

**BEXAR COUNTY BOARD OF TRUSTEES FOR
MENTAL HEALTH MENTAL RETARDATION SERVICES d/b/a
THE CENTER FOR HEALTH CARE SERVICES**

Regular Board Meeting

Tuesday, February 9, 2021

(Via Zoom)

6:00 p.m.

TRUSTEES PRESENT: Daniel T. Barrett, Chairman
Mary Rose Brown, Vice Chairman
Donnie Windham Whited, Secretary
Graciela Cigarroa, Treasurer
Roberta L. Krueger, M.D.
Laura Parker, Judge
Polly Jackson Spencer, Ret. Judge
Richard Usatine, M.D.
Margaret M. Vera

TRUSTEE ABSENT: Sheriff Javier Salazar

STAFF PRESENT: Jelynn LeBlanc Jamison, President/Chief Executive Officer
Adrienne Alcazar, VP/People & Culture
Brad Benoit, VP/IDD & Long Term Care
Tremaine Butler, Chief Information Officer
James Chapman, Chief Compliance Officer
Juanita Cordero-Rodriguez, VP/Adult Behavioral Health
Marie Fraire, Director/Nursing
Frank Garza, General Counsel
Lauro Garza, VP/Occupational Safety Risk Management
Ashley George, Director/Integrated Marketing & Communications
Allison Greer-Francis, VP/Governmental Relations
Robert Guevara, Chief Financial Officer
Sascha Kaster, Director/
Rene Olvera, M.D., Chief Medical Officer
Jesse Peralez, VP/Restoration & Transformation
Omar Qassom, VP/External Provider Network Development
Leonard Rodriguez, Director/Development
Melissa Tijerina, VP/Child Behavioral Health
Adam Velez, Director/Contracting & Procurement
Linda Cantu-Costilla, Senior Executive Assistant/Board Liaison

GUEST PRESENT: Lynn Blakeley, CPM, CCIM, Blakeley Commercial Real Estate
Kyle O'Connor, President, MLL Capital

The regular meeting of the Bexar County Board of Trustees for Mental Health Mental Retardation Services d/b/a The Center for Health Care Services was held on Tuesday, February 9, 2021 via zoom.

**CALL MEETING TO ORDER
CERTIFICATION OF QUORUM**

Mr. Barrett called the meeting to order at 6:02 p.m., with the following trustees present: Mses. Brown, Cigarroa, Parker, Spencer, Vera, Whited; and Drs. Krueger and Usatine; thereby establishing a quorum.

A moment of silence was observed in honor of Judge Polly Jackson Spencer's daughter and Sheriff Javier Salazar's mother.

PLEDGE OF ALLEGIANCE - Led by Chairman Daniel Barrett

CITIZENS TO BE HEARD – No citizens presented to be heard.

EXECUTIVE SESSION

At 6:05 p.m., Mr. Barrett called for the order of the agenda to be modified in order to move into Executive Session per Texas Government Code, Sections:

551.071 (Consultation with General Counsel) and 551.072 (Real Estate Matters):

Advice and guidance on the possible sale of CHCS property

OPEN SESSION

The Board reconvened into Open Session at 6:39 p.m., at which time it was announced that no formal action or votes had been taken in closed session.

1. APPROVAL OF MINUTES

Minutes of the Regular Board Meeting of December 8, 2020 were presented for review and approval. Dr. Usatine moved for approval as presented; Ms. Brown seconded the motion. Motion carried.

2. BOARD CHAIRMAN'S REPORT

In accordance with Government Code, Chapter 551.005; Texas Administrative Code, Chapter 411.310; and Texas Health & Safety Code, Chapter 534.006; members of the board received annual training on the following topics:

- Open Government
- Ethical Code of Conduct/Corporate Compliance
- Consumer Rights, Advocacy, Confidentiality/HIPAA Privacy and the Prevention of Client Abuse, Neglect and Exploitation
- Cultural Competency

Also in accordance with CARF accreditation requirements, members of the Board were asked to provide feedback via the Board assessment and self-assessment surveys and return them to the Executive Admin Office.

