialing and Privileging. <ul style="list-style-type: none"> ○ The Committee reviewed the Board’s role and responsibilities and the medical staff’s role and responsibilities with respect to the credentialing of medical staff. Specifically, CMS requires that Board have a non-delegable duty to appoint and take actions related to the medical staff based on recommendations from the medical staff. In addition, the Board is responsible for ensuring that the medical staff has a robust process to periodically assess the qualifications and competency of the medical staff. ○ Credentialing workflows for initial and reappointment applications and the process for files for discussion within Harris Health System were reviewed. 	<p>As Presented.</p>
--	---	-----------------------------

	<ul style="list-style-type: none"> Harris Health System’s commitment to the safety of employees continues and is unwavering. Harris Health System continues to evolve as conditions change and is aligned with regulatory requirements and national best practices. Some of the System’s current efforts and opportunities for future improvements include working with the Texas Medical Center Police to provide law enforcement for Ben Taub and LBJ and the deployment of new safety technology to assist in identifying potentially harmful events (i.e., weapon detection, metal detectors, and panic alarms). <p><u>Diversity, Equity & Inclusion (DEI) Committee</u></p> <p>Ms. Marcia Johnson stated that the Diversity, Equity, and Inclusion Committee met on October 20, 2023, and the following items were presented:</p> <ul style="list-style-type: none"> Mr. Derek Holmes, Administrative Director, Contracting Diversity, delivered an update regarding Harris Health’s Minority/Woman-owned Business Enterprises. Ms. Ashley Smith delivered an update regarding Harris Health’s Employee Engagement. Dr. Chethan Bachireddy, Senior Vice President, Chief Health Officer, delivered a presentation regarding Health Disparities and extensive follow-up discussion was held. The Committee discussed future agenda topics. Dr. Porsa proposed a calendar of topics enabling a more robust presentation. 	
	<p>C. Presentation and Discussion Regarding the Owner Controlled Insurance Program (OCIP)</p> <p>Mr. Patrick Casey, Senior Vice President, Facilities Construction & Systems Engineering, delivered a presentation regarding the Owner Controlled Insurance Program (OCIP). He provided a brief overview of the difference between the traditional insurance program and OCIP, benefits of OCIP, and highlights of the OCIP. Discussion ensued regarding the continuity of the OCIP, the procurement process for insurance companies, and the inclusion of Minority/Women Business Enterprises (M/WBE). A copy of the presentation is available in the permanent record.</p>	<p>As Presented.</p>
<p>IX. Consent Agenda Items</p>	<p>A. Consent Purchasing Recommendations</p>	
	<p>1. Approval of Purchasing Recommendations (Items A1 through A55)</p> <p>Copies of the purchasing recommendations are available in the permanent record.</p>	<p><u>Motion No. 23.10-158</u> Moved by Ms. Carol Paret, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item IX.A.1. Motion carried.</p>
	<p>B. Consent Committee Recommendations</p>	

	<p>Mr. Louis Smith, Senior Executive Vice President & Chief Operating Officer, provided an overview of Agenda Item IX. D. 3 – Consideration of Approval of a Resolution in Support of Sustainability Efforts of Harris County. Mr. Smith noted that Harris Health declares its support for sustainability efforts in energy use and consumption throughout the System, and commits to reviewing the Harris County Climate Action Plan and adopting sustainability goals and targets to the extent they align with Harris Health System operations and the associated regulatory framework. A copy of the resolution is available in the permanent record.</p>	
	<p>1. Approval of Revisions to Governing Body Bylaws of the Ambulatory Surgical Center at LBJ (Approved by the ASC Governing Body in August 2023)</p>	<p><u>Motion No. 23.10-159</u> Moved by Mr. Jim Robinson, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item IX.B. through IX.D. Motion carried.</p>
	<p>2. Approval of Revisions to Harris Health Policy No. 2.02, Participation in Board Meetings and Board Committee Meetings via Videoconference Call</p>	<p><u>Motion No. 23.10-159</u> Moved by Mr. Jim Robinson, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item IX.B. through IX.D. Motion carried.</p>
	<p>3. Approval of Board Officer Nomination Process Recommended by the Governance Committee</p>	<p><u>Motion No. 23.10-159</u> Moved by Mr. Jim Robinson, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item IX.B. through IX.D. Motion carried.</p>
	<p>C. Consent Grant Recommendations</p>	

	<p>1. Approval of Grant Recommendations (Items C1 through C2)</p>	<p><u>Motion No. 23.10-159</u> Moved by Mr. Jim Robinson, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item IX.B. through IX.D. Motion carried.</p>
	<p>D. New Consent Items for Board Approval</p>	
	<p>1. Approval of an Interlocal Agreement Between the Harris Center for Mental Health and Intellectual and Developmental Disability (IDD) and Harris County Hospital District d/b/a Harris Health System for Provision of Security, Housekeeping and Food and Nutrition Services</p>	<p><u>Motion No. 23.10-159</u> Moved by Mr. Jim Robinson, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item IX.B. through IX.D. Motion carried.</p>
	<p>2. Approval to Enter into a First Amendment to an Interlocal Agreement between Harris County, Harris County Community Supervision and Corrections Department, and Harris County Hospital District d/b/a Harris Health System for Staffing, Supplies and Pharmaceuticals Related to Residential Treatment Services</p>	<p><u>Motion No. 23.10-159</u> Moved by Mr. Jim Robinson, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item IX.B. through IX.D. Motion carried.</p>
	<p>3. Approval of a Resolution in Support of Sustainability Efforts for Harris Health System</p>	<p><u>Motion No. 23.10-159</u> Moved by Mr. Jim Robinson, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item IX.B. through IX.D. Motion carried.</p>

	<p>4. Approval to Amend the Administrative Services Agreement Between Harris Health System and Community Health Choice, Inc. and Community Health Choice Texas, Inc.</p>	<p><u>Motion No. 23.10-159</u> Moved by Mr. Jim Robinson, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item IX.B. through IX.D. Motion carried.</p>
	<p>E. Consent Reports and Updates to the Board</p>	
	<p>1. Updates Regarding Pending State and Federal Legislative and Policy Issues Impacting Harris Health System</p>	<p>For Informational Purposes Only</p>
	<p>2. Harris Health System Council-At-Large September Meeting Minutes <i>{End of Consent Agenda}</i></p>	<p>For Informational Purposes Only</p>
<p>X. Item(s) Related to Health Care for the Homeless Program</p>	<p>A. Review and Acceptance of the Following Report(s) 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 October 2023 Operational Update <p>Ms. Tracey Burdine, Director, Health Care for the Homeless Program, delivered a presentation regarding the Health Care for the Homeless Program September 2023 Operational Update including Patient Services, Consumer Advisory Council Report, Bridge Access Program Budget and HCHP Bylaws. Ms. Burdine reported that there were two (2) new telehealth patients, eleven (11) returning telehealth patients, 399 new adult patients, and twenty-eight (28) new pediatric patients associated with the Program. HCHP is expected to see approximately 9,775 patients per year as required by the Health Resources and Services Administration (HRSA), of which HCHP has served 5,545 unduplicated patients thus far. Ms. Burdine stated that for the month of September, HCHP served 1,131 unduplicated patients, of which 901 patients were seen for family practice services. She noted that HCHP has completed 2,170 total visits, 6,517 unduplicated patients year-to-date, which is a 29% increase from the previous year.</p> <p>Ms. Burdine presented the following highlights of the council activities from May 2023 – July 2023:</p> <ul style="list-style-type: none"> • The council was informed of the opening of the Navigation Center clinic. • The council was informed of the Det Norske Veritas (DNV) visit, which included five HCHP sites: Harmony House, Lord of the Streets, Open Door Mission, and the dental and medical mobile units. • The council was informed of the application for funding from the Harris County Hospital District Foundation to help with poor diabetes management. The grant would allow the purchase of glucometers and issue them to a select sample of our targeted population. • The council was updated on the process of the 2023 needs assessment and the ongoing surveys and 	<p><u>Motion No. 23.10-160</u> Moved by Ms. Sima Ladjevardian, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item X.A. Motion carried.</p>

	<p>interviews for getting direct consumer needs from patients and people experiencing homelessness that are not patients of the health center.</p> <p>Ms. Burdine presented the budget narrative for HCHP’s Bridge Access Program. She reported that HCHP received a grant from HRSA, in the amount of \$67,448, to continue the program’s COVID-19 efforts. The award cycle is September 1, 2023 through December 31, 2024, and the funds will be dedicated to 0.2 full – time equivalents (FTEs) to provide education and outreach services to its homeless population concerning COVID-19, travel expenses and medical supplies, as well as gas supplies for the program’s mobile units. Additionally, Ms. Burdine presented an overview of the amended HCHP Bylaws. A copy of the presentation is available in the permanent record.</p>	
	<p>B. Approval of the HCHP Consumer Advisory Council Report</p>	<p><u>Motion No. 23.10-161</u> Moved by Mr. Jim Robinson, seconded by Ms. Jennifer Tijerina, and unanimously passed that the Board approve agenda item X.B. Motion carried.</p>
	<p>C. Approval of the HCHP Bridge Access Program Budget</p>	<p><u>Motion No. 23.10-162</u> Moved by Dr. Andrea Caracostis, seconded by Ms. Carol Paret, and unanimously passed that the Board approve agenda item X.C. Motion carried.</p>
	<p>D. Approval of the Amended HCHP Bylaws</p>	<p><u>Motion No. 23.10-163</u> Moved by Ms. Jennifer Tijerina, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item X.D. Motion carried.</p>
<p>XI. Executive Session</p>	<p>At 10:41 a.m., Dr. Johnson stated that the Board would enter into Executive Session for Items XII ‘D through G’ as permitted by law under Tex. Gov’t Code Ann. §418.183, Tex. Gov’t Code Ann. §551.071, Tex. Gov’t Code Ann. §551.074, Tex. Gov’t Code Ann. §551.085, Tex. Gov’t Code Ann. §551.089, Tex. Health & Safety Code Ann. §161.032, Tex. Occ. Code. Ann. §160.007 and Tex. Occ. Ann. §151.002.</p>	
	<p>D. Review of the Community Health Choice Texas, Inc. and Community Health Choice, Inc. 2023 Financial Performance for the Eight Months Ending August 31, 2023, Pursuant to Tex. Gov’t Code Ann. §551.085</p>	<p>No Action Taken.</p>

	E. Consultation with Attorney Regarding Correctional Health Claims and Pending Litigation, Pursuant to Tex. Gov’t Code Ann. §551.071	No Action Taken.
	F. Report by the Executive Vice President, Chief Compliance and Risk Officer, Regarding Compliance with Medicare, Medicaid, HIPAA and Other Federal and State Healthcare Program Requirements and a Status of Fraud and Abuse Investigations, Pursuant to Tex. Health & Safety Code Ann. §161.032, Tex. Gov’t Code §418.183, Tex. Gov’t Code §551.089, Tex. Occ. Code Ann. §160.007, Tex. Occ. Code Ann. §151.002, and Tex. Gov’t Code Ann. §551.071, and Possible Action Regarding this Matter Upon Return to Open Session	No Action Taken.
	G. Discussion and Consultation with Attorney Regarding the 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	No Action Taken.
XII. Reconvene	At 12:05 p.m., Dr. Johnson reconvened the meeting in open session; he noted that a quorum was present and that no action was taken in Executive Session.	
XIII. Adjournment	Moved by Ms. Jennifer Tijerina, seconded by Dr. Cody M. Pyke, and unanimously approved to adjourn the meeting. There being no further business to come before the Board, the meeting adjourned at 12:06 p.m.	

I certify that the foregoing are the Minutes of the Harris Health System Board of Trustees Meeting held on October 26, 2023

Respectfully Submitted,

Barbie Robinson, MPP, JD, CHC, Acting Chair

Andrea Caracostis, MD, MPH, Secretary

Minutes transcribed by Cherry A. Pierson, MBA

Thursday, October 26, 2023

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
Dr. Ewan D. Johnson (<i>Chair</i>)	
Ms. Barbie Robinson (<i>Vice Chair</i>)	
Dr. Andrea Caracostis (<i>Secretary</i>)	
Ms. Carol Paret	
Dr. Cody M. Pyke	
Ms. Jennifer Tijerina	
Mr. Jim Robinson	
Ms. Marcia Johnson	
Ms. Sima Ladjevardian	

EXECUTIVE LEADERSHIP/STAFF/ SPECIAL INVITED GUESTS	
Amanda Callaway	Jack Adger (<i>Harris County Purchasing Office</i>)
Amy Smith	Dr. Jackie Brock
Anna Mateja (<i>Community Health Choice</i>)	Dr. Jennifer Small
Anthony Williams	Jennifer Zarate
Antoinette “Toni” Cotton	Jerry Summers
Dr. Arthur W. Bracey (<i>Former Board of Trustees: Public Comment Speaker</i>)	Jessey Thomas
Dr. Bradford Scott	John Matcek
Carolynn Jones	Jonathan Fombonne (<i>Harris County Attorney’s Office</i>)
Cherry Pierson	Dr. Joseph Kunisch
Cornelius Berry (<i>Harris County Attorney’s Office</i>)	Kari McMichael
Cynthia Cole (<i>AFSCME: Public Comment Speaker</i>)	Lisa Wright (<i>Community Health Choice President & CEO</i>)
Daniel Smith	Louis Smith
Dr. Derek Curtis	Margaret Green
DeWight Dopslauf (<i>Harris County Purchasing Office</i>)	Maria Cowles
Ebon Swofford (<i>Harris County Attorney’s Office</i>)	Dr. Martha Mims
Elizabeth Hanshaw Winn (<i>Harris County Attorney’s Office</i>)	Dr. Matasha Russell
Dr. Esmaeil Porsa (<i>Harris Health System President & CEO</i>)	Matt Reeder
Dr. Esperanza “Hope” Galvan	Michael Fritz (<i>Harris County Attorney’s Office</i>)
Dr. Glorimar Medina	Michael Hill

EXECUTIVE LEADERSHIP/STAFF/ SPECIAL INVITED GUESTS	
Dr. Michael Nnadi	Sara Thomas <i>(Harris County's Attorney's Office)</i>
Nicholas J. Bell	Sebastian Cole <i>(Public Comment Speaker)</i>
Olga Rodriguez	Shawn DeCosta
Dr. Otis Ekins	Dr. Steven Brass
Patricia Darnauer	Tai Nguyen
Patrick Casey	Dr. Tien Ko
Randy Manarang	Tracey Burdine
Sam Karim	Victoria Nikitin
Dr. Sandeep Markan	

MINUTES OF THE HARRIS HEALTH SYSTEM BOARD OF TRUSTEES
HRSA Special Called Board Meeting
Thursday, November 9, 2023
8:00 am

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATION
I. Call to Order and Record of Attendance	The meeting was called to order at 8:48 a.m. by Ms. Barbie Robinson, Chair. It was noted that a quorum was present and the attendance was recorded. Ms. Robinson 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 .	A copy of the attendance is appended to the archived minutes.
II. Public Comment		There were no public speakers registered to appear before the Board.
III. Item(s) Related to Health Care for the Homeless Program	<p>A. Review and Acceptance of the Following Report(s) 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 November 2023 Operational Update <p>Ms. Tracey Burdine, Director, Health Care for the Homeless Program, delivered a presentation regarding the Health Care for the Homeless Program November 2023 Operational Update, including HCHP 2023 Needs Assessment Report and, HCHP Foundation Glucometers Project. She reported that HCHP received a grant from the Harris County Hospital District Foundation, in the amount of \$5,000, to encourage diabetes self – management and decrease hemoglobin A1C levels. Ms. Burdine presented the budget narrative, which includes the purchase of glucometers (\$2,281.64) and blood glucose test strip packs (\$2,718.36) for 162 people experiencing homelessness.</p> <p>Areas of focus for the 2023 Needs Assessment include:</p> <ul style="list-style-type: none"> • Geographical and transportation barriers • Unemployment • Income level • Educational attainment • Health disparities • Housing • Health care needs • Primary health care services and gaps • Health care environment and operations <p>Ms. Burdine provided a brief overview of the 2023 Needs Assessment Report including HCHP Barriers, Community Barriers, and Corrective Action Plans. A copy of the presentation is available in the permanent record.</p>	<p><u>Motion No. 23.11-164</u></p> <p>Moved by Dr. Andrea Caracostis, seconded by Dr. Cody M. Pyke, and unanimously passed that the Board approve agenda item III.A. Motion carried.</p>

	<p>B. Approval of HCHP 2023 Needs Assessment Report</p>	<p><u>Motion No. 23.11-165</u> Moved by Dr. Andrea Caracostis, seconded by Ms. Carol Paret, and unanimously passed that the Board approve agenda item III.B. Motion carried.</p>
	<p>C. Approval of the Glucometers Project Budget Related to the Harris County Hospital District Foundation Grant</p>	<p><u>Motion No. 23.11-166</u> Moved by Ms. Carol Paret, seconded by Dr. Andrea Caracostis, and unanimously passed that the Board approve agenda item III.C. Motion carried.</p>
<p>IV. Adjournment</p>	<p>Moved by Ms. Carol Paret, seconded by Dr. Cody M. Pyke, and unanimously approved to adjourn the meeting. There being no further business to come before the Board, the meeting adjourned at 8:57 a.m.</p>	

I certify that the foregoing are the Minutes of the Harris Health System Board of Trustees Meeting held on November 9, 2023

Respectfully Submitted,

Barbie Robinson, MPP, JD, CHC, Acting Chair

Andrea Caracostis, MD, MPH, Secretary

Minutes transcribed by Cherry A. Pierson, MBA

Thursday, November 9, 2023

Harris Health System Board of Trustees HRSA Special Call 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. Barbie Robinson (<i>Chair</i>)	Mr. Jim Robinson
Dr. Andrea Caracostis (<i>Secretary</i>)	
Ms. Afsheen Davis	
Ms. Carol Paret	
Dr. Cody M. Pyke	
Ms. Jennifer Tijerina	
Ms. Marcia Johnson	
Ms. Sima Ladjevardian	

EXECUTIVE LEADERSHIP/STAFF/ SPECIAL INVITED GUESTS	
Anthony Williams	Dr. Matasha Russell
Carolynn Jones	Matthew Schlueter
Cherry Pierson	Maureen Padilla
Daniel Smith	Michael Hill
Ebon Swofford (<i>Harris County Attorney's Office</i>)	Dr. Michael Nnadi
Elizabeth Winn (<i>Harris County Attorney's Office</i>)	Nicholas J. Bell
Dr. Esmaeil Porsa (<i>Harris Health System President & CEO</i>)	Olga Rodriguez
Jack Adger (<i>Harris County Purchasing Office</i>)	Omar Reid
Dr. Jackie Brock	Patrick Casey
Dr. Jennifer Small	Randy Manarang
Jennifer Zarate	Dr. Sandeep Markan
Jerry Summers	Sara Thomas (<i>Harris County's Attorney's Office</i>)
Dr. Joseph Kunisch	Shawn DeCosta
John Matcek	Siraj Anwar
R. King Hillier	Dr. Tien Ko
Louis Smith	Tracey Burdine

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.

Thursday, December 7, 2023

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, December 7, 2023

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 –45 Were Intentionally Left Blank -

Thursday, December 7, 2023

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 47 –50 Were Intentionally Left Blank -

Thursday, December 7, 2023

Consideration of Approval of 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 November 2023.

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

Thank you.



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

Board of Trustees



December 2023 Medical Staff Credentials Report

Medical Staff Initial Appointments: 34

BCM Medical Staff Initial Appointments - 14

UT Medical Staff Initial Appointments - 17

HCHD Medical Staff Initial Appointments - 3

Medical Staff Reappointments: 35

BCM Medical Staff Reappointments - 14

UT Medical Staff Reappointments - 20

HCHD Medical Staff Reappointments - 1

BCM/UT/Harris County Hospital District (Harris Health) Medical Staff Changes in Clinical Privileges: 2

BCM/UT/HCHD Medical Staff Resignations: 20

For Information

Temporary Privileges Awaiting Board Approval - 20

Urgent Patient Care Need Privileges Awaiting Board Approval - 3

BCM/UT/Harris County Hospital District (Harris Health) Medical Staff Files for Discussion: 2

Medical Staff Initial Appointment Files for Discussion - 2

Medical Staff Reappointment Files for Discussion - N/A

Thursday, December 7, 2023

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

December 2023 Correctional Health Credentials Report

Medical Staff Initial Appointments: 6

Correctional Health Medical Staff Files for Discussion: 1

BOARD OF TRUSTEES

Meeting of the Board of Trustees



Thursday, December 7, 2023

Consideration of Approval of the Appointment of 2024 Committee Members

Sara Thomas

L. Sara Thomas, J.D, LL.M
Chief Legal Officer/Division Director

2024 Board Committee appointments

Quality Committee	Dr. Andrea Caracostis (Chair) Dr. Cody Pyke Sima Ladjevardian Afsheen Davis Board Chair (Ex-officio)
Compliance Committee	Barbie Robinson (Chair) Jennifer Tijerina Carol Paret Board Chair (Ex-officio)
Governance Committee	Dr. Cody Pyke (Chair) Marcia Johnson Dr. Andrea Caracostis Afsheen Davis Board Chair (Ex-officio)
DEI Committee	Marcia Johnson (Chair) Jennifer Tijerina Dr. Cody Pyke Board Chair (Ex-officio)
Budget & Finance Committee	Marcia Johnson (Chair) Jim Robinson Carol Paret Board Chair (Ex-officio)
Joint Conference Committee (Comprised of board members, administration & medical staff)	Dr. Caracostis (Chair) Sima Ladjevardian Board Chair (Ex-officio) <u>Joint Conference Committee - Non-Board Member Appointees</u> Chief of Staff Ben Taub Chief of Staff LBJ Assistant Chief of Staff UT Assistant Chief of Staff BCM Chair of the Medical Executive Board Vice Chair of the Medical Executive Board Harris Health System Chief Executive Officer Harris Health Chief Operating Officer Harris Health System Chief Medical Executive Harris Health System Chief Medical Officer Ambulatory Care Services

BOARD OF TRUSTEES

Meeting of the Board of Trustees



Thursday, December 7, 2023

**Consideration of Approval of the Tentative Harris Health System
2024 Board of Trustees Calendar**

Olga Rodriguez

Olga Llamas Rodriguez, MPA, MBA

Vice President – Community Engagement & Corporate Communications/Board Services

2024 Board & Board Committee Calendar

BOARD (9:00 AM-1:00 PM)	JANUARY 25, 2024 JULY 25, 2024 FEBRUARY 29, 2024 AUGUST 29, 2024 MARCH 28, 2024 SEPTEMBER 26, 2024 APRIL 25, 2024 OCTOBER 24, 2024 MAY 30, 2024 DECEMBER 12, 2024 JUNE 27, 2024	ASC AT LBJ GOVERNING BODY (9:00-10:30 AM)	FEBRUARY 22, 2024 AUGUST 22, 2024 MAY 23, 2024 NOVEMBER 21, 2024	BUDGET & FINANCE COMMITTEE (9:00-10:00 AM)	FEBRUARY 15, 2024 AUGUST 15, 2024 (9:00-9:30) MAY 16, 2024 NOVEMBER 14, 2024
SPECIAL CALL BOARD	NOVEMBER 14, 2024 (HRSA)	GOVERNANCE COMMITTEE (11:00 AM-12:00 PM)	JANUARY 9, 2024 SEPTEMBER 10, 2024 MARCH 12, 2024 NOVEMBER 12, 2024 MAY 14, 2024	COMPLIANCE & AUDIT COMMITTEE (10:00-11:30 AM)	FEBRUARY 15, 2024 SEPTEMBER 12, 2024 MAY 16, 2024 NOVEMBER 14, 2024
SPECIAL HHS COMMUNITY TOWN HALL	PLACEHOLDER PLACEHOLDER PLACEHOLDER PLACEHOLDER	QUALITY COMMITTEE (12:00-1:30 PM)	JANUARY 9, 2024 JUNE 11, 2024 FEBRUARY 13, 2024 AUGUST 13, 2024 MARCH 12, 2024 SEPTEMBER 10, 2024 APRIL 9, 2024 OCTOBER 8, 2024 MAY 14, 2024 NOVEMBER 12, 2024	JOINT CONFERENCE COMMITTEE (11:30 AM-12:30 PM)	JANUARY 11, 2024 SEPTEMBER 12, 2024 MARCH 14, 2024 NOVEMBER 14, 2024 MAY 16, 2024
BUDGET WORKSHOP (9:30 AM-11:00 AM)	AUGUST 15, 2024	DEI COMMITTEE (11:30 AM-12:30 PM)			
JANUARY 12, 2024 JUNE 14, 2024 FEBRUARY 16, 2024 AUGUST 16, 2024 MARCH 15, 2024 SEPTEMBER 13, 2024 APRIL 12, 2024 OCTOBER 11, 2024 MAY 17, 2024 NOVEMBER 15, 2024					

JANUARY							FEBRUARY							MARCH							APRIL							MAY							JUNE						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
	1	2	3	4	5	6					1	2	3						1	2		1	2	3	4	5	6				1	2	3	4							1
7	8	9	10	11	12	13	4	5	6	7	8	9	10	3	4	5	6	7	8	9	7	8	9	10	11	12	13	5	6	7	8	9	10	11	2	3	4	5	6	7	8
14	15	16	17	18	19	20	11	12	13	14	15	16	17	10	11	12	13	14	15	16	14	15	16	17	18	19	20	12	13	14	15	16	17	18	9	10	11	12	13	14	15
21	22	23	24	25	26	27	18	19	20	21	22	23	24	17	18	19	20	21	22	23	21	22	23	24	25	26	27	19	20	21	22	23	24	25	16	17	18	19	20	21	22
28	29	30	31				25	26	27	28	29			24	25	26	27	28	29	30	28	29	30				26	27	28	29	30	31		23	24	25	26	27	28	29	
													31																					30							

JULY							AUGUST							SEPTEMBER							OCTOBER							NOVEMBER							DECEMBER								
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S		
	1	2	3	4	5	6					1	2	3	1	2	3	4	5	6	7				1	2	3	4	5							1	2	1	2	3	4	5	6	7
7	8	9	10	11	12	13	4	5	6	7	8	9	10	8	9	10	11	12	13	14	6	7	8	9	10	11	12	3	4	5	6	7	8	9	8	9	10	11	12	13	14		
14	15	16	17	18	19	20	11	12	13	14	15	16	17	15	16	17	18	19	20	21	13	14	15	16	17	18	19	10	11	12	13	14	15	16	15	16	17	18	19	20	21		
21	22	23	24	25	26	27	18	19	20	21	22	23	24	22	23	24	25	26	27	28	20	21	22	23	24	25	26	17	18	19	20	21	22	23	22	23	24	25	26	27	28		
28	29	30	31				25	26	27	28	29	30	31	29	30						27	28	29	30	31			24	25	26	27	28	29	30	29	30	31						

HARRIS HEALTH HOLIDAY CLOSURES:	01/01/24 (New Year's Day)	05/27/24 (Memorial Day)	07/04/24 (Independence Day)	11/28/24 (Thanksgiving)	12/25/24 (Christmas)
	01/15/24 (MLK)	06/19/24 (Juneteenth)	09/02/24 (Labor Day)	11/29/24 (Fri. After Thanksgiving)	

Pending Board Approval: 12.07.23

BOARD OF TRUSTEES

Meeting of the Board of Trustees



Thursday, December 7, 2023

Consideration of Approval of Revisions to the Joint Conference Committee Charter

Sara Thomas

L. Sara Thomas, J.D, LL.M

Chief Legal Officer/Division Director

Harris Health System Board of Trustees Joint Conference Committee Charter

The Joint Conference Committee shall comprise up to thirteen (13) voting members including members of the Board of Trustees (“Board”), the Medical Staff, the Chair of the Medical Executive Board (“MEB”), the Vice Chair of the MEB, the CEO and such other members of Harris Health Administration as appointed by the Board Chair and approved by the Board. The Chair of the Board shall be an ex-officio, non-voting member of the Committee. The Board Chair shall designate the Committee Chair.

The purpose of the Committee is to provide direct consultation ~~serve as a liaison~~ between the Medical Staff and the Board Health System (“Harris Health”), to ensure the delivery of high-quality health services.

The Committee shall meet at least ~~four~~ five (45) times per year. The meetings of the Joint Conference Committee are not required to follow the Texas Open Meetings Act, unless the number of Health Board members participating in the meeting requires Compliance with the Texas Open Meeting Act.

The Committee shall either meet in person or via a telecommunications system permitting immediate, synchronous communication.

The Committee shall:

- a. Serve as the venue for continuing discussion ~~regarding the relationship~~ between the Board Harris Health and the Medical Staff, to include discussion of matters related to the quality of medical care provided to Harris Health patients;
- b. Discuss Medical Staff engagement and make recommendations to the Board, as appropriate, regarding same;
- c. Review and make recommendations to the Board regarding changes to the Medical Staff Bylaws and Rules and Regulations.

The Committee Chair or the Board Chair may identify additional topics for discussion as issues arise and assign them to the Committee for discussion and consideration.

2023 Strategic Pillar Reporting Schedule

Strategic Pillar	Executive Owner	JAN 2023	FEB 2023	MAR 2023	APR 2023	MAY 2023	JUN 2023	JUL 2023	AUG 2023	SEP 2023	OCT 2023	NOV 2023	DEC 2023
Pillar 1: Quality & Patient Safety	Dr. Steven Brass												
<i>Just and Accountable Culture</i>	Dr. Jackie Brock		X										
<i>Medical Staff Engagement Advisory Council (Survey Results) (Presented in May 11 Joint Conference Committee)</i>	Dr. Steven Brass					X							
<i>HRO Safety Message/Just and Accountable Culture (Presented in Quality Committee)</i>	Dr. Steven Brass/Omar Reid									X			
Pillar 2: People	Omar Reid/Dr. Jackie Brock												
<i>Workforce Safety & Violence Prevention</i>	Omar Reid/Dr. Jackie Brock			X			X				X		
<i>HR Overview: Employee Retention, Experience, and Wellness</i>	Omar Reid								X				
Pillar 3: One Harris Health	Louis Smith												
<i>Strategic Capital Funding</i>			X										
<i>Patient Throughput</i>	Trish Darnauer/Dr. Glorimar Medina/ Dr. Jennifer Small					X							
<i>Cardiology Service Line (Presented at Quality Committee)</i>	Amineh Kostov									X			
Pillar 4: Population Health Management	Dr. Jennifer Small/Dr. Hope Galvan												
<i>Pillar Progress focused on SDOH</i>	Dr. Hope Galvan					X							
<i>Hypertension Remote Patient Monitoring (Presented at Quality Committee)</i>	Dr. Hope Galvan									X			
Pillar 5: Infrastructure Optimization	Louis Smith												
<i>New LBJ Hospital and LBJ Campus Planning</i>	Louis Smith/Trish Darnauer			X	X								X
<i>LBJ Hospital Expansion Exterior Views (Update Only)</i>	Trish Darnauer/Patrick Casey							X					
<i>Relocation of Thomas Street HC and Riverside Dialysis to Quentin Mease Clinic</i>	Dr. Jennifer Small/Amanda Callaway			X	X								
Pillar 6: Diversity & Inclusion	Omar Reid												
<i>Diversity, Equity, and Inclusion</i>	Dr. Jobi Martinez						X						
<i>Minority Women Owned Business Enterprise</i>	Dr. Jobi Martinez		X								X		
<i>Addressing Health Disparities (Presented in DEI Committee)</i>	Dr. Chethan Bachireddy												
<i>Diversity, Equity, and Inclusion Committee Update</i>	Dr. Jobi Martinez	X											

*Subject to Change
Revised: 11.10.23

BOARD OF TRUSTEES

Meeting of the Board of Trustees

**HARRISHEALTH
SYSTEM**

Thursday, December 7, 2023

**Presentation Regarding Harris Health Strategic Plan Update:
LBJ Hospital Expansion Project**

Update by Olga Rodriguez, VP Community Engagement & Corporate Communications, Patricia Darnauer, EVP – LBJ, and Patrick Casey, SVP Facilities Construction & Systems Engineering, on the Harris Health System Strategic Plan regarding:

- LBJ Hospital Expansion Project Update

Louis Smith

Louis G. Smith, Jr.

