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

Regular Board Meeting 6800 Park Ten Blvd, Suite 200-S San Antonio, Texas 78213 Tuesday, June 11, 2024 6:00 p.m.

TRUSTEES PRESENT: Daniel T. Barrett, Chairman

Mary Rose Brown, Vice Chair (Virtual) Donnie Windham Whited, Secretary Polly Jackson Spencer, Ret. Judge

Roberta Krueger, M.D. Sandee Marion, Ret. Judge

TRUSTEES ABSENT: Graciela Cigarroa, Treasurer

Richard Usatine, M.D. Margaret M. Vera

STAFF PRESENT: Jelynne LeBlanc Jamison, President/Chief Executive Officer

Tremaine Butler, Chief Information Officer James Chapman, Chief Compliance Officer

Frank Garza, General Counsel

Robert Guevara, Chief Financial Officer Dr. Amber Pastusek, Chief Medical Officer Venisa Saenz, Chief of Staff/Board Liaison

Cynthia Martinez, Director of Consumer & Employee Safety Risk Mgmt.

Allison Greer, VP of Governmental Relations Jesse Peralez, VP of Community & Crisis Response Juanita Rodriguez-Cordero, VP of Center of Excellence

Burt Santos, Sr. Director of Center Care

Adam Velez, Sr. Director of Contracts & Procurement

Ashley Esparza, Interim Director, Integrated Marketing & Communication Jennifer Flores, Manager of Customer Service & Performance Reporting

Randa Gipson, Director of Contracts & Procurement

Jennifer Hussey, Director of Compliance

Carolina Pedroza, Sr. Program Support Analyst

Tab Montemayor, Community Behavioral Health Analyst

Cynthia Hinton, Executive Assistant

GUESTS PRESENT: George B. Hernandez, President/CEO, University Health System

Hunter Stanco, Morgan Stanley

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, June 11, 2024, at the Administrative Offices located at 6800 Park Ten Blvd, Suite 200, San Antonio, Texas 78213.

CALL MEETING TO ORDER CERTIFICATION OF QUORUM

Mr. Barrett called the meeting to order at 6:03 p.m., with the following trustees present: Mses. Cigarroa, Krueger, Marion, Spencer, Vera, and Dr. Whited, thereby establishing a quorum. Mse. Brown attended virtually.

PLEDGE OF ALLEGIANCE - Led by Mr. Barrett

CITIZENS TO BE HEARD – Mr. Lance Aaron thanked the Board for the opportunity to speak. He stated he has a daughter with severe persistent mental illness that manifested when she was in elementary school. She has been in the State Hospital, and right now she is a patient of the Center. He has several complaints and comes to advocate as a parent for his daughter and ask for assistance with getting her mental health report. Mr. Barrett thanked him for coming. Ms. Jamison told him that she has asked one of her staff members to visit with him before he leaves.

I. APPROVAL OF MINUTES

Mr. Barrett asked for a motion to approve the Minutes of the April 9, 2024, Regular Board Meeting, which were presented for review and approval. Dr. Whited so moved for approval as presented; Judge Spencer seconded the motion. Motion carried.

II. BOARD CHAIRMAN REPORT - Daniel Barrett

- Mr. Barrett introduced with great honor and distinction, Mr. George Hernandez from University Health System who is retiring, and gave nice comments about him. He told Mr. Hernandez the University Hospital has become not a hospital of last resort but a hospital of first choice, and for that he thanked Mr. Hernandez who has done splendid work for thirty years. Mr. Barrett then presented Mr. Hernandez with a gift, mentioned that Mr. Hernandez was on the Center's Board from 2000 2008 and has always been a great friend to the Center. The Center appreciates all he has done and continues to do.
- Mr. Hernandez thanked Mr. Barrett and stated it has been an honor to have had the ability to be the CEO of University Health System for nineteen & a half years. He gave a short speech, then thanked everyone for the invite and the recognition.

III. PRESIDENT/CEO REPORT

Leadership Briefing

Ms. Jamison mentioned her report will be brief because the Board has their annual training to do, and reported on the following:

• Service Recognition Awards Ceremony will be held August 16 at Noon, the Friday after the August Board Meeting. She is giving the Board early notice and would love for them to attend. It is when they recognize the various levels of tenure for all the employees.