Members of the Board also received a brief demo presentation on Board Effect – a board management platform, which will go into effect with the April 2021 board meeting. Further information/instructions will be forthcoming in the next few weeks.

3. PRESIDENT/CHIEF EXECUTIVE OFFICER'S REPORT

- Leadership Briefing
- Ms. Burley reported that the performance evaluation period for all employees was successfully completed and accomplished. As a result of some unspent dollars, the Center was able to provide a \$250 COVID service payment to all employees in acknowledgement for their outstanding manner in which they responded to the demands of the organization and our consumers throughout the year. Also, in addition to the meriting they earned for their performance throughout the year, the Center was able to provide a \$100 HEB gift card to all of the employees in preparation for the upcoming holidays.
- In our re-open efforts, we continue to operate at a level 2 in which we continue to monitor all of our clinic censuses to ensure we are conducting services in a reduced census. The majority of services are still being conducted through virtual access either through telephone or via telehealth. There are some increases in some of the programs who require more intensive management but for the most part we continue to operate at 70% virtual.
- Administrative staff continue to work in different shifts and will continue until we can sustain a low level of positivity rate for the community.
- The University Health System has reached out to us to include our employees in their vaccination efforts and we have had over 400 employees vaccinated. We have another group of employees on a waiting list, waiting for UHS to have the available vaccine for them.
- We are approaching the end of the DSRIP Program in 2021. However, a ten-year extension has been authorized until September 30, 2030. We are still trying to understand what this means for the Center. Basically, two pools of dollars have been created, one is a direct payment pool and the other a charity care pool. We know that we will be eligible for the direct payment pool due to our CCBHC certification.

We are still learning on the charity care but it appears that it will pay for primary care services and other preventive care for those suffering with chronic disease. This is good news for our consumers because that means they can continue to receive integrated care from CHCS and we will get paid for those services.

- We have an upcoming CARF review in the March timeframe. It is a requirement of our OATS Program but they are including our sobering and OSAR programs this year. Staff is already working in preparation for that review and we have met with our Board Chairman as well in preparation for interviews with the CARF surveyors.
- In regards to the implementation of the new Electronic Health Record, she reported that the members of the Steering Committee are heavily involved in the design, review and validation phase of the EHR implementation, and noted that each member of the committee has a specific accountability on all of the work efforts going into the new EHR. Mega-users will begin training in March and will follow the train-the-trainer model to begin training our workforce. NetSmart, our vendor for the EHR, has identified some high-risk areas for us relating to some recent turnover in the IT Department and we are already working on those. CHCS has also identified some high-risk areas for them as well in the area of staffing and resource allocation as they relate to state reporting requirements and are working with our State user group and NetSmart to ensure the proper resources are in place. Go-live date for the new EHR is August 1, 2021.
- Work location changes – The Board approved an agreement with the Bexar County Housing Authority for a building located at 1954 E. Houston Street for relocation of our eastside clinic. Although there have been some delays, their board has been very responsive and we anticipate our move for the end of April 2021.
- Due to the terming of our lease on the Packard building located on North Main, our justice programs will be moving to a new location on North San Saba. More space to consolidate some of our justice programs and create a mock courtroom to prepare our consumers for their court appearances. This will also bring our justice programs to a more centralized area where they will be closer to the courts that they work so closely with.
- Renovations are also taking place at the CBH clinic on Bandera Road to provide for a brand new lobby for our consumers and their families. Also working to enhance some of the work areas for the staff to provide for better treatment areas for our consumers. We are also working to move the CBH intake staff to a store front location at the same Bandera location.
- Our residential program currently operating on the Haven Campus will be moving to a new location in the next month or so. COSA and Haven are renovating a building adjacent to the Haven Campus and that's where our program will move to. We will continue to work with Haven to ensure that all of our proper protocols are still in place. We think that with the overall design of that facility, we might be able to increase the overall program census. Right now we are still operating at 50% due to the pandemic.