Senior Executive Vice President / Chief Operating Officer

HARRISHEALTH SYSTEM

LBJ Hospital Expansion Update

Facilities & Engineering

December 2023



63 Public Community & MWBE Outreach Events



2,993 Total Participants/Attendees -
629 MWBE Attendees

2,725 On Project Stakeholder Registry

679 (Total surveyed)

81% Agreed with
building a new LBJ Hospital

117 Neighborhoods and
Area Zip Codes
Reached (Acres Home, Fifth Ward
Trinity/Kashmere Gardens, Settegast,
Rosewood, Linwood, Magnolia, Pleasantville
and Denver Harbor/East End and the
surrounding areas)



4 Neighborhood bus tours Participants from the
community and community leaders rode alongside members from the
project team and Harris Health leadership- Collaboration with
METRO

10 Town Hall Meetings

35,029 Touches via Website,
Events & Project Contact/Call Center

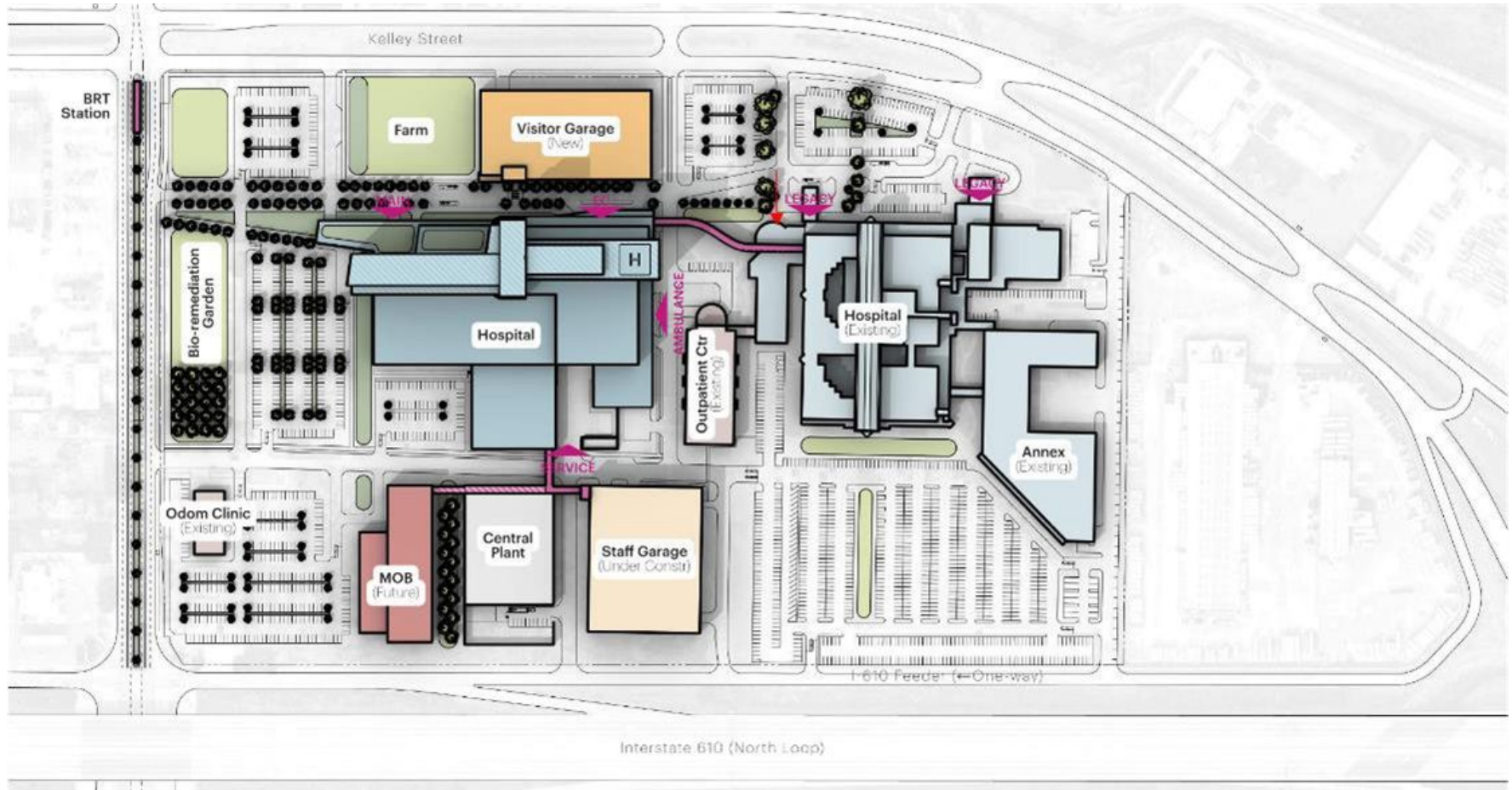


Design Development Meetings + Celebration

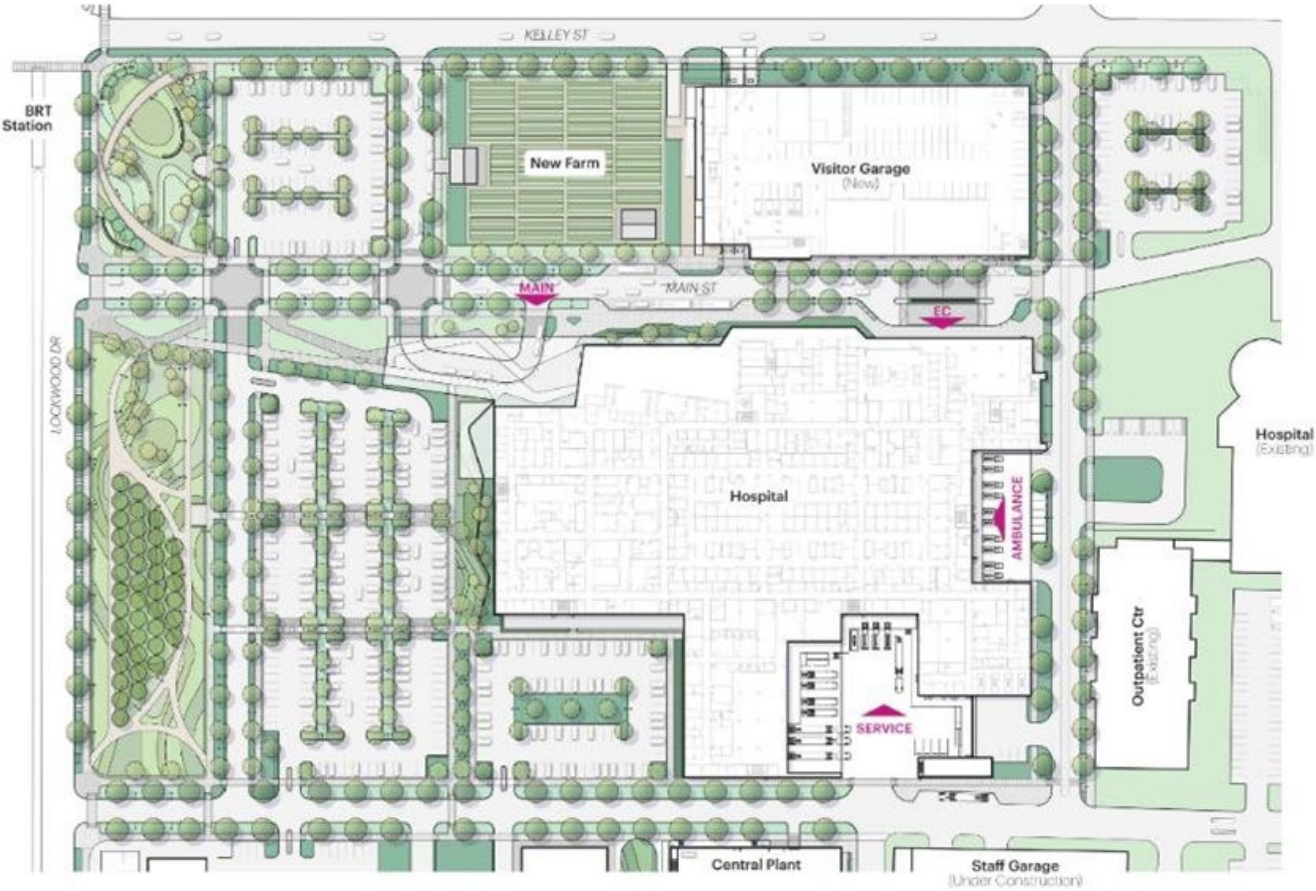


- 4 SD Workshops
- 4 DD Workshops
- 11 Full Scale Mock-Up Rooms
- 5 Design Tracks
- 800+ department meetings overall

Campus Plan



Site Development



Exterior Development



Sustainability

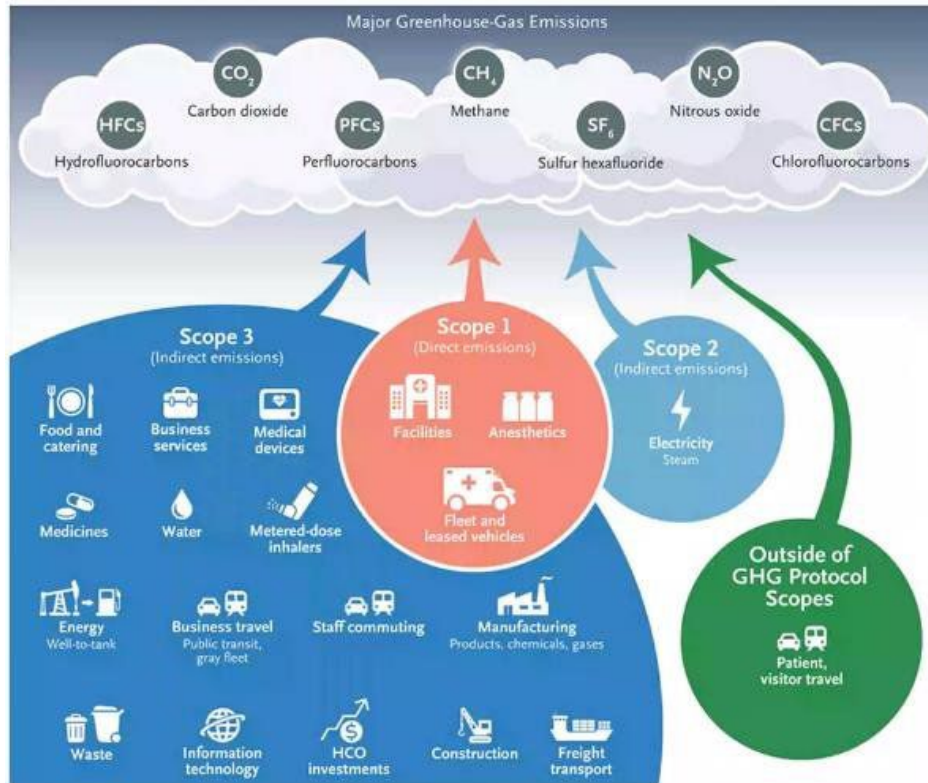
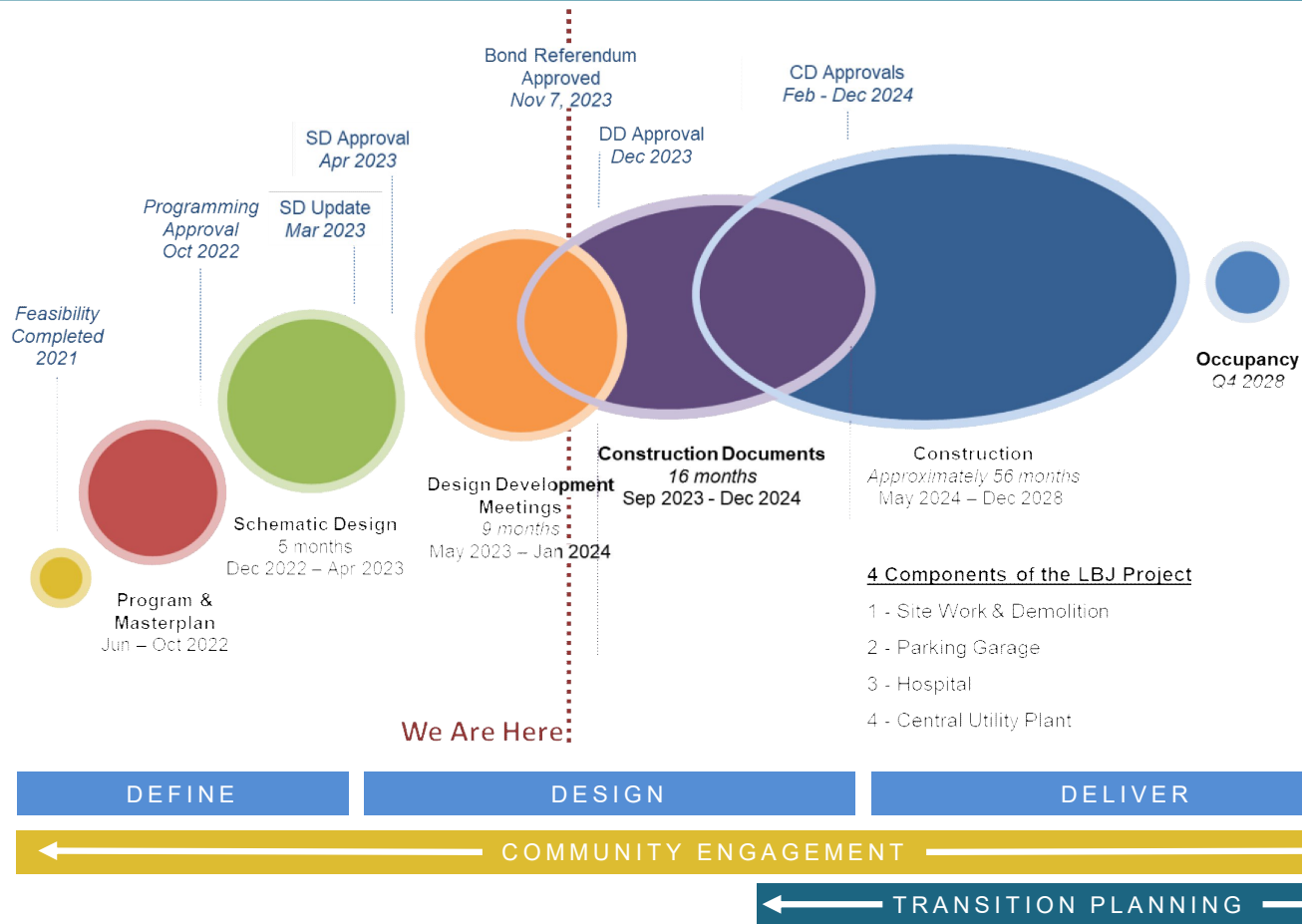


Image Credits: The New England Journal of Medicine



- Designing to USGBC LEED Silver
- High-performance building envelope
- 30% More energy efficient than other hospitals in the region
- Baseline greenhouse gas study to align with Harris County Climate Action Plan
- Strategy to phase to full electrification of hospital
- 6.6 million gallons of water saved annually
- Onsite power cogeneration system reduces greenhouse gases compared to power grid
- Opportunity for solar generation

Schedule



Thursday, December 7, 2023

November Board Committee Reports

November Board Committee Meetings:

- Governance Committee – November 7, 2023
- Quality Committee – November 7, 2023 (Summary attached for your review)
 - HRO Safety Message – Video: Communication for Safer Care
 - Annual Research Report
- Budget & Finance Committee – November 9, 2023
- Compliance & Audit Committee – November 9, 2023 (Summary attached for your review)
- Joint Conference Committee – November 9, 2023
- Ambulatory Surgical Center (ASC) at LBJ Governing Body – November 16, 2023
- DEI Committee – November 17, 2023

Board of Trustees – Executive Summary
Patient Safety & Quality Programs – Open Session
December 7, 2023



Please refer to reports presented at the Quality Committee Open Session on November 7, 2023 for additional details.

HRO Safety Message – Video: Communication for Safer Care

Steven Brass, MD, MPH, MBA, FACHE

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.

Annual Research Report

Julie Thompson, PhD, MSN, APRN, CNOR, CIP

Research is an integral part of the mission and vision of the Harris Health System. Research at Harris Health encompasses clinical, translational, quality, outcomes and cost-effectiveness research aimed at improving the healthcare system and the patients and communities served. The annual research report highlights the human subject research activities within the Harris Health System conducted in collaboration with our academic partners.

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.

**November 9, 2023 Board of Trustees Compliance and Audit Committee
Executive Summary**



Open Session

- *A presentation regarding the Harris Health System Independent Auditor’s Pre-audit Communication for the Fiscal Year Ended September 30, 2023 was presented by Mr. Chris Clark with Forvis for information only.*
- *The Committee had a discussion regarding the 2024 Compliance and Audit Committee Meeting frequency and agreed to maintain quarterly meetings with a commitment to meet more frequently if needed.*

The following items were presented by the Chief Assistant County Auditor for information only:

- Internal Audit Annual Status Update:
 - *Overview of audit team’s organization and credentials*
 - *Summary of Post-Engagement Survey results – 29% survey response rate; Internal Audit received ratings ranging from 4.5 to 4.8 on a 5.0 scale*
 - *FY2023 Audit Plan status – 13 audits completed; four audits in progress (Baylor Provider Invoicing, Medical Device Security, MWBE Program & Policy, HIPAA Privacy Controls); one audit delayed (Non- Formulary Drug Process Audit)*
 - *Overview of four recently completed audits – Follow-up on 2019 Guidehouse Grant Accounting Process Assessment; Cybersecurity Training Compliance; Physician Preference Cards Consulting Engagement; PeopleSoft Change Management*
 - *Overview of outstanding management action plans (MAPs) - 14 MAPs from seven prior audits (UT Provider Invoicing; Vendor Payment Timeliness; Procurement; PeopleSoft Change Management; Business Continuity and Disaster Recovery; Telemedicine; Follow-up on Guidehouse Grant Accounting Process Assessment). There were two past-due, high-priority MAPs from the Business Continuity and Disaster Recovery and Telemedicine audits.*
 - *Highlights from FY2024 Annual Risk Assessment and Audit Plan Process (Further discussed in Executive Session; see below.)*

The following items were recommended by the Committee for approval to the full Board of Trustees and will appear on the Board’s Consent Agenda for approval:

- Harris Health System Internal Audit Charter;
- FY 2024 Internal Audit Plan;
- FY 2024 Compliance Program (including Information Security) Plan; and
- FY 2024 Internal Quality Audit (Accreditation) Plan.



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

November 21, 2023

Board of Trustees Office
Harris Health System

**RE: Board of Trustees Meeting – December 7, 2023
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: December 07, 2023 (Approvals)

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A1	J.T. Vaughn Construction, LLC MWBE Goal: 33%	Construction and Buildout of New Cathlab Suites at Ben Taub Hospital for Harris Health System - To provide all labor, materials, equipment and incidentals for the construction of the new Cathlab suites and associated support spaces. Project will relocate the existing Interventional Cardiology suite on Level 6 in the Hospital, to an existing shell space on Level 2, adjacent to the Surgical Suite. The owner contingency provides for coverage on unanticipated costs throughout the construction. <i>Job No. 230353</i>	Best proposal meeting requirements	Babak Zare		\$ 5,695,000
A2	Cigna Health & Life Insurance Company (GA-06734) MWBE Goal: N/A Procured Prior to MWBE Program	Group Medical and Stop Loss Coverage for Harris Health System - To provide group medical and stop loss insurance coverage for members of Harris Health System's health plans. <i>Job No. 160065, Board Motion 23.01-08</i>	Ratify Renewal October 01, 2023 through October 31, 2023	Amanda Jones-Duncan	\$ 5,600,000	\$ 5,600,000
A3	Favorite Healthcare Staffing (HCHD-858) MWBE Goal: 30%	Temporary Nursing Personnel for Harris Health System - To providing temporary nursing personnel to Harris County correctional facilities. <i>Professional Services Exemption, Board Motion 22.09-126</i>	Ratify Renewal Professional Services Exemption September 02, 2023 through September 01, 2024	Kiki Teal	\$ 5,400,000	\$ 5,400,000
A4	Baxter Healthcare Corporation (GA-07333) MWBE Goal: GPO/CO-OP Sourced	IV Therapy - I.V. Fluids, Bag-Based Drug Delivery and TPN Macronutrients - To continue providing Harris Health System with IV fluids, bag-based drug delivery systems and Total Parenteral Nutrition (TPN) macronutrients. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 23.01-08</i>	Funding Yr. 11 February 01, 2024 through January 31, 2025	Douglas Creamer	\$ 2,930,222	\$ 2,930,222
A5	Masimo Americas (PP-NS-1470) MWBE Goal: GPO/CO-OP Sourced	Pulse Oximetry and Capnography Devices - To continue providing Harris Health System with disposable sensors and connecting cables for the pulse oximetry devices. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 23.01-08</i>	Renewal February 19, 2024 through February 18, 2025	Douglas Creamer	\$ 2,680,674	\$ 2,761,094
A6	SHI Government Solutions, Inc. (DIR-TSO- 4092) (HCHD-566) MWBE Goal: 100%	Microsoft Enterprise Agreement Software Maintenance Renewal - To continue to provide software maintenance and license renewal for the Microsoft software running on Harris Health System's computer workstations and servers. It includes productivity software (i.e. MS Office - Word, Excel, Outlook and PowerPoint). <i>State of Texas Department of Information Resources (DIR) Cooperative Contract, Board Motion 23.01-08</i>	Renewal January 01, 2024 through December 31, 2024	Ronald Fuschillo	\$ 2,789,960	\$ 2,534,694
A7	Merc Medical Supply (HCHD-911) MWBE Goal: 0% Non-Divisible	Purchase and/or Rental of Durable Medical Equipment (DME) and Home Oxygen for Harris Health System - To provide continued DME and home oxygen for Harris Health System patients at Medicaid rates. <i>Job No. 220317, Board Motion 22.12-166</i>	Renewal January 06, 2024 through January 05, 2025	Ruth Russell	\$ 2,000,000	\$ 2,000,000

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A8	Smith & Company Architects (HCHD-839) 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 September 02, 2023 through September 01, 2024	Patrick Casey	\$ 1,500,000	\$ 1,500,000
A9	Teliosity, LLC (HCHD-842) 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 23.08-130</i>	Ratify Renewal December 02, 2023 through December 01, 2024	Patrick Casey	\$ 1,500,000	\$ 1,500,000
A10	Page Southerland Page, Inc. (HCHD-836) 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>	Renewal December 09, 2023 through December 08, 2024	Patrick Casey	\$ 1,500,000	\$ 1,500,000
A11	SCA Pharmaceutical, LLC (PPPH21SCA01) MWBE Goal: GPO/CO-OP Sourced QuVa Pharma, Inc (PPPH21QVA01) MWBE Goal: GPO/CO-OP Sourced	Outsourced Services for I.V. Admixture, Drug Shortages and Compounded Ophthalmics - To continue providing unique compounding services, greater than 24-hour dating on intravenous admixture products, and minimize wastage of batch pharmaceutical products. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 22.12-166</i>	Funding Yr. 6 January 01, 2024 through December 31, 2024	Michael Nnadi	\$ 1,131,406	\$ 1,131,406
A12	Davis Vision, Inc., a subsidiary of Metlife (GA-06387) MWBE Goal: 0% Non-Divisible	Vision Insurance for Harris Health System - To provide vision insurance benefit to Harris Health employees. <i>Job No. 150101, Board Motion 23.06-95</i>	Ratify Renewal October 01, 2023 through September 30, 2024	Amanda Jones-Duncan	\$ 1,030,943	\$ 1,030,943
A13	Hellmuth, Obata & Kassabaum, 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>	Renewal December 09, 2023 through December 08, 2024	Patrick Casey	\$ 500,000	\$ 1,000,000
A14	Smith Seckman Reid, Inc. (HCHD-840) 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>	Renewal December 09, 2023 through December 08, 2024	Patrick Casey	\$ 1,000,000	\$ 1,000,000
A15	Affiliated Engineers, Inc. (HCHD-819) 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>	Renewal December 19, 2023 through December 18, 2024	Patrick Casey	\$ 1,000,000	\$ 1,000,000
A16	O'Connell Robertson (HCHD-835) 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 December 02, 2023 through December 01, 2024	Patrick Casey	\$ 1,000,000	\$ 1,000,000

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A17	Wylie & Associates LLC dba Wylie Engineering (HCHD-844) 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 December 02, 2023 through December 01, 2024	Patrick Casey	\$ 1,000,000	\$ 1,000,000
A18	LSL Industries, Inc MWBE Goal: GPO/CO-OP Sourced	IV Site Management and Accessories - To provide Harris Health System with intravenous (IV) start kits and central line dressings used in the maintenance of IV insertion sites. Premier Healthcare Alliance, L.P. Contract	Best ASCEND Contract January 01, 2024 through December 31, 2024	Douglas Creamer	\$ 826,066	\$ 826,066
A19	Protiviti, Inc. MWBE Goal: 5%	Applied Research and Data Analysis, Strategic Planning and Management Strategies and Other Services for Harris County - To allow Harris Health to utilize this contract to conduct a system-wide technology assessment and develop an Information Technology Strategic Plan. The County Attorney's office is preparing an Agreement for these services. These services are subject to execution of the Agreement. Job No. 210317	March 22, 2023 through March 21, 2024 with three (3) one-year renewal options	Jose Mathew		\$ 750,000
A20	University of Texas Health Science Center - Houston (HCHD-306) MWBE Goal: N/A Government Entity	Anatomical Pathology Reference Testing and Services for Harris Health System - To continue providing anatomical pathology reference testing services for Harris Health System. Interlocal Agreement, Board Motion 22.09-126	Ratify Renewal October 01, 2023 through September 30, 2024	Michael Nnadi	\$ 683,250	\$ 715,375
A21	Elekta, Inc. MWBE Goal: N/A Sole Source	Hardware Maintenance and Support for Elekta Linear Accelerators for Harris Health System - To provide equipment upgrade and maintenance and support for three (3) linear accelerators at Smith Clinic. Sole Source Exemption	Ratify Award Sole Source Exemption One (1) year initial term with three (3) one-year renewal options	Michael Beckman		\$ 701,921
A22	ICU Medical Inc. (PP-IV-126) MWBE Goal: GPO/CO-OP Sourced	Infusion Sets and Accessories – Closed Chemotherapy System - To continue providing Harris Health System with specialized IV tubing, needles connectors and accessories utilized specifically in chemotherapy treatment. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.01-08	Funding Yr. 11 February 01, 2024 through January 31, 2025	Douglas Creamer	\$ 669,502	\$ 682,892
A23	Netsync Network Solutions, Inc. MWBE Goal: 100%	Technology Refresh of Servers Supporting the Unified Communications System Infrastructure for Harris Health System - To replace the servers that support the organization's Unified Communications system which will soon reach its end of useful life. State of Texas Department of Information Resources (DIR) Cooperative Contract	Award Only quote	Ronald Fuschillo		\$ 627,307
A24	HP, Inc. (DIR-TSO-4159) MWBE Goal: 0% Dropped Shipped	Hewlett-Packard Laptop and Tablet Purchase - This purchase will replace 500 old end of life laptops and 100 old end of life tablets. These devices will be used by employees throughout the entire organization. State of Texas Department of Information Resources (DIR) Cooperative Contract	Purchase Low quote	Antony Kilty		\$ 623,291

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A25	Linde Gas & Equipment Inc fka Praxair (HCHD-480) MWBE Goal: GPO/CO-OP Sourced	Provide Bulk Oxygen and Cylinder Gases for Harris Health System. - To continue providing bulk oxygen and cylinder gases for Ben Taub and LBJ Hospital and to add micro bulk oxygen and cylinder gases for Quentin Mease Hospital. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.01-08	Ratify Renewal November 15, 2023 through November 14, 2024	Douglas Creamer	\$ 501,016	\$ 616,138
A26	Globus Medical North America, Inc. (HCHD-573) MWBE Goal: N/A Public Health or Safety	Spinal Implants and Related Products - To continue providing physician clinically preferred spinal implants and related products used for various operating procedures. Public Health or Safety Exemption, Board Motion 22.12-166	Renewal Public Health or Safety Exemption February 25, 2024 through February 24, 2025	Doug Creamer	\$ 603,887	\$ 615,965
A27	Cardinal Health (AD-NS-1187) MWBE Goal: GPO/CO-OP Sourced Encompass Group, LLC (PP-NS-1188) MWBE Goal: GPO/CO-OP Sourced	Disposable Non-Sterile Apparel - To continue to provide Harris Health System with non-sterile disposable apparel. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.01-08	Funding Yr. 6 December 01, 2023 through November 30, 2024	Douglas Creamer	\$ 579,102	\$ 579,102
A28	Cadence Bank (GA-07443) MWBE Goal: 0% Non-Divisible First Horizon Bank MWBE Goal: 0% Non-Divisible	Depository Banking Services for Harris County - To provide banking services for Harris Health funds. Job No. 160241, Board Motion 22.02-20	Ratify October 01, 2023 through September 30, 2024	Kari McMichael	\$ 456,212	\$ 540,000
A29	Favorite Healthcare Staffing (HCHD-858) MWBE Goal: 30%	Temporary Nursing Personnel for Harris Health System - Additional funds cover an increase in staffing assignments filled by this vendor. Professional Services Exemption, Board Motion 22.09-126	Ratify Additional Funds Professional Services Exemption September 02, 2022 through September 01, 2023	Kiki Teal	\$ 4,900,000	\$ 500,000
A30	Concept Engineers, Inc. (HCHD-826) 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	Renewal December 09, 2023 through December 08, 2024	Patrick Casey	\$ 500,000	\$ 500,000
A31	Terracon Consultants, Inc. (HCHD-843) 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	Renewal January 06, 2024 through January 05, 2025	Patrick Casey	\$ 500,000	\$ 500,000

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A32	<p>Henry Schein, Inc. (Secondary) MWBE Goal: 0% Non-Divisible</p> <p>Cardinal Health 200, LLC (Secondary) MWBE Goal: 0% Non-Divisible</p> <p>Medline Industries, LP (Primary) MWBE Goal: 0% Non-Divisible</p>	<p>Primary and Secondary Distribution Services for Medical and Surgical Supplies for the Harris Health System - To provide primary and secondary distribution services for medical and surgical supplies for Harris Health System.</p> <p>Premier Healthcare Alliance, L.P. Contract</p>	<p>Award Best Offer(s) Meeting Requirements</p> <p>One (1) year initial term with seven (7) one-year renewal options</p>	Doug Creamer		\$ 468,600
A33	<p>TDIndustries MWBE Goal: 28%</p>	<p>Hot Water Heater Replacement at Lyndon B. Johnson Hospital for Harris Health System - The project consists of the replacement of the existing domestic hot water heater and supporting control valves. The existing hot water heater system is past its life expectancy and is experiencing moderate scaling.</p> <p>OMNIA Partners, Public Sector Cooperative Purchasing Program</p>	<p>Purchase Low quote</p>	Patrick Casey		\$ 467,827
A34	<p>Karl Storz Endoscopy-America, Incorporated (HCHD-496) MWBE Goal: N/A Sole Source</p>	<p>Preventative Maintenance and Repair Services for Harris Health System - To provide preventative maintenance and repair services for telescopes, intubation video scopes and related equipment located at Ben Taub Hospital and Lyndon B. Johnson Hospital.</p> <p>Sole Source Exemption, Board Motion 22.09-126</p>	<p>Ratify Renewal Sole Source Exemption</p> <p>October 01, 2023 through September 30, 2024</p>	James Young	\$ 435,960	\$ 435,960
A35	<p>Cardinal Health 200, LLC (AD-OR-1969) MWBE Goal: GPO/CO-OP Sourced</p>	<p>Sterile Packs and Gowns - To continue providing Harris Health System with sterile packs, gowns, sterile and nonsterile drapes.</p> <p>Premier Healthcare Alliance, L.P. Contract, Board Motion 22.12-166</p>	<p>Funding Yr. 3</p> <p>January 01, 2024 through December 31, 2024</p>	Douglas Creamer	\$ 412,455	\$ 430,077
A36	<p>FMA Alliance, Ltd. MWBE Goal: N/A Procured Prior to MWBE Program</p>	<p>Collection Services for Overdue Patient Accounts for Harris Health System - Extension and additional funds to continue services until the competitive proposal process is complete and new agreements are in place.</p> <p>Job No. 110223, Board Motion 23.04-58</p>	<p>Ratify Additional Funds Extension</p> <p>September 12, 2023 through March 31, 2024</p>	Victoria Wiltz	\$ 639,956	\$ 420,000
A37	<p>First DataBank, Inc. (GA-07073) MWBE Goal: N/A Sole Source</p>	<p>First DataBank MedKnowledge License and Maintenance for Harris Health System. - To continue to provide maintenance for the drug interaction database software designed for medication ordering and prescribing at the point of care.</p> <p>Sole Source Exemption, Board Motion 22.12-166</p>	<p>Renewal Sole Source Exemption</p> <p>December 15, 2023 through December 14, 2024</p>	Ronald Fuschillo	\$ 400,194	\$ 413,730
A38	<p>Change Healthcare Solutions, LLC (HCHD-478) MWBE Goal: N/A Procured Prior to MWBE Program</p>	<p>Web-Based Electronic Claims and Insurance Verification System for Harris Health System - To continue providing Harris Health System with web-based electronic claims and insurance verification.</p> <p>Job No. 180008, Board Motion 23.01-08</p>	<p>Ratify Renewal</p> <p>October 18, 2023 through October 17, 2024</p>	Tina Strawn	\$ 410,000	\$ 410,000

