

**STAYS IN FILE**



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## CENTRAL HEALTH

### **Our Vision**

Central Texas is a model healthy community.

### **Our Mission**

By caring for those who need it most, Central Health improves the health of our community.

### **Our Values**

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*Stewardship* - We maintain public trust through fiscal discipline and open and transparent communication.

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## **BUDGET AND FINANCE COMMITTEE MEETING**

**Wednesday, June 12, 2024, 3:00 p.m.**

**Or immediately following the Strategic Planning Committee Meeting**

**Videoconference meeting<sup>1</sup>**

**A quorum of the Committee and the presiding officer will be present at:**

Central Health Administrative Offices  
1111 E. Cesar Chavez St.  
Austin, Texas 78702  
Board Room

Members of the public may attend the meeting at the address above, or observe and participate in the meeting by connecting to the Zoom meeting link listed below (copy and paste into your web browser):

<https://us06web.zoom.us/j/89326185663?pwd=fjMLqubxtpZS60BKrjxbqcS9tanhIX.1>

Meeting ID: 893 2618 5663

Passcode: 222368

Links to livestream video are available at the URL below (copy and paste into your web browser):

<https://www.youtube.com/@tchealthdistrict/streams>

Or to participate by telephone only:

Dial: (346) 248 7799

Meeting ID: 893 2618 5663

Passcode: 222368

The Committee may meet via videoconference with a quorum present in person and will allow public participation via videoconference and telephone as allowed under the Open Meetings Act. Although a quorum of the Committee will be physically present at the location posted in this meeting notice, we strongly encourage all members of the public to observe the meeting virtually

and participate in public comment, if desired, through the virtual meeting link or telephone number listed on this meeting notice.

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A member of the public who wishes to make comments virtually during the Public Communication portion of the meeting must properly register with Central Health **no later than 1:30 p.m. on June 12, 2024**. Registration can be completed in one of three ways:

- Complete the virtual sign-in form at <https://www.centralhealth.net/meeting-sign-up/>;
- Call 512-978-9190 and leave a voice message with your full name, your request to comment via telephone, videoconference, or in-person at the meeting; or
- Sign-in at the front desk on the day of the meeting, prior to the start of the meeting.

Individuals who register to speak on the website or by telephone will receive a confirmation email and/or phone call by staff with instructions on how to join the meeting and participate in public communication.

### **PUBLIC COMMUNICATION**

Public Communication rules for Central Health Committee meetings include setting a fixed amount of time for a person to speak and limiting Committee and Board responses to public inquiries, if any, to statements of specific factual information or existing policy. The Public Communication portion of the meeting will begin at 5:30 p.m., unless a member of the public wishes to comment on a specific item on this agenda.

### **COMMITTEE AGENDA<sup>2</sup>**

1. Approve the minutes of the May 22, 2024 Budget and Finance Committee meeting. (*Action Item*)
2. Discuss and take appropriate action on a recommendation of the Central Health Tax Year 2024 homestead property tax exemption rate and homestead exemption amounts for Travis County residents who are over 65 or disabled. (*Action Item*)
3. Receive and discuss a presentation on the proposed Central Health Fiscal Year (FY) 2025 budget and tax rate. (*Informational item*)
4. Confirm the next Budget and Finance Committee meeting date, time, and location. (*Informational Item*)

<sup>1</sup> This meeting may include one or more members of the Budget and Finance Committee participating by videoconference. It is the intent of the presiding officer to be physically present and preside over the meeting at Central Health Headquarters, 1111 Cesar Chavez, Austin, Texas 78702. This meeting location will be open to the public during the open portions of the meeting, and any member participating

by videoconference shall be visible and audible to the public members in attendance whenever the member is speaking. **Members of the public are strongly encouraged to participate remotely through the toll-free videoconference link or telephone number provided.**

- <sup>2</sup> The Budget and Finance Committee may take items in an order that differs from the posted order and may consider any item posted on the agenda in a closed session if the item involves issues that require consideration in a closed session and the Committee announces that the item will be considered during a closed session. A quorum of Central Health's Board of Managers may convene or participate via videoconference to discuss matters on the Committee agenda, and any Committee actions will be in conformance with the Central Health Bylaws.

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Cualquier persona con una discapacidad que planea asistir o ver esta reunión y requiera ayudas o servicios auxiliares debe notificar a Central Health con la mayor anticipación posible de la reunión, pero no menos de dos días de anticipación, para que se puedan hacer los arreglos apropiados. Se debe notificar al Gerente de Gobierno de la Junta por teléfono al (512) 978-8049.



Came to hand and posted on a Bulletin Board in the  
County Recording Office, Austin, Travis County, Texas on this the  
7 day of June 2024  
Dyana Limon-Mercado  
County Clerk, Travis County, Texas  
By [Signature] Deputy

**E. MEDINA**

**FILED AND RECORDED**  
**OFFICIAL PUBLIC RECORDS**  
*Dyana Limon-Mercado*  
Dyana Limon-Mercado, County Clerk  
Travis County, Texas  
**202480766** Jun 07, 2024 03:48 PM  
Fee: \$0.00 MEDINAE





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## **Central Health Board of Managers Shared Commitments** **Agreed adopted on June 30, 2021**

Whereas, the Board of Managers of Central Health has come together as a governing body to ensure the Vision of Central Health: Central Texas is a model health Community;

Whereas, the Board of Managers of Central Health bring this vision into reality by enacting the mission of caring for those who need it most and thereby improving the health of our community;

Whereas, the Board of Managers of Central Health achieves excellence toward this vision and mission through the stated values of Stewardship, Innovation, Respect, and Collaboration;

Whereas, the Board of Managers of Central Health further known as we in this document understand that systemic racism is the root of health inequities that emerge from a history of racism in Texas including Travis County that contributes to the social determinants of health that play a primary role in producing inequitable health outcomes;

Whereas, as an organization, Central Health is anti-racist and committed to a diverse and inclusive culture that seeks equity and social justice in the pursuit of its mission:

1. We Commit to informing all of our actions as Board Managers with the understanding that we are accountable to recognizing and to interrupting systems of oppression. This includes understanding the power structure in the United States, and Texas, and Travis County, that advantages certain community members and has historically disadvantaged other community members based on the color of their skin, race, ethnicity, language, and/or other characteristics. We further understand that to disrupt this power structure and the health inequities it produces, we must collaborate to collectively respond to the lived realities of all ethnicities, races, and identities disadvantaged within this system and all historically oppressed identities and communities disadvantaged within this system. We Commit to understanding that when disadvantaged communities compete against each other, we all lose in this system, and the only way forward is to work together for the benefit of all oppressed communities collectively.
2. We Commit to a model of Generative Leadership which requires us to understand and practice collaboration and accountability demonstrated by following our agreed upon meeting procedures and ensuring all members have the opportunity for comparable speaking time. We further Commit to intentionality prior to speaking including: considering: what is the goal of what I

want to share; is this the right time to share it; and is this in keeping with our collective goal for this particular moment within this particular meeting?