- Working with Turner Construction on finishing out a portion of the second floor of the Paul Elizondo Clinic with additional dollars received from the County. This will help us to achieve social distancing and also to see more consumers once Covid restrictions are lifted.
- Ms. Jamison acknowledged the Foundation staff for their hard work and dedication to the Mental Health First Aid (MHFA) Program. The program has really grown. The Foundation is partnering with the Bridges to Care Program which has as many as 300 congregations in their program. Our role is to train all of the wellness champions that are designated by the participating congregations on MHFA. We anticipate that the partnership will continue to be a huge success as Bridges to Care continues to grow in enrolling more congregations.
- Have also entered into a partnership with ACCD to provide MHFA training to faculty members at all of their facilities. Also working with the Advocacy Services Department (ASD) at ACCD where they deal with students who are in need of services, i.e., counseling, anything they might need to support their efforts while in college. We are working directly with ASD so that they understand our crisis protocol and we are designating a contact person for them should students need more counseling and/or crisis services. In addition to that, we are providing a designee in our enrollment area so that as counselors are working with students and it is indicative that a student needs a higher level of assessment for a diagnosis, they have a direct contact.
- Reported on two grants – 1) West Care Texas and San Antonio Fighting Back to provide MHFA training; and 2) SACADA – they are pursuing a SAMHSA grant that we were initially looking to pursue. However, in speaking with SACADA, it was determined that they would be the better entity with a much broader reach in their proposal. We decided to partner with them and provide the MHFA training for that proposal and support their efforts.
- Chief Medical Officer's Report – *Dr. Rene Olvera*
- Contracts executed by the President/CEO over \$50,000 and under \$100,000 for the months of December 2020 & January 2021

4. **INDIVIDUAL ITEMS FOR REPORT, DISCUSSION & APPROPRIATE ACTION**

EXECUTIVE COMMITTEE (*Daniel T. Barrett, Chair*)

The following item was pulled from the agenda:

1. Discussion and Possible Action to Approve the Mural Design for the City of San Antonio Public Arts Project to be located on the east facade of the Paul Elizondo Adult Behavioral Health Clinic, 928 W. Commerce, San Antonio, Texas – *Jelynn LeBlanc Jamison*

FINANCE COMMITTEE (*Mary Rose Brown, Chair*)

2. Acceptance of the Center's Financial Statements for the period ending October 31, 2020 and November 30, 2020 – *Robert Guevara*

Mr. Guevara reported that the Center's financials for the month of October 2020 had ended with an overall gain of \$331 thousand; bringing the Y-T-D to \$341 thousand. We have recognized \$609 thousand in planned reserve expenditures; therefore, our overall position through the month of October is a positive \$951 thousand with all funds recognized. Waiver funding has been recognized in the amount of \$2.2 million; that's \$591 thousand below the Y-T-D expense budget. The Y-T-D revenue budget was reported slightly over \$19 million; actual revenue reported was \$16.7 million. The shortfalls noted do not impact the Center's bottom line.

Strategic Plan Revenues were reported short by \$307 thousand (9.5%), mainly in Restoration and Long Term Care. Both of these areas have the biggest impact in dealing with Covid. However, the \$307 thousand is offset by maintaining expenses in a positive \$2.1 million (11.48%). The budget for Service Revenue is \$2.032 million; we are slightly over \$2.1 million; exceeding the budget by \$89 thousand. The monthly budget for Service Revenues was \$1.039 million; the actual was \$1.1 million; exceeding the monthly budget by \$100,000. Daily billable revenue was averaging at \$51 thousand; we exceeded that average by 4600. Last year, we were averaging about \$46 thousand so we have increased our daily average by 4300. The budget for Medicaid Rehab was \$304 thousand; we ended the month with a positive \$312 thousand; exceeding the target by \$12,800. Fund balance was reported at \$36.6 million; investments in TexPool decreased by \$4 million with interest slightly over \$2000. The total profit margin with all funds included was a positive 5.5%. October was a pretty strong month financially.