- Next week is the Texas Council Conference. We have been notified that the Center has won the 2023 Outstanding Achievement and Liability Loss Prevention Safety Award. The award will be accepted at the Texas Council Conference on Monday, June 17. This is the Center's second year winning.
- Andrew Estrada will be joining the Center on June 24. He is a 31-year Deputy Chief with the San Antonio Fire Department and has retired from the City of San Antonio last week. He will lead all the Center's Crisis Response activities as well as the Crisis Line. We are excited to get someone with his expertise and passion about mental health, and who had created the mental health unit at the Fire Department.
- There are informational items on the agenda that staff fully presented to the Planning & Operations Committee. There are summaries for each one of those reports. Staff will not be presenting them because of the training that the Board must do this evening. If there are any questions on those items, there are staff here that can answer those questions.

Chief Medical Officer's Report

Dr. Pastusek greeted the Board and reported the following:

- Establishing an MOU with UTSA for the forensic justice program area. This previous position had been a locum tenens position with high turnover. If you are turning over a doctor in an area frequently, then quality of care can be a concern. Utilizing an MOU with UTSA will strengthen the Center's partnership with them and reduce our utilization of locums in that area.
- Actively interviewing for complex care and enrollment psychiatric provider positions. Hoping to get those filled over the next couple of months.

Contracts executed by the President/CEO over \$50,000 and under \$100,000 for the months of April 2024 and May 2024

There were none.

IV. CONSENT AGENDA

- 1. Review/Approve Acceptance of the CY 2024 First Quarter Performance Report of the Center's 401(a) and 457(b) Accounts from Morgan Stanley *Hunter Stanco*
- 2. Review/Approve the Proposed Membership to the Center for Health Care Services Foundation Board *Leonard B. Rodriguez*
- 3. Review/Approve Acceptance of the Center's Financial Statements for the period ending February 29, 2024, and March 31, 2024 *Robert Guevara*
- 4. Review/Approve authority for the President/CEO to Negotiate/Execute a Contract with Prosumers International for the Provision of Consumer Operated Services *Adam Velez*
- 5. Review and Approve authority for the President/CEO to Negotiate/Execute a Contract with Pamela W. Deegear for the Provision of Grant Writing Services *Adam Velez*
- 6. Review/Approve authority for the President/CEO to Negotiate/Execute a Contract with Relias, LLC for the Provision of a Learning Management System *Adam Velez*
- 7. Review/Approve authority for the President/CEO to Negotiate/Execute a Contract with Canon U.S.A. Inc. for the provision of a Center Print Shop Printer *Adam Velez*
- 8. Review/Approve a Resolution authorizing the President/CEO to request to the Texas

Department of Housing and Community Affairs (TDHCA) to become a Reservation System Participant to access HOME funds an authorizing the Clinical Director to execute certain documents on behalf of The Center for Health Care Services – *Robert Guevara*

Mr. Barrett asked for a motion to accept the Consent Agenda. Judge Spencer so moved; Dr. Whited seconded. Motion carried.

V. INDIVIDUAL ITEMS FOR REPORT, DISCUSSION & APPROPRIATE ACTION

1. Review and Recommendation to the Board of trustees for Acceptance of the Budget Assumptions and Center Wide Targets for Fiscal Year 2025 – *Robert Guevara*

FY 2025 Budget Priorities and Business Planning

Mr. Guevara shared with the Board the resolve of the Center's Budget Planning and Business Plan Session that was held on April 19. Also included is the overall Center Wide Goals and the Budget Assumptions for FY 2025 that were presented to the Center Advisory Committee on May 15, and approved by the Finance Committee on May 16. He stated moving forward there are three things happening in our environment: 1) Need to make sure we are seeing people by keeping the scheduled appointments to see consumers, 2) Need to make sure we are documenting those services appropriately so there is a complete medical record for the individual, and 3) Making sure we are reporting timely to funding sources. He went over the importance of doing those three things going forward. The Directed Payment Program (DPP) is related to services that the Center provides to individuals enrolled in various MCO payors, valued at \$3.5 million. The other component is the Charity Care Program (CCP) which is reimbursement for services provided to individuals not covered by MCOs and is valued at \$37.8 million. Both programs are requiring the Center to make sure that we see individuals, report these individuals were seen, and report care was provided. When looking at it from a fiscal perspective, about 72% of the Center's funding sources requires two of these three things; see people, document accurately/appropriately, and report services were provided. The entire model is shifting in that direction.