3. We Commit to Generative Conflict which includes engaging in disagreements and differences in perspective in a way that deepens relationships and trust by expanding knowledge and understanding of each other, including expecting our ideas to be expanded and enriched by learning and engaging with other Board Manager ideas, choosing curiosity over competition of ideas, and anchoring our conversations in our common purpose.
4. We Commit to practicing emotional intelligence as leaders which includes being aware of our own emotions and reactions and managing them, as well as being aware of our impact on others and managing this impact for the collective good when we are in our role as Board Managers.
5. We Commit to being aware of our own privileges and advantages in the sociopolitical and economic structure of the United States, Texas, and Travis County to use these for the benefit of interrupting inequities across historically disadvantaged identities.
6. We Commit to preventing the commission of microaggressions through the awareness of the history and oppression of diverse identities and communities. To this end, we Commit to strive to learn the historical context informing the lived realities of all historically oppressed identities and communities, and to use this to prevent use of language and commission of actions that can be harmful given these histories.
7. If we inadvertently commit a microaggression, we strive to immediately become aware on our own of the harm we have caused. If another Board Manager generously helps us become aware of a microaggression we have committed we welcome the support in our learning and growing process as a leader and immediately express appreciation for having made us aware, own the mistake we have made, acknowledge the impact of the harm we have caused, and engage repair through apology and the articulation of what we will do to avoid the repetition of such harm in the future.
8. If we observe one of our fellow Board Managers commit a microaggression, we Commit to calling them in by letting them know in a respectful and kind manner of the mistake that has been made.
9. We understand that many of us, as survivors of historically oppressed identities and communities, carry internalized narratives of oppression, and we can inadvertently express these oppressions against others in ways that cause harm and we Commit to the same process identified in 7 and 8 to engage repair and return to generative collaborative processes.
10. We understand that even without the history of oppression potentiating the weight of harm, expressions of prejudice and rudeness can also cause harm to our shared aims, and we Commit to the same process identified in 7 and 8 to engage repair and return to generative collaborative processes.



11. We Commit to using our Racial and Social Justice Framework (next page) for decision-making as we work together for the collective good of our communities as we eradicate health inequities and create a model healthy community.
12. We understand that we are entrusted with a vital responsibility for our communities and are accountable stewards for the time and resources available to our Board of Managers. We understand that these commitments are entered into to ensure responsible stewardship of this time and resources through generative collaborative processes to reach our vision and mission and we agree that if we do not follow any one of these commitments we welcome our Board Manager colleagues to bring this to our attention through the agreed upon process reflected here and when this occurs, we commit to immediately acknowledging the mistake and engaging in a repair and correction process as indicated in these commitments so that our work to dismantle systemic racism and resulting barriers and achieve health equity can move forward.

Be it adopted that the above agreements will be honored and acted upon by each Board Manager as of 6/30/2021 and henceforth forward as indicated by signature below.

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Board Manager Signature

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Date

---

Board Manager Printed Name

# Calling In and Repairing Harm

## Calling In after Harm in Groups with Shared Values and Aims Stance

Hey, this thing you said/did hurt some folks or could hurt some folks.

A) Here's why that can be hurtful or,

B) Please do some research to learn the history of why that's hurtful.

Implied message: I know you are good and are on this journey with us and we are all going to make mistakes as we unlearn things.

## Calling In after Harm in Groups with Shared Values and Aims Sample Language

- I know it wasn't your intention, but what you just said minimizes the horror of \_\_\_\_\_ e.g. the history of racism, enslavement, the holocaust, etc.
- I know it wasn't your intention but what you just said has the impact of implying that \_\_\_\_\_ are not competent or as intelligent as others.
- What you just said suggests that \_\_\_\_\_ people don't belong.
- That phrase has been identified as being disrespectful and painful to \_\_\_\_\_ people and it's important that we not use it.
- Oh, I have also used that term, but I have now learned that when we use it we are leaving out people who \_\_\_\_\_ or we are implying that \_\_\_\_\_ and the word people are learning to use now is \_\_\_\_\_.
- The term used now by people living with that identity is \_\_\_\_\_.

## Repairing Harm after Microaggressions, Mistakes, and expressions of Prejudice

- Own / Name it
- Recognize the Impact
- Apologize (Do not share context or explanations)
- Make any amends that are possible
- State what you are going to do to learn and do better in the future.

Sample Language: Thank you so much for letting me know. You are right, I used this term or said that phrase and realize that it has the impact of minimizing the experience of \_\_\_\_\_ or implying that \_\_\_\_\_. I am deeply sorry and will practice learning the correct language and will research and learn more about this to ensure that I do not make this mistake and cause this harm in the future.

# RACIAL and SOCIAL JUSTICE FRAMEWORK

## Values and Anti-Racism/Anti-Oppression

- Is this consistent with our values?
- Are we taking steps so we cannot predict outcomes by race and other systemically disadvantaged characteristics?

## Intentional and Accountable Storytelling

- What data are we using and has it been disaggregated by race? What is the source of the data? Who is it making visible and invisible? Whose experience is being centralized and whose is being marginalized in the data? Does the way we are using the data reflect the complexity of the issues and reflect the issues accurately?
- What are the stories and narratives we are telling? What is the purpose? Who is interpreting the meaning? Who's it meant for? Who's impacted and how?
- Are we refusing to be ahistorical? Are we fully considering history and the impacts of the historical context?

## Power Analysis

- What are the power dynamics in this situation? What are the intersecting spheres of oppression at work in this situation?
- What are the cultural norms of white supremacy at work in this situation?
- Who would benefit and who would be harmed by this action/decision?
- Does this interrupt/disrupt or collude with/reinforce oppressive systems/power structures?
- If this is attempting a solution, where are we locating the problem?
- Does the solution/strategy we are proposing change the system or the individual?
- Who are we asking to change and why?

## Relationships

- Who is in the room and who isn't and why? Who is sharing and who is not and why?
- Whose perspective is represented/who is left out? And who is doing the representing? Who do we believe, who do we find credible? Why? Why not?
- Whose experience is being centralized and whose experience is being marginalized? Who is gazing and who is being gazed upon?
- Are we boldly leading toward our racial justice aim by building a broad coalition of support?
- Are we operating from a similar/shared understanding of anti-racism work? Do we have a shared anti-racist understanding of where the problem is located and a shared anti-racist theory of change to generate a solution? Have we agreed upon a shared goal?



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## **BUDGET & FINANCE COMMITTEE MEETING**

**June 12, 2024**

### **AGENDA ITEM 1**

Approve the minutes of the May 22, 2024 Budget and Finance Committee meeting. (*Action Item*)

MINUTES OF MEETING – MAY 22, 2024  
CENTRAL HEALTH  
BUDGET AND FINANCE COMMITTEE

On Wednesday, May 22, 2024, a meeting of the Central Health Budget and Finance Committee convened in open session at 4:31 p.m. in person at the Central Health Administrative Offices and remotely by toll-free videoconference. Clerk for the meeting was Briana Yanes.

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**Committee members present in person:** Chair Museitif, Manager Martin, Manager Motwani, and Manager Valadez

**Board members present in person:** Manager Kitchen, Manager Zamora, Manager May, and Manager Jones

**Absent:** Manager Brinson

**COMMITTEE AGENDA**

**1. Approve the minutes of the April 24, 2024 Budget and Finance Committee meeting.**

**Clerk’s Notes:** Discussion on this item began at 4:34 p.m. Manager Valadez asked that the minutes reflect that she was watching the meeting on YouTube.

Manager Museitif moved that the Committee approve the minutes of the April 24, 2024 Budget and Finance Committee meeting.

Manager Kitchen seconded the motion.

Chairperson Museitif	For
Manager Martin	For
Manager Motwani	For
Manager Valadez	For
Manager Kitchen	For
Manager Zamora	For
Manager May	For
Manager Jones	For

**2. Receive and discuss the quarterly financial and operational report for Sendero Health Plans.**

**Clerk’s Notes:** Discussion on this item began at 6:02 p.m. Ms. Karen Ator, Sendero Chief Strategy Officer, presented the Sendero quarterly report. The presentation included an enrollment update and 2024 Q1 budget vs. actuals finance review. The rest of this item was convened in closed session.

At 6:09 p.m. Chairperson Museitif announced that the Committee was convening in closed session to discuss agenda item 2 under Texas Government Code §551.085 Governing Board Of Certain Providers Of Health Care Services.

At 6:22 p.m. the Committee returned to open session.