For the month of November, the Center's financials ended with a loss slightly over \$77 thousand; bringing the Y-T-D to \$264 thousand. We have recognized \$720 thousand in planned reserve expenditures; therefore, with all funds recognized, we are at a positive \$985 thousand for the first three months of the fiscal year. Waiver funding recognized was reported at \$3.2 million; under recognized by \$1 million. That does not impact the bottom line until the end of the fiscal year when we are able to recognize the full waiver dollars. The Y-T-D revenue budget was reported at \$28.6 million; actual revenue reported was \$24.8 million.

Strategic Plan Revenues were reported short by \$529 thousand (10%); offset by maintaining expenses (positive \$3.3 million/12%) to fill that revenue shortfall. Service Revenues exceeding the budget by \$174 thousand; ending Y-T-D at \$3 million. Service revenues for the month of November exceeding the budget by \$84 thousand; ending the month at \$935 thousand. Daily billable revenue was averaging at \$51,982; we exceeded the average by 4700. Last year, we were averaging about \$46 thousand so we have increased our daily average by about 4300-4400. We did have a lag on Medicaid Rehab but overall through the first three months of the fiscal year, we are meeting our budget by \$6600. Last year, we were averaging about \$304 thousand, this year we are averaging at \$307 thousand.

Fund balance was reported at \$36.1 million; investments in TexPool decreased by \$4.3 million with interest earned at \$1300. The total profit margin with all funds recognized was a positive 5.47%.

In conclusion, Mr. Guevara reported that we had exceeded our service revenue target for the month of December and are trending in that same direction for the month of January as well. Service Revenues were reported strong for the first five months of the fiscal year.

Ms. Brown moved for acceptance of the financials as presented; Ms. Whited seconded the motion. Motion carried.

3. Approval for the President/CEO to negotiate and execute an Agreement for Lease of Space at 315 N. San Saba – *Adam Velez*

That the Board of Trustees approve for the President/CEO to negotiate and execute an agreement for the lease of space at 315 N. San Saba.

This space would house all of the Justice Programs (Assisted Outpatient Treatment, Mental Health Court, Community Reintegration and Community Alternatives to Incarceration) and the Center's Foundation staff currently located at the Packard building, 1123 N. Main. This would also allow for the construction of a mock courtroom and the move of the Outpatient Competency Restoration and Court-Ordered Treatment programs currently housed at the Palo Alto location. If approved, this lease would be effective March 1, 2021.

Ms. Brown moved for approval; Dr. Krueger seconded the motion. Motion carried.

4. Approval for the President/CEO to negotiate and execute an Interlocal Agreement with The University of Texas Health Science Center at San Antonio for the Chief Medical Officer Services – *Adam Velez*

That the Board of Trustees approve for the President/CEO to negotiate and execute an Interlocal Agreement with The University of Texas Health Science Center at San Antonio (UTHSC-SA) for the provision of Chief Medical Officer Services.

The Interlocal Agreement is for an initial term of thirty-eight (38) months, commencing May 1, 2021 and ending June 30, 2024.

Ms. Brown moved for approval; Dr. Usatine seconded the motion. Motion carried.

PLANNING & OPERATIONS COMMITTEE (*Polly Jackson Spencer, Chair*)

5. Approval for the President/CEO to negotiate and execute a contract with Quest Diagnostics Clinical Laboratories, Inc. for the provision of laboratory services – *Adam Velez*

That the Board of Trustees approve for the President/CEO to negotiate and execute a contract with Quest Diagnostics Clinical Laboratories, Inc. for the provision of Laboratory Services.