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A39	Texas Children's Hospital (GA-04784) MWBE Goal: N/A Public Health or Safety	On-Call Health Services for Pediatric Patients of Harris Health System - Additional funds cover an anticipated increase in services needed. Public Health or Safety Exemption, Board Motion 23.05-73	Additional Funds Public Health or Safety Exemption July 01, 2023 through June 30, 2024	Ruth Russell	\$ 400,000	\$ 400,000
A40	Jones Lang LaSalle, Inc. MWBE Goal: 1%	Integrated Workplace Management System (Software) for Harris Health System - To provide an integrated workplace management system (software) for Harris Health System. Job No. 230198	Award Best proposal meeting requirements Three-year initial term	Teong Chai		*
A41	Himage Solutions, LLC, an Omega Healthcare owned company (HCHD-1157) MWBE Goal: 12%	Cancer Registry Services for Harris Health System - To provide certified cancer registry personnel for Harris Health Cancer Center. Professional Services Exemption	Ratify Purchase Professional Services Exemption One (1) year initial term with one (1) one-year renewal options	Tenisha Granville		\$ 341,000
A42	Insight Direct USA, Inc. (PP-IT-241) MWBE Goal: 0% Dropped Shipped	HP computer monitors for Harris Health System - This purchase will replace 2,000 old outdated desktop monitors that have reached their end of life. This will be awarded for 2 years under Premier Contract. Premier Healthcare Alliance, L.P. Contract	Award Lowest Offer One (1) year initial term with one (1) one-year renewal options	Anthony Kilty		\$ 331,740
A43	Womble Bond Dickinson (US) LLP (GA-07768) MWBE Goal: N/A Specialized or Technical	Special Counsel for Harris Health System - To provide special counsel services in connection with the drafting and negotiating of affiliation, support, and medical education agreements for Harris Health. Professional Services Exemption, Board Motion 23.01-08	Renewal Professional Services Exemption January 22, 2024 through January 21, 2025	L. Sara Thomas	\$ 300,000	\$ 300,000
A44	AndWell LLC (PP-SV-322) (HCHD-609) MWBE Goal: GPO/CO-OP Sourced	Advertising and Marketing Svcs - Additional funds are for the purchase of additional media and vendor's fees. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.05-73	Ratify Additional Funds May 01, 2023 through December 31, 2023	Amanda Callaway	\$ 2,036,447	\$ 300,000
A45	Hewlett-Packard Enterprise Company MWBE Goal: N/A Specialized or Technical	Hewlett-Packard Annual Hardware and Software Maintenance Renewal for Harris Health - To provide hardware and software maintenance for Hewlett-Packard server equipment. The maintenance provides next business day, 6 hour call to repair and includes onsite replacement of failed equipment, operating systems updates, and 24/7 technical support. State of Texas Department of Information Resources (DIR) Cooperative Contract	Purchase Only quote January 25, 2024 through January 24, 2025	Ronald Fuschillo		\$ 287,920
A46	The College of American Pathologists MWBE Goal: N/A Public Health or Safety	Laboratory Accreditation and External Proficiency Testing Services for Harris Health System - To provide external proficiency testing services and 2024 Accreditation fees for Harris Health System. Public Health or Safety Exemption	Purchase Public Health or Safety Exemption	Michael Nnadi		\$ 277,100

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A47	Lightbeam Health Solutions, Inc. dba CareSignal (HCHD-571) MWBE Goal: N/A Procured Prior to MWBE Program	Remote Patient Monitoring Platform for Harris Health System - To continue providing support services for the remote patient monitoring platforms. This allows monitoring Harris Health's chronic disease patients through text messaging and phone calls with real-time access to Harris Health's care team. Public Health or Safety Exemption, Board Motion 22.12-166	Renewal Public Health or Safety Exemption January 01, 2024 through December 31, 2024	Esparanza Galvan	\$ 240,000	\$ 276,000
A48	Performance Health Supply, Inc (AD-NS-1680) MWBE Goal: N/A Specialized or Technical	Physical Therapy Products - To continue to provide Harris Health System with physical therapy products used for therapy aimed at developing, maintaining and restoring maximum movement and functional ability. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.06-95	Funding Yr. 2 March 01, 2024 through February 28, 2025	Douglas Creamer	\$ 260,230	\$ 260,230
A49	Medegen Medical Products, LLC MWBE Goal: GPO/CO-OP Sourced Medline Industries, LP MWBE Goal: GPO/CO-OP Sourced	Patient Bedside Products - To provide Harris Health System with products for patient bedside and personal use including plastic, disposable and biodegradable products. Premier Healthcare Alliance, L.P. Contract	Best Contract(s) July 01, 2023 through June 30, 2024	Douglas Creamer	\$ 255,393	\$ 255,393
A50	Edwards Lifesciences LLC (GA-07090) MWBE Goal: N/A Public Health or Safety	Heart Valves - To continue providing Harris Health System with heart valves consignment used in cardiovascular surgical procedures. Public Health or Safety Exemption	Renewal Public Health or Safety Exemption December 01, 2023 through November 30, 2024	Douglas Creamer	\$ 241,000	\$ 241,000
A51	Charles Roger Coward (HCHD-1142) MWBE Goal: N/A Public Health or Safety	Interim Leader Services for Harris Health System - To provide interim services as Director of Emergency Medical Services. Professional Services Exemption	Ratify Purchase Professional Services Exemption October 16, 2023 through April 13, 2024	Ruth Russell		\$ 220,000
A52	Bard Peripheral Vascular Inc. (GA-07727) MWBE Goal: GPO/CO-OP Sourced	Peripheral Vascular Products - To continue providing consignment of peripheral vascular products used primarily for the prevention and treatment of in-stent restenosis at Ben Taub and Lyndon B. Johnson Hospitals. Premier Healthcare Alliance, L.P. Contract	Renewal November 14, 2023 through November 13, 2024	Douglas Creamer	\$ 212,550	\$ 212,550
A53	B.Braun Medical, Inc. (AD-OR-2041) MWBE Goal: GPO/CO-OP Sourced	Regional Anesthesia Trays and Supplies - To continue providing Harris Health System with regional anesthesia trays and consumables required for epidural and spinal procedures. Premier Healthcare Alliance, L.P. Contract, Board Motion 23.02-24	Funding Yr. 3 March 01, 2024 through February 28, 2025	Douglas Creamer	\$ 208,322	\$ 208,322
A54	Insight Direct (USA), Inc. [PP-IT-241] MWBE Goal: N/A Specialized or Technical	Imperva Flex Protect Plus Maintenance Renewal - To provide a database security monitoring solution to monitor and audit all access to sensitive data from SQL and Oracle databases. This solution helps Harris Health maintain continuous HIPAA compliance for electronic patient health information. Premier Healthcare Alliance, L.P. Contract	Ratify Award Lowest Offer November 24, 2023 through November 24, 2024	Jeffrey Vinson		\$ 180,167

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A55	Medtronic Inc. (HCHD-0764) MWBE Goal: N/A Public Health or Safety	Peripheral Embolization Products for the Harris Health System - To continue providing consignment of physician clinically preferred concerto coils and micro vascular plugs used to treat arterial, venous and peripheral vascular disease. <i>Public Health or Safety Exemption</i>	Renewal Public Health or Safety Exemption February 09, 2024 through February 08, 2025	Douglas Creamer	\$ 180,080	\$ 180,080
A56	3M Company (AD-NS-1000) MWBE Goal: GPO/CO-OP Sourced	Tape Products - To continue to provide Harris Health System with tape products. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 23.07-113</i>	Funding Yr. 2 February 01, 2024 through January 31, 2025	Douglas Creamer	\$ 176,588	\$ 176,588
A57	Century Link Communications, LLC d/b/a Lumen Technologies Group (HCHD-926) MWBE Goal: N/A Specialized or Technical	Amendment for Redundant Data Circuits for Clinic Locations - 7 clinic locations are no longer operating (closed) and no longer require Lumen connectivity. Those seven circuits are being replaced with 3 new locations circuits, with a monthly reduction of approximately \$1,000. <i>Government Services Administration (GSA) Cooperative Purchasing Program, Board Motion 23.05-73</i>	Additional Funds May 07, 2023 through May 07, 2026	Eric Hidalgo Mohammad Manekia	\$ 1,227,226	\$ 176,349
A58	NDCHealth Corporation d/b/a RelayHealth (GA-05355) MWBE Goal: N/A Procured Prior to MWBE Program	Real-Time Electronic Pharmacy Claims Transactions Switching Service for Harris Health System - To provide adjudication services to comply with National Council for Prescription Drug Programs (NCPDP) required for the Texas Vendor Drug Program. <i>Sole Source Exemption, Board Motion 23.04-58</i>	Ratify Renewal Sole Source Exemption September 06, 2023 through September 05, 2024	Sunny Ogbonnaya	\$ 165,000	\$ 165,000
A59	ARUP Laboratories, Inc. (HCHD-499) MWBE Goal: GPO/CO-OP Sourced	Clinical Reference Laboratory Testing Services for Harris Health System - To continue providing outside clinical reference laboratory testing services for Harris Health System. <i>Premier Healthcare Alliance, L.P. Contract, Board Motion 21.06-65</i>	Ratify Renewal October 01, 2023 through September 30, 2024	Michael Nnadi	\$ 160,000	\$ 160,000
A60	A/W Mechanical Services, LP MWBE Goal: Not Applicable to Request	Job Order Contracting for HVAC and/or HVAC Related Projects for Harris Health System - To provide heating, ventilation and air conditioning (HVAC) repair, renovation, or alteration services at various hospitals and clinics for Harris Health System. <i>Job No. 180068, Board Motion 23.09-146</i>	Additional Funds Extension February 15, 2024 through May 12, 2024	Kia Scales	\$ 1,000,000	\$ 150,000
A61	CenturyLink Communications LLC d/b/a Lumen Technologies Group (GSA Contract# 47QTCA20D0077) MWBE Goal: N/A Specialized or Technical	10G dedicated internet to be utilized at the Bryan Data Center - This will reduce cost and also this replacement circuit consolidates voice and data services including internet at HH Fibertown Bryan Data Center due to AT&T already providing services with multiple circuits at same location. These circuits will ensure reliable access to Harris Health system applications in case the AT&T circuits fail. <i>Government Services Administration (GSA) Cooperative Purchasing Program</i>	Purchase Only quote Three-year initial term	Eric Hidalgo Mohammad Manekia		\$ 146,258
A62	Philips Healthcare MWBE Goal: 0% Dropped Shipped	Physiological Monitoring Equipment - To add twenty-two (22) vital sign monitors for Ben Taub and Lyndon B. Johnson Hospitals. <i>Premier Healthcare Alliance, L.P. Contract</i>	Award Best Offer(s) Meeting Requirements	Teong Chai		\$ 145,433

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A63	CenturyLink Communications LLC d/b/a Lumen Technologies Group (GSA Contract# 47QTCA20D0077) MWBE Goal: N/A Specialized or Technical	Agreement for Consolidation of Lumen Circuits - This circuit request will provide consolidated voice/data circuit services that support LBJ Hospital and Smith Clinic from Fibertown Bryan. AT&T is already providing services at LBJ Hospital. Geographic diversity will ensure reliable access to Harris Health system applications in case of Houston data failure of the AT&T circuits. Government Services Administration (GSA) Cooperative Purchasing Program	Purchase Only quote Three-year initial term	Eric Hidalgo Mohammad Manekia		\$ 143,956
A64	Insight Direct USA, Inc. MWBE Goal: GPO/CO-OP Sourced	Information Technology Service Management Software (ITSM) Support for Harris Health System - To provide for the continued support to the Cherwell Service Management software. This system allows IT to support service delivery, as well as software and hardware asset management. Premier Healthcare Alliance, L.P. Contract	Award Lowest Offer December 28, 2023 through December 27, 2024	Ronald Fuschillo		\$ 141,424
A65	Innovative Product Achievements, LLC (GA-07396) MWBE Goal: N/A Sole Source	Automated Scrub and Linen Dispensing Systems for Harris Health System - To provide scrub and linen dispensing systems and maintenance, repair and web hosting for these systems at the Harris Health System. The additional funds are required to purchase additional equipment that is needed and the extension allows for continued maintenance of the equipment in use at the Harris Health System. Sole Source Exemption	Ratify Additional Funds Extension Sole Source Exemption November 01, 2023 through October 31, 2024	Douglas Creamer	\$ 0	\$ 126,817
A66	EAN Holdings, LLC MWBE Goal: 0% Dropped Shipped	Rental of Vehicles for Harris Health System - Additional funds are needed for payment of a stolen vehicle rented from EAN Holdings, LLC. Job No. 220727, Board Motion 23.10-159	Additional Funds October 01, 2023 through September 30, 2024	Timothy Brown	\$ 456,000	\$ 119,956
A67	UpToDate, Inc. fka Wolters Kluwer Clinical Drug Information, Inc. and Lexi-Comp, Inc. (GA-05505) MWBE Goal: N/A Sole Source	Drug Database Software System for Harris Health System - To continue to provide a clinical drug reference library for Harris Health System. Sole Source Exemption, Board Motion 22.12-166	Renewal Sole Source Exemption December 26, 2023 through December 25, 2024	Ronald Fuschillo	\$ 101,086	\$ 112,524
A68	Encompass Group LLC MWBE Goal: GPO/CO-OP Sourced	Fall Management Footwear - To provide Harris Health System with non-skid 360-degree tread slippers used in preventing patient falls. Premier Healthcare Alliance, L.P. Contract	Best ASCEND Contract August 01, 2023 through July 31, 2024	Douglas Creamer	\$ 109,217	\$ 109,217
A69	SHI Government Solutions, Inc. (DIR-TSO-4092) MWBE Goal: 100%	Microsoft SQL Server licenses for Harris Health System - To provide additional licenses using the Epic EMR system. State of Texas Department of Information Resources (DIR) Cooperative Contract	Award Only quote December 30, 2023 through December 31, 2024	Antony Kilty		\$ 106,890

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
A70	FinThrive (fka TransUnion/eScan) MWBE Goal: N/A Procured Prior to MWBE Program	Certification of Pending Medicaid Cases and Other Related Third Party Sources for Harris Health System - Additional funds to cover higher volume of services than previously estimated for assistance in reducing uncompensated care costs <i>Job No. 070214, Board Motion 23.10-158</i>	Ratify Additional Funds Best proposal meeting requirements November 16, 2022 through November 15, 2023	Nancy Barrera	\$ 512,000	\$ 104,000
A71	Penumbra, Inc. (HCHD-0506) MWBE Goal: GPO/CO-OP Sourced	Neurovascular Interventional Radiology - To continue providing Harris Health System with consignment of diagnostic and interventional radiology products used in the treatment of cerebral vascular disease. These products include micro catheters, intracranial access devices, intracranial balloons, intracranial coils and intracranial embolization products. <i>Premier Healthcare Alliance, L.P. Contract</i>	Renewal November 15, 2023 through November 14, 2024	Douglas Creamer	\$ 100,156	\$ 100,156
A72	Insight Direct USA, Inc. (PP-IT-241) (HCHD-1061) MWBE Goal: 0% Non-Divisible	Equipment Hardware, Software and Services - Additional funds cover additional resume database licenses and the addition of an Employer Branding Hub consisting of Indeed Company Pages and Glassdoor Enhanced Profile. <i>Premier Healthcare Alliance, L.P. Contract</i>	Ratify Additional Funds November 01, 2022 through October 31, 2023	Elle Pallugna	\$ 60,000	\$ 49,389
A73	San Jacinto Community College District (HCHD-476) MWBE Goal: Not Applicable to Request	Spanish Language Classes for Harris Health System - To enhance Spanish language communication in and out of the healthcare system. <i>Interlocal Agreement, Board Motion 22.12.166</i>	Ratify Renewal September 10, 2023 through September 09, 2024	Gary Marsh	\$ 17,700	\$ 17,700
A74	Returns R Us, Inc. an Illinios Corporation d/b/a Pharma Logistics, Ltd. MWBE Goal: GPO/CO-OP Sourced	Onsite Box & Ship Returned Goods Service - To provide Harris Health System with the pick up and processing of outdated, recalled, and overstocked prescription drugs. <i>Premier Healthcare Alliance, L.P. Contract</i>	Award Best Contract(s) February 01, 2023 through January 31, 2024	Michael Nnadi		\$ (520,865)
					Total Expenditures	\$ 57,286,213
					Total Revenue	\$ (520,865)

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

Expenditure Summary: December 07, 2023 (Transmittals)

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
B1	CFI Mechanical, Inc. MWBE Goal: 5%	Installation of Dental Air Compressors in Various Clinics for the Harris Health System - To install dental air compressors in various clinics for the Harris Health System Choice Partners, a division of Harris County Department of Education Cooperative Program	Award Low quote	Babak Zare		\$ 103,626
B2	Canon Medical Informatics, Inc. fka Vital Images, Inc. (GA-05791) MWBE Goal: N/A Procured Prior to MWBE Program	Technical Support and Maintenance for Radiological Imaging Post-Processing Applications System for Harris Health System - To provide for continued technical support and maintenance services for the Vitrea® Advanced Visualization enterprise-wide post-processing system for Ben Taub and Lyndon B. Johnson Radiology departments. The post-processing system allows clinicians to view radiological images in 3D. Job No. 130320	Renewal November 21, 2023 through November 20, 2024	Ronald Fuschillo	\$ 99,293	\$ 99,293
B3	International Biomedical, Ltd. MWBE Goal: GPO/CO-OP Sourced	Neonatal Development Products - To replace one (1) existing infant transport incubator that is no longer supported by the manufacturer with a new unit for Lyndon B. Johnson Hospital. Premier Healthcare Alliance, L.P. Contract	Award Best Offer(s) Meeting Requirements	Teong Chai		\$ 94,342
B4	Datix (USA), Inc. [HCHD-617] [DIR-TSO-4395] MWBE Goal: N/A Specialized or Technical	Policy Management Software Software for Harris Health System - To provide a policy management software system that will allow strict version control, track approvals, and provide customized reporting for the hospital district. State of Texas Department of Information Resources (DIR) Cooperative Contract	Renewal November 05, 2023 through December 04, 2023	Laurabeth Gonzales	\$ 86,745	\$ 91,950
B5	Philips Healthcare MWBE Goal: GPO/CO-OP Sourced	MRI Ancillary Equipment and Coils - To add one (1) MRI breast coil at Lyndon B. Johnson Hospital. Premier Healthcare Alliance, L.P. Contract	Award Best Offer(s) Meeting Requirements	Teong Chai		\$ 80,040
B6	Medtronic US, Inc. (HCHD-318) MWBE Goal: N/A Sole Source	Maintenance and Service Support for O-Arm™ Imaging System for Harris Health System - To continue providing maintenance and support for the O-Arm™ O2 at Ben Taub Hospital. Sole Source Exemption	Renewal Sole Source Exemption November 01, 2023 through October 31, 2024	Tim Tatum	\$ 76,950	\$ 76,950
B7	CenturyLink Communications LLC d/b/a Lumen Technologies Group (GSA Contract# 47QTC A20D0077) MWBE Goal: N/A Specialized or Technical	Redundant Circuit for the Correctional Health Program - To provide redundant and diverse for Ethernet and data circuits for Correctional health at Fiber town Houston Bryan D, ensuring reliable access to Harris Health system applications in case of Houston data center failure which is provide by another provider, AT&T. Government Services Administration (GSA) Cooperative Purchasing Program	Award Only quote Three-year initial term	Eric Hidalgo Mohammad Manekia		\$ 76,618

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
B8	Steris Corporation MWBE Goal: GPO/CO-OP Sourced	OR Tables - To replace one (1) specialty imaging surgical table that is past its expected useful life with a new unit at Lyndon. B Johnson Hospital. <i>Premier Healthcare Alliance, L.P. Contract</i>	Award Lowest Offer	Teong Chai		\$ 74,225
B9	AS Software, LLC MWBE Goal: N/A Specialized or Technical	Maternal Fetal Medicine Ultrasound System (Software) for Harris Health System - To provide software to be used with maternal fetal medicine ultrasound systems used at Harris Health System. <i>Job No. 230311</i>	Award Only proposal received One (1) year initial term with nine (9) one-year renewal options	Ronald Fuschillo		\$ 74,085
B10	Insight Direct (USA), Inc. [PP-IT-241] MWBE Goal: GPO/CO-OP Sourced	Purchase of Media Tapes - These media tapes are needed to store IT data, which is an inexpensive way to store vast amounts of data. Awarded vendor will label tape media according to Harris Health's specifications. <i>Premier Healthcare Alliance, L.P. Contract</i>	Award Lowest Offer	Emeka Okoli Antony Kilty		\$ 73,199
B11	Davol Inc. (PP-OR-2100) MWBE Goal: GPO/CO-OP Sourced	Synthetic Bioabsorbable Mesh Products - To continue providing Harris Health System with consignment of synthetic bioabsorbable mesh products used for the initial repair strength of synthetic mesh while being absorbed over a period of time. <i>Premier Healthcare Alliance, L.P. Contract</i>	Funding Yr. 2 October 01, 2023 through September 30, 2024	Douglas Creamer	\$ 72,968	\$ 72,968
B12	Laborie Medical Technologies Corporation MWBE Goal: N/A Sole Source	Urodynamic Measurement System - To replace one (1) urodynamic measurement system that is past its expected useful life and no longer supported by the manufacturer for the urology clinic at the Outpatient Center. <i>Sole Source Exemption</i>	Award Sole Source Exemption	Teong Chai		\$ 72,495
B13	Marsh USA, Inc. (GA-07436) MWBE Goal: N/A Procured Prior to MWBE Program	All Risk Property Insurance and Boiler and Machinery Coverage for Harris Health System - Additional funds are required due to increase in premiums for directors officers, crime and cyber liability insurance coverage. <i>Job No. 180048, Board Motion 23.03-41</i>	Additional Funds May 01, 2023 through April 30, 2024	Jay Camp	\$ 5,800,000	\$ 72,000
B14	SunMed Group Holdings, LLC (AD-NS-1223) MWBE Goal: GPO/CO-OP Sourced	Closed Ventilation Suction - To provide Harris Health System with products used in neonate, pediatric and adult patients to aspirate or suction the bronchial tree or trachea with an endotracheal tube (ETT) or tracheostomy. <i>Premier Healthcare Alliance, L.P. Contract</i>	Funding Yr. 2 March 01, 2024 through February 28, 2025	Douglas Creamer	\$ 62,697	\$ 68,967
B15	Connection [PP-IT-238] MWBE Goal: GPO/CO-OP Sourced	Ground Control Managed Services - Imprivata Managed Services will configure and assist with implementing Ground Control Software and charging stations for the Clinical Communications Project. Ground Control Software and charging stations provides for charging of the iPhones, automates iOS updates, clears data from the phone between uses, and allows for customization of each device based on the roles a user is assigned in software. <i>Premier Healthcare Alliance, L.P. Contract</i>	Award Lowest Offer	William Bowker Antony Kilty		\$ 68,859

No.	Vendor	Description Justification Contract	Action Basis of Recommendation Term	Project Owner	Previous Amount	Current Estimated Cost
B16	ESO Solutions, Inc. (HCHD-347) MWBE Goal: N/A Public Health or Safety	EMS Dispatch Software for Harris Health System - This provides a comprehensive dispatching, tracking, and analytical tool to track and streamline patient and pavilion information to report to Trauma registries. Software allows for immediate and robust end user reporting. EMS dispatch software includes Electronic Health Record (EHR) and Health Data Exchange (HDE). Public Health or Safety Exemption	Renewal Public Health or Safety Exemption November 09, 2023 through November 08, 2024	Monica Mitchell	\$ 71,599	\$ 65,298
B17	ICU Medical Inc. (PP-IV-118) MWBE Goal: GPO/CO-OP Sourced	IV Therapy - Infusion Devices - To continue providing Harris Health System with infusion therapy pumps, IV therapy pain management pumps, IV syringe pumps, tubing and sets and medication management software including adverse drug event tracking and management systems. Premier Healthcare Alliance, L.P. Contract	Funding Yr. 11 February 01, 2024 through January 31, 2025	Douglas Creamer	\$ 62,244	\$ 63,489
B18	AskReply, Inc. dba B2Gnow (DIR-TSO-4212) MWBE Goal: N/A Specialized or Technical	B2Gnow Renewal that is Part of Diversity Management System Proposal - Annual fees cover Modules in Baseline System and Vendor Management, Contract Compliance, Goal Setting, Outreach and Event Management, Spend Analysis, and Utilization Plans. Annual fees also cover Standard Import Interface for Contract Headers and Contract Payments, Certified Directory Connection in Texas HUB and SBA Directory and US Depart of Veteran Affairs, and LCPtracker with SSO/Data sync. State of Texas Department of Information Resources (DIR) Cooperative Contract	Purchase Only quote October 18, 2023 through October 17, 2024	Derek Holmes		\$ 62,496
B19	Avkin, Inc. MWBE Goal: N/A Sole Source	Avbirth Wearable Simulator - To provide Harris Health System with one (1) wearable birthing simulator for training and education purposes. Sole Source Exemption	Award Sole Source Exemption	Maureen Padilla		\$ 58,785
B20	AVI-SPL, LLC (TIPS Contract 200904) MWBE Goal: 0% Non-Divisible	TEEM Maintenance Renewal - This purchase is for the annual maintenance renewal for the TEEM software, which is used to reserve workspace for huddle rooms, hybrid desks and conference rooms at the administrative building at 4800 Fournace Place. This action can be performed via email, phone or online. The Interlocal Purchasing System (TIPS)	Purchase Only quote December 20, 2023 through December 19, 2024	Antony Kilty Jin Lee		\$ 55,338
B21	Edwards Lifesciences MWBE Goal: N/A Sole Source	Cardiac Output Monitors - To provide Ben Taub Hospital with new cardiac output monitors including noninvasive measurement capability. Sole Source Exemption	Award Sole Source Exemption	Teong Chai		\$ 53,685
B22	Getinge USA Sales, LLC (PP-CA-461) MWBE Goal: GPO/CO-OP Sourced	Preventative Maintenance and Repair for Harris Health System - To provide preventative maintenance and repair services for five (5) intra-aortic balloon pumps located at Ben Taub Hospital. Premier Healthcare Alliance, L.P. Contract	Award Only Offer Received Three-year initial term	Tim Tatum		\$ 53,556
					Total Expenditures	\$ 1,612,264
					Total Revenue	\$ (0)

BOARD OF TRUSTEES

Meeting of the Board of Trustees

**HARRISHEALTH
SYSTEM**

Thursday, December 7, 2023

**Consideration of Approval of Revisions to the Harris Health System
Board Standard Operating Procedures**

Sara Thomas

L. Sara Thomas, J.D, LL.M

Chief Legal Officer/Division Director

HARRIS HEALTH SYSTEM

Board of Trustees Standard Operating Procedures

1. Harris County Hospital District d/b/a Harris Health System (Harris Health) is a political subdivision and unit of local government of the State of Texas created pursuant to the Texas Constitution, Article 9, Section 4 of the Texas Constitution for the purposes of delivering medical and hospital care to the needy inhabitants of Harris County and organized under the laws of the State of Texas. Pursuant to Chapter 281 of the Texas Health and Safety Code, Harris Health shall have a Board appointed by the Harris County Commissioners Court to serve as its governing body.
2. The Harris Health Board of Trustees adopts and implements these Board Standard Operating Procedures to outline the procedural rules for the performance of the Board's duties including complying with the Bylaws, and where applicable, Board policies.
- 4-3. A Board Member is a fiduciary. As such, a Board member owes allegiance to Harris Health System with recognition that it is an entity serving the public and must act in the best interest of the entity Harris Health and the patients it serves when acting in his or her official capacity. While Board members are appointed by a specific Commissioner or the County Judge, their duty is to the Harris Health System as a whole. A Board member must always exercise honest and unbiased judgment in pursuit of Harris Health's interests.
- 2-4. A Board Member's primary obligation is to participate in the governance of Harris Health and to act within the boundaries of his or her governance authority. ~~The Board of Trustees has delegated to the~~ The Harris Health President/CEO, ~~is responsible for all matters related to operations and administration as is defined in the Bylaws of the Board of Trustees ("Bylaws"), and Chapter 281 of the Texas Health and Safety Code, applicable law regulations, and policies.~~
- 3-5. Board Members must comply with all applicable laws, regulations and policies. ~~Questions related to the applicability of Harris Health policy may be directed to Harris Health's Chief Legal Officer or Harris Health's EVP Chief Compliance and Risk Officer, and abide by the Board of Trustees Conflict of Interest and Nepotism policy, which requires the disclosure of certain interests and business and familial relationships prior to discussion or voting on an item implicated by the interest or relationship.~~
- a. ~~A Board Member shall not vote on or participate in discussions or deliberations on matters when a conflict is deemed to exist.~~
- b. ~~A Board Member shall complete the required conflict of interest affidavit and assure that Board or Committee meeting minutes properly record his or her recusal or abstention from voting on any matter for which a conflict may exist.~~
- 4-6. When appointed, a Board Member is expected to attend ~~must attend~~ the Board of Trustees' orientation and become knowledgeable of the Bylaws and a hospital district's responsibilities.
- 5-7. A Board Member is expected to attend ~~must attend~~ Board meetings and applicable committee meetings and carefully review and evaluate background materials contained in the appropriate "agenda book" published through the Board's ~~on secure online portal, to be prepared.~~

Commented [TLS1]: Board member feedback received that the board's fiduciary duty extends to the public. As a healthcare entity, Harris Health board must operate as a legal fiduciary to the entity, especially with respect to Quality of Care. However, there must also be a recognition that HH is a public entity and the board must keep the best interests of the patients in mind when making decisions on behalf of a governmental entity that is funded in part through public tax dollars.

Commented [TLS2]: Questions related to application of law or policy should be directed to Harris Health's Chief Legal Officer (Sara Thomas) and Harris Health's EVP Chief Compliance and Risk Officer (Carolynn Jones).

BOARD APPROVAL
Agenda Item: V.B.
Date: 12.03.2020
Motion: 20.12-146

8. A Board Member is entitled to rely upon information, opinions, reports, and statements prepared or presented by Harris Health staff, counsel, accountants, or other Board Members whom the Board Member reasonably believes to be reliable and competent on the matter presented. Board members may should request additional deliverables through parliamentary motions during Board and committee meetings when matters require additional inquiry.
9. Individual Board Members are not empowered to provide instruction to the CEO of Harris Health or any Harris Health employee unless the Board determines, during a properly called meeting of the Board of Trustees, that such instruction will enable the Board to satisfy their fiduciary duties (e.g., instruction to produce information material to a future Board decision). Board members who require additional information to fulfill their duty of care outside of a Board or Committee meeting, should coordinate requests, through one of the following channels:
- a. Harris Health's Chief Executive Officer for matters related to Harris Health administration.
 - b. Harris Health's Chief Legal Officer for legal advice and consultation.
 - c. Harris Health's EVP Chief Compliance and Risk Officer related to compliance matters and reporting allegations.
 - d. The Board Office for coordination of all other matters and meetings not involving the CEO, Chief Legal Officer and EVP Chief Compliance and Risk Officer.
- Written material or additional deliverables provided to individual board members outside of Board or Committee meetings shall be made available to all Board members through the Board's secure online portal.
- 6.10. Board meetings are managed and conducted in a way that promotes transparency and high levels of effectiveness and efficiency, while complying with the Texas Open Meetings Act and allowing for appropriate questions. Pursuant to the Bylaws, meetings are conducted in accordance with Robert's Rules of Order.

Commented [TL53]: Board members should utilize parliamentary procedures to request reports and deliverables during Board and Committee meetings.

Commented [TL54]: Board members requested clarification on how to direct requests for information outside of board meetings: If board members request additional information outside of the course of a board meeting in order to fulfill their duty of care, those requests should be directed to the CEO or coordinated with members of administration through the Board Office. Board members may always seek legal advice directly from Harris Health's Chief Legal Officer and discuss compliance matters including reporting allegations in direct coordination with Harris Health's EVP Chief Compliance and Risk Officer.

Commented [TL55]: Deliverables provided to a board member outside of a board meeting, shall be made available to all Board members through Diligent.

BOARD APPROVAL
Agenda Item: V.B.
Date: 12.03.2020
Motion: 20.12-146

~~7.11.~~ A Board Member must not disclose any information learned in the course of a closed session meeting or any confidential material supplied by Harris Health. If a Board Member is uncertain whether information is confidential, the Board Member should consult with Harris Health's legal counsel to avoid allegations of abuse of office. Violations of the Texas Open Meetings Act could result in civil and criminal penalties.

~~8.12.~~ A Board member should listen to and respect the opinions and perspectives of all other members and be willing to respectfully express a dissenting opinion and vote no when their opinion warrants.

~~9.13.~~ A Board Member should bring matters of interest to the attention of the Board Chair or applicable Committee Chair at least twelve (12) days before the date of the Board or Committee meeting so appropriate matters can be included on an agenda of a future Board or Committee meeting. Board officers and Committee Chairs are encouraged to participate in reviewing and finalizing draft Board and Committee agendas with Administration as part of the agenda planning process. Committee Chairs may work directly with Committee Executive sponsors as part of the committee agenda planning process. The Board Chair and Board Officers may exercise discretion and professional judgment during the agenda planning process.

~~10.14.~~ The Board employs and evaluates the President and Chief Executive Officer ("CEO") alone. The Board delegates full authority to the CEO to direct Harris Health's affairs (including supervising its work and activities; formulating strategies and managing its operations) and communicates policies and decisions that may constrain the CEO's authority.

~~11. Individual Board Members are is not empowered to provide instruction to the CEO of Harris Health or any Harris Health employee unless the Board determines, during a properly called meeting of the Board of Trustees, that such instruction will enable the Board to satisfy their fiduciary duties (e.g., instruction to produce information material to a future Board decision).~~

~~12. Neither the CEO of Harris Health, nor its employees should be held accountable for fulfilling requests from individual Board Members outside of formal Board action.~~

~~13.15.~~ The Board's authority is carried out through actions taken by a majority of the Board who are present and voting during a duly called meeting of the Board of Trustees. If a Board member is absent for a meeting, actions and decisions made will not automatically be reconsidered due the Board member's absence.

~~14.16.~~ A Board member should fully support the Board's decisions once they have been made.

~~15.17.~~ The Board speaks with one voice through the Board Chair unless otherwise authorized by the Board Chair or the Board.

~~16.18.~~ A Board Member ~~must~~ may direct all media requests to the Board Chair in addition and must inform ~~to~~ the Board Office or Harris Health's Office of Corporate Communications at (346) 426-1832.

Commented [T156]: Provides clarification on "What is agenda planning process" and "how do board members make requests to include agenda items."