Current Business Model Assumptions

- Align staffing resources to make sure the Center can meet the census targets.
- Created specific unit to make sure the scheduled seven hundred appointments are kept.
- Established productivity and direct service targets by ensuring people were able to schedule those appointments and see them timely.
- How it is reported through the revenue cycle process to make sure billing is on time, reporting accurately, and presenting to payors

He then went over the FY 2024 Year End Financial Projections and the Service & Quality Improvement Recommendations.

FY 25 Center Wide Goals Gating Metrics

Performance Goals are split into three categories in which an individual will be graded on: 1) 10% of Goals are Center-wide metrics, 2) 70% on Individual metrics and how they contribute to our overall business plan, and 20% on Core Values metrics. For the Center, target for Training is 75%, Wellness is 90% of those participating in the platform, and 95% for Phishing. Mr. Guevara continued to go over the Safety Metrics, Fiscal Metrics Scheduling & Appointments Metrics,

Productivity Metrics, and Services Completed Metric. Questions ensued.

Budget Assumptions for Fiscal Year 2025

- DPP revenue is estimated at \$4.2 million and CCP revenue is estimated at \$37.8 million.
- General Revenue is budgeted at \$29.5 million with no increase/decrease, Local Match will be 9% of the General Revenue
- Estimating current SB 292 and PPB funding will continue to work with local hospital partners. The Center is scheduled to receive additional funding from HHSC for the psychiatric beds an estimate of an additional \$7.6 million per year.
- Total projected revenue for FY 2025 is \$141 million, which includes \$18.6 million for Patient Service Revenue.

Questions/discussion ensued regarding psychiatric beds.

Next Steps are to bring the budget to the Finance Committee on July 18, 2024, and then to the August 13, 2024, Board Meeting. Mr. Guevara shared that the environment is changing for FY 2025, which includes the goals and major budget assumptions. He then went over each of the FY 2025 Budget Planning Assumptions for Local, Expenses, and Program Changes.

Mr. Barrett asked for a motion to approve the FY 2025 Budget Assumptions and Center Wide Targets for FY 2025. Judge Marion so moved; Judge Spencer seconded. Motion carried.

Ms. Jamison stated that Mr. Beach, Chair for the Center Advisory Committee (CAC), had been invited to this Board Meeting and could not attend because of a conflict. Mr. Guevara had mentioned that the CAC had approved the assumptions. Mr. Beach will be at a future Board Meeting because part of our CCBHC requirement is to invite the CAC Chair to the Center Board Meetings.

2. Cyber Security FY 2024 Mid-Year Report – Tremaine Butler

Mr. Butler began by stating that all the things happening in the Cyber world is not changing, is not going away, and is getting worse. He stated that recently CentroMed, one of the Center's partners, was faced with a breach that had them offline and had to work with paper for more than a month and is still deciding whether to pay the ransom or not. Mr. Butler wants to inform the Board as to what the Center is doing to prevent these Cyber threats happening to the Center.

Mr. Butler reported on the following:

- Pre-Ransomware CHCS had six security measures in place in 2019, minimal security measures which are required for anyone in business. He wants to make sure they have backup solutions, that there is an Analyst on their team looking at Cyber and have firewalls to prevent things from coming into their environment.
- Post-Ransomware CHCS has implemented additional security measures. Security measures are now more robust and presently have seventeen security measures in place, to include two firewalls, better email security, educating team members, and 24/7 monitoring service. Constantly trying to stay on the proactive.