**3. Receive and discuss the quarterly financial and operational report for CommUnityCare Health Centers.**

**Clerk’s Notes:** Discussion on this item began at 4:38 p.m. Dr. Jaeson Fournier, CommUnityCare CEO, and Ms. Tara Trower, CommUnityCare Chief Strategy Officer, presented the CommUnityCare quarterly report. Ms. Trower began with an overview of the new pharmacy management system that has been

launched. She then shared that CommUnityCare is one of the nation's top workplaces as recognized by USA Today. Next, she announced that they have received a clean third-party single audit. Lastly, she discussed CommUnityCare's partnership with Central Texas Food Bank's Mobile Pharmacy Program.

Dr. Fournier then shared information about the Health Center Program Advocacy, which resulted in \$400 million in increased funding for health centers. Next, he discussed navigating a decreasing Medicaid payor mix and how this has impacted financials. Lastly, he shared the challenges and potential adaptations of the "dilution effect" due to gentrification.

**4. Receive and discuss a presentation on the Fiscal Year (FY) 2025 preliminary Budget and the financial forecast for subsequent fiscal years, including information on possible property tax rates to be assessed.**

**Clerk's Notes:** Discussion on this item began at 5:05 p.m. Mr. Jeff Knodel, Chief Financial Officer, and Ms. Nicki Riley, Deputy Chief Financial Officer, presented the FY25 financial forecast. The presentation focused on a long-term forecast of sources and uses of funds needed to achieve strategic priorities and an evaluation of a proposed tax rate for the Central Health FY25 proposed budget.

The Budget and Finance Committee recessed at 5:31 p.m. to take up Public Communication at the Board of Managers Meeting.

The Budget and Finance Committee returned from recess at 5:58 p.m.

**5. Receive a presentation on the April 2024 financial statements for Central Health.**

**Clerk's Notes:** Discussion on this item began at 6:01 p.m. Chair Museitif announced that financials were provided in the backup and Managers can submit any questions to Briana Yanes.

**6. Confirm the next Budget and Finance Committee meeting date, time, and location.**

At 6:22 p.m. Manager Kitchen moved that the Committee adjourn.

Manager May seconded the motion.

Chairperson Museitif	For
Manager Martin	For
Manager Motwani	For
Manager Valadez	For
Manager Kitchen	For
Manager Zamora	For
Manager May	For
Manager Jones	For

The meeting was adjourned at 6:23 p.m.

ATTESTED TO BY:

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Maram Museitif, Chairperson  
Central Health Budget and Finance Committee

---

Manuel Martin, Secretary  
Central Health Board of Managers



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## **BUDGET & FINANCE COMMITTEE MEETING**

**June 12, 2024**

### **AGENDA ITEM 2**

Discuss and take appropriate action on a recommendation of the Central Health Tax Year 2024 homestead property tax exemption rate and homestead exemption amounts for Travis County residents who are over 65 or disabled. (*Action Item*)



**AGENDA ITEM SUBMISSION FORM**

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date June 12, 2024

Who will present the agenda item? (Name, Title) Dr. Pat Lee, President & CEO  
Jon Morgan, Chief Operating Officer  
Jeff Knodel, Chief Financial Officer

General Item Description Receive and discuss a presentation on the proposed Central Health Fiscal Year (FY) 2025 budget and tax rate.

Is this an informational or action item? Informational

Fiscal Impact \_\_\_\_\_

Recommended Motion (if needed – action item) N/A

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- The FY 2025 proposed budget incorporates the implementation of the approved Healthcare
- 1) Equity Plan.
- 2) The budget was prepared at a 6.5% increase above the no new revenue tax rate in order to support the long-term financial sustainability of the Healthcare Equity Plan.
- 3) \_\_\_\_\_

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Presentation- Due to timing or need to discuss real-time for context, the backup for this item will be provided next week. This is an informational item only and future meetings will be conducted to further discuss and take action on the FY 2025 budget and tax rate

Estimated time needed for presentation & questions? 30 minutes

Is closed session recommended? (Consult with attorneys.) No

Form Prepared By/Date Submitted: Jeff Knodel/June 7, 2024





# Trust Makes Healthcare Better

Property Tax Exemptions

Central Health Budget and Finance Comr

June 12, 2024

Jeff Knodel, Chief Financial Officer

Nicki Riley, Deputy Chief Financial Officer

# Requested Action

Recommendation to the Travis County Commissioners Court amounts for local property tax exemptions:

- Homestead
- Over 65
- Disabled

## **Amounts approved by Travis County Commissioners' Court**

- Recommendations have historically been made from Central Health Board of Managers to TCCC

# History of Exemptions

- Approved FY 2024 rates/amounts
  - Homestead 20% - maximum allowed by state law
  - Over 65 - \$124,000
  - Disabled - \$124,000
- All three exemptions are the same for Central Health, Travis County, and the City of Austin in FY 2024

<b>Travis County Hospital District</b>	
<b>Exemption History</b>	
<b>OV65/Disabled</b>	
<b>FY</b>	<b>Exemption Amount</b>
2021	\$85,000
2022	\$100,000
2023	\$110,000
2024	\$124,000

\* Homestead Exemption of 20% approved since creation of TCHD

# Property Tax Exemptions – Current Year (FY 2025)

## ➤ Other Jurisdictions

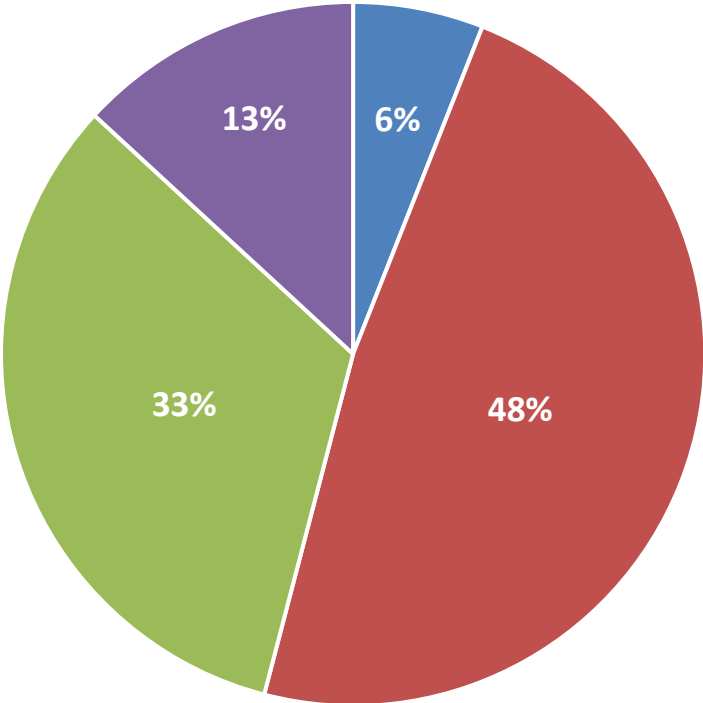
- City of Austin recently approved
  - Homestead 20%
  - OV65/Disabled - \$154,000
- Travis County – has not taken action, but considering the following
  - Homestead – remain at 20%
  - OV65/Disabled – \$136,400 (10% increase)
- Central Health has always had the same exemption amounts as Travis County

# Property Tax Exemption Analysis

<b>Average Homestead Values/Exemptions</b>	<b>FY 24</b>	<b>Proposed FY 25</b>
<b>Taxable Value</b>		
Average Homestead	\$475,286	\$489,548
Tax Rate	0.100692	0.104393
Average Homestead Gross Tax Bill	\$478.57	\$511.05
<b>Exemption Savings</b>		
Homestead (20%)	\$95.71	\$102.21
OV65/Disabled		
\$124,000 (Same)	\$124.86	\$129.45
\$136,400 (10% increase)	N/A	\$142.39
\$154,000 (COA Amount)	N/A	\$160.77
<b>Impact to Other Homesteads &gt;\$124,000</b>		
\$136,400 (10% increase)	N/A	\$1.30
\$154,000 (COA Amount)	N/A	\$3.13