Board Officers & committee chairs are encouraged to participate in agenda review meetings to finalized agendas. **Committee chairs may work directly with Committee Executive Sponsors as part of Committee agenda planning process.**

|

BOARD APPROVAL
Agenda Item: V.B.
Date: 12.03.2020
Motion: 20.12-146

BOARD OF TRUSTEES

Meeting of the Board of Trustees



Thursday, December 7, 2023

Consideration of Approval to Ratify an Amendment to the Agreement between the Harris County Hospital District d/b/a Harris Health System, Baylor College of Medicine and the City of Houston

For your consideration is the third amendment to the agreement between the Harris County Hospital District d/b/a Harris Health System, Baylor College of Medicine and the City of Houston. The agreement was entered in 2018 for the purpose of educating and training healthcare providers regarding the delivery of services to human trafficking victims. This third amendment would extend the agreement through 2026 and provide up to \$69,966.00 for a social work case manager to be employed by Baylor College of Medicine. The social work case manager would be responsible for referring patients to appropriate resources and collecting de-identified data to support a comprehensive City of Houston anti-trafficking program.

Administration Recommends Ratification of this Amendment to the Agreement between the Harris County Hospital District d/b/a Harris Health System, Baylor College of Medicine and the City of Houston.

Dr. Amy Smith

Amy Smith, DNP, MSN, RN, CCM
Senior Vice President - Care Transitions & Integration

Grant Agenda Items for the Harris County Hospital District dba Harris Health System, Board of Trustees Report
Grant Agreement Summary: December 7, 2023

No.	Grantor	Description/Justification	Action, Basis of Recommendation	Term	Project Owner	Award Amount
C1	The City of Houston and the Texas Office of the Governor - Criminal Justice Division	<p>Consideration of Approval to Ratify an Amendment to the Agreement between the Harris County Hospital District d/b/a Harris Health System, Baylor College of Medicine and the City of Houston to Collaborate in Educating and Training Healthcare Providers Regarding the Delivery of Services to Human Trafficking Victims.</p> <p>● <u>October 1, 2023 - September 30, 2024</u> Texas Office of the Governor - Criminal Justice Division:\$55,972.80 City of Houston: \$13,993.20 TOTAL: \$69,966</p> <p>● <u>October 1, 2024 - September 30, 2025: \$69,966</u> Texas Office of the Governor - Criminal Justice Division:\$55,972.80 City of Houston: \$13,993.20 TOTAL: \$69,966</p> <p>● <u>October 1, 2025 - September 30, 2026: \$69,966</u> Texas Office of the Governor - Criminal Justice Division:\$55,972.80 City of Houston: \$13,993.20 TOTAL: \$69,966</p>	Ratification of an Amendment	October 1, 2023 through September 30, 2026	Dr. Amy Smith	\$ 209,898
TOTAL AMOUNT:						\$ 209,898.00

BOARD OF TRUSTEES

Meeting of the Board of Trustees



Thursday, December 7, 2023

**Consideration of Acceptance of the Harris Health System YTD Ended October 31, 2023
Financial Report Subject to Audit**

Attached for your review and consideration is the year-to-date ended October 31, 2023 Financial Report.

Administration recommends that the Board accept the financial report for the period ended October 31, 2023, subject to final audit.

Victoria Nikitin

Victoria Nikitin
Executive Vice President – Chief Financial Officer



Financial Statements

As of October 31, 2023
Subject to Audit



Table of Contents



Financial Highlights Review.....3

FINANCIAL STATEMENTS

Income Statement.....4

Balance Sheet.....5

Cash Flow Summary.....6

Performance Ratios.....7

KEY STATISTICAL INDICATORS

Statistical Highlights.....9

Statistical Highlights Graphs.....10 – 21

Financial Highlights Review

As of October 31, 2023

Operating income for October was \$14.1 million compared to a budgeted income of \$9.3 million.

Total net revenue for October of \$212.7 million was \$4.0 million or 1.9% less than budget. Net patient revenue was \$6.5 million lower than expected, but was offset by improved investment returns of \$1.5 million over budget.

In October, total expenses of \$198.6 million were \$8.9 million or 4.3% less than budget. Purchased services decreased \$6.4 million, with medical insurance subsidies contributing \$2.3 million to the decrease due to the Marketplace plan pricing effective for calendar year 2023.

Also in October, total patient days and average daily census increased 5.4% compared to budget. Inpatient case mix index, a measure of patient acuity, was 7.6% lower than planned with length of stay 3.5% less than budget. Emergency room visits were 7.4% higher than planned for the month. Total clinic visits, including telehealth, were 6.1% lower compared to budget. Births were down 11.8% for the month.

Total cash receipts for October were \$483.7 million primarily due to receipt of an outstanding Medicaid Supplemental receivable for Uncompensated Care. The System has \$1,273.6 million in unrestricted cash, cash equivalents and investments, representing 205.0 days cash on hand. Harris Health System has \$173.0 million in net accounts receivable, representing 103.6 days of outstanding patient accounts receivable at October 31, 2023. The October balance sheet reflects a combined net receivable position of \$215.0 million under the various Medicaid Supplemental programs. The current portion of ad valorem taxes receivable is \$907.6 million, which is offset by ad valorem tax collections as received. Accounts payable and accrued liabilities include \$833.3 million in deferred ad valorem tax revenues that are released as ad valorem tax revenue is recognized. As of October 31, 2023, no current ad valorem tax collections were received and \$75.8 million in current ad valorem tax revenue was recognized.

Income Statement

As of October 31, 2023 and 2022 (in \$ Millions)

	MONTH-TO-MONTH			YEAR-TO-DATE				
	CURRENT YEAR	CURRENT BUDGET	PERCENT VARIANCE	CURRENT YEAR	CURRENT BUDGET	PERCENT VARIANCE	PRIOR YEAR	PERCENT VARIANCE
REVENUE								
Net Patient Revenue	\$ 51.8	\$ 58.3	-11.2%	\$ 51.8	\$ 58.3	-11.2%	\$ 63.3	-18.3%
Medicaid Supplemental Programs	68.0	68.0	0.0%	68.0	68.0	0.0%	47.1	44.4%
Other Operating Revenue	11.1	10.2	8.8%	11.1	10.2	8.8%	9.5	16.7%
Total Operating Revenue	\$ 130.9	\$ 136.5	-4.1%	\$ 130.9	\$ 136.5	-4.1%	\$ 119.9	9.1%
Net Ad Valorem Taxes	74.8	74.7	0.1%	74.8	74.7	0.1%	69.3	8.0%
Net Tobacco Settlement Revenue	-	-	0.0%	-	-	0.0%	-	0.0%
Capital Gifts & Grants	-	-	0.0%	-	-	0.0%	-	0.0%
Interest Income & Other	7.1	5.5	27.4%	7.1	5.5	27.4%	2.1	234.9%
Total Nonoperating Revenue	\$ 81.9	\$ 80.3	2.0%	\$ 81.9	\$ 80.3	2.0%	\$ 71.4	14.7%
Total Net Revenue	\$ 212.7	\$ 216.8	-1.9%	\$ 212.7	\$ 216.8	-1.9%	\$ 191.3	11.2%
EXPENSE								
Salaries and Wages	\$ 79.2	\$ 79.2	0.1%	\$ 79.2	\$ 79.2	0.1%	\$ 72.2	-9.7%
Employee Benefits	29.0	29.5	1.6%	29.0	29.5	1.6%	22.2	-31.0%
Total Labor Cost	\$ 108.2	\$ 108.7	0.5%	\$ 108.2	\$ 108.7	0.5%	\$ 94.3	-14.7%
Supply Expenses	25.4	26.6	4.3%	25.4	26.6	4.3%	25.2	-0.8%
Physician Services	36.8	37.3	1.3%	36.8	37.3	1.3%	35.3	-4.0%
Purchased Services	20.4	26.8	23.8%	20.4	26.8	23.8%	21.7	5.8%
Depreciation & Interest	7.8	8.2	4.7%	7.8	8.2	4.7%	8.1	3.2%
Total Operating Expense	\$ 198.6	\$ 207.5	4.3%	\$ 198.6	\$ 207.5	4.3%	\$ 184.7	-7.6%
Operating Income (Loss)	\$ 14.1	\$ 9.2		\$ 14.1	\$ 9.2		\$ 6.7	
Total Margin %	6.6%	4.3%		6.6%	4.3%		3.5%	

Balance Sheet

October 31, 2023 and 2022 (in \$ Millions)

	<u>CURRENT</u> <u>YEAR</u>	<u>PRIOR</u> <u>YEAR</u>
<u>CURRENT ASSETS</u>		
Cash, Cash Equivalents and Short Term Investments	\$ 1,273.6	\$ 1,141.6
Net Patient Accounts Receivable	173.0	122.9
Net Ad Valorem Taxes, Current Portion	907.6	68.3
Other Current Assets	303.5	184.2
Total Current Assets	\$ 2,657.7	\$ 1,517.1
<u>CAPITAL ASSETS</u>		
Plant, Property, & Equipment, Net of Accumulated Depreciation	\$ 522.0	\$ 418.9
Construction in Progress	147.6	171.0
Right of Use Assets	43.1	45.9
Total Capital Assets	\$ 712.7	\$ 635.8
<u>ASSETS LIMITED AS TO USE & RESTRICTED ASSETS</u>		
Debt Service & Capital Asset Funds	\$ 40.9	\$ 40.0
LPPF Restricted Cash	32.9	71.2
Capital Gift Proceeds	55.2	45.5
Other - Restricted	1.0	1.0
Total Assets Limited As to Use & Restricted Assets	\$ 130.1	\$ 157.6
Other Assets	32.7	31.9
Deferred Outflows of Resources	237.5	188.5
Total Assets & Deferred Outflows of Resources	\$ 3,770.6	\$ 2,530.9
<u>CURRENT LIABILITIES</u>		
Accounts Payable and Accrued Liabilities	\$ 192.7	\$ 241.5
Employee Compensation & Related Liabilities	132.3	122.4
Deferred Revenue - Ad Valorem	833.3	-
Estimated Third-Party Payor Settlements	18.0	13.5
Current Portion Long-Term Debt and Capital Leases	20.0	20.6
Total Current Liabilities	\$ 1,196.3	\$ 398.0
Long-Term Debt	316.3	332.9
Net Pension & Post Employment Benefits Liability	777.3	605.1
Other Long-Term Liabilities	9.9	8.1
Deferred Inflows of Resources	112.6	218.7
Total Liabilities	\$ 2,412.3	\$ 1,562.8
Total Net Assets	\$ 1,358.3	\$ 968.1
Total Liabilities & Net Assets	\$ 3,770.6	\$ 2,530.9

Cash Flow Summary

As of October 31, 2023 and 2022 (in \$ Millions)

	MONTH-TO-MONTH		YEAR-TO-DATE	
	CURRENT YEAR	PRIOR YEAR	CURRENT YEAR	PRIOR YEAR
CASH RECEIPTS				
Collections on Patient Accounts	\$ 64.8	\$ 52.3	\$ 64.8	\$ 156.9
Medicaid Supplemental Programs	403.4	452.7	403.4	462.0
Net Ad Valorem Taxes	0.0	0.0	0.0	204.0
Tobacco Settlement	0.0	0.0	0.0	0.0
Other Revenue	15.4	6.4	15.4	66.8
Total Cash Receipts	\$ 483.7	\$ 511.4	\$ 483.7	\$ 889.7
CASH DISBURSEMENTS				
Salaries, Wages and Benefits	\$ 118.4	\$ 102.5	\$ 118.4	\$ 313.1
Supplies	24.4	21.2	24.4	73.8
Physician Services	35.8	34.0	35.8	96.4
Purchased Services	22.2	14.3	22.2	52.5
Capital Expenditures	16.4	12.8	16.4	32.5
Debt and Interest Payments	0.3	0.3	0.3	0.9
Other Uses	5.4	7.6	5.4	(8.5)
Total Cash Disbursements	\$ 222.7	\$ 192.6	\$ 222.7	\$ 560.8
Net Change	\$ 261.0	\$ 318.8	\$ 261.0	\$ 328.9
Unrestricted Cash, Cash Equivalents and Investments - Beginning of year			\$ 1,012.6	
Net Change			261.0	
Unrestricted Cash, Cash Equivalents and Investments - End of period			\$ 1,273.6	

Performance Ratios

As of October 31, 2023 and 2022 (in \$ Millions)

	MONTH-TO-MONTH		YEAR-TO-DATE		
	CURRENT YEAR	CURRENT BUDGET	CURRENT YEAR	CURRENT BUDGET	PRIOR YEAR
<u>OPERATING HEALTH INDICATORS</u>					
Operating Margin %	6.7%	4.3%	6.7%	4.3%	3.5%
Run Rate per Day (In\$ Millions)	\$ 6.2	\$ 6.5	\$ 6.2	\$ 6.5	\$ 5.7
Salary, Wages & Benefit per APD	\$ 2,369	\$ 2,567	\$ 2,369	\$ 2,567	\$ 2,228
Supply Cost per APD	\$ 557	\$ 627	\$ 557	\$ 627	\$ 596
Physician Services per APD	\$ 805	\$ 880	\$ 805	\$ 880	\$ 835
Total Expense per APD	\$ 4,349	\$ 4,900	\$ 4,349	\$ 4,900	\$ 4,361
Overtime as a % of Total Salaries	3.8%	3.0%	3.8%	3.0%	3.9%
Contract as a % of Total Salaries	5.0%	4.5%	5.0%	4.5%	6.1%
Full-time Equivalent Employees	10,286	10,230	10,286	10,230	9,823
<u>FINANCIAL HEALTH INDICATORS</u>					
Quick Ratio			2.2		3.7
Unrestricted Cash (In \$ Millions)			\$ 1,273.6	\$ 848.2	\$ 1,141.6
Days Cash on Hand			205.0	130.0	196.9
Days Revenue in Accounts Receivable			103.6	89.0	60.2
Days in Accounts Payable			51.3		46.3
Capital Expenditures/Depreciation & Amortization			241.1%		180.4%
Average Age of Plant(years)			10.6		9.6

Harris Health System Key Indicators



Statistical Highlights

As of October 31, 2023 and 2022

	MONTH-TO-MONTH			YEAR-TO-DATE				
	CURRENT YEAR	CURRENT BUDGET	PERCENT CHANGE	CURRENT YEAR	CURRENT BUDGET	PERCENT CHANGE	PRIOR YEAR	PERCENT CHANGE
Adjusted Patient Days	45,659	42,457	7.5%	45,659	42,457	7.5%	42,344	7.8%
Outpatient % of Adjusted Volume	62.3%	61.2%	1.8%	62.3%	61.2%	1.8%	61.0%	2.1%
Primary Care Clinic Visits	46,759	49,905	-6.3%	46,759	49,905	-6.3%	48,550	-3.7%
Specialty Clinic Visits	20,797	21,625	-3.8%	20,797	21,625	-3.8%	21,467	-3.1%
Telehealth Clinic Visits	10,064	11,093	-9.3%	10,064	11,093	-9.3%	10,890	-7.6%
Total Clinic Visits	77,620	82,623	-6.1%	77,620	82,623	-6.1%	80,907	-4.1%
Emergency Room Visits - Outpatient	11,786	11,155	5.7%	11,786	11,155	5.7%	11,977	-1.6%
Emergency Room Visits - Admitted	1,918	1,609	19.2%	1,918	1,609	19.2%	1,794	6.9%
Total Emergency Room Visits	13,704	12,764	7.4%	13,704	12,764	7.4%	13,771	-0.5%
Surgery Cases - Outpatient	1,040	857	21.4%	1,040	857	21.4%	835	24.6%
Surgery Cases - Inpatient	858	784	9.4%	858	784	9.4%	790	8.6%
Total Surgery Cases	1,898	1,641	15.7%	1,898	1,641	15.7%	1,625	16.8%
Total Outpatient Visits	124,741	134,129	-7.0%	124,741	134,129	-7.0%	126,812	-1.6%
Inpatient Cases (Discharges)	2,942	2,720	8.2%	2,942	2,720	8.2%	2,851	3.2%
Outpatient Observation Cases	983	972	1.1%	983	972	1.1%	940	4.6%
Total Cases Occupying Patient Beds	3,925	3,692	6.3%	3,925	3,692	6.3%	3,791	3.5%
Births	428	485	-11.8%	428	485	-11.8%	523	-18.2%
Inpatient Days	17,215	16,485	4.4%	17,215	16,485	4.4%	16,496	4.4%
Outpatient Observation Days	2,962	2,649	11.8%	2,962	2,649	11.8%	2,833	4.5%
Total Patient Days	20,177	19,134	5.4%	20,177	19,134	5.4%	19,329	4.4%
Average Daily Census	650.9	617.2	5.4%	650.9	617.2	5.4%	623.5	4.4%
Average Operating Beds	696	702	-0.9%	696	702	-0.9%	681	2.2%
Bed Occupancy %	93.5%	87.9%	6.4%	93.5%	87.9%	6.4%	91.6%	2.1%
Inpatient Average Length of Stay	5.85	6.06	-3.5%	5.85	6.06	-3.5%	5.79	1.1%
Inpatient Case Mix Index (CMI)	1.566	1.694	-7.6%	1.566	1.694	-7.6%	1.616	-3.1%
Payor Mix (% of Charges)								
Charity & Self Pay	44.1%	44.3%	-0.3%	45.7%	44.3%	3.2%	47.8%	-4.5%
Medicaid & Medicaid Managed	22.9%	22.7%	1.1%	20.0%	22.7%	-11.7%	22.5%	-11.0%
Medicare & Medicare Managed	11.4%	11.4%	-0.1%	11.6%	11.4%	1.6%	11.0%	5.0%
Commercial & Other	21.6%	21.7%	-0.4%	22.7%	21.7%	4.9%	18.7%	21.8%
Total Unduplicated Patients - Rolling 12				248,536			246,784	0.7%
Total New Patient - Rolling 12				88,091			84,260	4.5%