- Three of the measures were consolidated under Artic Wolf Extended Detection and Response, Managed Endpoint Detection, and Vulnerability Management. With Arctic Wolf, the Center has better visibility and was cost effective by saving \$40-\$50 thousand per year on consolidating that solution into one rather than have fifteen different applications.
- The security posture timeline showed the progressive and continuous progress made since the ransomware event occurrence in December 2019 to present.
- The Center has not only invested in technology but in people. Now have a Cyber Manager, three dedicated support people who do not focus solely on Cyber but also our systems, and all over the server back-end things that are pertinent to the Center being successful. We invested in those people, invested in their learning, education that they are taking, taking training opportunities, attending cyber meetings and podcasts to make sure they are staying updated with the latest.
- They are still getting their disaster site up and running.
- Mid-year metrics were presented:
 - O Digital Defense determine the severity of vulnerabilities discovered, evaluates how those affect your assets and uses information to calculate the security GPA. Right now, the Center's GPA is a 3.48. The Center has operated as the "Best in Class" over the last five years. The Center is one of the highest GPAs across any spectrum not just in healthcare.
 - CrowdStrike indicates the total number of detections by severity during the fiscal year. There have been no critical detections. There were high and low risks identified in the system that the team had to mitigate.
 - KnowBe4 Security awareness platform for end users. Simulated phishing emails are sent monthly. A total of 412 clicks were identified which required the individuals to take remedial training. The benchmark is 95% and the Center is at 92% and trending in the right direction.
 - PhishER triage environment, it categorized the reported emails. It shows the staff are more cautious with emails they receive and reporting phishing emails. IT response time is within 24 hours.

Questions ensued. Mr. Barrett thanked Mr. Butler for his report.

3. Board Annual Training

- a. Consumer Rights Cynthia Martinez
- b. Cultural Competency Cynthia Martinez
- c. Corporate Compliance & Ethics 101 *James Chapman, Frank Garza* Ouestions ensued for Ethics 101.
- d. Open Meetings Frank Garza

The above trainings were presented to the Board of Trustees for their annual training which is required by the State.

VI. INFORMATIONAL ITEMS

- 1. HHSC Performance Contract Metrics 7 Outcomes FY 2024 Mid-Year Report Jennifer Flores
- 2. Utilization Management FY 2024 Mid-Year Report Lauren Estrada
- 3. Compliance Department FY 2024 Mid-Year Report Crystal Paz-Barrera
- 4. Contracting and Procurement FY 2024 Mid-Year Report Adam Velez
- 5. CCBHC FY 2024 Mid-Year Report Tab Montemayor

Ms. Jamison reminded the Board that the Informational Items would not be presented. They were deferred because the Board had their training to do. There were summaries should the Board have any questions.

VII. EXECUTIVE SESSION (DISCUSSION ONLY: CLOSED TO THE PUBLIC) PURSUANT TO CHAPTER 551, TEXAS GOVERNMENT CODE 551.071 (Consultation with General Counsel)

551.071(Consultation with General Counsel): Advise on matters in which the duty of the General Counsel to the Center under the Texas Disciplinary Rules of Professional Conduct of the State of Texas clearly conflicts with Chapter 552 of the Texas Government Code

- A. Discussion regarding President/CEO Contract Terms
- B. Discussion regarding terms and outstanding issues with Haven for Hope Contract
- C. Discussion regarding terms and outstanding issues with Bexar County Contracts

Mr. Barrett called the meeting in to Executive Session at 7:45 p.m.

VIII. RECONVENE OPEN SESSION

The meeting reconvened at 8:20 p.m. No action taken.

VIII. REPORTS

1. TEXAS COUNCIL OF COMMUNITY MHMR CENTERS INC. BOARD - Daniel T. Barrett

Mr. Barrett stated he went to the Texas Council Board held on April 25 – 26, 2024, and there are things happening in the State. He mentioned the Annual Texas Council Conference will be held June 17 – 19, 2024 here in San Antonio as the host City. Mr. Barrett asked the Board Members to please attend the conference if they can.

2. TEXAS COUNCIL RISK MANAGEMENT FUND BOARD (TCRMF) - Robert Guevara

Mr. Guevara stated their next Board meeting is scheduled for July 31, 2024.

3. TEJAS HEALTH MANAGEMENT BOARD - Robert Guevara

Mr. Guevara stated their next Board meeting is scheduled for July 11, 2024.

IX. ADJOURNMENT

There being no further business, Mr. Barrett asked for a motion to adjourn the meeting. Judge Spencer so moved; Dr. Krueger seconded. Mr. Barrett adjourned the meeting at 8:26 p.m.

Passed and approved this 13th day of August, 2024.

Daniel T. Barrett Board Chairman Cynthia Hinton
Executive Assistant