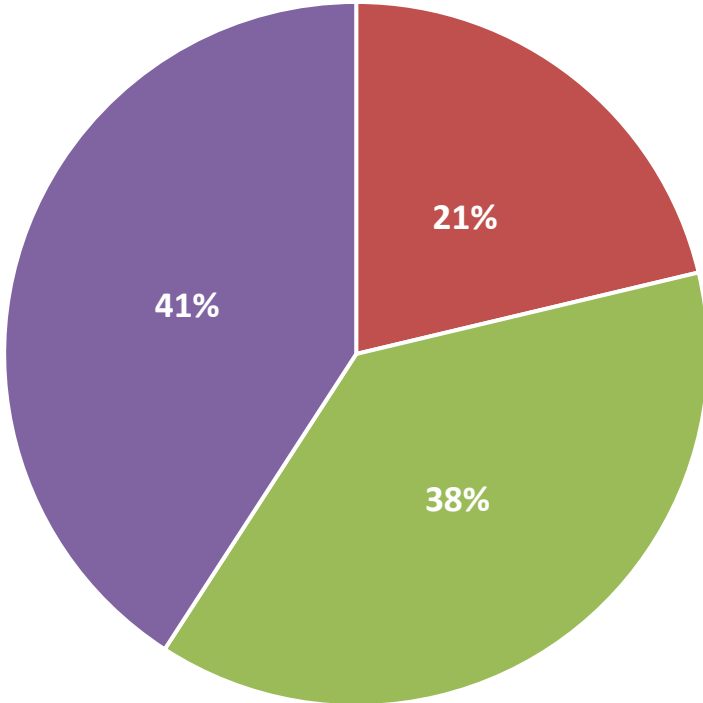
# Homesteads Eligible for OV65/Disabled Exemption

Count



■ =\$0 ■ <\$300K ■ <\$700K ■ >\$700K

Value



■ < \$300K ■ <\$700K ■ >\$700K

# Staff Recommendation

The Central Health Board of Managers recommend to the Travis County Commissioners' Court approval of Central Health local ad valorem exemptions (which include Homestead, Over 65, and Disabled) at the same amount(s)/rate as approved for Travis County ad valorem exemptions.



CENTRAL HEALTH

**Our Vision**

Central Texas is a model healthy community.

**Our Mission**

By caring for those who need it most, Central Health improves the health of our community.

**Our Values**

Central Health will achieve excellence through:

*Stewardship* - We maintain public trust through fiscal discipline and open and transparent communication.

*Innovation* - We create solutions to improve healthcare access.

*Right by All* - By being open, anti-racist, equity-minded, and respectful in discourse, we honor those around us and do right by all people.

*Collaboration* - We partner with others to improve the health of our community.

## **BUDGET & FINANCE COMMITTEE MEETING**

**June 12, 2024**

### **AGENDA ITEM 3**

Receive and discuss a presentation on the proposed Central Health Fiscal Year (FY) 2025 budget and tax rate. (*Informational item*)





**AGENDA ITEM SUBMISSION FORM**

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date June 12, 2024

Who will present the agenda item? (Name, Title) Nicki Riley, Deputy CFO

General Item Description Discuss and take appropriate action on a recommendation of the Central Health Tax Year 2024 homestead property tax exemption rate and homestead exemption amounts for Travis County residents who are over 65 or disabled.

Is this an informational or action item? Action Item

Fiscal Impact N/A

Recommended Motion (if needed – action item) Move that the Board recommend to the Travis County Commissioners’ Court Tax Year 2024 Central Health local ad valorem exemption rates and /or amounts.

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- 1) The Travis County Commissioners’ Court approves the local homestead exemption amounts.
- 2) Homestead exemption is currently the maximum allowable by law.
- 3) Over 65 and Disabled homestead exemptions are reviewed annually for potential revisions

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) PowerPoint Presentation

Estimated time needed for presentation & questions? 10 minutes

Is closed session recommended? (Consult with attorneys.) No

Form Prepared By/Date Submitted: Jeff Knodel/June 7, 2024



# Trust Makes Healthcare Better

Proposed Fiscal Year 2025 Budget  
Central Health Board of Managers  
Budget & Finance Committee  
June 12, 2024

Patrick T. Lee, M.D., President & CEO  
Jon Morgan, Chief Operating Officer  
Jeff Knodel, Chief Financial Officer





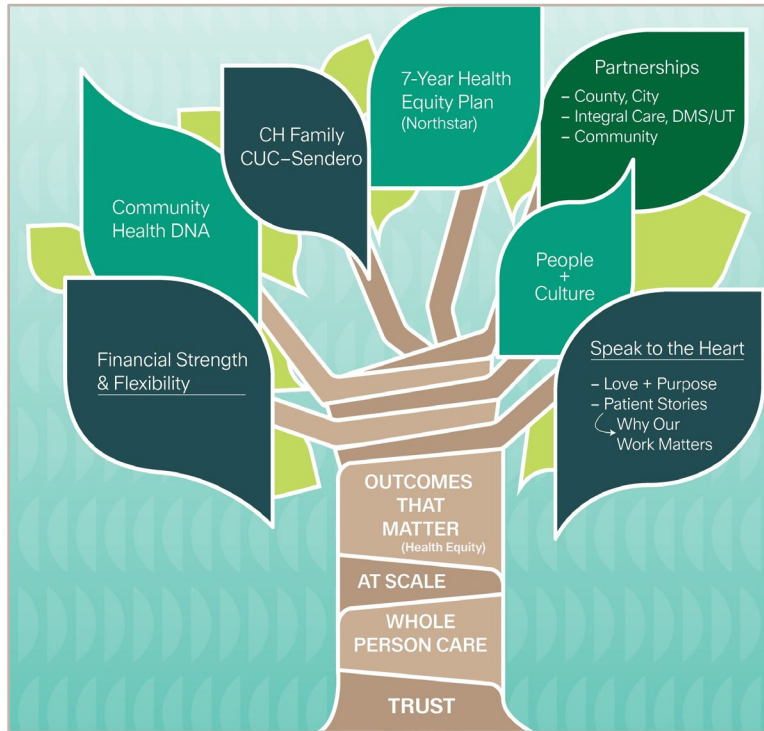
"One trunk, many branches"



# Bridge Team Stories



# Setting FY 2025's Strategic Priorities

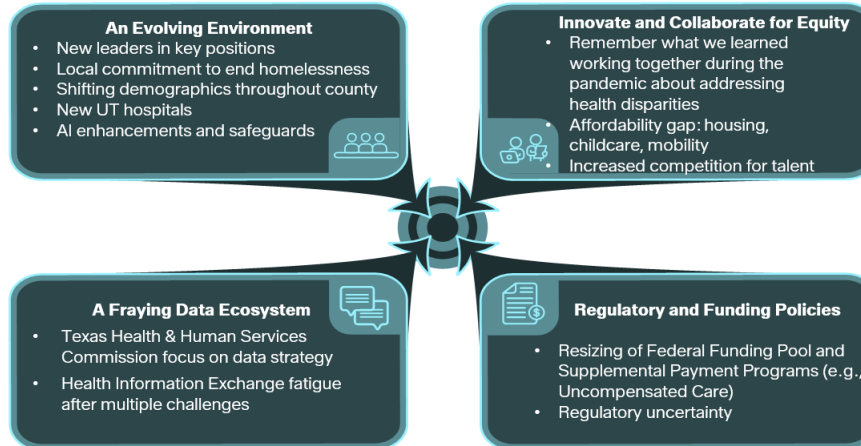


## Healthcare Equity Strategic Plan

The Central Health system is committed to developing an equitable system of care that is comprehensive and accountable, while optimizing the collective use of Travis County's capabilities and resources to serve the safety-net population.