Harris Health System

Statistical Highlights

October FY 2024

Cases Occupying Beds - CM

Actual	Budget	Prior Year
3,925	3,692	3,791

Cases Occupying Beds - YTD

Actual	Budget	Prior Year
3,925	3,692	3,791

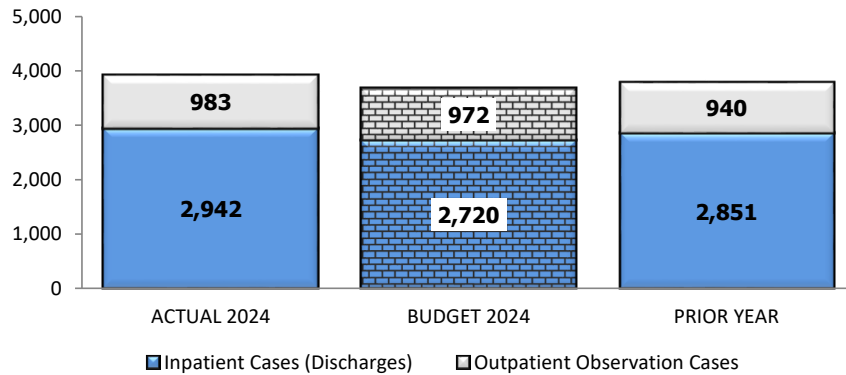
Emergency Visits - CM

Actual	Budget	Prior Year
13,704	12,764	13,771

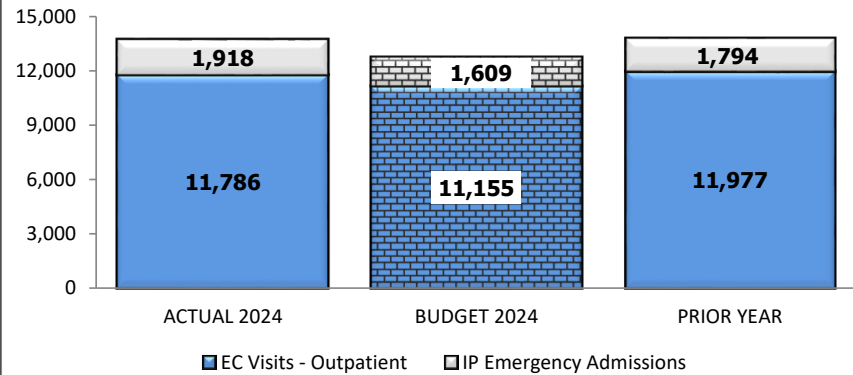
Emergency Visits - YTD

Actual	Budget	Prior Year
13,704	12,764	13,771

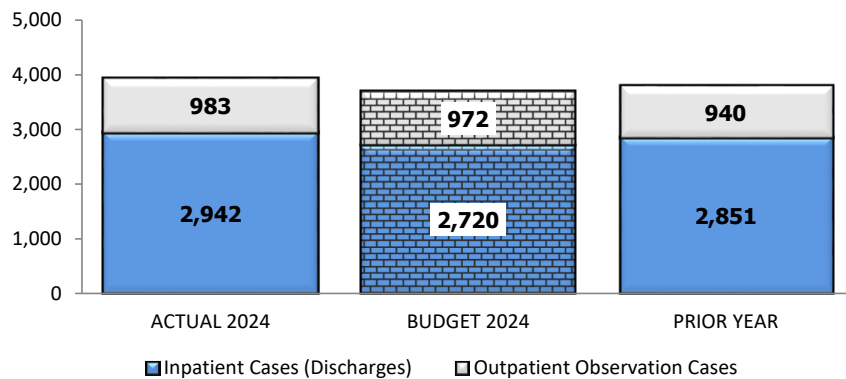
Cases Occupying Beds - Current Month



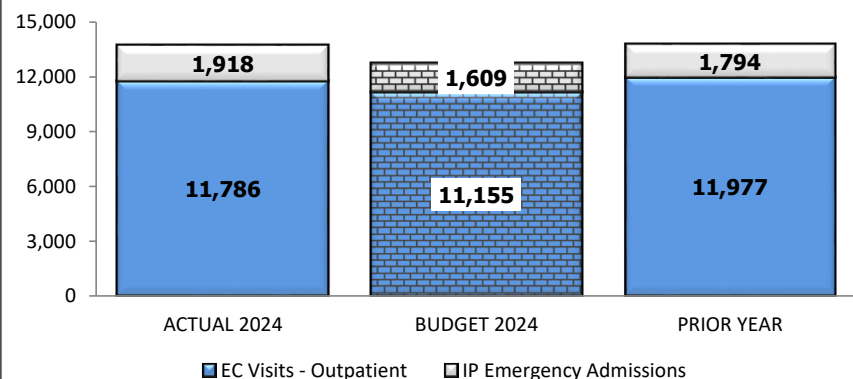
Emergency Visits - Current Month



Cases Occupying Beds - YTD



Emergency Visits - YTD



Harris Health System

Statistical Highlights

October FY 2024

Surgery Cases - CM

Actual	Budget	Prior Year
1,898	1,641	1,625

Surgery Cases - YTD

Actual	Budget	Prior Year
1,898	1,641	1,625

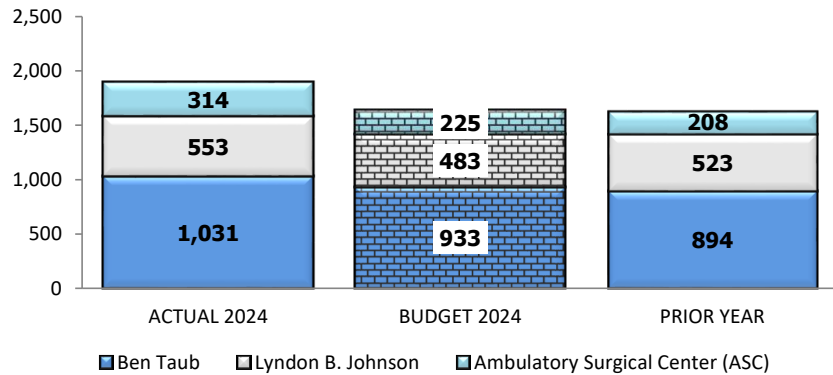
Clinic Visits - CM

Actual	Budget	Prior Year
77,620	82,623	80,907

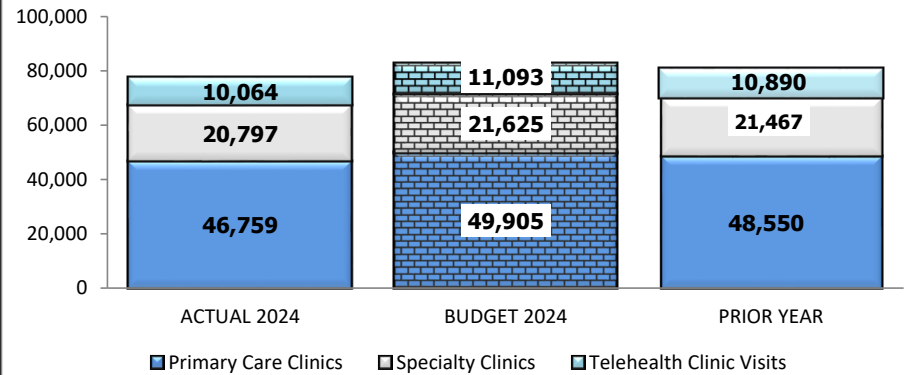
Clinic Visits - YTD

Actual	Budget	Prior Year
77,620	82,623	80,907

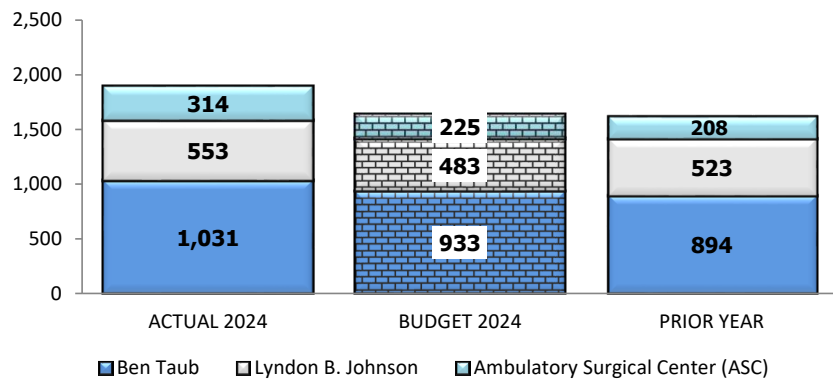
Surgery Cases - Current Month



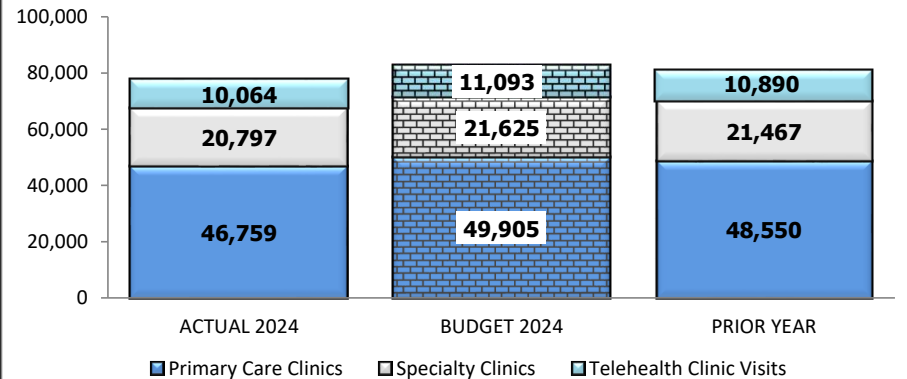
Clinic Visits - Current Month



Surgery Cases - YTD



Clinic Visits - YTD



Harris Health System

Statistical Highlights

October FY 2024

Adjusted Patient Days - CM

45,659

Adjusted Patient Days - YTD

45,659

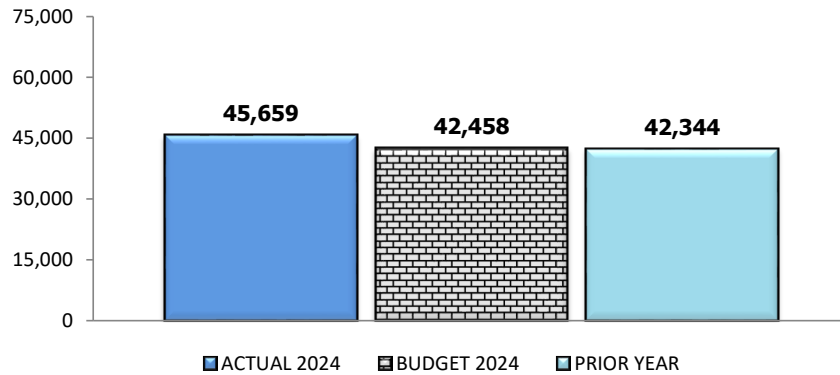
Average Daily Census - CM

650.9

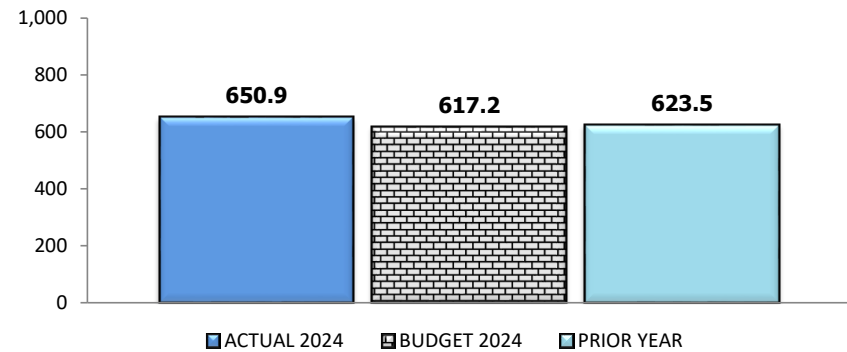
Average Daily Census - YTD

650.9

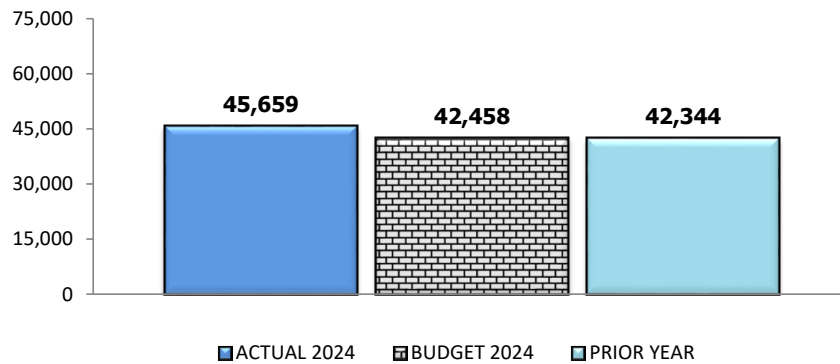
Adjusted Patient Days - Current Month



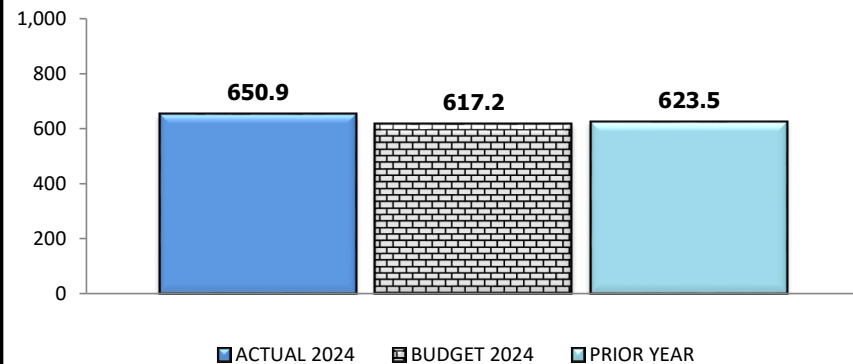
Average Daily Census - Current Month



Adjusted Patient Days - YTD



Average Daily Census - YTD



Harris Health System

Statistical Highlights

October FY 2024

Inpatient ALOS - CM

5.85

Inpatient ALOS - YTD

5.85

Case Mix Index (CMI) - CM

Overall

Excl. Obstetrics

1.653

1.823

Case Mix Index (CMI) - YTD

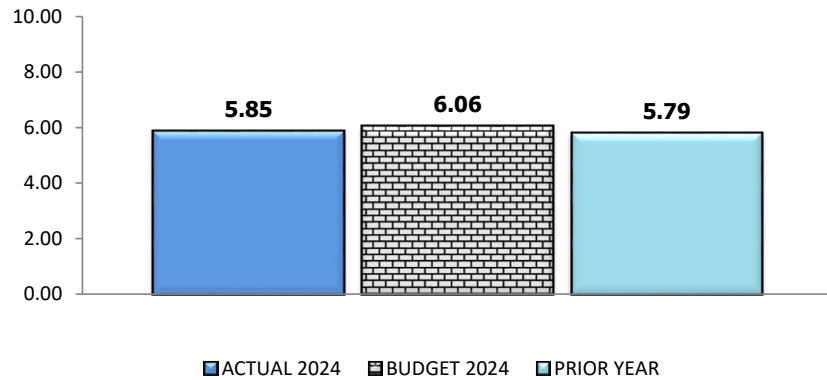
Overall

Excl. Obstetrics

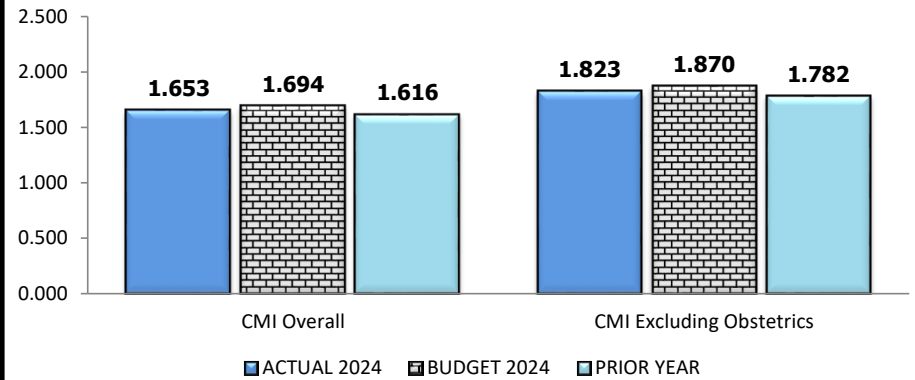
1.653

1.823

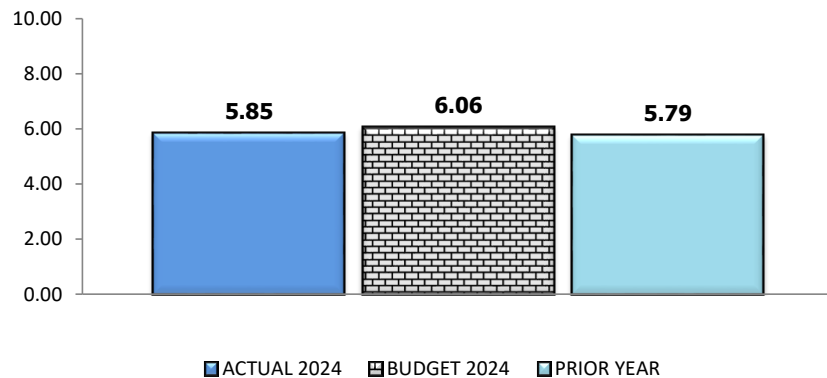
Inpatient ALOS - Current Month



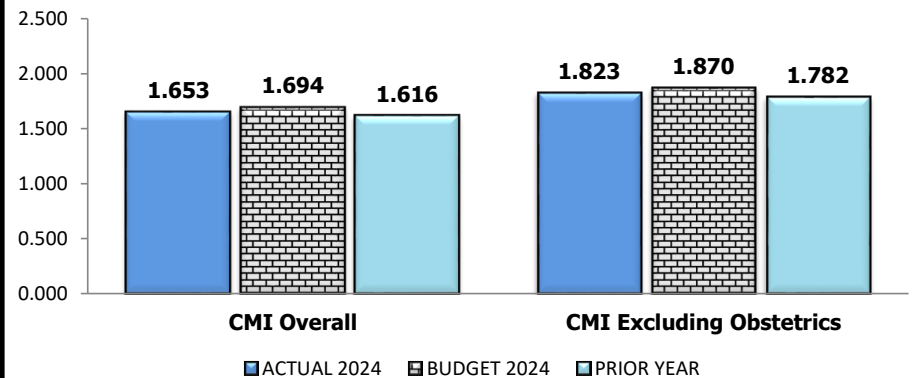
Case Mix Index - Current Month



Inpatient ALOS - YTD



Case Mix Index - YTD



Harris Health System

Statistical Highlights - Cases Occupying Beds

October FY 2024

BT Cases Occupying Beds - CM

Actual	Budget	Prior Year
2,288	2,200	2,210

BT Cases Occupying Beds - YTD

Actual	Budget	Prior Year
2,288	2,200	2,210

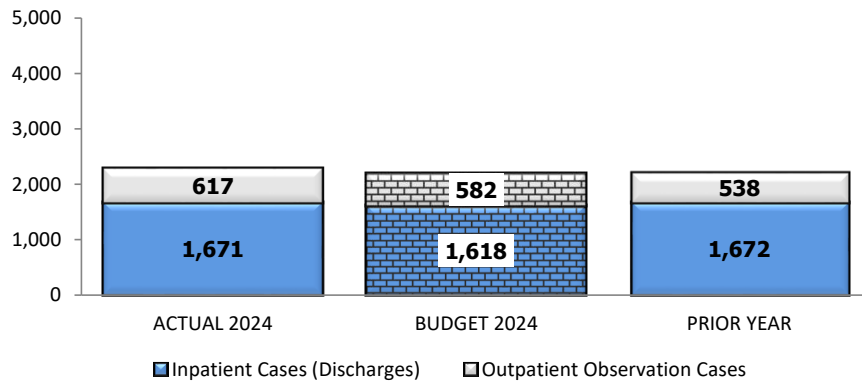
LBJ Cases Occupying Beds - CM

Actual	Budget	Prior Year
1,637	1,492	1,581

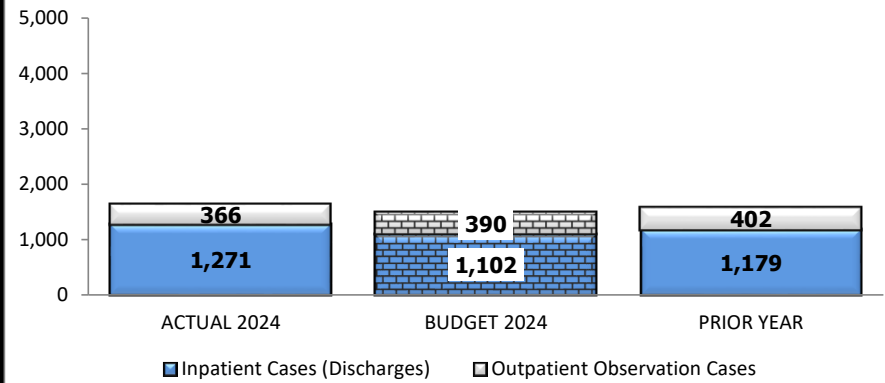
LBJ Cases Occupying Beds - YTD

Actual	Budget	Prior Year
1,637	1,492	1,581

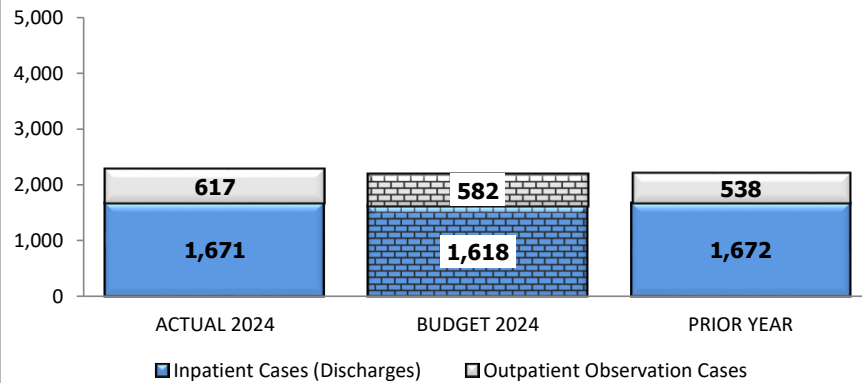
Ben Taub Cases - Current Month



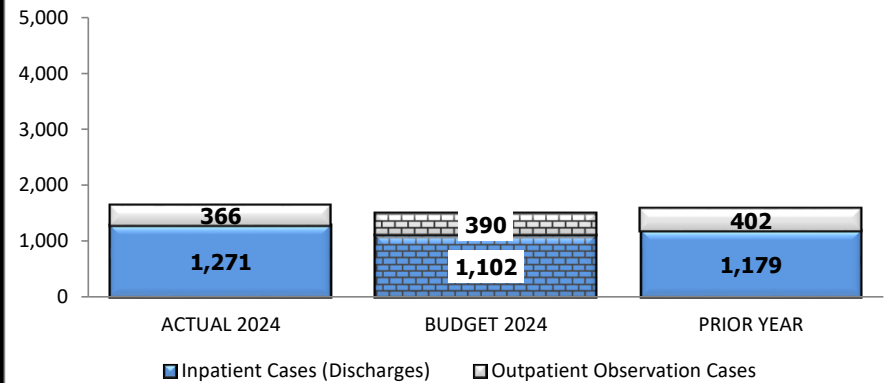
Lyndon B. Johnson Cases - Current Month



Ben Taub Cases - YTD



Lyndon B. Johnson Cases - YTD



Harris Health System

Statistical Highlights - Surgery Cases

October FY 2024

BT Surgery Cases - CM

Actual	Budget	Prior Year
1,031	933	894

BT Surgery Cases - YTD

Actual	Budget	Prior Year
1,031	933	894

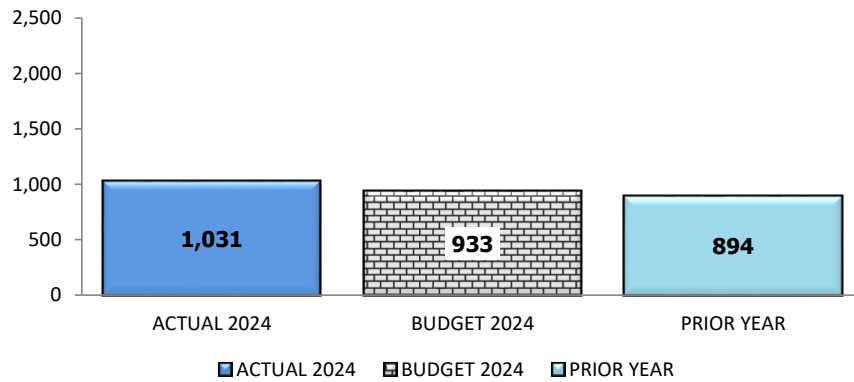
LBJ Surgery Cases - CM

Actual	Budget	Prior Year
867	708	731

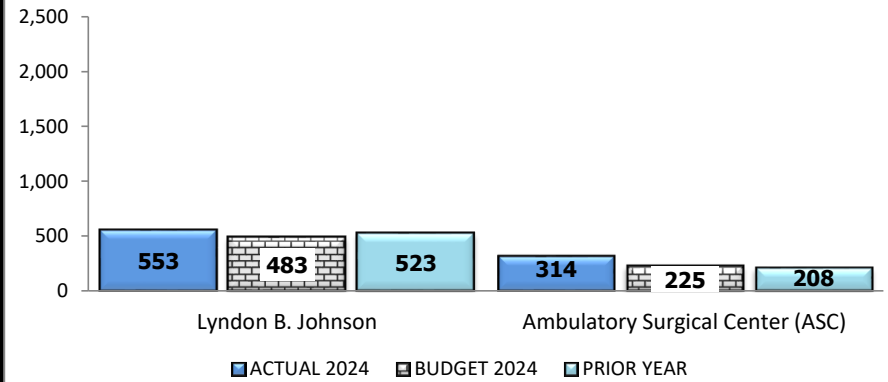
LBJ Surgery Cases - YTD

Actual	Budget	Prior Year
867	708	731

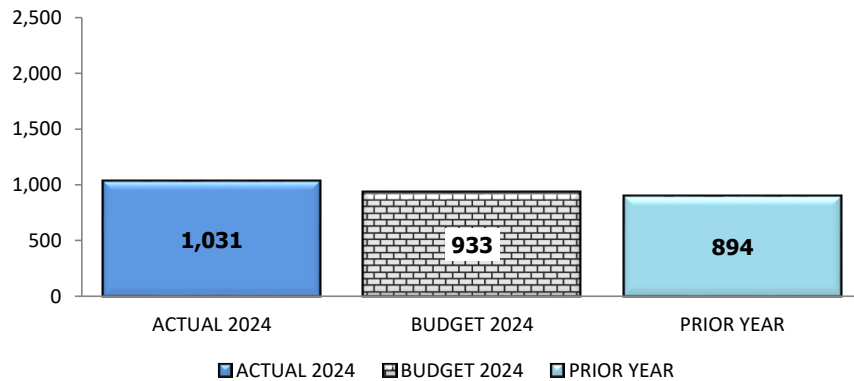
Ben Taub OR Cases - Current Month



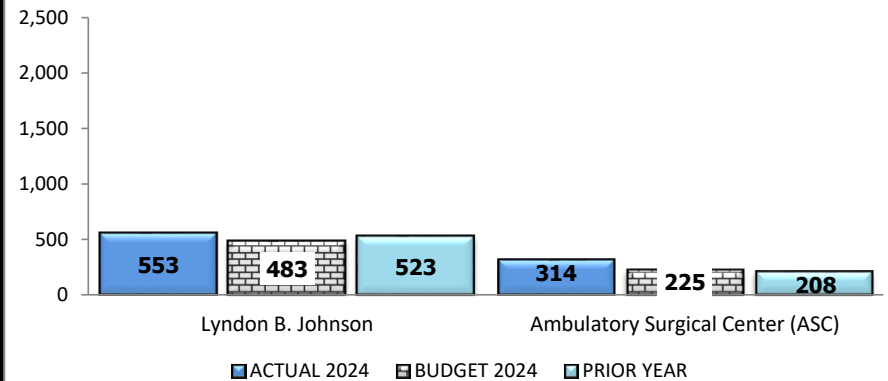
Lyndon B. Johnson OR Cases - Current Month



Ben Taub OR Cases - YTD



Lyndon B. Johnson OR Cases - YTD



Harris Health System

Statistical Highlights - Emergency Room Visits

October FY 2024

BT Emergency Visits - CM

Actual	Budget	Prior Year
7,127	6,128	6,463

BT Emergency Visits - YTD

Actual	Budget	Prior Year
7,127	6,128	6,463

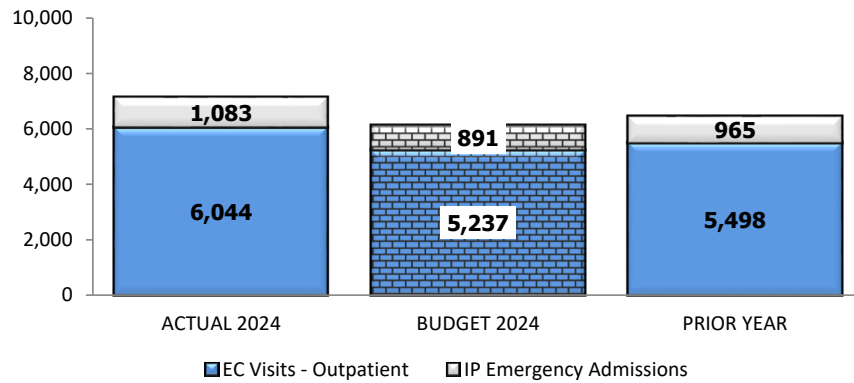
LBJ Emergency Visits - CM

Actual	Budget	Prior Year
6,577	6,636	7,308

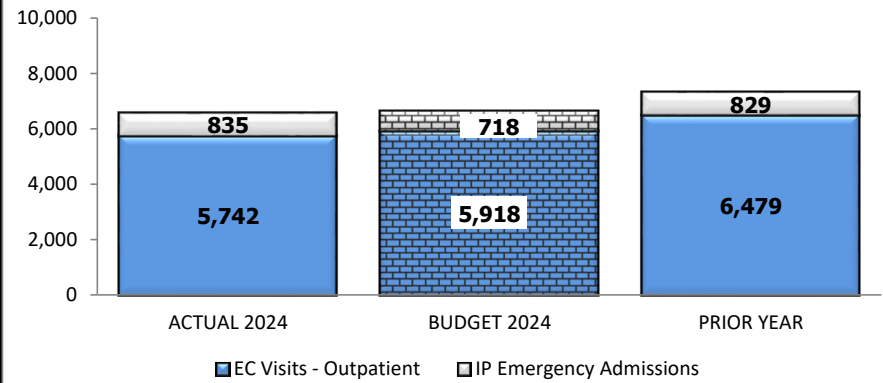
LBJ Emergency Visits - YTD

Actual	Budget	Prior Year
6,577	6,636	7,308

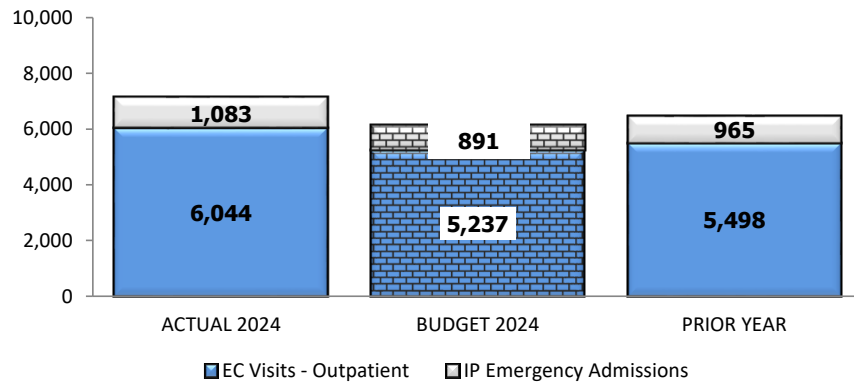
Ben Taub EC Visits - Current Month



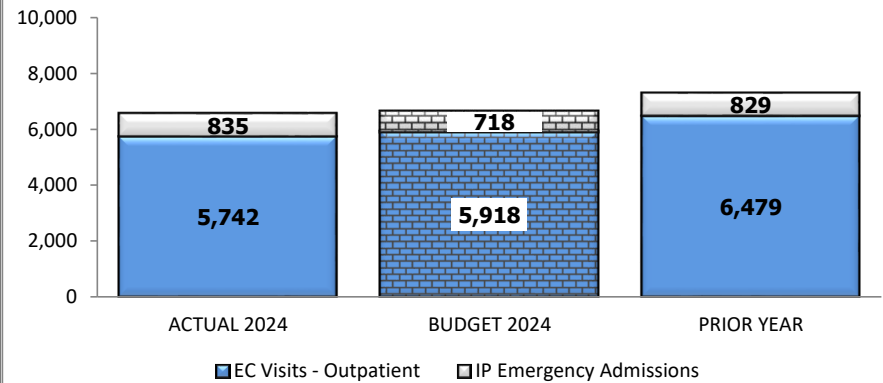
Lyndon B. Johnson EC Visits - Current Month



Ben Taub EC Visits - YTD



Lyndon B. Johnson EC Visits - YTD



Harris Health System

Statistical Highlights - Births

October FY 2024

BT Births - CM

Actual	Budget	Prior Year
196	292	317

BT Births - YTD

Actual	Budget	Prior Year
196	292	317

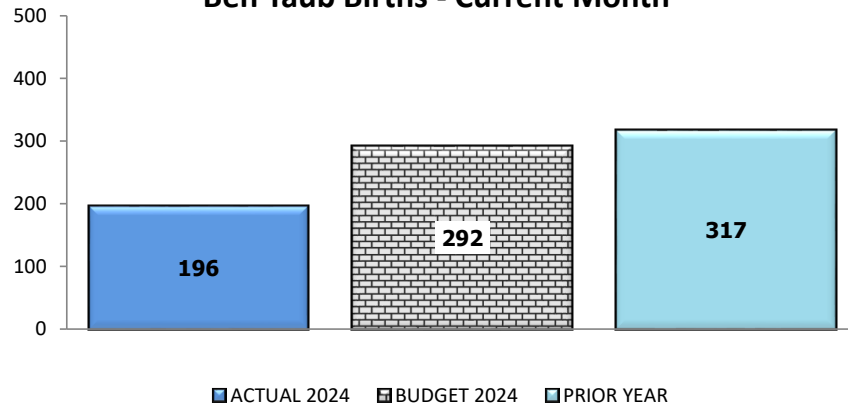
LBJ Births - CM

Actual	Budget	Prior Year
232	193	206

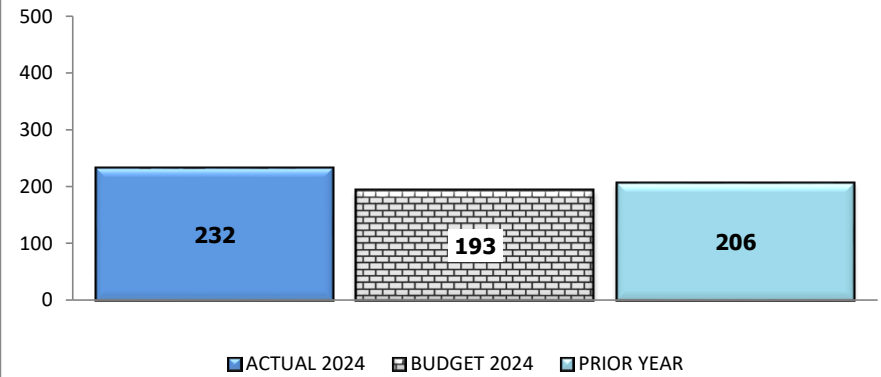
LBJ Births - YTD

Actual	Budget	Prior Year
232	193	206

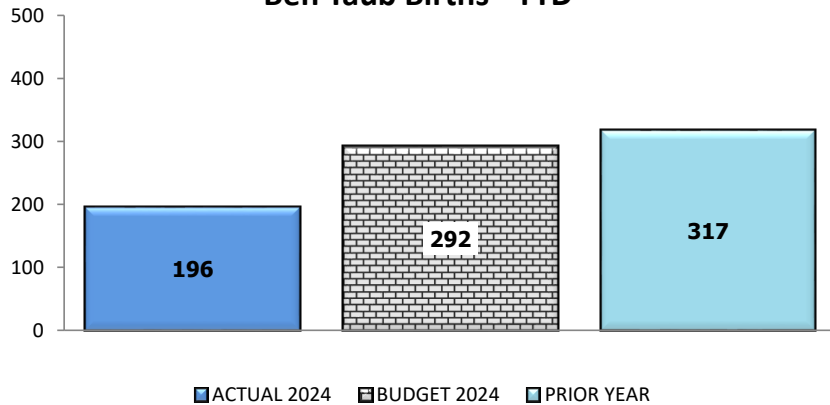
Ben Taub Births - Current Month



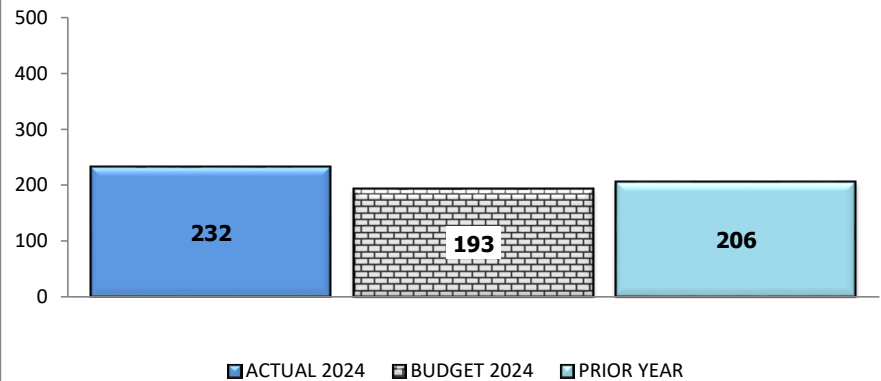
Lyndon B. Johnson Births - Current Month



Ben Taub Births - YTD



Lyndon B. Johnson Births - YTD

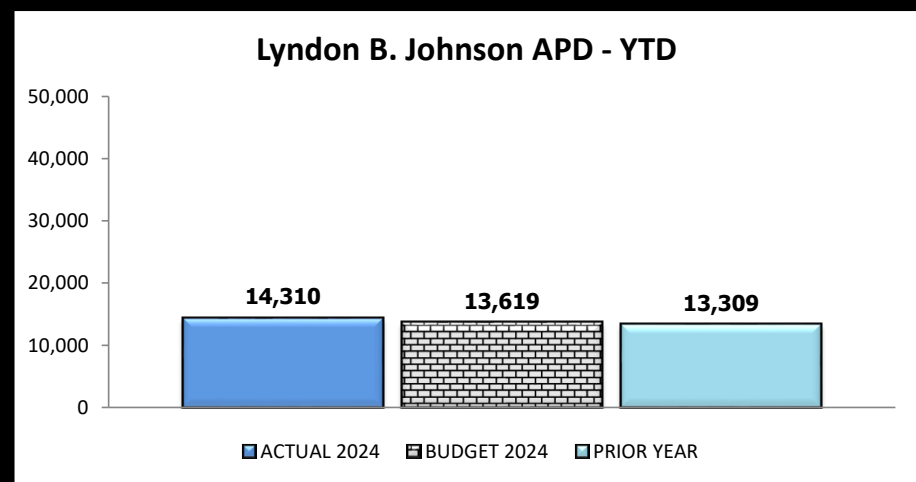
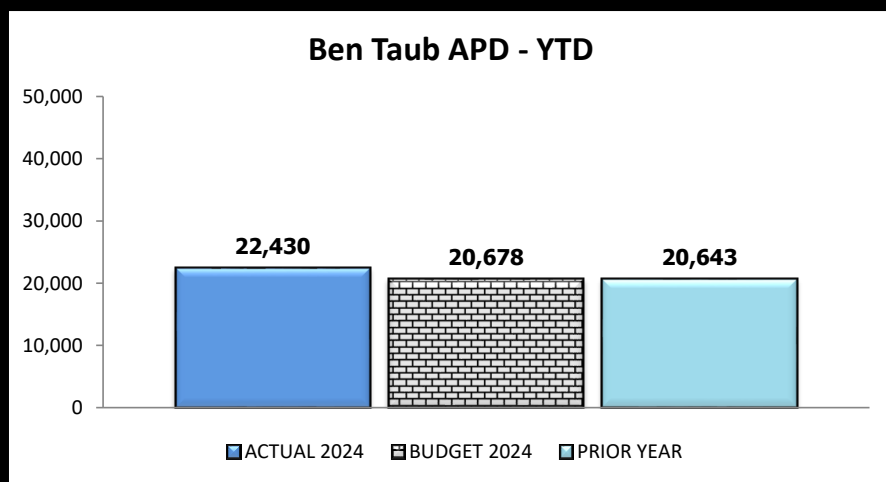
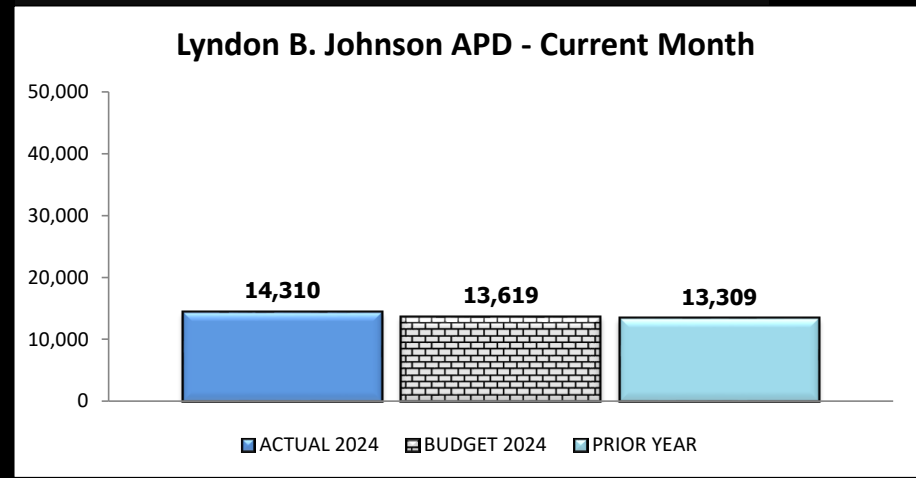
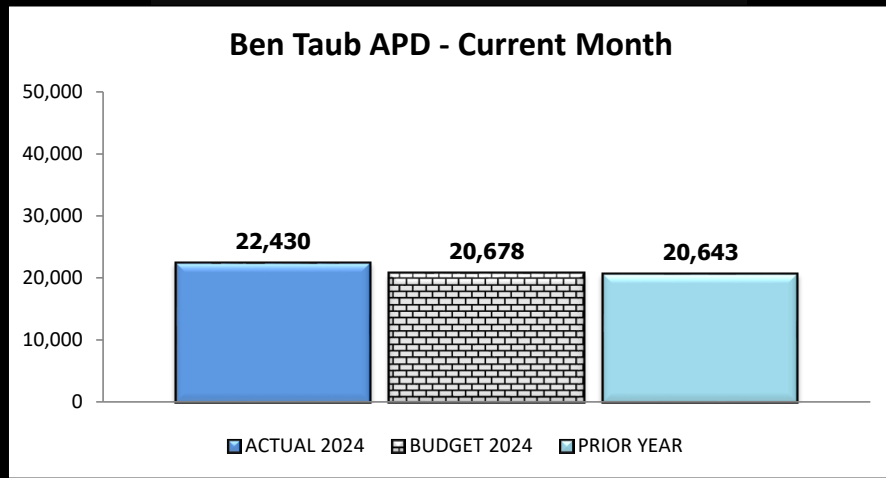


Harris Health System

Statistical Highlights - Adjusted Patient Days

October FY 2024

<u>BT Adjusted Patient Days - CM</u>	<u>BT Adjusted Patient Days - YTD</u>	<u>LBJ Adjusted Patient Days - CM</u>	<u>LBJ Adjusted Patient Days - YTD</u>
22430.0	22430.0	14310.0	14310.0



Harris Health System

Statistical Highlights - Average Daily Census (ADC)

October FY 2024

BT Average Daily Census - CM

418.9

BT Average Daily Census - YTD

418.9

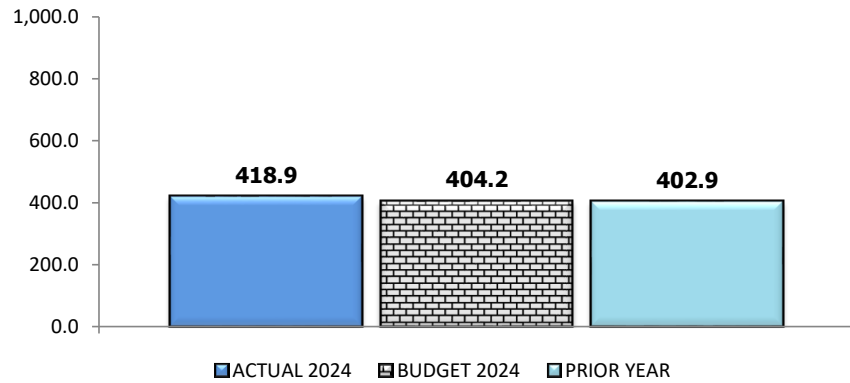
LBJ Average Daily Census - CM

231.9

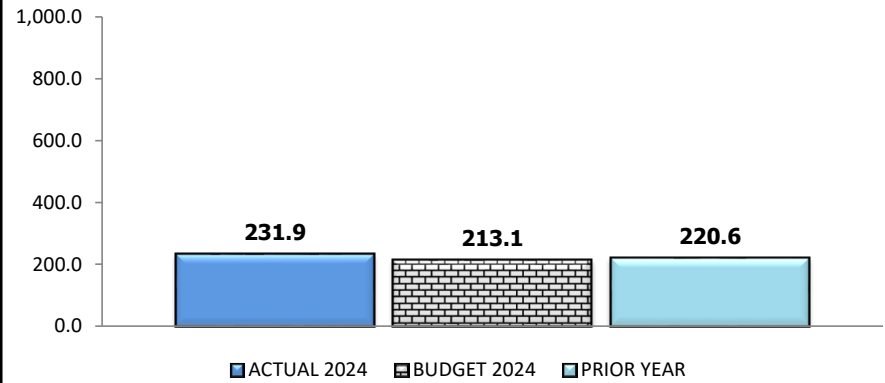
LBJ Average Daily Census - YTD

231.9

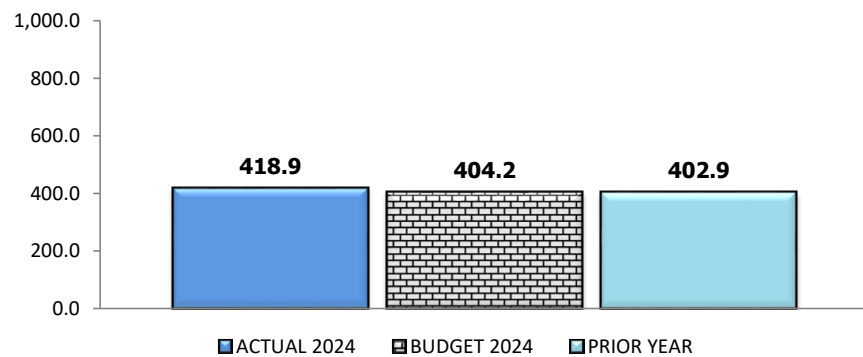
Ben Taub ADC - Current Month



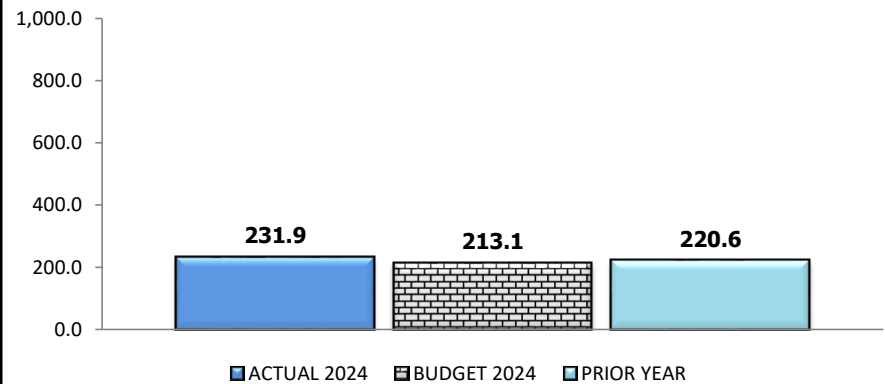
Lyndon B. Johnson ADC - Current Month



Ben Taub ADC - YTD



Lyndon B. Johnson ADC - YTD



Harris Health System

Statistical Highlights - Inpatient Average Length of Stay (ALOS)

