

Board of Directors

Meeting

Tuesday, April 8, 2014

2:00 p.m.

Central Health Administrative Offices

1111 E. Cesar Chavez St.

Austin, Texas 78702

AGENDA*

- I. Call to Order and Record of Attendance
- II. Public Comments
- III. General Business

A. Consent Agenda

All matters listed under the Consent Agenda will be considered by the Board of Directors to be routine and will be enacted by one motion. There will be no separate discussion of these items unless members of the Board request specific items to be moved from the Consent Agenda to the Regular Agenda for discussion prior to the time the Board of Directors votes on the motion to adopt the Consent Agenda.

1. Approve minutes from the March 18, 2014 CCC Board of Directors meeting.

B. Regular Agenda

- 1. Receive a Delivery System Reform Incentive Payment (DSRIP) Projects update.
- 2. Discuss and take appropriate action on agreements for performing CCC DSRIP Projects.
- 3. Receive a presentation on CCC Financial Statements as of March 31, 2014.
- 4. Receive a report on the current number of Unique MAP Enrollees.

IV. Closed Session

V. Closing

*The Board of Directors may take items in an order that differs from the posted order.

The Board of Directors may consider any matter posted on the agenda in a closed session if there are issues that require consideration in a closed session and the Board announces that the item will be considered during a closed session.

Consecutive interpretation services from Spanish to English are available during Citizens Communication or when public comment is invited. Please notify the front desk on arrival if services are needed.

Los servicios de interpretación consecutiva del español al inglés están disponibles para la comunicación de los ciudadanos o cuando se invita al público a hacer comentarios. Si necesita estos servicios, al llegar sírvase notificarle al personal de la recepción.



Board of Directors

Meeting

Tuesday, March 18, 2014

2:00 p.m.

Central Health Administrative Offices

1111 E. Cesar Chavez St.

Austin, Texas 78702

Meeting Minutes

I. Call to Order and Record of Attendance

On Tuesday, March 18, 2014, a public meeting of the CCC Board of Directors was called to order at 2:06 p.m. in the Board Room at Central Health Administrative Offices located at 1111 E. Cesar Chavez St, Austin, Texas 78702. Chairperson Patricia A. Young Brown was absent, and Vice-Chairperson Greg Hartman served as the Chair for the meeting. The clerk for the meeting was Margo Gonzalez.

Clerk's Notes:

Secretary Gonzalez took record of attendance.

Directors Present:

Vice-Chairperson Greg Hartman, Christie Garbe, Jeff Knodel, Sarah Cook (Proxy for Patricia A. Young Brown), Willie Lopez (Proxy for Tim LaFrey), and David Evans (Non-Voting Advisory Board Member)

Officers Present:

Larry Wallace (Executive Director) and Margo Gonzalez (Secretary)

Other Attendees Present:

Beth Devery (General Counsel)

II. Public Comments

Clerk's Notes:

None.

III. General Business

A. Consent Agenda

All matters listed under the Consent Agenda will be considered by the Board of Directors to be routine and will be enacted by one motion. There will be no separate discussion of these items unless members of the Board request specific items to be moved from the Consent Agenda to the Regular Agenda for discussion prior to the time the Board of Directors votes on the motion to adopt the Consent Agenda.

- 1. Approve minutes from the February 11, 2014 CCC Board of Directors meeting.
- 2. Adopt a resolution to approve the Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Manual for Central Health and Community Care Collaborative as Affiliated Covered Entities as approved by the Central Health Board of Managers.

Clerk's Notes:

Director Knodel moved that the Board approve Consent Agenda items A (1) and (2). Director Cook seconded the motion. The motion was passed on the following vote:

Director Greg Hartman (Vice-Chairperson)	For
Director Christie Garbe	For
Director Jeff Knodel	For
Director Sarah Cook (Proxy)	For
Director Willie Lopez (Proxy)	For

B. Regular Agenda

1. Receive a Delivery System Reform Incentive Payment (DSRIP) Projects update.

Clerk's Notes:

Sarah Cook provided an update on the current CCC DSRIP projects for Demonstration Year (DY) 3. The Centering Pregnancy Project has not yet been approved; however, the milestone metrics for that project is 20 enrollees not 100 as listed on the report that was provided at the meeting. She also stated that additional information related to this project may not be available from Centers for Medicare and Medicaid Services (CMS) until summer 2014. The projects that are underway will receive a payout of \$4 million for DY 2 milestones. There is an agreement pending with the City of Austin EMS which will be reviewed and considered for approval by the Austin City Council and the Central Health Board of Managers. If approved, the City of Austin EMS will provide a Community Health Paramedic Program which includes the hire of one community paramedic, the purchase of a vehicle and the necessary equipment, short-term care and navigation services for 100 patients. This agreement expands the capabilities of the program to provide the proper resources to manage the healthcare needs and navigation through the healthcare system to the CCC's target population.

No action was taken.