STRATEGIC IMPERATIVES	
Access and Capacity	Appropriate Capacity and Access to Services, Providers and Care Teams
Care Coordination	Optimizing Transitions of Care, Including Effective Data Sharing Across Points of Care
Member Enrollment and Engagement	Enhancing Engagement for Enrollees and Expanding Enrollment in High-Need Regions
System of Care Infrastructure	Joint Service-Delivery Planning and Timely Sharing of Healthcare Data

### Driving Forces Toward Change in FY 2025



DESCRIPTION	FY 2023 APPROVED BUDGET	FY2024 Approved Budget
<b>TAX RATE</b>		
FIEs	333.7	530.5
Beginning Balance (Contingency Reserve)	327,783,722	407,730,068
<b>REVENUE</b>		
Property Taxes	281,605,053	312,456,814
Lease Revenue	13,145,328	12,022,497
Tobacco Litigation Settlement	4,500,000	4,500,000
Other	1,500,000	7,500,000
<b>Total Revenue</b>	<b>300,750,381</b>	<b>336,479,311</b>
<b>Available Budgeted Resources</b>	<b>628,534,103</b>	<b>744,209,379</b>
<b>EXPENSES</b>		
Healthcare Delivery	212,208,877	295,246,806
Administration	22,149,360	28,647,030
UT Affiliation Agreement	22,000,000	35,000,000
Transfers Out	49,000,000	8,019,240
Contingency Reserves	323,175,866	377,296,303
<b>Total Expenses</b>	<b>628,534,103</b>	<b>744,209,379</b>
<b>Increase/Decrease in Fund Balance</b>	-	-
Ending Fund Balance	-	-
<b>RESERVES</b>		
Emergency Reserves	38,719,836	46,739,076

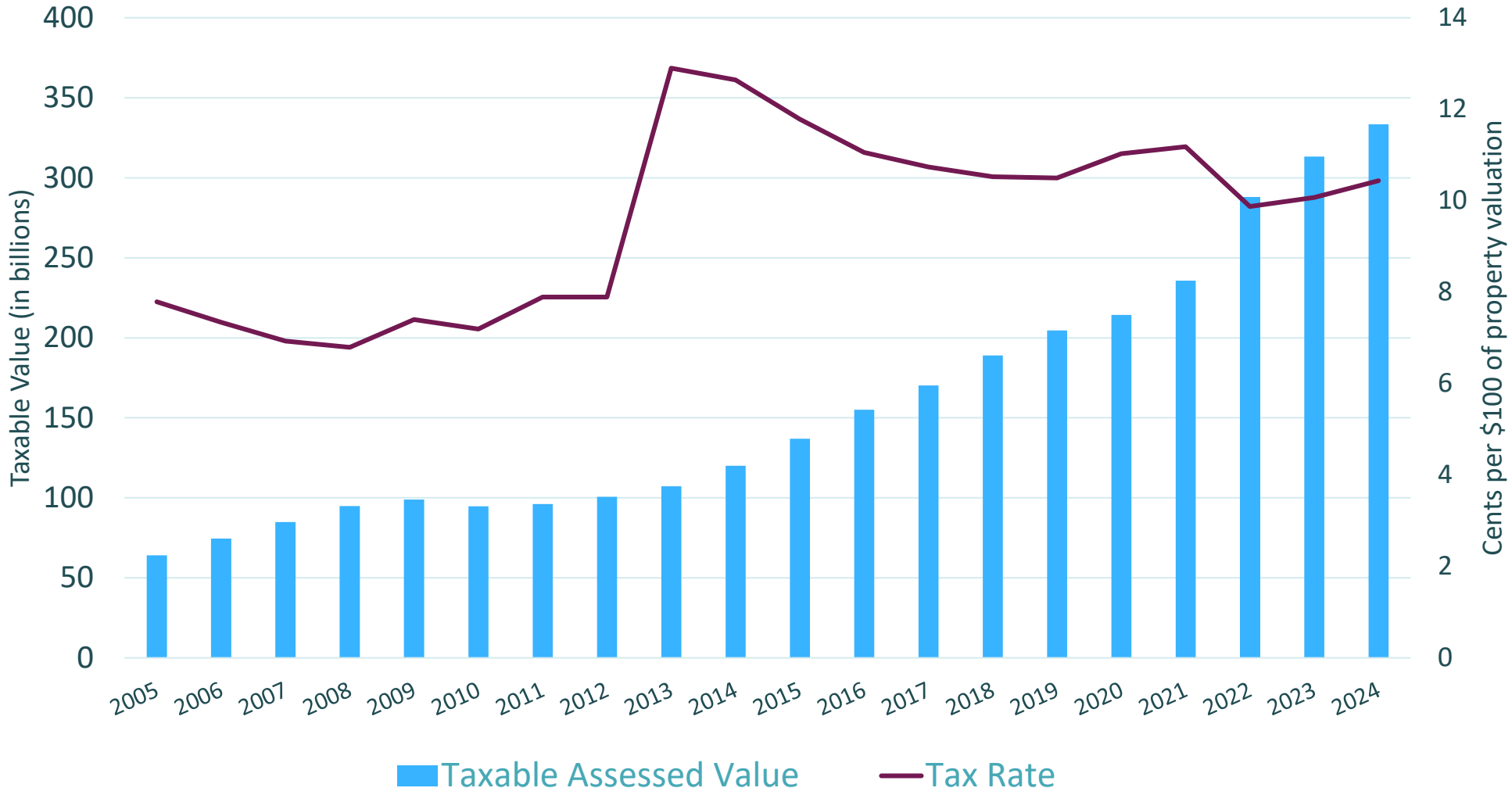
# FY 2025 Budget Highlights

## *Financial Strength and Flexibility*

- Beginning Balance of FY 2025 Contingency Reserves estimate is \$494M, which is higher than anticipated as a result of:
  - Significant higher interest income due to higher rates
  - Clinic site construction delays
- Accelerate clinical services, including:
  - Respite, rheumatology, endocrinology, psychiatry, therapy and counseling services, transitions of care, diversion, bridge teams
- Cash finance upcoming capital projects
  - Eliminates future interest costs
- FY25 Property Tax Rate is 6.5% above no new revenue rate
  - Achieves future targeted range (120-150 days) of reserves for forecast period based on Health Equity Plan cost estimates