October FY 2024

BT Inpatient ALOS - CM

6.6

BT Inpatient ALOS - YTD

6.6

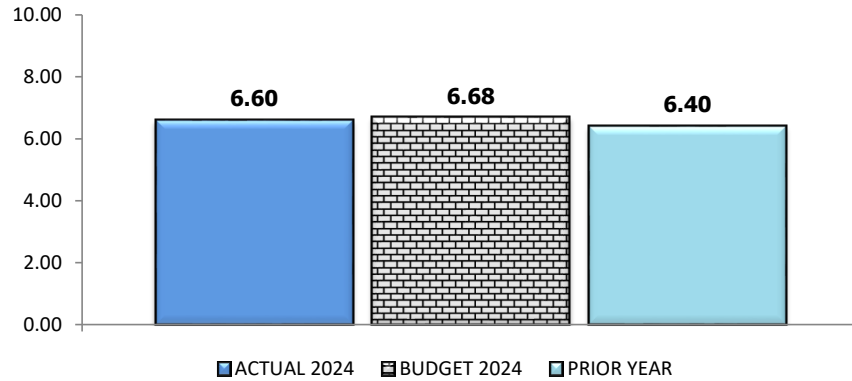
LBJ Inpatient ALOS - CM

4.9

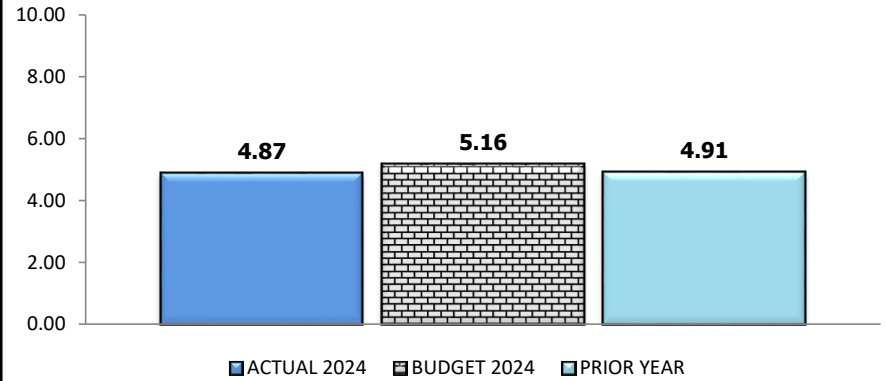
LBJ Inpatient ALOS - YTD

4.9

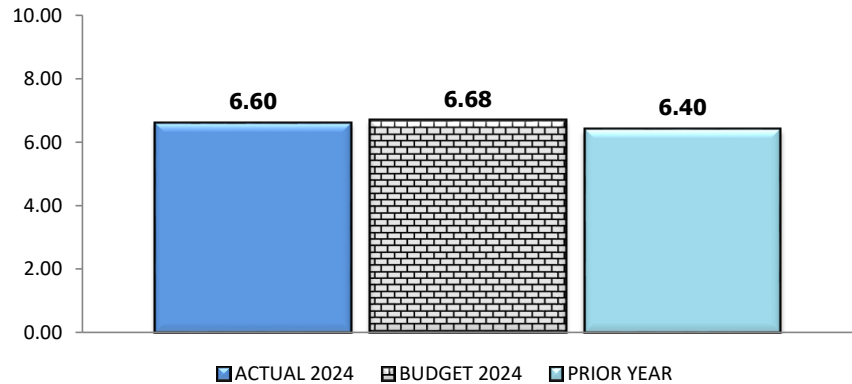
Ben Taub ALOS - Current Month



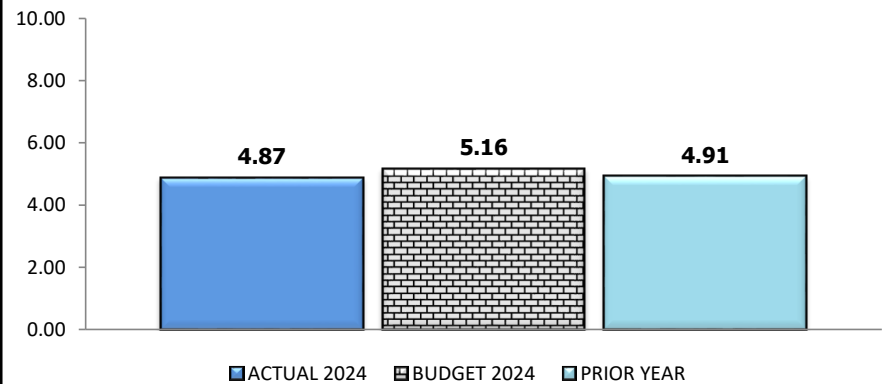
Lyndon B. Johnson ALOS - Current Month



Ben Taub ALOS - YTD



Lyndon B. Johnson ALOS - YTD



Harris Health System

Statistical Highlights - Case Mix Index (CMI)

October FY 2024

BT Case Mix Index (CMI) - CM

Overall	Excl. Obstetrics
1.782	1.969

BT Case Mix Index (CMI) - YTD

Overall	Excl. Obstetrics
1.782	1.969

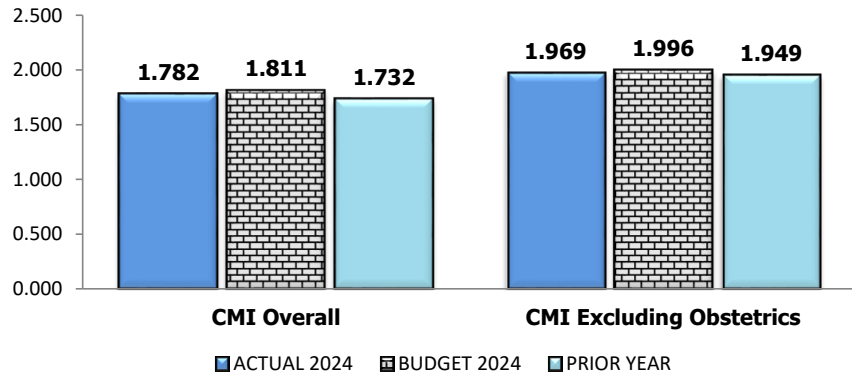
LBJ Case Mix Index (CMI) - CM

Overall	Excl. Obstetrics
1.484	1.630

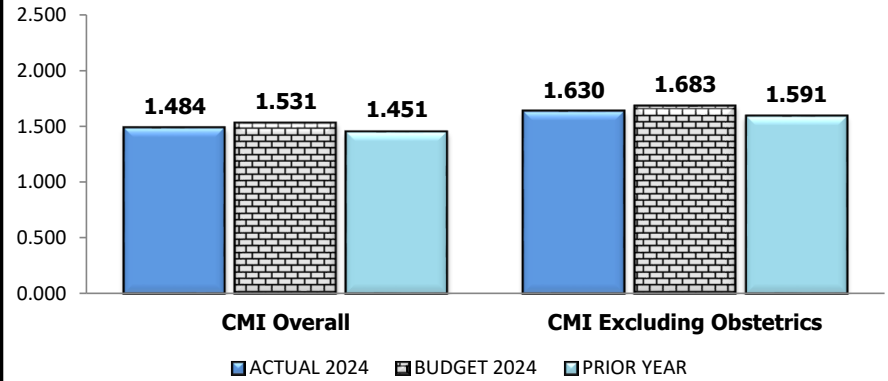
LBJ Case Mix Index (CMI) - YTD

Overall	Excl. Obstetrics
1.484	1.630

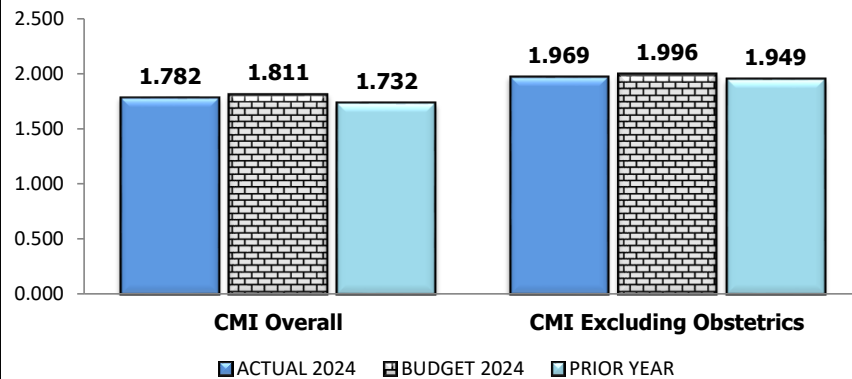
Ben Taub CMI - Current Month



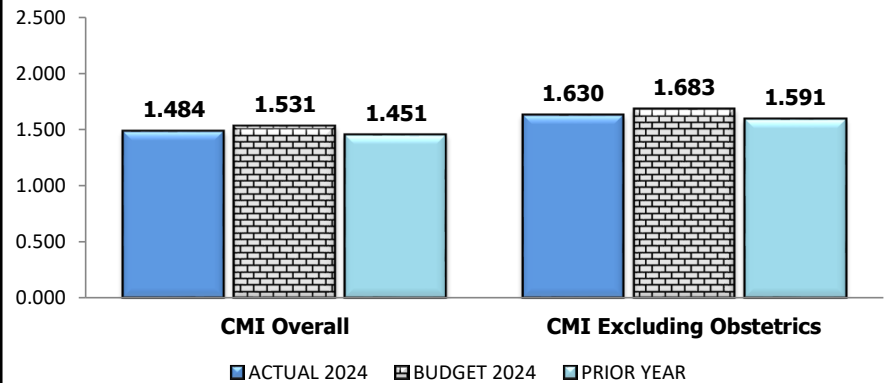
Lyndon B. Johnson CMI - Current Month



Ben Taub CMI - YTD



Lyndon B. Johnson CMI - YTD



BOARD OF TRUSTEES

Meeting of the Board of Trustees

HARRISHEALTH
SYSTEM

Thursday, December 7, 2023

Consideration of Approval of the Harris Health System Investment Policy

The Harris Health System Investment Policy is adopted annually by the Harris Health System Board of Trustees as the governing body pursuant to Chapter 2256 of the Texas Government Code, "Public Funds Investment Act." Harris County recently modified their policy to include the updates summarized below. The attached policy includes changes applicable to Harris Health and related to the sections addressed below. Administration has reviewed the policy and recommends the updates.

Section 4.02. Training

The following changes were made to this section to be in alignment with the Harris County Investment Policy effective October 1, 2023: Harris Health Designees and CHC Designees shall be active members of the Texas Association of Counties Investment Academy or in the active process of attaining membership and attend investment training as required by the Investment Act.

Section 5.03.8. Authorized Investment Instruments – Commercial Paper

The following changes were made to this section to be in alignment with the Harris County Investment Policy effective October 1, 2023: Regardless of whether commercial paper is purchased directly from the issuer or from a broker/dealer in the secondary market, a competitive bid process is required, in which the investment yield is compared to other available commercial paper having a comparable maturity and credit rating. An exception may be made to the competitive offer process when seeking to purchase municipal commercial paper securities due to very limited quantity.

Section 5.06. Maturity

Added Insurance Reserve funds with a maximum maturity of five years. Community Health Choice, Inc. and Community health Choice Texas, Inc. (collectively, CHC) are required by the Texas Department of Insurance to hold insurance reserves.

Section 5.12. Finance Committee

The following changes were made to this section to be in alignment with the Harris County Investment Policy effective October 1, 2023: Although not required by the Investment Act, Harris Health has established a Finance Committee composed of members of the Board of Trustees, and attended by the Chief Financial Officer and a representative of the Harris Health's financial advisor. This committee will seek to meet at least once after the completion of each fiscal quarter and will include in its discussions a review of cash, investment and debt reports, projects, bond deals, policy compliance, recommendations, and other relevant finance related matters.

Section 6.06. Finance Committee

Added the investment strategy for the CHC Insurance Reserve funds: Insurance reserves are pledged to satisfy insolvency and other reserves as required by the Texas Department of Insurance. The Matching, Barbell, and/or Laddered Approaches are used for the debt service reserve funds investment strategy.

Exhibit A List of Approved Banks

CHC’s bank, Amegy Bank, a division of AB, N.A, was added to the list of approved banks.

Administration recommends that the Board approve the updated Harris Health System Investment Policy to be effective January 1, 2024.

DocuSigned by:
Victoria Nikitin
7AE7D121730A45C
Victoria Nikitin
EVP - CFO

HARRIS HEALTH SYSTEM

HARRIS HEALTH SYSTEM

INVESTMENT POLICY

PREPARED BY:

HARRIS HEALTH SYSTEM - TREASURY & CASH MANAGEMENT

Effective: January 1, 2024

TABLE OF CONTENTS

ARTICLE	PAGE
I. PURPOSE	
1.01 Purpose.....	1
II. SCOPE	
2.01 Scope.....	1
III. DEFINITIONS	
3.01 Definitions.....	2
IV. INVESTMENT OFFICER	
4.01 Investment Officer.....	4
4.02 Training.....	4
4.03 Disclosure of Relationships with Persons Selling Investments to Harris Health.....	4
4.04 Reporting by the Investment Officer.....	5
4.05 Selection of Banks and Securities Dealers.....	5
4.06 Certifications from Approved Broker/Dealers.....	6
V. INVESTMENT OBJECTIVES	
5.01 General Objectives.....	7
5.02 Monitoring and Pricing the Portfolio.....	7
5.03 Authorized Investments.....	8
5.04 Unauthorized Investment Instruments.....	10
5.05 Internal Controls.....	10
5.06 Maturity.....	11
5.07 Diversification.....	11
5.08 Risk Tolerance.....	12
5.09 Safekeeping and Custody.....	13
5.10 Policy of Securing Deposits of Harris Health Funds and CHC Funds – Applicable to All Deposited Harris Health Funds and CHC Funds.....	13
5.11 The Investment Policy Review.....	14

ARTICLE	PAGE(S)
VI. INVESTMENT STRATEGY FOR FUNDS	
6.01 Debt Service Funds.....	14
6.02 Debt Service Reserve Funds.....	14
6.03 General Fund.....	14
6.04 Capital Project Fund.....	14
6.05 Specific Purpose Funds.....	14
VII. MISCELLANEOUS	
7.01 Socially Responsible Investing.....	15
7.02 Superseding Clause.....	15
7.03 Open Meeting.....	15
EXHIBIT "A"	
List of Approved Banks.....	16
EXHIBIT "B"	
Harris Health System & CHC Authorized Designees.....	17
EXHIBIT "C"	
Approved Brokers/Dealers, Money Market Funds, and Investment Pools for the Investment of Harris Health and CHC Funds.....	18
EXHIBIT "D"	
Harris County Hospital District dba Harris Health System – Financial Management Products Policy.....	19

INVESTMENT POLICY

This Investment Policy (the “Policy”) is adopted by the Harris Health System Board of Trustees, as the governing body of the Harris County Hospital District d/b/a/Harris Health System (“Harris Health”) and Community Health Choice, Inc. and Community Health Choice Texas, Inc. (collectively, “CHC”), discretely presented component units of Harris Health, pursuant to the Texas Government Code, Title 10, Chapter 2256 (Public Funds Investment Act) and Texas Local Government Code, Chapter 116.112. The Policy will be reviewed and adopted at least annually in accordance with the Texas Government Code 2256.005(e).

ARTICLE I PURPOSE

Section 1.01. Purpose

The purpose of this Policy is to provide guidance in the investment of Harris Health and CHC investments to help ensure safety of principal, liquidity for Harris Health and CHC operations, and return on investment.

ARTICLE II SCOPE

Section 2.01. Scope

The Policy applies to all financial assets of Harris Health and CHC.

Harris County, through the Financial Management Division acts as an Investment Agent for Harris Health and CHC.

ARTICLE III DEFINITIONS

Section 3.01. Definitions

Unless the context requires otherwise, the following terms and phrases used in this Policy shall mean the following:

- (a) **“Barbell Approach”** means an investment strategy whereby investments are concentrated at both the short end and the long end of the Policy permitted maturity range, instead of buying securities with maturity dates to correspond with specific expenditures.
- (b) **“Board of Trustees”** means the Harris Health Board of Trustees.

- (c) **“CHC Designees”** means the employees of Community Health Choice, Inc. and Community Health Choice Texas, Inc. (collectively, “CHC”) authorized by the Investment Officer to process investments for CHC.

It is specifically noted that at this time, CHC has contracted with the Harris County Director of the Financial Management Division to have personnel of such office handle the purchase and sale of investments for CHC. Exhibit B attached hereto sets forth a list of CHC Designees, which includes CHC personnel specifically authorized to purchase/sell securities for CHC and personnel of the Harris County Financial Management Division who are authorized to purchase/sell securities for CHC.

- (d) **“CHC funds”** means the general operating funds, the bond funds, and any specific purpose funds.
- (e) **“Collateral”** means any security or other obligation which Harris Health or CHC authorizes to serve as security for the deposit of Harris Health or CHC funds in Article V hereof.
- (f) **“Collateral Act”** means Chapter 2257, Texas Government Code, as amended from time to time.
- (g) **“Commissioners Court”** means the elected governing body of Harris County consisting of the County Judge and four (4) Precinct Commissioners.
- (g) **“County Designees”** means the officials and/or employees of the Harris County Financial Management Division authorized to process investments for Harris Health or CHC.
- (h) **“Delivery vs. Payment (DVP)”** means a method of settling trades in which cash is exchanged for securities simultaneously.
- (i) **“Depository Bank”** means the banking institution that is contracted to process Harris Health or CHC’s receipts, disbursements, and investments and to provide safekeeping services.
- (j) **“Depository Trust Co. (DTC)”** means the book entry depository for municipal and corporate bonds, equities, commercial paper and various other obligations. The corporation is owned by banks and brokerage firms and holds securities, arranges for securities receipt and delivery, and arranges for the payments in settlement of trades.
- (k) **“Employee”** means any person employed by Harris Health or CHC, but does not include independent contractors or professionals hired by Harris Health or CHC as outside consultants.

- (l) **“Financial Management Division”** means the Harris County office responsible for cash and banking management, debt management, investment management, and management of collateral of all Harris County funds as required.
- (m) **“Harris Health Designees”** means the Board of Trustees, officers, and employees of Harris Health authorized to process investments for Harris Health, as well as the persons, other political subdivision or business entities engaged and authorized to process investments for Harris Health.

It is specifically noted that at this time, Harris Health has contracted with the Harris County Director of the Financial Management Division to have personnel of such office handle the purchase and sale of investments for Harris Health. Exhibit B attached hereto sets forth a list of Harris Health Designees, which includes Harris Health personnel specifically authorized to purchase/sell securities for Harris Health and personnel of the Harris County Financial Management Division who are authorized to purchase/sell securities for Harris Health.

- (n) **“Harris Health funds”** means the general operating funds, the bond funds, and any specific purpose funds.
- (o) **“Investment Act”** means Chapter 2256, Texas Government Code, as amended from time to time, also referred to as the Texas Public Funds Investment Act.
- (p) **“Investment Officer”** means the Employee appointed by the Commissioners Court to administer all investment activity of Harris Health and CHC funds under the Investment Act standard of care “prudent person” and to monitor compliance and management-level controls.
- (q) **“Laddered Approach”** means an investment strategy that positions maturities that occur in regular intervals, providing a known stream of cash.
- (r) **“Matching Approach”** means an investment strategy that matches maturities of investments to coincide with known predictable cash needs. This approach requires a reasonably accurate forecast of cash flow and disbursement requirements.
- (s) **“Pooled Fund Group”** means an internally created fund of an investing entity in which one or more accounts of the investing entity are invested.
- (t) **“Reserve Investment Officer”** means those certified investment officers within the Financial Management Division who have been designated and trained as backup or relief Harris Health Designees.
- (u) **“Trustee”** means a person appointed to serve on the Harris Health Board of Trustees.

ARTICLE IV INVESTMENT OFFICER

Section 4.01. Investment Officer

In accordance with the Local Government Code, Section 116.112(a) and the Government Code, Sections 2256.005(f) and (g), the Commissioners Court hereby appoints the Deputy Executive Director of the Office of Management and Budget to serve as Investment Officer to manage and oversee the investment of Harris Health and CHC funds. In the event the Investment Officer is unable to perform the functions of that office, the Investment Manager of the Office of Management and Budget is hereby authorized to perform such functions until the Investment Officer is able to perform them or another Investment Officer is appointed by the Commissioners Court. The Investment Officer shall be responsible for investing Harris Health and CHC funds in accordance with this Policy. The Investment Officer shall invest Harris Health and CHC funds using judgment and care under then prevailing circumstances that a person of prudence, discretion, and intelligence would exercise in the management of their own affairs, not for speculation, but for investment, considering the probable safety of capital. The standard of care to be used by the Investment Officer and Harris Health and CHC Designees shall be the “prudent person” standard and shall be applied in the context of managing an overall portfolio. The Investment Officer, and Harris Health and CHC Designees (1) acting in accordance with this Policy and any written procedures approved by the Board of Trustees and (2) exercising due diligence shall be relieved of personal responsibility for an individual security’s credit risk or market price changes, provided that deviations from expectation are reported in a timely fashion and appropriate action is taken to control adverse developments. The Investment Officer and Harris Health and CHC Designees will also be required to adhere to financial procedures prescribed by the County Auditor for financial transaction processing. Reference Exhibit B for authorized personnel to invest Harris Health and CHC funds.

Section 4.02. Training

Harris Health Designees and CHC Designees shall be active members of the Texas Association of Counties Investment Academy or in the active process of attaining membership and attend investment training as required by the Investment Act. Under this Policy, all individuals are required to submit written confirmation of completion of such training to the Investment Officer.

Section 4.03. Disclosure of Relationships with Persons Selling Investments to Harris Health or CHC

The Investment Officer of Harris Health who has a personal business relationship with a business organization offering to engage in an investment transaction with the entity shall file a statement disclosing that personal business interest. An Investment Officer who is related within the second degree by affinity or consanguinity, as determined under Chapter 573, to an individual seeking to sell an investment to the Investment Officer’s entity shall file a statement disclosing that relationship. A statement required under this subsection must be filed with the Texas Ethics Commission and the Board of Trustees. The Investment Act, Section 2256.005(i) should be referred to for more qualifying events and it is the responsibility of the Investment Officers, Harris Health Designees, CHC Designees, and broker/dealers to be knowledgeable of and compliant with reportable events and relationships. Under this Policy, an Investment Officer is prohibited from accepting any

gifts, including meals, from a broker/dealer unless authorized by the Executive Director of the Office of Management and Budget.

Section 4.04. Reporting by the Investment Officer

Not less than quarterly and within a reasonable time after the end of the quarter being reported, the Investment Officer, assisted by Harris Health and CHC Designees, shall prepare and submit to the Board of Trustees a written report of the investment transactions for all funds of Harris Health and CHC for the preceding reporting period. The reports must (1) describe in detail the investment position of Harris Health and CHC on the date of the reports, (2) be prepared jointly by the Investment Officer and/or Harris Health or CHC Designees, (3) be signed by the Investment Officer and/or Harris Health or CHC Designees, (4) contain a summary statement of each pooled fund group that states the beginning market value and fully accrued interest for the reporting period, (5) state the book value and the market value of each separately invested asset at the beginning and end of the reporting period by the type of asset and fund type invested, (6) state the maturity date of each separately invested asset that has a maturity date, (7) state the Harris Health and CHC account or fund or pooled group fund for which each individual investment was acquired, (8) state the compliance of the investment portfolio as it relates to this Policy and the relevant provisions of the Investment Act, and (9) disclose any investments that no longer have the minimum rating required by law and the liquidation, or plan for liquidation, of such investments consistent with the provisions of Section 2256.021. All investments must comply with the Investment Act and all federal, state, and local statutes, rules and regulations.

Section 4.05. Selection of Banks and Securities Dealers

Harris Health and CHC will seek to include qualified and registered minority, women, veteran, and disabled-owned financial institutions when selecting broker/dealers for investments and depository banks in the depository procurement process.

Depository banks shall be selected through the Harris Health's depository procurement process, which shall begin with a formal request for proposals every four years, or as otherwise determined by Harris Health and allowed by law.

All financial institutions and broker/dealers desiring to become approved broker/dealers for Harris Health and CHC investment transactions must supply the Financial Management Division with the following: (1) the most recent audited financial statements for the financial institution or broker/dealer and (2) evidence of registration with the appropriate regulatory agency. Bank dealers must be registered with the appropriate regulatory authority as a government securities dealer, municipal securities dealer, or both. For a securities firm, this requires a statement that the firm is registered with the Financial Industry Regulatory Authority (FINRA), Municipal Securities Regulatory Board (MSRB), and/or the Securities and Exchange Commission (SEC). Securities dealers will be selected by the Financial Management Division and then submitted to Commissioners Court for final approval. All transactions will be conducted on a Delivery vs. Payment basis per the Investment Act, Section 2256.005(b). Reference Exhibit A for approved banks. Harris Health and CHC mirror the list of approved broker/dealers, money market funds, and investment pools as listed in the most current Harris County Investment policy as noted in Exhibit C.

Section 4.06. Certifications from Approved Broker/Dealers

A written copy of the investment policy shall be presented to a qualified representative of any business offering to engage in an investment transaction with Harris Health and CHC. A business organization includes banks, broker/dealers, and investment pools (Harris Health only). Nothing in this subsection relieves the Investment Officer of the responsibility for monitoring the investments made by Harris Health and CHC for compliance with the investment policy. The qualified representative of the business organization offering to engage in an investment transaction shall execute a written instrument in a form acceptable to Harris Health and CHC substantially to the effect that the business organization has: (1) received and reviewed the investment policy of the entity; and (2) acknowledged that the business organization has implemented reasonable procedures and controls in an effort to preclude investment transactions not authorized within the investment policy, except to the extent that this authorization is dependent on an analysis of the makeup of the entire portfolio or requires an interpretation of subjective investment standards. The Investment Officer may not acquire or otherwise obtain any authorized investment described in the investment policy from a person who has not delivered the required document.

ARTICLE V INVESTMENT OBJECTIVES

Section 5.01. General Objectives

Harris Health funds and CHC funds will be invested in accordance with federal and state laws and this investment policy. Harris Health and CHC will invest according to investment or fund policies and strategies for each fund as they will or have been adopted by the Board of Trustees. This policy shall apply to all funds of the Harris Health System, Community Health Choice, Inc. and Community Health Choice Texas, Inc.

1. Harris Health and CHC emphasize these primary general objectives in investing its funds, listed in the order of importance:
 - a. preservation and safety of original investment principal;
 - b. maintenance of sufficient liquidity to meet the County's operating needs as they are planned or become due;
 - c. marketability of the investment if the need arises to liquidate the investment before final maturity;
 - d. diversification of the investment portfolio;
 - e. maximization of return (yield).
2. Safety of principal is the foremost objective of Harris Health and CHC. In each investment transaction, Harris Health and CHC shall seek first to ensure that capital losses are avoided, whether they are from securities defaults or erosion of market value.
3. Investment decisions shall favor preservation of principal over income or yield.

4. The investment portfolio shall be structured to be sufficiently liquid to enable Harris Health and CHC to meet all operating requirements which might be reasonably anticipated. This need for investment liquidity may be tempered to the extent that Harris Health and CHC is allowed to borrow on a short-term basis to meet its operating requirements, if needed, taking into consideration the net cost to Harris Health and CHC.
5. The investment portfolio shall be designed with the objective of attaining a fair market yield throughout budgetary and economic cycles, taking into account investment risk constraints and liquidity needs. A fair market yield rate shall equal or exceed the available yield at the time of purchase on a U.S. Treasury security having a comparable maturity date.
6. Investments shall be made to avoid incurring unreasonable and avoidable risks.
7. No investments shall be made for the purpose of speculation, such as anticipating an appreciation of capital through changes in market interest rates.
8. All Harris Health Designees and CHC Designees shall seek in the investment process to act responsibly as custodians of the public trust. Harris Health Designees and CHC Designees shall avoid any transaction, including personal transactions that might impair public confidence in Harris Health's ability to operate effectively. Nevertheless, the Board of Trustees recognizes that in a diversified portfolio, occasionally losses may occur due to fluctuating market conditions and must be considered within the context of the overall portfolio's investment return, provided that adequate diversification has been implemented.
9. Harris Health and CHC, as a general objective, plans to hold investments to final maturity which protects principal and liquidity while obtaining the most prudent competitive yield possible at the date of the investment trade. Investments will be purchased for their interest yield expectations over their remaining life to final maturity rather than for speculative purposes. Although Harris Health and CHC's intent upon purchase is to hold securities until maturity, Harris Health and CHC may, whenever appropriate, exchange securities with similar maturity and risk characteristics in order to enhance total returns, provided that safety of principal is given first consideration.
10. Pooling of fund groups for the purposes of investment is approved and allowed and must be done in accordance with any applicable bond indentures.

Section 5.02 Monitoring and Pricing of the Portfolio

Harris Health and the Harris County Financial Management Division use a combination of resources, such as Bloomberg Investment Service, the Federal Reserve Board's economic research and data, broker/dealer matrices, and third party pricing services to monitor the market and to value the portfolio. The financial advisor, Investment Officer, and the Finance Committee may also assist in monitoring the portfolio periodically.

Section 5.03. Authorized Investment Instruments

Harris Health and CHC funds governed by this Policy may be invested in the instruments described below, all of which are authorized in the Public Funds Investment Act:

1. Direct obligations of the United States, its agencies, and instrumentalities.
2. Other obligations, the principal, and interest of which are unconditionally guaranteed, insured, or backed by the full faith and credit of the State of Texas, the United States, or any obligation fully guaranteed or fully insured by the Federal Deposit Insurance Corporation (FDIC).
3. Direct obligations of the State of Texas or its agencies provided the agency has the same debt rating as the State of Texas.
4. Obligations of states, agencies, counties, cities, and other political subdivisions located in the United States and rated not less than A, or its equivalent, by a nationally recognized investment rating firm.
5. Fully insured or collateralized certificates of deposit/share certificates issued by a state and national banks, or a savings bank, a state or federal credit union (having its main or branch office in Texas) guaranteed or insured by the Federal Deposit Insurance Corporation (FDIC) or its successor; and secured by obligations as stated on Item 1 of this section. In addition to Harris Health's authority to invest funds in certificates of deposit and share certificates as stated above, an investment in certificates of deposit made in accordance with the following conditions is an authorized investment under the Texas Gov't. Code, Section 2256.010 (b): (1) the funds are invested by the Financial Management Division through a clearing broker registered with the Securities and Exchange Commission (SEC) and operating pursuant to SEC, Rule 15c3-3 (17 C.F.R., Section 240.15c3-3) with its main office or branch office in Texas and selected from a list adopted by the Financial Management Division as required by Section 2256.025; or a depository institution that has its main office or a branch office in this state and that is selected by the Financial Management Division; (2) the broker or the depository institution selected by the County arranges for the deposit of the funds in certificates of deposit in one or more federally insured depository institutions, wherever located, for the account of Harris Health and CHC; (3) the full amount of the principal and accrued interest of each of the certificates of deposit is insured by the United States or an instrumentality of the United States; (4) the broker or depository institution selected by the County acts as custodian for the County with respect to the certificates of deposit issued for the account of Harris Health and CHC.
6. Fully collateralized repurchase agreements, provided the Financial Management Division has on file, a signed Master Repurchase Agreement detailing eligible collateral, collateralization ratios, standards for collateral custody and control, collateral valuation, and conditions for agreement termination. The repurchase agreement must have a defined termination date and be secured by obligations as stated on Item 1 of this section. It is required that the securities purchased as part of the repurchase agreement must be assigned to Harris Health/CHC, held in Harris Health/CHC's name, and deposited at the time the investment is made with our custodian or with a third-party approved by Harris Health and/or CHC. Securities purchased as part of a repurchase agreement shall be marked-to-market no less than weekly. All

repurchase agreements must be conducted through a primary government securities dealer as defined by the Federal Reserve or a financial institution doing business in Texas. Maturities shall be limited to 90 days. The 90-day limit may be exceeded in the case of flexible repurchase agreements (“flex repos”) provided the investment type is specifically authorized within individual bond ordinances and final maturity does not exceed the anticipated spending schedule of bond proceeds.

7. Securities lending programs if the loan is fully collateralized, including accrued income, by securities described in Texas Gov’t. Code, Section 2256.009, by irrevocable bank letters of credit issued by a bank under the laws of the United States, or any other state, continuously rated not less than A by at least one nationally recognized investment rating firm, or by cash invested in accordance with the Investment Act. Securities held as collateral must be pledged to the investing entity, held in the investing entity’s name, and deposited at the time the investment is made. A loan must be placed through a primary government securities dealer or a financial institution doing business in Texas. A loan must allow for termination at any time and must have a term of one year or less.
8. Commercial paper with a stated maturity of 270 days or less from the date of issuance, rated not less than A-1 or P-1 or an equivalent rating by at least two nationally recognized rating agencies, and not under review for possible downgrade at time of purchase. **Regardless of whether commercial paper is purchased directly from the issuer or from a broker/dealer in the secondary market, a competitive bid process is required, in which the investment yield is compared to other available commercial paper having a comparable maturity and credit rating. An exception may be made to the competitive offer process when seeking to purchase municipal commercial paper securities due to very limited quantity.**
9. Local government investment pools with a dollar weighted average maturity of 60 days or less, approved through resolution of the Board of Trustees to provide services to Harris Health/CHC, continuously rated no lower than AAA or equivalent by at least one nationally recognized rating service. Harris Health/CHC may not invest an amount that exceeds 10 percent of the total assets of any one local government investment pool. On a monthly basis, the Investment Officer shall review a list of securities held in the portfolio of any pool in which Harris Health and CHC funds are being held. To be eligible to receive funds from and invest funds on behalf of Harris Health an investment pool must furnish to the Investment Officer or other authorized representative an offering circular or other similar disclosure instrument that contains information required by the Tex. Gov’t. Code, Section 2256.016. Investments will be made in a local government investment pool only after a thorough investigation of the pool and review by the County Designees.
10. A Securities and Exchange Commission (SEC) registered, no-load money market mutual fund which has a dollar-weighted average stated maturity of 60 days or less. Furthermore, it must be rated not less than AAA or equivalent by at least one nationally recognized rating service and Harris Health/CHC must be provided with a prospectus and other information required by the SEC Act of 1934 or the Investment Company Act of 1940. Harris Health/CHC may not invest an amount that exceeds 10 percent of the total assets of any one fund. Investments will be made in a money market mutual fund only after a thorough investigation of the fund and review by the County Designees.