Subject to approval by the Board, and successful negotiation by the President/CEO, the proposed contract will commence February 1, 2021.

Judge Spencer moved for approval; Ms. Whited seconded the motion. Motion carried.

6. Approval for the President/CEO to negotiate and execute a contract with Donald L. Mooney, LLC d/b/a Nurses Etc. Staffing for the provision of Temporary Nurse Staffing Services – *Adam Velez*

That the Board of Trustees approve for the President/CEO to negotiate and execute a contract with Donald L. Mooney, LLC d/b/a Nurses Etc. Staffing for the provision of temporary nurse staffing services.

The proposed contract will be for an initial term of three (3) years and the Center shall have the option to renew under the same terms and conditions for up to two (2) additional one (1) year extensions.

Subject to approval by the Board, and successful negotiation by the President/CEO, the proposed contract will commence February 1, 2021.

Judge Spencer moved for approval; Dr. Krueger seconded the motion. Motion carried.

REPORTS

At this time, Mr. Barrett asked Dr. Olvera to provide his Chief Medical Officer's report.

Dr. Olvera thanked the Board for their support and reported on the following:

- The Harvard Eastside Clinic historically only had three psychiatric NPs. Over the holidays, they went down to two. Since the last board meeting an additional two NPs were hired for a total of four.
- We also have a Letter of Commitment from a graduating psychiatrist who will be joining us this summer. Harvard has never had a psychiatrist.
- Additionally, UHS recognized our commitment to integrated care so we were able to recruit a Family NP, so for the first time the Eastside Clinic will be able to provide a full array of services much like PEC and Northwest Clinic.
- We have now vaccinated approximately 450 of our employees, thanks to our partnership with UHS. Some of our prescribers also took advantage of receiving their vaccination through the Bexar County Medical Society and other locations.
- We still have many prescribers and staff who are waiting to get vaccinated. We are in constant communication with UHS. Hopefully we can get all of our staff vaccinated in the next few months.

- The Center is also making plans to be vaccinators for our patients. Our primary care department has taken inventory of our freezers and updated them with data monitors as part of our application through DSHS to access vaccines for our patients. Our application is complete and we are awaiting word regarding future distribution. He believes that we could become the prime option for many of our patients.
- **TEXAS COUNCIL OF COMMUNITY MHMR CENTERS INC. BOARD** – *Daniel T. Barrett*

Mr. Barrett reported that he had been unable to attend the last meeting but he did receive the minutes from that meeting so he will review and provide a full report to the Board at the next meeting.

- **TEXAS COUNCIL RISK MANAGEMENT FUND BOARD** – *Robert Guevara*

Mr. Guevara reported that the renewal process is getting underway; renewal notices will be going out in February, and the actual review process will begin in March. The overall net position is \$35 million and they have determined that \$21 million can be utilized for rate stabilization.

- **TEJAS HEALTH MANAGEMENT BOARD** – *Robert Guevara*

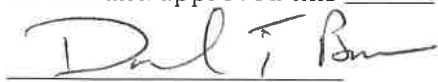
Mr. Guevara reported on last week's Tejas Board meeting:

- They are conducting a CEO search now that Charlie Boone is retiring.
- They have identified the top five applicants.
- Effective August 31, 2021, El Paso will be pulling out of the Tejas. They will continue to pay for some products (reports) but will no longer be members. Since they were not a founding member, they did not have an investment. They were only responsible for their monthly contribution. This brings the number of members down to five.

ADJOURNMENT

There being no further business to discuss, Mr. Barrett called for a motion to adjourn. Dr. Krueger moved for adjournment; Ms. Whited seconded the motion; and the meeting was adjourned at 8:25 p.m.

Passed and approved this 13th day of April, 2021.



Daniel T. Barrett
Board Chairman



Donnie Windham-Whited
Board Secretary