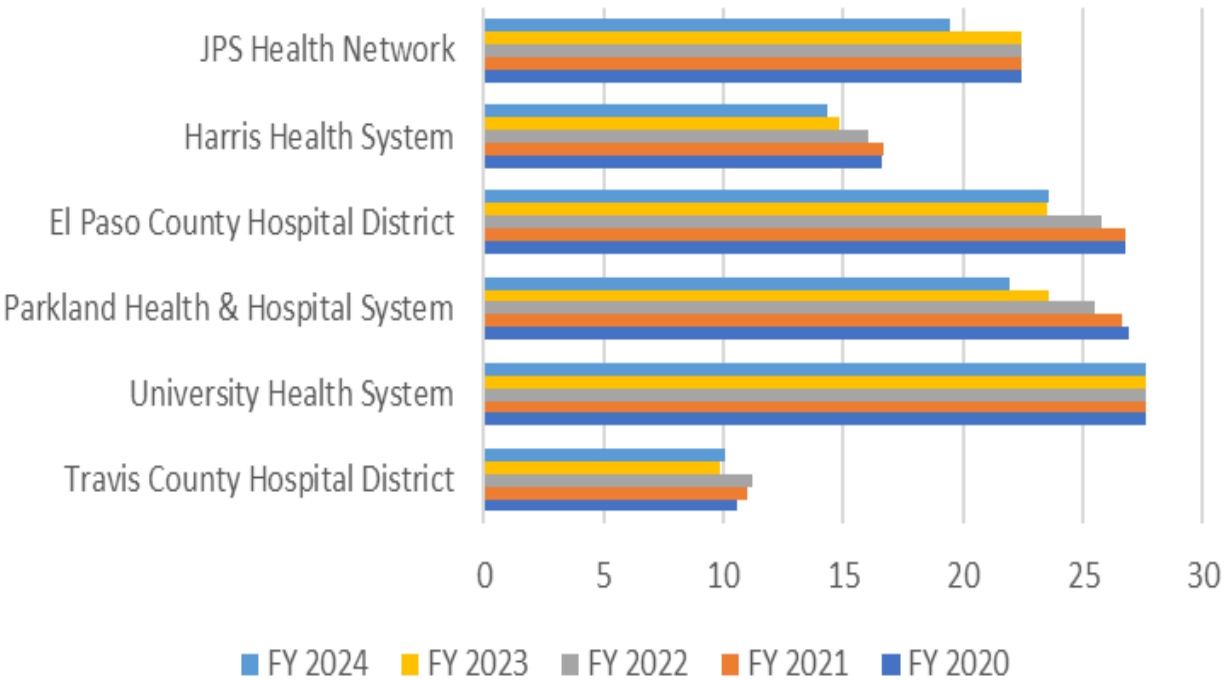
# Tax Rate History – Central Health

Travis County taxable values and Central Health tax rate by tax year

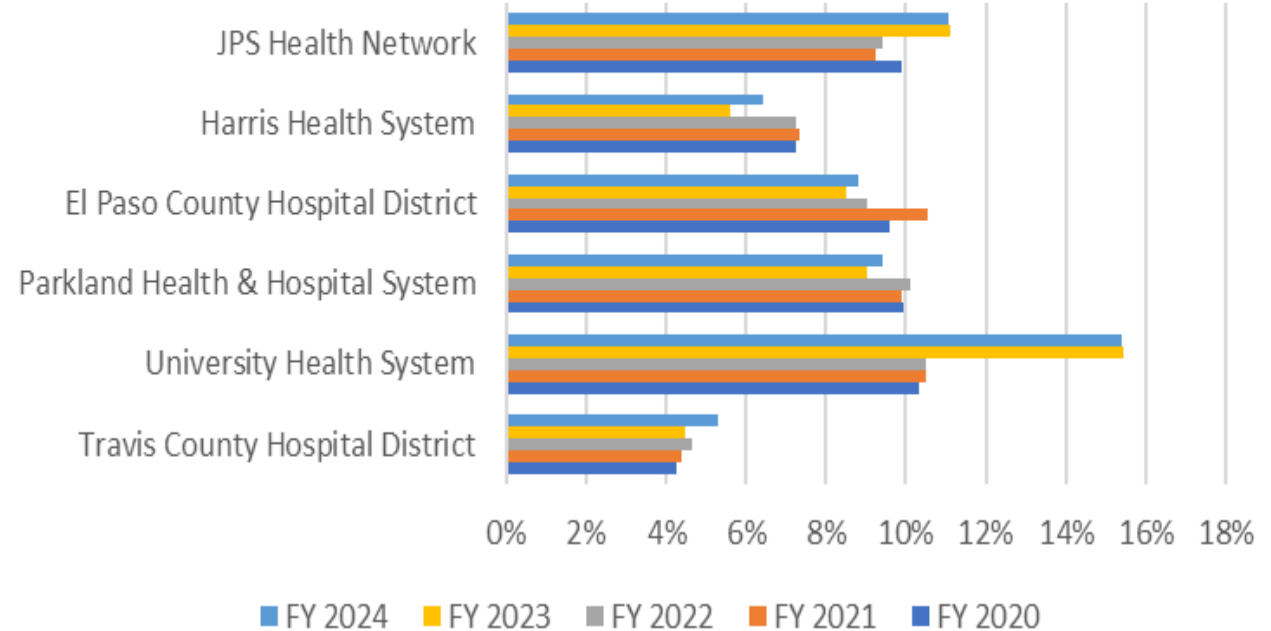


# Five Year Historical Ad Valorem Data

Texas Major Hospital Districts  
Ad Valorem Rates (cents/\$100) 2020-2024



Texas Major Hospital Districts  
Overlapping Taxing Jurisdiction % 2020-2024



\*Travis County Hospital District does not own or operate a hospital.