11. Interest-bearing banking deposits that are guaranteed or insured by: (A) the FDIC or its successor; or (B) the National Credit Union Share Insurance Fund or its successor; and interest-bearing banking deposits other than described above if: (A) the funds invested in the banking deposits are invested through: (i) a broker with a main office or branch office in Texas that the County Designee selects from a list of its governing body or designated investment committee adopts as required by Section 2256.025; or (ii) a depository institution with a main office or branch office in Texas that the County Designee selects (B) the broker or depository institution selected as described above arranges for the deposit of the funds in one or more federally insured depository institutions, regardless of where located, for Harris Health's account; (C) the full amount of the principal and accrued interest of the deposits is insured by the United States or an instrumentality of the United States; and (D) Harris Health/CHC appoints as the custodian of the bank deposits issued for Harris Health's and CHC's account: (i) the depository institution selected as described above; (ii) an entity described by Section 2257.041(d); or (iii) a clearing broker dealer registered with the Securities and Exchange Commission and operating under Securities and Exchange Commission Rule 15c3-3 (17 C.F.R. Section 240.15c3-3).

Section 5.04 Unauthorized Investment Instruments

Harris Health and CHC authorized investment options are more restrictive than those allowed by state law. Furthermore, this Policy specifically prohibits investment in the securities listed below:

1. Any obligation whose payment represents the coupon payments on the outstanding principal balance of an underlying mortgage-backed security, but pays no principal (IO).
2. Any obligation whose payment represents the principal stream of cash flow from an underlying mortgage-backed security, but pays no interest (PO).
3. Any obligation whose interest rate is determined by an index that adjusts opposite to the changes in a market index (Inverse Floater).
4. Any Collateralized Mortgage Obligation (CMO).
5. An investment that requires a minimum credit rating does not qualify as an authorized investment during the period the investment does not have the minimum credit rating, even if the investment had the appropriate rating at the time of purchase. The Investment Officer shall take all prudent measures that are consistent with this Policy to liquidate an investment that does not have the minimum rating.

Section 5.05. Internal Controls

The Investment Officer, assisted by County Designees, shall prepare a system of management-level and internal accounting controls which shall be documented in writing. The controls may be reviewed by Harris Health and CHC's independent auditor or the County Auditor during quarterly report audits or at any time. Controls deemed most important include controls to avoid or detect collusion, segregation of duties, segregation of transaction authority from accounting and record

keeping, custodial safekeeping, clear delegation of authority, specific limitations regarding securities losses and remedial action, approved written confirmation of telephone transactions, minimizing the number of authorized investment personnel, documentation of transactions and strategies, and adherence to ethics standards.

Section 5.06. Maturity

Fund investment may not exceed the following maturities, or as restricted by specific bond indentures:

<u>Fund Name</u>	<u>Maximum Maturity (in years)</u>
Debt Service Funds	5
General Concentration Pool	5
Construction Funds/Capital Project Funds	5
Specific Purpose Funds	5
Insurance Reserves	5
Bond Reserve Funds	<i>Final maturity of bonds</i>

In addition, the weighted average maturity of the overall portfolio shall not exceed three years.

Section 5.07. Diversification

It is the policy of Harris Health to diversify its investment portfolio. All funds shall be diversified to eliminate the risk of loss resulting from over concentration of assets in a specific maturity, a specific issuer or a specific class of securities. In establishing specific diversification strategies, the following general policies and constraints shall apply:

1. Portfolio investment maturities shall be staggered in a way that avoids undue concentration of assets in a specific maturity sector. Maturities shall be selected which provide for stability of income and reasonable liquidity.
2. Liquidity shall be maintained through practices that ensure that the liquidity needs of the next disbursement date and payroll date are covered through liquid deposits, maturing investments, or marketable securities.
3. Risks of market price volatility shall be limited through maturity diversification accomplished by various investment strategies including, but not limited to, the Matching, Barbell, Laddered, or combination of the investment approaches.
4. The following diversification limitations shall be imposed on the portfolio:
 - a. **Maturity**. No more than 50% of the portfolio, excluding those investments held for construction/capital projects, debt service payments, bond fund reserve accounts, and capitalized interest funds may be invested beyond three years, and the average maturity of the overall portfolio, with the previous exceptions, shall not exceed three years.
 - b. **Default Risk**. The restrictions on legally authorized investments and the legal requirements for full collateralization are intended to reduce the potential of default

risk. Nonetheless, no more than 25% of the overall portfolio may be invested in time deposits, including certificates of deposit, of a single issuer.

- c. **Marketability.** At least 15% of the portfolio, excluding those investments held for future major capital expenditures, debt service payments, bond fund reserve accounts, and capitalized interest funds, shall be invested in overnight instruments or in marketable securities which can be sold to raise cash within one day's notice.

Section 5.08. Risk Tolerance

Harris Health recognizes that investment risks can result from issuer defaults, market price changes or various technical complications leading to temporary illiquidity. Portfolio diversification is employed as a way to control these risks. The Investment Officer and Designees are expected to display prudence in the selection of securities and no individual investment transaction shall be undertaken which jeopardizes the total capital position of the overall portfolio.

In addition to these general policy considerations, the following specific policies will be strictly observed:

1. All investment transactions will be conducted with approved banks as listed in Exhibit A, broker/dealers, money market funds, and investment pools as listed in Exhibit C.
2. All transactions will be settled on Delivery vs. Payment basis.
3. A competitive bid/offer process will be used to place all security sales and purchases. The competitive bid/offer process shall also be utilized for newly issued securities to verify whether a comparable secondary market security is available with a better price and yield. All competitive bid information shall be documented and saved with the confirming email, offering communication, or verbal communique details maintained with the transaction. Any transactions not competitively bid must be explained in writing and approved by the Executive Director of the Office of Management and Budget, the Deputy Executive Director, or the Investment Manager before the trade is accepted. An exception may be made to the competitive offer process when seeking to purchase municipal securities. Due to the very limited quantity of any specific municipal bond, government agency bonds with comparable maturity dates may be considered.
4. The Board of Trustees will at least annually approve a recommended broker/dealer list, or sooner if circumstances require a change. The approved broker/dealer list will be posted in this Harris County Investment Policy and Harris County website. Based on an evaluation performed at least biennially, banks and securities dealers will be removed from or continued on the eligibility list. The following criteria will be used in the evaluation:
 - a. Number and value of transactions competitively won;
 - b. Prompt and accurate confirmation of transactions;
 - c. Efficient securities delivery;

- d. Account servicing;
- e. Moral character and public ethics of both broker and firm;
- f. Qualifications and experience of the broker.

Section 5.09. Safekeeping and Custody

Safekeeping and custody of Harris Health and CHC investment securities shall be in accordance with state law. All security transactions, except investment pool and money market fund transactions, shall be conducted on a Delivery vs. Payment basis. All investment securities will be held by a third party custodian designated by Harris Health/CHC, and this custodian shall be required to issue monthly statements listing all securities held on account.

Section 5.10. Policy of Securing Deposits of Harris Health and CHC Funds – Applicable to All Deposited Harris Health and CHC Funds

1. Harris Health recognizes that FDIC or its successor's insurance is available for Harris Health and CHC funds deposited at any one Texas based financial institution (including branch banks) only up to a maximum of \$250,000 (including accrued interest) for each of the following: (i) demand deposits, (ii) time and savings deposits, and (iii) deposits made pursuant to an indenture or pursuant to law in order to pay a bond or note holder. It is the policy of Harris Health that all deposited funds in each of the Harris Health accounts shall be insured by the FDIC, or its successor, or secured by Collateral pledged to the extent of the fair market value of the amount not insured in compliance with the Collateral Act, Government Code, Section 2257.2. If it is necessary for the Harris Health depositories to pledge collateral to secure the Harris Health deposits, the Collateral pledge agreement must be (1) in writing, (2) approved by the depository's board of directors or loan committee and reflected in the minutes of the meeting and (3) kept in the official records of the depository. The depository must approve the collateral pledge agreement and provide to the Investment Officer a copy of the minutes of the meeting of the depository's board or loan committee at which the collateral pledge agreement is approved prior to the deposit of any Harris Health and CHC funds requiring the pledge of Collateral in such financial institution.
2. Collateral pledged by a depository shall be held in safekeeping at the Federal Home Loan Bank and the Investment Officer pursuant to this Policy, shall obtain safekeeping receipts from the Federal Reserve Bank. Collateral may also be pledged with the use of an Irrevocable Standby Letter of Credit issued by the Federal Home Loan Bank. Principal and accrued interest on deposits in accordance with this Policy, if authorized, shall not exceed the FDIC, or its successor's, insurance limits or the Collateral pledged as security for Harris Health investments. It shall be acceptable for Harris Health to periodically receive interest on deposits to be deposited to the credit of Harris Health if needed to keep the amount of the funds under the insurance or collateral limits. The Investment Officer, with the help of the Harris Health Designees, shall ensure that the Collateral pledged to the Harris Health is pledged only to Harris Health and shall review the fair market value of the Collateral pledged to secure the funds to ensure that the Harris Health Funds are fully secured.

3. Certificates of deposit, to the extent that they are not insured, may be secured by any securities allowed under the Investment Act and depository contract.
4. Demand deposits (for example, checking accounts) and savings accounts, to the extent that they are not insured, may be secured by any securities allowed under the Collateral Act.

Section 5.11. The Investment Policy Review

The Investment Policy shall be formally reviewed and approved by the Board of Trustees at least annually or when amended.

Section 5.12. Finance Committee

Although not required by the Investment Act, Harris Health has established a Finance Committee composed of members of the Board of Trustees, and attended by the Chief Financial Officer and a representative of the Harris Health's financial advisor. This committee will seek to meet at least once after the completion of each fiscal quarter and will include in its discussions a review of cash, investment and debt reports, projects, bond deals, policy compliance, recommendations, and other relevant finance related matters.

**ARTICLE VI
INVESTMENT STRATEGIES FOR FUNDS**

Section 6.01. Debt Service Funds

Debt service funds are used to account for the accumulation of resources to fund periodic principal and interest payments on outstanding obligations. The investment strategy for these funds is the Matching Approach. Debt service funds may be pooled for investment purposes.

Section 6.02. Debt Service Reserve Funds

Debt service reserve funds are used as required by debt covenants and may be invested for a period not to exceed the maturity of the bond. The Matching, Barbell, and/or Laddered Approaches are used for the debt service reserve funds investment strategy.

Section 6.03. General Fund

Unrestricted revenues and most of Harris Health operating expenditures and supplements to debt service are accounted for in the general fund. The investment strategy for the General Fund combines the Matching and/or Laddered Approaches. The average maturity of these investments is one year or less.

Section 6.04. Capital Project Funds/Construction Funds

Capital project funds and construction funds are used to account for construction and other nonrecurring capital expenditure activity. A Matching, Barbell, and/or Laddered Approach may be used for these funds, depending on the liquidity needs and prevailing interest rate environment.

Section 6.05. Specific Purpose Funds

This is funded from grants or restricted donations. The Matching Approach is used.

Section 6.06. Insurance Reserves

Insurance reserves are pledged to satisfy insolvency and other reserves as required by the Texas Department of Insurance. The Matching, Barbell, and/or Laddered Approaches are used for the debt service reserve funds investment strategy.

**ARTICLE VII
MISCELLANEOUS**

Section 7.01 Socially Responsible Investing

Harris Health will strive to maintain a goal of at least 2% of portfolio holdings in Environmental, Social, and Governance (ESG) investments. Although the Government-Sponsored Enterprises of Fannie Mae and Freddie Mac meet the ESG criteria by “providing a stable source of liquidity to support low- and moderate-income mortgage borrowers and renters by enabling greater access to affordable home and rental housing finance in all markets and at all times,” Harris Health shall seek to primarily meet its ESG goal, whenever possible, through investments in municipal bonds specifically geared toward low-income or affordable housing, and/or serving a county listed on the Federal Financial Institutions Examination Council’s (FFIEC) underserved or distressed areas <https://www.ffiec.gov/cra/pdf/2021/distressedorunderservedtracts.pdf>, or bonds of a school district issuer with 50% or more of students eligible for free or reduced lunch, or municipal bonds held in an ESG Fund.

It is understood that Harris Health may not have continual or regular access to these municipal bonds, and at times such bonds may not meet credit ratings as outlined in state statutes.

Section 7.02. Superseding Clause

This Policy supersedes any prior policies adopted by the Board of Trustees regarding investment or securitization of Harris Health and CHC funds.

Section 7.03. Open Meeting

The Board of Trustees officially finds, determines and declares that this Investment Policy was reviewed, carefully considered, and adopted at a regular meeting of the Board of Trustees, and that a sufficient written notice of the date, hour, place and subject of this meeting was posted as required by the Texas Open Meetings Act, Chapter 551, Texas Government Code, and that this meeting had been

open to the public as required by law at all times during which this Policy was discussed, considered and acted upon. The Board of Trustees further ratifies, approves and confirms such written notice and the contents and posting thereof.

EXHIBIT A

List of Approved Banks

Cadence Bank
Amegy Bank, a division of ZB, N.A.

EXHIBIT B

Harris Health System & CHC Authorized Designees

Authorized Personnel of Harris Health

President and Chief Executive Officer
Executive Vice President and Chief Financial Officer
Vice President - Controller
Director - Treasury and Cash Management

Authorized Personnel of CHC

President and Chief Executive Officer
Chief Financial Officer
Vice President - Controller
Treasurer & Director of Investment Management

Authorized Personnel of Harris County

Deputy Executive Director, Office of Management and Budget (Investment Officer)
Investment Manager, Financial Management Division
Financial Analyst, Financial Management Division
Reserve Investment Officer(s), Financial Management Division

EXHIBIT C

**Approved Broker/Dealers, Money Market Funds, and Investment Pools for the Investment
of Harris Health and CHC Funds**

See Exhibit B of Harris County's most recently approved Investment Policy.

EXHIBIT D

Harris County Hospital District dba Harris Health System Financial Management Products Policy

1. General Considerations. The Harris Health System (“Harris Health”) may consider the use of financial management products such as interest rate swaps, caps, floors and other similar transactions in connection with outstanding or authorized debt. Harris Health shall enter into financial management products in a prudent and professional manner and will take into account relevant risk factors and market conditions when evaluating its asset and liability management objectives. The term of a financial management product shall not extend beyond the final maturity date of the underlying debt or the maturity date of the referenced investments. Harris Health may evaluate the use of financial management products by comparison to traditional financing structures and will only use a risk management product if it produces significant quantifiable value or reduces the risk exposure associated with management of the debt portfolio. The Harris Health Chief Financial Officer, the Deputy Executive Director of the Office of Management and Budget and the Harris Health Swap Advisor (the “Financial Management Products Committee”) will periodically review current market conditions for risk management products and will evaluate how current conditions affect existing and/or any proposed future risk management products.

2. Policy Considerations Specific to Financial Management Products.
 - A. Interest rate swaps may be used by Harris Health to lower interest expense, manage financial risk or to create a risk profile not otherwise achievable through traditional debt or investment instruments.

 - B. Risk factors to evaluate when considering interest rate swaps:
 - i. Interest rate risk
 - ii. Termination risk
 - iii. Counterparty risk
 - a. Credit Quality
 - b. Concentration
 - iv. Basis Risk
 - v. Collateral posting requirements
 - vi. Liquidity risk
 - vii. Tax Risk
 - viii. Accounting risk and ability to receive independent third party fair market valuation

 - C. Criteria for selecting counterparty shall be determined by the Harris Health System Board of Trustees, consistent with other applicable regulations, and shall include:
 - i. Counterparty shall be rated at AA-/Aa3/AA- by at least two of Standard & Poor’s Rating Services (“S&P”), Moody’s Investors Service (“Moody’s), and Fitch Ratings (“Fitch”), respectively; or

- ii. If rated below AA-/Aa3/AA- by at least two of S&P's Moody's, and Fitch, respectively, or if not rated, then the counterparty shall obtain credit enhancement with respect to its obligations under the financial management transaction from a provider that is rated at least AA-/Aa3/AA- by at least two of S&P, Moody's, and Fitch, respectively; or
- iii. If rated below AA-/Aa3/AA- by least two of S&P, Moody's, and Fitch, respectively, or if not rated, then the counterparty shall provide credit support that requires the counterparty to deliver collateral for the benefit of the Harris Health System (a) that is of a kind and in such amounts as are specified therein and which related to various rating threshold levels of the counterparty or its guarantor, beginning at AA-/Aa3/AA- (S&P/Moody's/Fitch) and (b) that, in the judgment of the Harris Health System, is reasonable and customary for similar transactions, taking into account all aspects of the financial management product including, without limitation, the economic terms of the financial management product and the creditworthiness of the counterparty or its guarantor.
- iv. Counterparty must disclose any payments made to a third party in connection with the procurement of the transaction as required by Texas Government Code §1371.056.

D. Limitations on fixed rate and basis swaps:

Fixed rate and basis swaps may not exceed 35% of total outstanding par value of the Harris Health bonds and outstanding debt net of any offsetting swap transactions.

E. Limitation on counterparty termination exposure;

Uncollateralized counterparty termination exposure shall not exceed \$75 million per counterparty.

3. Reporting Requirements

- A. Prior to the execution of any financial management product, Harris Health will submit a record of the proceedings of Harris Health authorizing the execution of the financial management product and any contract providing revenue or security to pay the financial management product to the Texas Attorney General for review and approval as required under Texas Government Code §1371.057.
- B. As required under Texas Government Code §1371.056, the governing body or an authorized officer of Harris Health shall make a determination that each financial management product conforms to Harris Health's Financial Management Products Policy after reviewing a report of the chief financial officer that identifies with respect to each financial management product:
 - i. Its purpose;

- ii. The anticipated economic benefit and the method used to determine the anticipated benefit;
 - iii. The use of the receipts of the transaction;
 - iv. The notional amount, amortization, and average life compared to the obligation;
 - v. Any floating indices;
 - vi. Its effective date and duration;
 - vii. The identity and credit rating of the counterparties; or credit support entities;
 - viii. The cost and anticipated benefit of transaction insurance;
 - ix. The financial advisors and the legal advisors and their fees;
 - x. Any security for scheduled and early termination payments;
 - xi. Any associated risks and risk mitigation features; and
 - xii. Early termination provisions.
- C. As required by Texas Government Code §1371.061, on at least an annual basis an authorized designee of Harris Health, in consultation with the Financial Management Products Committee, shall report in writing the status of all outstanding financial management products to the Board of Trustees. Any such report shall include, but not be limited to, the following information:
- (i) Disclosure of all changes to financial management products or new financial management products entered into by Harris Health since the last report to the Board of Trustees;
 - (ii) A summary of each financial management product including, but not limited to, the type of financial management product, specific terms, cash flows, the marked-to-market value, the final maturity date, and other information of interest to the Board of Trustees;
 - (iii) A statement as to whether the continuation of each financial management product would comply with this Financial Management Products Policy;
 - (iv) The total notional amount of financial management products detailed by counterparty;

- (v) The credit ratings of each counterparty to Harris Health, and those of any credit enhancer insuring or guaranteeing financial management product payments (as applicable);
 - (vi) Any default or rating change by a counterparty to Harris Health, and the results of default or rating change including the financial impact to Harris Health, if any;
 - (vii) Collateral posted by each counterparty to Harris Health, if any, and by Harris Health, if any, detailed by each financial management product and in total by counterparty; and
 - (viii) The market movement or rating change required to trigger a collateral posting requirement, as applicable.
4. Regulatory Compliance Guidelines. Pursuant to the authority of Section 731 of Title VII of the Dodd-Frank Wall Street Reform and Consumer Protection Act of 2010 (“Dodd-Frank”), which includes amendments to the Commodity and Exchange Act (the “CEA”) regarding over-the-counter derivative instruments including financial management products, regulations were published by the Commodity Futures Trading Commission (the “CFTC”) that define business conduct between swap dealers and their counterparties, including swap dealers engaged in swap transactions with state and local governmental counterparties such as Harris Health (referred to in the regulations as “Special Entities”). Following is a list of regulatory requirements imposed under the authority of Dodd-Frank with which Harris Health shall make every reasonable effort to comply:
- A. As required by CFTC Regulation 23.450, which includes language added to Section 4s(h) (5) of the CEA, it is Harris Health’s policy to procure a qualified independent representative (the “QIR”) as its swap advisor. In order to qualify as a QIR, the swap advisor must meet the following criteria:
 - (i) Has sufficient knowledge to evaluate the transaction and associated risks;
 - (ii) Is not subject to a statutory disqualification;
 - (iii) Is independent of the swap dealer (counterparty);
 - (iv) Undertakes a duty to act in the best interests of Harris Health;
 - (v) Makes appropriate and timely disclosure to Harris Health;
 - (vi) Evaluates, consistent with any guidelines provided by Harris Health, fair pricing and the appropriateness of the financial management products; and

- (vii) Is subject to restrictions on certain political contributions imposed by the CFTC, the Securities and Exchange Commission (the “SEC”), or a self-regulatory organization subject to the jurisdiction of the CFTC or the SEC.
- B. At least annually, Harris Health shall conduct a review of its QIR to ensure that it still meets the criteria listed in Part A above.
- C. In order to ensure that Harris Health is in compliance with all regulatory reform imposed by Dodd-Frank, Harris Health may, but is not required to, execute an ISDA August 2012 DF Protocol Agreement (each a “Protocol Agreement”) with its QIR and each counterparty prior to executing any financial management product. If Harris Health elects not to execute a Protocol Agreement with each counterparty, then Harris Health shall provide an alternate form of written representation to each counterparty that meets all applicable disclosure requirements as required by Dodd-Frank.
- D. Section 2(h)(1) of the CEA requires that certain financial management products, including those commonly entered into by state and local governmental entities such as Harris Health, must be cleared through a derivatives clearing organization unless otherwise exempt from clearing under the “End User Exception” in Section 2(h)(7) of the CEA. In order to qualify for the End User Exception, Harris Health must report to the CFTC on either an annual or a transaction-by-transaction basis that is (i) is not a financial entity; (ii) is using financial management products to hedge or mitigate commercial risk; and (iii) will notify the CFTC, in a manner set forth by the CFTC, how it generally meets its financial obligations associated with entering into non-cleared financial management products. Harris Health, in consultation with the QIR, shall make its best efforts to comply with Sections 2(h) (1) and 2(h) (7) of the CEA, as applicable.

BOARD OF TRUSTEES
Meeting of the Board of Trustees



Thursday, December 7, 2023

**Consideration of Approval to Amend the Lease with Farha International, Inc. for the
Monroe Health Center located at 8539 Gulf Freeway, Houston, Texas 77017**

Administration recommends Board of Trustees approve an amendment to extend the Monroe Health Center lease for 2-years with Farha International, Inc. located at 8539 Gulf Freeway, Houston, Texas 77017. The lease will commence on January 1, 2024 through December 31, 2025 at an annual base rate of \$200,000.00 plus operating expenses.

Patrick Casey

Patrick Casey

Senior Vice President – Facility Construction & Systems Engineering

BOARD OF TRUSTEES
Meeting of the Board of Trustees



BOARD OF TRUSTEES
 Monroe Health Center
 Farha International, Inc.
 December 7, 2023
 Page 2

Fact Sheet

Purpose of Lease: Ambulatory Care Clinic

Lessor: Farha International, Inc.

Lessee: Harris Health System

Location of Lease Space: 8539 Gulf Freeway
Houston, Texas 77017

Lease Space: Approximately 10,000 square feet

Lease Term: 2 years

Lease Terms	Annual Base Rent	Est. Monthly Operating Expenses	Annual Payment	Base Lease Rate/SF
Jan. 1, 2024 - Dec. 31, 2024	\$200,000.00	\$106,469.04	\$306,469.04	\$30.65
Jan. 1, 2025 - Dec. 31, 2025	\$200,000.00	\$109,663.11	\$309,663.11	\$30.97

Termination Option: Tenant may terminate the Lease Agreement on any anniversary of the commencement of the term of this Lease Agreement if either Tenant’s Board of Trustees or the Harris County Commissioners Court in its sole discretion fails to approve, adequately fund or certify funds for this Lease Agreement, whether annually or otherwise, or if funding for this Agreement is removed or reduced and verification of such is provided to Landlord. Tenant agrees to provide at least 60 days prior written notice of any non-appropriation of or reduction in funding in the budget.

Thursday, December 7, 2023

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

December 7, 2023
Board of Trustees Monthly Report

Federal Update

Fiscal Year 2024 Budget Update: Congress reached a surprise short-term agreement at the end of September to fund the federal government and prevent a shutdown. The deal included a delay of the Medicaid disproportionate share hospital cuts.

The current spending agreement keeps the government operational through November 17. Senate and House proposals will likely include the elimination of DSH proposed cuts for one to two years, potential hospital transparency initiatives and site neutral facility fee elimination for hospital outpatient departments located in on- and off-campus outpatient clinics.

Congressman Mike Johnson (R-La.) replaced Kevin McCarthy as House Speaker on October 25. The new Speaker has been proposing another short-term spending bill likely extending to mid-January 2024 at current funding levels. This proposal is meeting stiff opposition from the ultra-conservative House Freedom Caucus, which wants drastic spending cuts.

The Senate continues to move forward with a proposed omnibus or multiple minibus appropriations bills to pass over to the House. The omnibus would include all 12 spending bills were the minibus would be multiple packages of spending bills.

The current comprehensive health care discussion draft under consideration in the Senate Finance Committee contains provisions addressing mental health, mental health workforce, drug price reductions, a 2-year repeal of the Affordable Care Act (ACA) DSH cuts, and no site neutral hospital outpatient department elimination. However, the bill will change as amendments are offered and accepted.

The ongoing conflicts in Ukraine and the Mid-East have also stifled legislative movement in both chambers.

All the above dynamics increase the possibility of multiple continuing resolutions throughout the remainder of the year and early next year or a more disruptive government shut down soon.

340B Update: On Nov. 2, the Centers for Medicare & Medicaid Services (CMS) issued a final rule which outlines its plan to remedy nearly five years of unlawful Medicare Part B cuts to hospitals in the 340B Drug Pricing Program with \$9 billion in lump sum Outpatient Prospective Payment System payments.

CMS states that it will:

- Repay hospitals a total of \$9 billion in lump sum payments. An additional \$1.6 billion already has been repaid through reprocessed claims for 2022.
- Not pay hospitals interest on the underpayments from 2018 to 2022.
- Recoup \$7.8 billion from hospitals over a 16-year period, beginning in 2026, to offset the higher payments it made for non-drug items and services from 2018 to 2022.
- Allow hospitals to request technical corrections to their payment amounts by Nov. 30.
- Begin repaying hospitals in early 2024.

Harris Health estimates it will recoup \$7.3 million from this action.

State Update:

Legislative Updates: The third special 88th legislative session ended with both chambers the morning of November 7 with most business left unfinished. Governor Abbott issued a proclamation on the afternoon of November 7 for the 88th fourth special session, the agenda items are listed below:

Legislation relating to primary and secondary education, including the establishment of an education savings account program, the certification, compensation, and health coverage of certain public school employees, the public school finance system, special education in public schools, measures to support the education of public school students that include certain educational grant programs, reading instruction, and early childhood education, the provision of virtual education, and public school accountability.

Legislation related to school safety measures and related state funding mechanisms.

Legislation to do more to reduce illegal immigration by creating criminal offenses for illegal entry into this state from a foreign nation and illegal reentry or presence following denial of admission, exclusion, deportation, or removal; authorizing the removal of illegal immigrants from Texas; and providing indemnification and immunity for public officials, employees, or contractors in connection with the foregoing.

Legislation to impede illegal entry into Texas by providing more funding for the construction, operation, and maintenance of border barrier infrastructure, and additional funding for the Department of Public Safety for border security operations, including additional overtime expenses and costs due to an increased law enforcement presence to preserve public safety and security in the Colony Ridge development in Liberty County, Texas.

On the immigration matters before the legislature, amendments will be offered to exclude all health care facilities from the proposed legislation.

Expectations for this session are minimal with the ongoing tensions and acrimony between Senate leadership, House leadership, and the Governor. We could be in for a long Fall/Winter

with multiple called special sessions. The Governor has openly threatened members in both chambers that if they do not pass his agenda, he will meet them at the ballot box this upcoming spring in the primaries.

PHE Medicaid Redetermination Status Update: In October, approximately 100,000 SSI waiver disabled, nursing home, and Star Plus Medicaid recipients lost their eligibility during the redetermination process. HHSC and the Social Security Administration (SSA) are working to examine this cohort of recipients to determine why the number was so high. It may be more of a SSA issue than a HHSC issue.

Over the past two months HHSC has been closely watched by CMS and is undergoing an intensified review of the redetermination processes' they have in place due to the high number of enrollees losing coverage. As of the end of September over 600,000 have been disenrolled due to procedural errors according to the Kaiser Family Foundation.

This has had a detrimental effect on Community Health Choice.

12 Month Continuous Eligibility for Post 12months Post-Partum Update: HB 12 passed in the 88th Regular Legislative Session which placed in statute 12 months of continuous eligibility under the Medicaid program for post-partum women. HHSC did file the State Plan Amendment (SPA) on October 20. The SPA contained no language referencing pregnancy termination or other language that would disqualify or slow the SPA approval. The proposed effective date will be March 1, 2024.

For any post-partum woman who had lost Medicaid coverage under the previous limited benefit will be eligible for re-enrollment if they are still within their 12-month post-partum period.

BOARD OF TRUSTEES

Meeting of the Board of Trustees



Thursday, December 7, 2023

Harris Health System Council-At-Large October Meeting Minutes

Harris Health System Council-At-Large Meeting Minutes

- October 9, 2023

Louis Smith

Louis G. Smith Jr.