2. Discuss and take appropriate action on the creation of the CCC Finance Committee.

Clerk's Notes:

John Stephens, Central Health Director of Financial Planning and Management, gave a presentation on the creation of the CCC Finance Committee. Since the creation of the CCC in June 2013, the finance staff of Seton Healthcare Family and Central Health have been collaborating to carry out the finance-related provisions of the Master Agreement. This agreement provides the financial structure necessary to allow the CCC to develop its 2014 budget and to commence operations. Now that the CCC has a structure for reporting revenues and expenses in place, the creation of a CCC Finance Committee will provide financial oversight

to ensure the success of the 1115 waiver DSRIP Projects and alert the Advisory Committee and/or Board of Directors of operational issues related to the DSRIP Projects. The CCC is also working on a plan for reporting on the cost and progress of the DSRIP Projects. The CCC Finance Committee will be comprised of staff from Seton Healthcare Family and Central Health – Jeff Knodel, Central Health Chief Financial Officer, John Stephens, Cental Health Director of Financial Planning and Management, Willie Lopez, Seton Healthcare Family Director of Business Development and Strategy, Julie L. Holly, Seton Healthcare Family Director of Reimbursement. The Central Health Budget and Finance Committee recommended for approval the creation of the CCC Finance Committee as a special committee, and the Central Health Board of Managers will consider the creation of the committee at their next meeting of March 19, 2014.

Director Lopez moved that the Board adopt the Resolution creating the CCC Finance Committee, contingent upon approval of the Central Health Board of Managers. Director Knodel seconded the motion. The motion passed on the following vote:

Director Greg Hartman (Vice-Chairperson)	For
Director Christie Garbe	For
Director Jeff Knodel	For
Director Sarah Cook (Proxy)	For
Director Tim LaFrey (Proxy)	For

3. Receive a presentation and take appropriate action on CCC Financial Statements as of February 28, 2014.

Clerk's Notes:

Jeff Knodel reported on the CCC's Financial Statements as of February 28, 2014, including review of the balance sheet, sources and uses, and healthcare delivery costs.

No action was taken.

4. Receive a report on the current number of Unique MAP Enrollees.

Clerk's Notes:

Dr. Mark Hernandez, CCC Chief Medical Officer, reported the current number of unique MAP enrollees for February 2014 which was 24,305 and comparable to trends from last year.

No action was taken.

IV. Closed Session

Clerk's Notes:

No closed session discussion.

V. Closing

Clerk's Notes:

There being no further discussion or agenda items, Director Knodel moved that the meeting adjourn. Director Cook seconded the motion.

Director Greg Hartman (Vice-Chairperson)	For
Director Christie Garbe	For
Director Jeff Knodel	For
Director Sarah Cook (Proxy)	For
Director Tim LaFrey (Proxy)	For

The meeting was adjourned at 2:37 p.m.

Patricia A. Young Brown, Chairperson Community Care Collaborative Board of Directors

ATTESTED TO BY:

Margo Gonzalez, Secretary to the Board Community Care Collaborative

Community Care Collaborative

Financial Statement Presentation FY 2014 – as of March 31, 2014

CCC Board of Directors

APRIL 8, 2014



General





- Interim Financial Statements
 - Balance Sheet
 - Sources and Uses Report Budget vs. Actual
- Six months of operations
 - October 1, 2013 March 31, 2014

Balance Sheet March 31, 2014



3

Assets	•
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Cash & cash equivalents	66,746,342
Accounts receivable	<u>25,080</u>
Total Assets	<u>66,771,422</u>

Liabilities

ccounts payable	1,844,081
Other liabilities	<u>428,517</u>
Total Liabilities	<u>2,272,598</u>