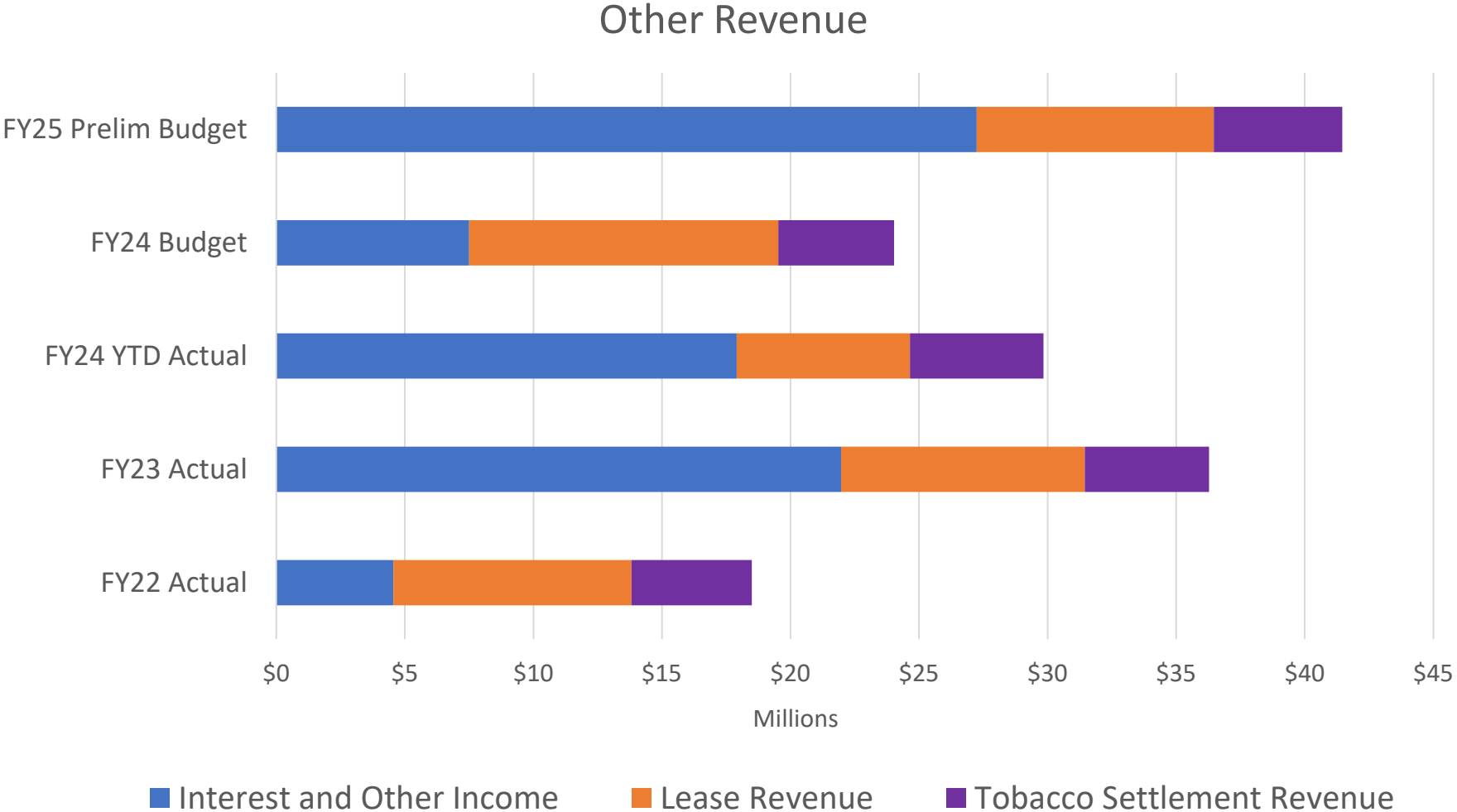


# Average Homestead Values 6.5% above NNR

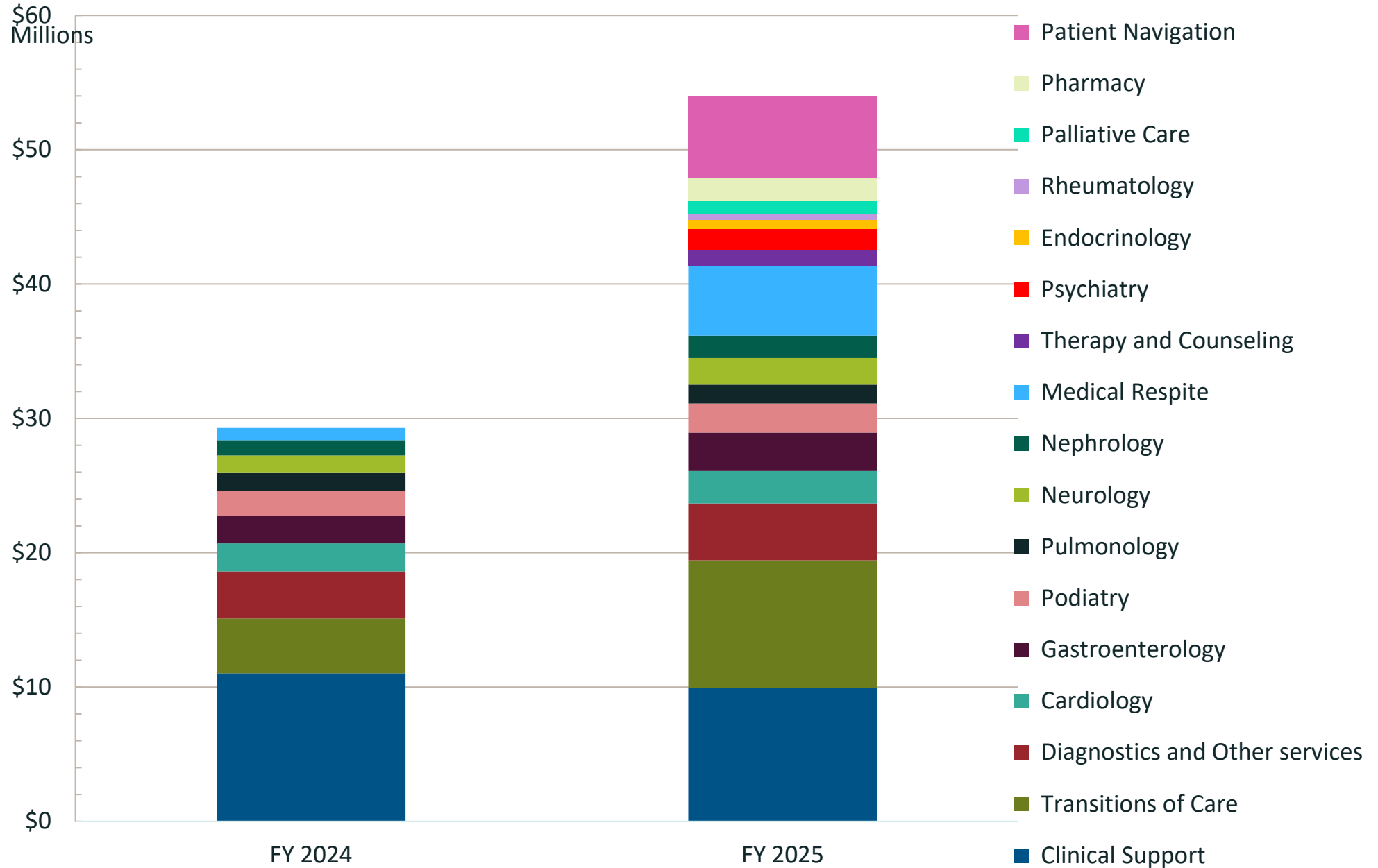
AVERAGE HOMESTEAD	FY24 Approved	FY25 Proposed
Average Taxable Homestead Value	\$475,286	\$489,534
Average Taxable Homestead Value Appreciation	11.1%	3.0%
Tax Rate	10.0692	10.4393
M&O	9.6071	10.0034
Debt Service	0.4621	0.4359
Tax Bill	\$478.57	\$511.04
M&O	\$456.61	\$489.70
Debt Service	\$21.96	\$21.34