Senior Executive Vice President / Chief Operating Officer

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
October 9, 2023**

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"> • Acres: Sheila Taylor • Baytown: Pamela Breeze, Don Nichols • Ben Taub M. Ahmadi, Y. Pham • Casa: Alicia Reyes • Gulfgate: Teresa Recio, Patricia Shepherd • Homeless: Ross Holland • LBJH: Velma Denby • MLK: Fadine Roquemore • Vallbona: Cynthia Goodie <p>Harris Health System Attendees: Dr. Esmail Porsa, Louis Smith, Gloria Glover, Allyson Duong, Jon Hallaway, Patrick Casey, Dr. Matasha Russell, Omar Reid, Lydia Rogers, Lady Barrs, Melvin Prado, Collin Bentley, Leslie Gibson, Tracey Burdine, Jabeen John, Olevia Brown, Robin Luckett, Dawn Jenkins, Monica Salinas, Nina Jones</p>	
II. Moment of Silence	<p>Moment of Silence observed.</p>	
III. Approval of Minutes	<p>Motion granted and second to approve minutes as written</p>	
IV. Council Reports	<p>Acres Home – Sheila Taylor</p> <ul style="list-style-type: none"> • The council met today. There was an appreciation luncheon given to those of us that serve on the council as well as the staff. • We registered 7900 patients. • A program called Fast Pass helps people get in without going through the regular registration process. It’s being done though Hello World. • Pharmacy is doing well. If we can get individuals to sign up to get their medications through the mail it would cut down on wait time and long lines. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
October 9, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Council Reports (<i>continued</i>)</p> <ul style="list-style-type: none"> October 29th will be the last day for cooking demonstrations through food pharmacy. It has been a great success. Dominique, who is apart of the pharmacy crew commented the classes were very proactive. A lot of good reports on A1C levels. Nursing has two RN positions vacant. Stacey Washington presided over our meeting today. Mammography is up and running, it will be doing images only. <p>Baytown – Members Present</p> <ul style="list-style-type: none"> Having technical difficulties unable to report at this time. <p>Casa de Amigos – Alicia Reyes</p> <ul style="list-style-type: none"> Casa is working to complete the first phase of construction and on target to opening in November. HEDIS scores are looking good. Podiatry service is increasing another half day. There are a few variances dealing with vaccines. <p>Gulfgate – Theresa Recio & Patricia Shepherd</p> <ul style="list-style-type: none"> The Patient Advisory council met today. In the months of July and August the council was actively recruiting for the council. There were 12 patients interested in becoming member and 3 non patients. Notices were sent out about today’s meeting, but none of them showed up. We continue to recruit. The meeting today was very successful. Gulfgate is 88.8% underbudget to present. Onboarding two family practice physicians, one in October and one in November. Dr. Waters is the new Podiatrist. She started on September 13th. Gulfgate is now offering the Flu Shot. Patients will have two options of getting the shot; during their scheduled visit or walk-in clinic every Wednesday from 1- 3pm. Plans to support the construction for the Food Pantry at Gulfgate has been approved. The next step is approval from Commissioner’s court. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
October 9, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Council Reports (<i>continued</i>)</p> <ul style="list-style-type: none"> All metrics have been met this month. Patients Satisfaction goal exceeded. 90.1 <p>Homeless – Ross Holland</p> <ul style="list-style-type: none"> The Council met on October 3rd. Tracey Burdine was the moderator. We heard about a needs assessment that is being completed by Dr. Gonzalez. A new Dentist has been assigned to the Mobile Unit. We are still looking for new members, which is an ongoing process. New grant funding has been received for the covid vaccine. Patient Satisfaction survey reports; there were at least 5,153 patients seen. We want to thank all council members and management staff for attending. <p>MLK – Fadine Roquemore</p> <ul style="list-style-type: none"> There was no meeting this month due to bad weather. <p>Thomas Street – No representative</p> <p>Vallbona – Cynthia Goodie</p> <ul style="list-style-type: none"> In person council meeting held October 4th. This year to date we have 57,175, year to date 51, 450. This year to date, we have 57, 175 actual patient visits, year to day 51, 450. All HEDIS scores were met and exceeded expectations for two metrics. Met the stretch goal for eleven metrics. Patient Satisfaction; recommended facility year to date is 89%. Staff variance and recruiting updates; Pediatric family practice provider will start November 2023. This will give us the opportunity to increase our pediatric visits. Recruitment of new advisory council members; we have some patients inquiring. We are starting to upgrade our radiology and mammogram equipment. Which will also include some remodeling those areas. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
October 9, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Council Reports (continued)</p> <p>Ben Taub Hospital – Muhammad Ahmadi</p> <ul style="list-style-type: none"> We are trying to coordinate our first meeting for recruiting. Tonight, I have Ms. Pham present to this is her third meeting. Ms. Pham stated she’s happy to be here and hopes to be able to contribute in activities and give reports in the upcoming months and year. Mr. Ahmadi stated we need our badges updated because they have expired. Ms. Pham is qualified to get a badge, then we will be able to officially work around Harris Health and help with patients and their concerns. Coordinate and recruit people for the council. BT updates; new Nursing Director Ms. N. Carol started in September. <ul style="list-style-type: none"> -Patient Satisfaction score was 87.4. Recommended facilities are 89.7. Recommended provider is 89%. The number of patients seen for Ben Taub tower is 5,626. -We are currently recruiting member for Ben Taub tower. <p>Lyndon B. Johnson Hospital – Velma Denby</p> <ul style="list-style-type: none"> Ms. Denby stated she does not have a report at this time. 	
<p>V. Old Business</p>	<p>No Old Business</p>	
<p>VI. Community Medicine</p>	<p>Dr. Matasha Russell</p> <p>Medical Staff Report:</p> <ul style="list-style-type: none"> We are entering respiratory viral season. Were concerned about the triple threat, increases in Covid, Flu and RSV this season. We’re recommending those who are eligible to get their Covid Booster and Flu Shots which are all available in your health centers. Please spread the word in the community. As I’ve said before, you all are influential at your Centers. Masking is also strongly recommended in the clinical areas. Last month Dr. Zare discussed the initiatives to improve care for our high-risk diabetic patients. This has been an ongoing effort with the multi-disciplinary team. Last week we started outreach activities, the patient access team has been reaching out to those high-risk patients who don’t have upcoming appointments with their PCP. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
October 9, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Community Medicine (continued)</p> <p>Getting them scheduled so that we can properly set up and treat.</p> <ul style="list-style-type: none"> The American Heart Association is awarding Harris Health System a silver recognition for the work that has been done, especially in the Ambulatory system with vast improvement with our hypertensive measures. There will be an awarded luncheon this week and I will be there to accept the award for Harris Health. <i>Council members, please take time out to congratulate your clinical team when you see them. This is a big accomplishment “national recognition” and we are really proud!</i> <p>Primary Care Operations Scorecard:</p> <ul style="list-style-type: none"> We are meeting goals in Medical Home no show rate. However, in September we did not meet our overall no show rate. We will be keeping an eye on it and make sure it does not become a trend. We’re meeting goals in cycle time and new appointment availability. <p>Primary Care Pediatric Scorecard:</p> <ul style="list-style-type: none"> We are still having challenges with our overall no show rate. We will be working with our local pediatric triads to have them look into the reasons behind the no show rate and tactics to further remind parents to keep their kids doctor appointments. We are doing well in cycle time. Still having challenges with the 3rd new available appointments. Again, we’ll work with triads. <p>HEDIS Scorecard Data Reporting Period:</p> <ul style="list-style-type: none"> We continue to do exceptionally well with our 13 quality HEDIS measures. We’re performing above the National Benchmark or exceeding our internal Harris Health goal. Of note, we are starting to monitor Nephropathy screening (kidney check of our high-risk diabetic patients) there’s has been a bit of a drop off over the last two months. <p>Questions/Comments:</p> <p>Mrs. Reyes asked do we have the national score to compare (A1C control >9%).</p> <p><i>Dr. Russell explained the downward slop on the scale is what we are looking for. We are trending downward (less than 9). The stretch goal is at 14. We still have little ways to go.</i></p>	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
October 9, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
<p>Administration</p>	<p>Community Medicine (continued)</p> <p>Mrs. Reyes stated, I know at one point you were talking about patients being called to remind them about medications. Is there a system in place for diabetic patients?</p> <p><i>Dr. Russell responded yes; it is part of the strategic initiatives we’re working on. Using technology (EPIC) to send out personalized messages to patients (with uncontrol diabetes, etc.) requesting them to make an appointment to see their provider. Hopefully, we will be able to attach a link in the message that will take the patient into my health to book them an appointment. Using technology will make it easier for us to reach our patients and easier for patients to reach us.</i></p> <p>Mrs. Reyes stated she think it would be important for the CAL members to hear what the plans are for the Food pharmacies as well. Would that be something you could report on?</p> <p><i>Dr. Russell responded it would be another division. But she will be happy to take request to Population Health.</i></p> <p>Dr. Esmail Porsa, President/CEO</p> <ul style="list-style-type: none"> • Annual Health Fair held at Smith clinic. We provided education, cancer screening and various activities. There was a lot of participants. We received a grant from Survive Her to do additional Mammograms. Part of this activity includes the mobile mammogram unit that is going to different clinics. They were at Cypress today and will be going to Danny Jackson next. • Early voting starts two weeks from today. Election day is November 7th. As everyone is aware Harris Health has a 2.5billion dollar ballot proposal. I cannot tell you how to vote, but I would recommend all of you, your family and friends please vote. • We recently learned that a concrete company wants to build a plant across from the LBJ campus. Last week several members of the legislature, county attorney’s office and myself held a press conference on the campus of LBJ to raise awareness and ask the company to pull the permit request. 	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
October 9, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Administration (continued) There’s going to be a public hearing in December (date to be verified). I highly recommend those of you who are able to participate, please show up. Needless to say, it is not a good idea to build something we know is going to pollute the air, across from an existing hospital and also were we plan to invest tax payers’ money. Please write letters to your legislatures and show up at the hearing.</p> <p>Questions/Comments: None</p> <p>Gloria Glover, VP Business and Ancillary Operations on behalf of Dr. Jennifer Small, Executive Vice President, Ambulatory Care Service</p> <ul style="list-style-type: none"> • Mobile Mammogram is available for service. They will start at Cypress and then go to Danny Jackson. • New Podiatry contract started September 1st. The contract is ongoing with Lepow & Associates and extends podiatry service to all health centers. • There will be a Breast Cancer event on October 25th called Pink Out 2023. The celebration will be at Smith Clinic in the Healing Garden from 6:30pm to 8:30pm. • New Senior Operations Manager at Baytown and Strawberry Health Center. Vincent Steven comes with a good amount of experience and practice management from Michigan. • Our 1st Friday tour was on October 6th. We toured Settegast, LBJ Specialty, OPC, Margo Hilliard and Surgical Center. Next month we welcome you to join us. We will be touring MLK and the Dental Center. • Currently holding our Annual Lobby decorating contest, judging started today. <p>Questions/Comments: Mrs. Reyes asked, do you know the status of Settegast food pharmacy? <i>Mrs. Gibson responded, were in the design phase and it’s going to be located in our vending area.</i></p>	<p>Target completion: August 2024.</p>

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
October 9, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Administration (continued)</p> <p>Allyson Duong on behalf of Dr. Sunny Ogbonnaya, Admin. Director Outpatient Pharmacy & Pharmacy Business</p> <ul style="list-style-type: none"> Pharmacy Service Update: <ul style="list-style-type: none"> -Meds-To-Bed-delivers discharge prescriptions to patients’ room at no additional cost. -Post Discharge Follow Up Calls-patients receive follow-up calls from clinical pharmacist. -Interactive Voice Response Notifications -will text or call patients to let them know their prescriptions are ready for pickup or there on the way in the mail. -MyHealth for Refills-patient may request refills 24/7 from the comfort of their home. -Prescription Home Delivery- Prescriptions are mail to patients’ home and delivered in 3 to 5 business days. In September we dispensed 157,000. 62% were new prescriptions. We average 3.4 prescriptions per patient. 70% of prescriptions were home delivered. 24% were picked up by the patients. 6% were delivery via the Meds-To-Bed program.78% of refills were requested via MyHealth app. For the first time, we exceeded goal of 75%. <p>Questions/Comments: Mrs. Roquemore request presentations be sent to the CAL members for review before the meeting.</p> <p>Jon Hallaway, Program Director, Department of Public Safety (DPS)</p> <ul style="list-style-type: none"> This is security week, so council members if you are onsite, please say hello to the team and thank them for the job they do. They work very hard to keep track of our facilities. Workplace Violence-we are in the middle of big education campaign for all of our staff, contractors and volunteers to keep everyone safe. Badge concerns-please reach out to your Administrative Assistance for your respective teams. If you have any problems, please feel free to contact me. <p>Questions/Comments: None</p>	

**MINUTES OF THE HARRIS HEALTH SYSTEM COUNCIL AT LARGE COMMITTEE
October 9, 2023**

AGENDA	DISCUSSION	ACTION/S – PLAN/S RESPONSIBLE PERSON/S ASSIGNMENT/S TARGET DATE/S
	<p>Administration (continued)</p> <p>Patrick Casey, SVP Facilities, Construction & Systems Engineering</p> <ul style="list-style-type: none"> • Quentin Mease 5th floor is scheduled to be completed in February 2024. • Casa De Amigos project is in full swing. Phase 1 is scheduled to be completed the end of November. Next month, I will have some pictures to show the group of the finished work. <p>Questions/Comments: None</p> <p>Omar Reid, Executive Vice president, Chief People Officer, Human Resources</p> <ul style="list-style-type: none"> • Staff continues to stabilize, less turnovers. • Celebrating employees on November 4th at Fournace. <p>Questions/Comments: None</p>	
<p>VII. New Business</p>	<p>Ms. Goodie stated she received a text in her phone stating, this is Harris Health you may receive important messages and appointment reminders. For security purposes, I was wondering did anyone else receive a message?</p> <p><i>Dr. Porsa responded this is the new EPIC module “Hello World” that we are using to expand our communication with our patients. You can opt in to receive text communications from your providers.</i></p>	
<p>VIII. Adjournment</p>	<p>Motion to adjourn the meeting granted at 5:50pm.</p>	<p>Next Meeting: November 13, 2023</p>

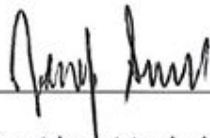
Thursday, December 7, 2023

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 December 2023 Operational Update**

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 – December 2023

**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
 - Budget Summary Report
 - Patient Satisfaction Report

Patients Served

Telehealth Visits

- Telehealth New Patients: 0
- Telehealth Return Patients: 18

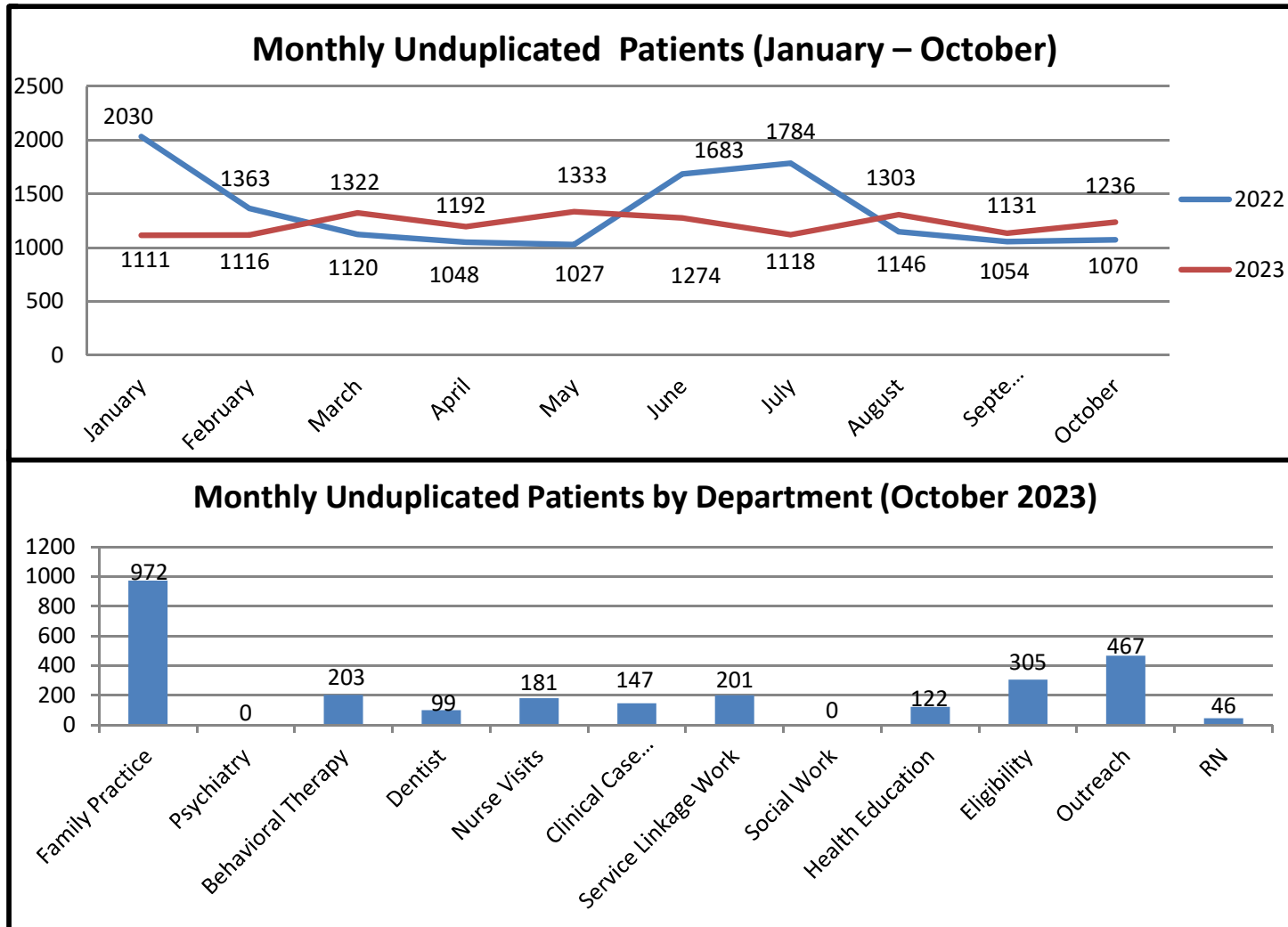
New Patient Visits

- Adult New Patients: 506
- Pediatric New Patients: 43

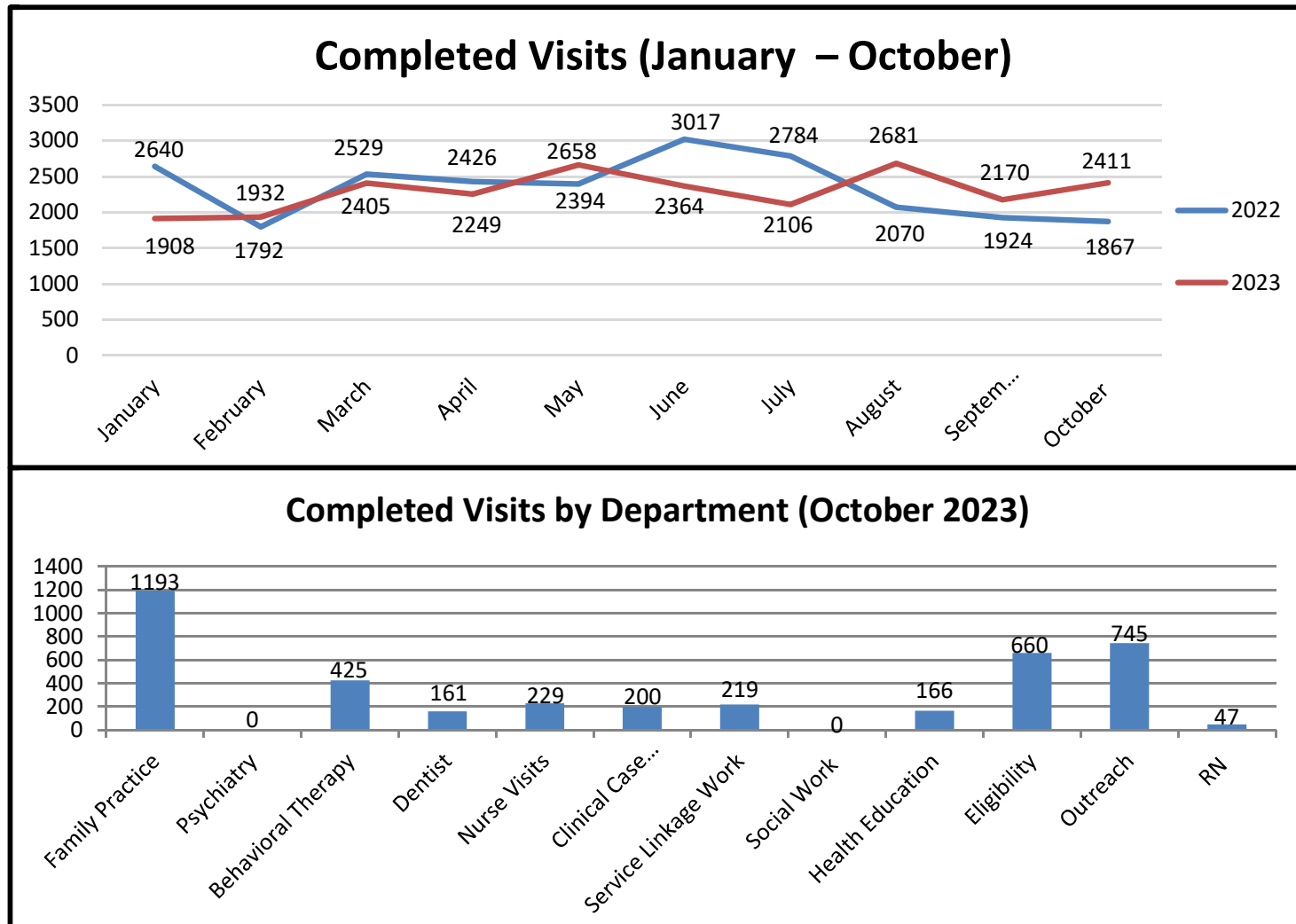
HRSA Target: 9775

- Unduplicated Patients: 6065
- Total Complete Visits: 23,016

Operational Update



Operational Update



Budget Summary Report

Multiple Award year budget is based on all federal and non federal grant awards received by the homeless department. The grant awards can range from an annual award to multiple years depending on the award.

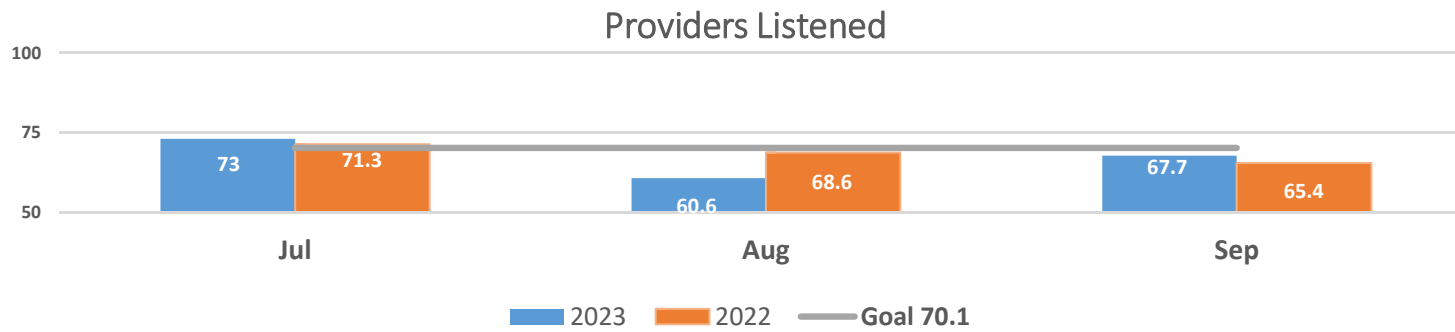
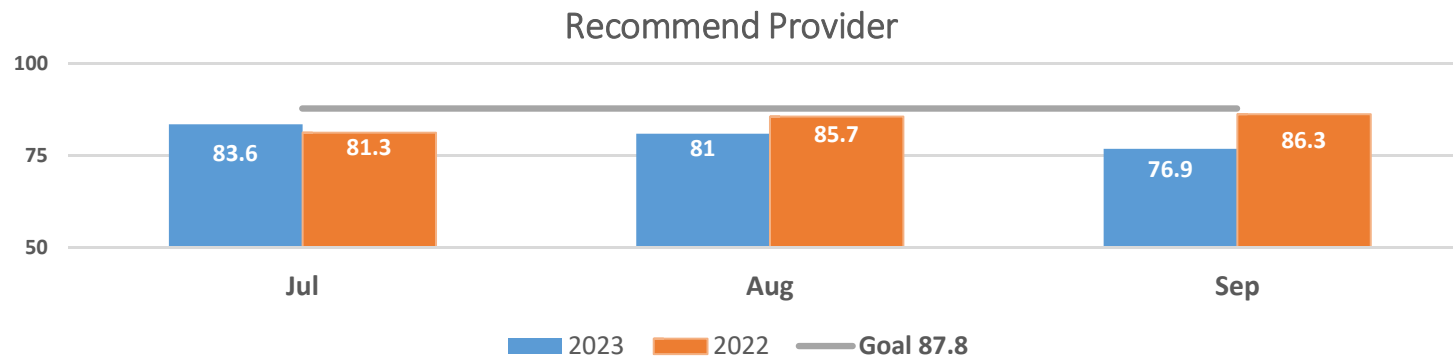
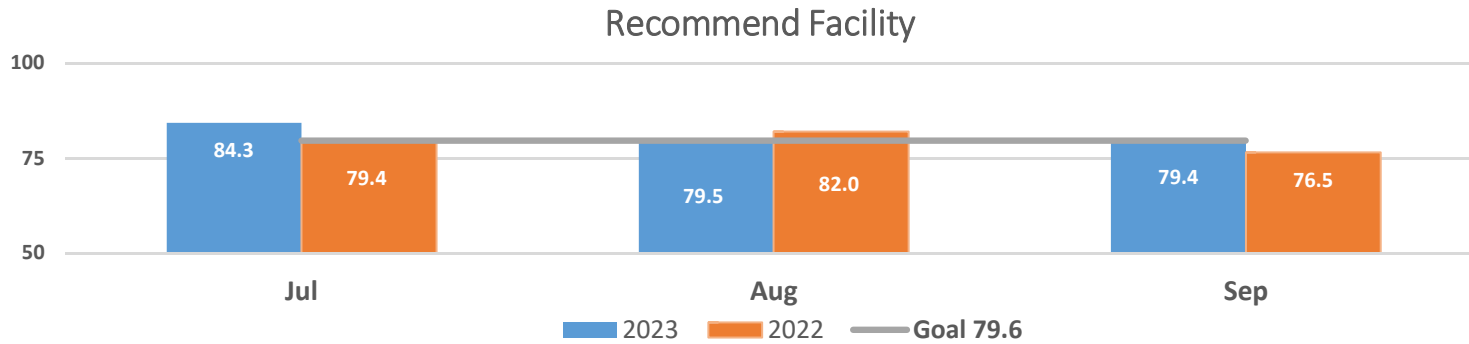
Homeless -Primary Grants and Harris Health Funding

Period: January 1, 2023 – December 31, 2023

YTD September 2023

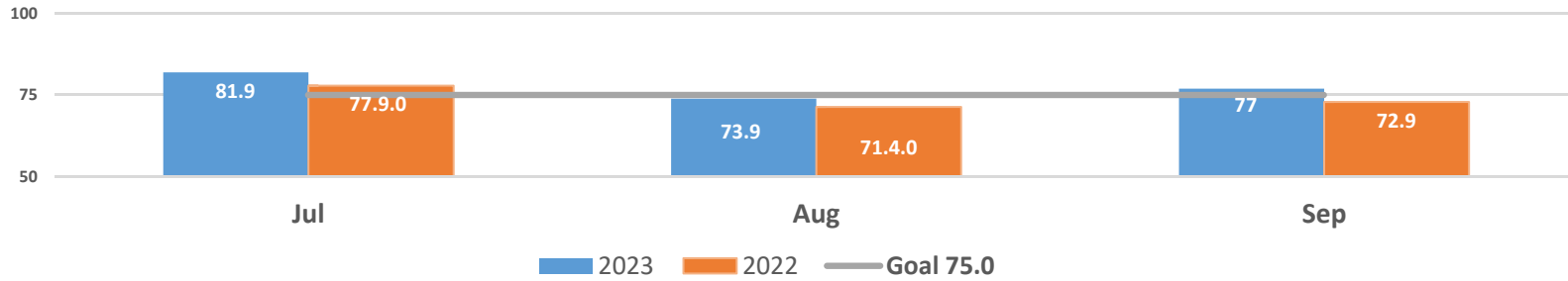
	Line Item	Multiple Award Year Budget	YTD Total Expense	Projected Expenses Through 12/31/2023	Remaining Balance (budget-projected expense)	%Used YTD
Operating	Personnel/Fringe	\$ 5,781,577	\$3,103,397	\$4,137,863	\$1,643,714	54%
	Travel	\$ 22,501	\$2,681	\$4,175	\$18,326	12%
	Supplies	\$ 1,021,863	\$342,848	\$505,184	\$516,679	34%
	Equipment	\$ 1,389,922	\$32,202	\$ 1,292,995	\$96,927	2.3%
	Contractual	\$ 260,677	\$114,620	\$ 152,827	\$107,850	44%
	Other	\$ 513,193	\$38,609	\$ 51,479	\$461,714	3.4%
	Total		\$ 8,989,733	\$3,634,357	\$6,144,523	\$2,845,210
Capital	Other	\$613,179.00	\$0.00	\$51, 500	\$561,679.00	0%
Total		\$ 9,602,912	\$3,634,357	\$6,196,023	\$3,406,889	38%

HCHP Patient Satisfaction Trending Data Q3

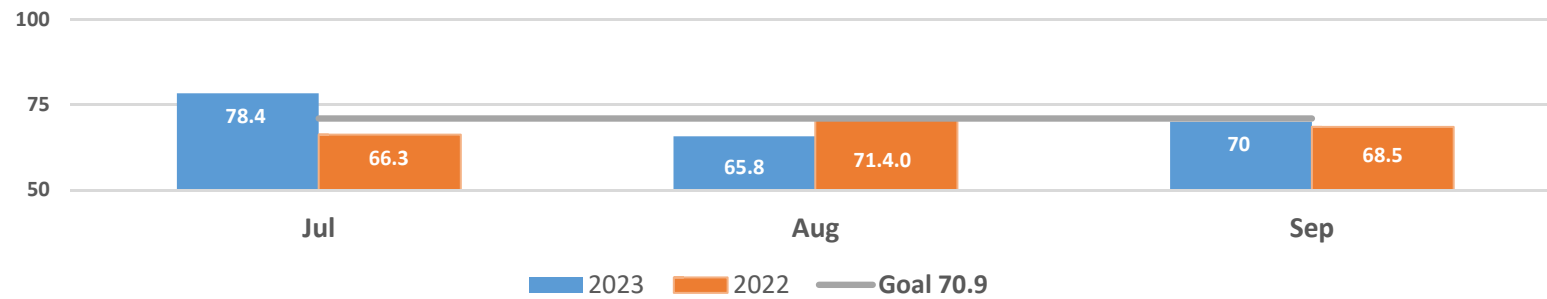


HCHP Patient Satisfaction Trending Data Q3

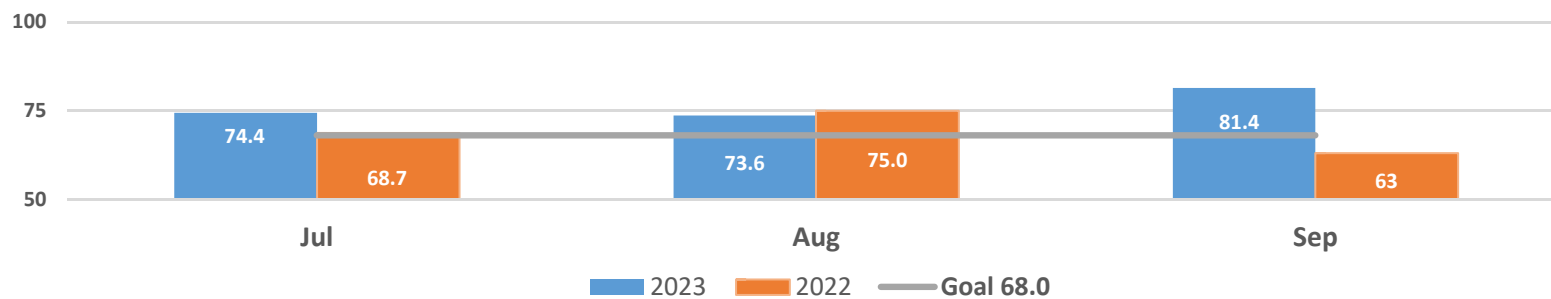
Nurses Listened



Good Communication Providers/Nurses



Wait Time



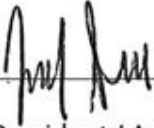
Thursday, December 7, 2023

Consideration of Approval 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 consideration of approval:

- **HCHP Budget Summary Report**

Administration recommends that the Board approve 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

Homeless Primary Grant & Non-Federal Funding
Period: January 1, 2023 - December 31, 2023
Reporting Period: January 1, 2023 - September 30,2023

	Line Item	Annual Budget	YTD Total Expense	Annualized Expenses	Remaining Balance(Budget-Annualized Expenses)	% Used YTD	% Used Annualized
Federal	Salary	\$ 4,457,309.16	\$ 2,421,430.21	\$ 3,228,573.61	\$ 1,228,735.55	54.3%	72.4%
	Benefits	\$ 1,114,267.88	\$ 571,506.35	\$ 762,008.47	\$ 352,259.41	51.3%	68.4%
	Travel	\$ 19,501.06	\$ -	\$ -	\$ 19,501.06	0.0%	0.0%
	Supplies	\$ 882,133.10	\$ 327,154.78	\$ 436,206.37	\$ 445,926.73	37.1%	49.4%
	Equipment	\$ 1,389,922.00	\$ 31,550.00	\$ 42,066.67	\$ 1,347,855.33	2.3%	3.0%
	Contractual	\$ 260,677.00	\$ 114,620.38	\$ 152,827.17	\$ 107,849.83	44.0%	58.6%
	Other	\$ 1,048,307.66	\$ 17,677.97	\$ 23,570.63	\$ 1,024,737.03	1.7%	2.2%
	Total	\$ 9,172,117.86	\$ 3,483,939.69	\$ 4,645,252.92	\$ 4,526,864.94	38.0%	50.6%
Non-Federal	Salary	\$ 175,000.00	\$ 100,218.08	\$ 133,624.11	\$ 41,375.89	57.3%	76.4%
	Benefits	\$ 35,000.00	\$ 10,242.65	\$ 13,656.87	\$ 21,343.13	29.3%	39.0%
	Travel	\$ 3,000.00	\$ 2,681.04	\$ 3,574.72	\$ (574.72)	89.4%	119.2%
	Supplies	\$ 139,729.48	\$ 15,692.74	\$ 20,923.65	\$ 118,805.83	11.2%	15.0%
	Equipment	\$ -	\$ 652.28	\$ 869.71	\$ (869.71)	0.0%	0.0%
	Contractual	\$ -	\$ -	\$ -	\$ -	0.0%	0.0%
	Other	\$ 78,063.97	\$ 20,931.29	\$ 27,908.39	\$ 50,155.58	26.8%	35.8%
	Total	\$ 430,793.45	\$ 150,418.08	\$ 200,557.44	\$ 230,236.01	34.9%	46.6%
Grand Total	Salary	\$ 4,632,309.16	\$ 2,521,648.29	\$ 3,362,197.72	\$ 1,270,111.44	54.4%	72.6%
	Benefits	\$ 1,149,267.88	\$ 581,749.00	\$ 775,665.33	\$ 373,602.55	50.6%	67.5%
	Travel	\$ 22,501.06	\$ 2,681.04	\$ 3,574.72	\$ 18,926.34	11.9%	15.9%
	Supplies	\$ 1,021,862.58	\$ 342,847.52	\$ 457,130.03	\$ 564,732.55	33.6%	44.7%
	Equipment	\$ 1,389,922.00	\$ 32,202.28	\$ 42,936.37	\$ 1,346,985.63	2.3%	3.1%
	Contractual	\$ 260,677.00	\$ 114,620.38	\$ 152,827.17	\$ 107,849.83	44.0%	58.6%
	Other	\$ 1,126,371.63	\$ 38,609.26	\$ 51,479.01	\$ 1,074,892.62	3.4%	4.6%
	Total	\$ 9,602,911.31	\$ 3,634,357.77	\$ 4,845,810.36	\$ 4,757,100.95	37.8%	50.5%