Net Assets 64,498,824

Liabilities and Net Assets 66,771,422

Sources and Uses Report Budget vs. Actual As of FYTD March 31, 2014



Sources Budget Actual Sources 49,152,105 49,287,465 Seton Indigent Care Payments (1) 60,000,000 30,000,000 Central Health Indigent Care Payments (1) 15,200,000 5,000,000 Operations Contingency Carry-forward 10,354,156 12,393,741 Total Sources 134,706,261 96,681,206 Uses – Programs Healthcare Delivery 73,188,730 30,029,826 Permitted Investments - UT 35,000,000 0 Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000 Total 64,498,824	`	Adopted	
DSRIP Revenue 49,152,105 49,287,465 Seton Indigent Care Payments (1) 60,000,000 30,000,000 Central Health Indigent Care Payments (1) 15,200,000 5,000,000 Operations Contingency Carry-forward 10,354,156 12,393,741 Total Sources 134,706,261 96,681,206 Uses – Programs Healthcare Delivery 73,188,730 30,029,826 Permitted Investments - UT 35,000,000 0 Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000		Budget	Actual
Seton Indigent Care Payments (1) 60,000,000 30,000,000 Central Health Indigent Care Payments (1) 15,200,000 5,000,000 Operations Contingency Carry-forward 10,354,156 12,393,741 Total Sources 134,706,261 96,681,206 Uses – Programs Healthcare Delivery 73,188,730 30,029,826 Permitted Investments - UT 35,000,000 0 Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	Sources		
Central Health Indigent Care Payments (1) 15,200,000 5,000,000 Operations Contingency Carry-forward 10,354,156 12,393,741 Total Sources 134,706,261 96,681,206 Uses – Programs Healthcare Delivery 73,188,730 30,029,826 Permitted Investments - UT 35,000,000 0 Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	DSRIP Revenue	49,152,105	49,287,465
Operations Contingency Carry-forward 10,354,156 12,393,741 Total Sources 134,706,261 96,681,206 Uses – Programs Healthcare Delivery 73,188,730 30,029,826 Permitted Investments - UT 35,000,000 0 Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	Seton Indigent Care Payments (1)	60,000,000	30,000,000
Total Sources 134,706,261 96,681,206 Uses – Programs Healthcare Delivery 73,188,730 30,029,826 Permitted Investments - UT 35,000,000 0 Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	Central Health Indigent Care Payments (1) 15,200,000	5,000,000
Uses – Programs Healthcare Delivery 73,188,730 30,029,826 Permitted Investments - UT 35,000,000 0 Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	Operations Contingency Carry-forward	10,354,156	12,393,741
Healthcare Delivery 73,188,730 30,029,826 Permitted Investments - UT 35,000,000 0 Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	Total Sources	134,706,261	96,681,206
Healthcare Delivery 73,188,730 30,029,826 Permitted Investments - UT 35,000,000 0 Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000			
Permitted Investments - UT 35,000,000 0 Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	Uses – Programs		
Emergency Reserve 5,000,000 2,500,000 DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	Healthcare Delivery	73,188,730	30,029,826
DSRIP Project Costs 21,587,531 2,152,556 Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	Permitted Investments - UT	35,000,000	0
Total Uses 134,706,261 34,682,382 Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	Emergency Reserve	5,000,000	2,500,000
Sources over uses 0 61,998,824 Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	DSRIP Project Costs	21,587,531	2,152,556
Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000	Total Uses	134,706,261	34,682,382
Net Assets: Unrestricted 61,998,824 Emergency Reserve 2,500,000			
Unrestricted 61,998,824 Emergency Reserve 2,500,000	Sources over uses	0	61,998,824
Unrestricted 61,998,824 Emergency Reserve 2,500,000			
Emergency Reserve 2,500,000	Net Assets:		
	Unrestricted		61,998,824
Total 64,498,824	Emergency Reserve		2,500,000
	Total		64,498,824

(1) Final contributions will be subject to provisions of the Master Agreement, which requires the parties to collaborate to adequately fund the CCC, but leaves the amount of funding up to each parties' discretion. Each member contribution could be more or less than the estimate, depending upon a variety of factors.

Healthcare Delivery Report As of FYTD March 31, 2014





Healthcare Delivery	Budget	<u>Actual</u>
Healthcare Services	62,288,077	30,029,826
Operations Contingency	10,330,653	0
Expansion Funds	500,000	0
Total	73,118,730	30,029,826

Healthcare Delivery Costs As of FYTD March 31, 2014



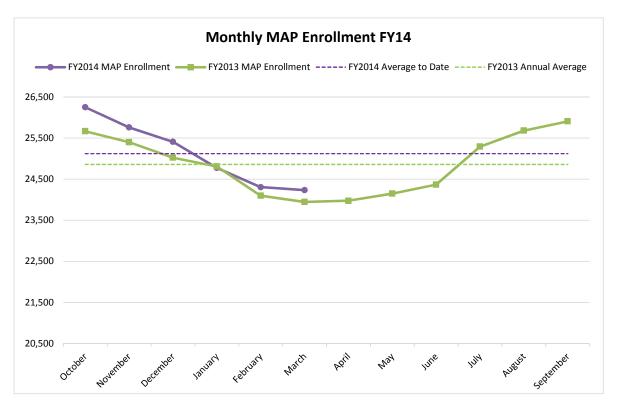
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	Adopted	
Healthcare Delivery Costs	Budget_	Actual_
Primary Care	50,231,419	24,559,254
Specialty Care	1,388,277	954,009
Mental Health	265,000	188,830
Dental Care	596,711	214,221
Pharmacy	5,571,670	1,928,719
Client Referral Services	735,000	428,156
Claims Administration	3,500,000	1,750,000
Other	0	6,638
Total Healthcare Delivery Costs	<u>62,288,077</u>	30,029,826

Questions? Comments?



Medical Access Program Enrollment				
Enrollment on:	FY2014 MAP Enrollment		FY2013 MAP Enrollment	Change from Previous Year
October	26,251		25,666	2%
November	25,760		25,400	1%
December	25,409		25,023	2%
January	24,774		24,810	0%
February	24,305		24,096	1%
March	24,235		23,947	1%
April			23,974	-100%
May			24,147	-100%
June			24,367	-100%
July			25,293	-100%
August			25,682	-100%
September			25,907	-100%
FY14 Avg to date	25,122		24,859	1%



Notes:

- 1) MAP enrollment is the count of all individuals enrolled at any point in that month.
- 2) Full benefit includes CBRACKFQ and CPENDSSI. Enrollees have access to primary care, hospital based services care as well as ancillary services such as laboratory, pharmacy, etc. Dental services are also available to individuals in this group.

Updated: 5 April 14