*Average Taxable Homestead Property Tax is anticipated to increase by \$32.*

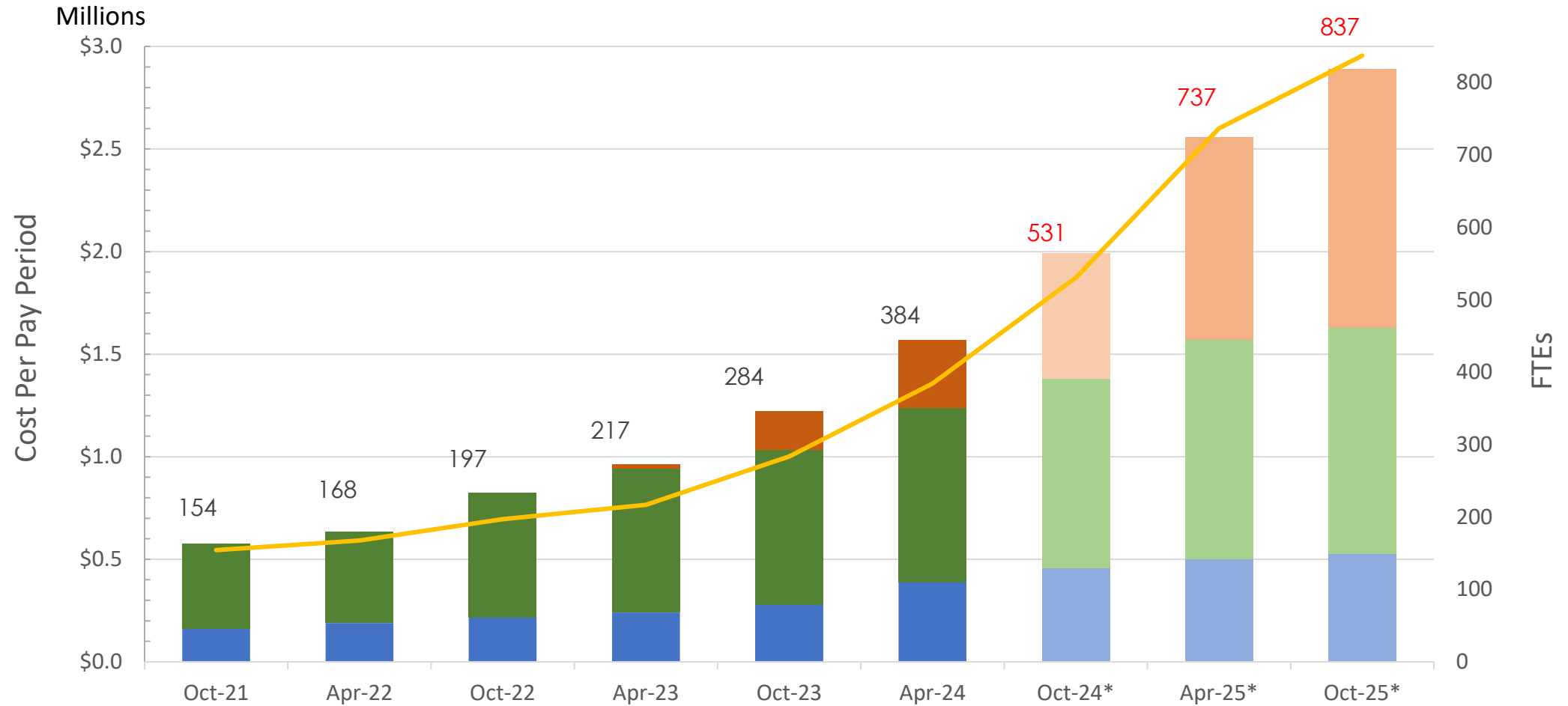
# Other Revenue – Central Health



# Investment in Direct Healthcare Services



# FTE Trend (Actuals and Forecast)



\*Projecting 100% of budgeted positions filled by end of FY25

■ Administration

■ Healthcare Operations & Support

■ Direct Healthcare Services

# Attachment A

DESCRIPTION	FY 2024 APPROVED BUDGET	FY 2024 YEAR-END ESTIMATE	FY 2025 PROPOSED BUDGET 6/12/2024
<b>TAX RATE</b>	<b>0.100692</b>	<b>0.100692</b>	<b>0.104393</b>
FTEs	530.46		837.29
Beginning Balance (Contingency Reserve)	407,730,068	441,168,057	494,040,391
<b>REVENUE</b>			
Property Taxes	312,456,814	312,000,000	344,827,418
Lease Revenue	12,022,497	18,000,000	9,218,670
Tobacco Litigation Settlement	4,500,000	5,000,000	5,000,000
Other	7,500,000	30,268,000	27,241,200
<b>TOTAL REVENUE</b>	<b>336,479,311</b>	<b>365,268,000</b>	<b>386,287,288</b>
<b>Available Budgeted Resources</b>	<b>744,209,379</b>		<b>880,327,679</b>
<b>EXPENSES</b>			
Healthcare Delivery	295,246,806	241,379,012	339,137,132
Administration	28,647,030	27,997,415	36,428,127
UT Affiliation Agreement	35,000,000	35,000,000	35,000,000
Transfers Out	8,019,240	8,019,240	59,979,490
<b>Total Expenses</b>	<b>366,913,076</b>	<b>312,395,666</b>	<b>470,544,749</b>
<b>Increase/Decrease in Fund Balance</b>		<b>52,872,334</b>	
Ending Contingency Reserve Balance	377,296,303	494,040,391	409,782,930
<b>Total Appropriated Resources</b>	<b>744,209,379</b>		<b>880,327,679</b>
<b>RESERVES</b>			
Emergency Reserves	46,739,076	46,739,076	56,718,565

# Attachment B

(1 of 3)

DESCRIPTION	FY 2024 APPROVED BUDGET	FY 2025 PROPOSED BUDGET 6/12/2024	FY24 - FY25 Change	% Change
<b>HEALTHCARE DELIVERY</b>				
<b>Purchased Healthcare Services</b>				
Primary Care: Medical, Dental, & Behavioral Health	71,782,200	73,957,000	2,174,800	3%
Specialty Care: including Specialty Dental	30,188,000	31,153,000	965,000	3%
Inmate Health	2,000,000	1,000,000	(1,000,000)	-50%
Specialty Care: Behavioral Health	20,675,000	24,150,000	3,475,000	17%
Post Acute Care	7,250,000	8,100,000	850,000	12%
Pharmacy	18,000,000	18,000,000	-	0%
Community Health Care Initiatives Fund	875,000	875,000	-	0%
<b>Purchased Healthcare Services</b>	<b>150,770,200</b>	<b>157,235,000</b>	<b>6,464,800</b>	<b>4%</b>
<b>Direct Healthcare Services</b>				
Therapy and Counseling		1,175,079	1,175,079	100%
Psychiatry		1,518,414	1,518,414	100%
Cardiology	2,079,895	2,419,523	339,628	16%
Endocrinology		715,207	715,207	100%
Gastroenterology	2,039,621	2,849,444	809,823	40%
Nephrology	1,129,700	1,670,781	541,081	48%
Neurology	1,264,294	1,979,851	715,557	57%
Podiatry	1,877,022	2,165,098	288,076	15%
Pulmonology	1,370,648	1,416,644	45,996	3%
Rheumatology		445,075	445,075	100%
Palliative Care		929,391	929,391	100%
Pharmacy		1,763,105	1,763,105	100%
Transitions of Care	4,074,868	9,528,345	5,453,477	134%
Medical Respite	906,886	5,220,785	4,313,899	476%
Diagnostics and Other services	3,511,294	4,226,785	715,491	20%
Patient Navigation		5,999,815	5,999,815	100%
Clinical Support	11,022,146	9,904,526	(1,117,620)	-10%
<b>Direct Healthcare Services Total</b>	<b>29,276,374</b>	<b>53,927,868</b>	<b>24,651,494</b>	<b>84%</b>
MAP Eligibility - Increase in eligibility period	1,000,000	-	(1,000,000)	-100%
<b>Total Healthcare Services</b>	<b>181,046,574</b>	<b>211,162,868</b>	<b>30,116,294</b>	<b>17%</b>

# Attachment B

(2 of 3)

DESCRIPTION	FY 2024 APPROVED BUDGET	FY 2025 PROPOSED BUDGET 6/12/2024	FY24 - FY25 Change	% Change
<b>HEALTHCARE DELIVERY</b>				
<b>Healthcare Operations &amp; Support</b>				
Salary and Benefits	33,878,558	39,318,453	5,439,895	16%
ACA Healthcare Premium Assistance Programs	18,587,364	19,300,000	712,636	4%
Real Estate and Facilities	7,619,360	19,958,801	12,339,441	162%
UT land lease for teaching hospital	1,037,550	1,037,550	-	0%
Legal	766,000	108,000	(658,000)	-86%
Consulting	2,315,000	2,120,000	(195,000)	-8%
Other professional goods & services	10,922,140	4,721,700	(6,200,440)	-57%
Outreach and Education	1,927,211	4,115,250	2,188,039	114%
Insurance and Risk Management	400,000	100,000	(300,000)	-75%
Information Technology	13,855,455	13,177,000	(678,455)	-5%
Travel, training and professional development	1,186,250	1,267,750	81,500	7%
Other operating expenses	738,883	211,600	(527,283)	-71%
Health Care Capital Line of Credit	500,000	-	(500,000)	-100%
Debt service - principal retirement	7,440,000	8,085,000	645,000	9%
Debt service - interest	7,026,462	6,453,161	(573,301)	-8%
Transfer to Sendero Risk-Based Capital	6,000,000	8,000,000	2,000,000	33%
<b>Total Healthcare Operations &amp; Support</b>	<b>114,200,233</b>	<b>127,974,265</b>	<b>13,774,032</b>	<b>12%</b>
<b>Total Healthcare Delivery</b>	<b>295,246,807</b>	<b>339,137,133</b>	<b>43,890,326</b>	<b>15%</b>

# Attachment B

(3 of 3)

DESCRIPTION	FY 2024 APPROVED BUDGET	FY 2025 PROPOSED BUDGET 6/12/2024	FY24 - FY25 Change	% Change
<b>ADMINISTRATION</b>				
Salary and Benefits	15,308,898	21,480,410	6,171,512	40%
Legal	2,745,136	2,775,000	29,864	1%
Consulting	2,419,750	2,593,623	173,873	7%
Investment and Financial Services	126,000	200,000	74,000	59%
Other professional goods & services	2,093,775	1,783,613	(310,162)	-15%
Marketing and Communications	249,061	779,080	530,019	213%
Leases, Utilities, Security and Maintenance	1,253,250	1,491,500	238,250	19%
Insurance and Risk Management	412,500	500,000	87,500	21%
Phones, Computer Equipment and supplies	1,149,186	1,597,046	447,860	39%
Travel, training and professional development	386,695	797,568	410,873	106%
Other operating expenses	205,365	63,950	(141,415)	-69%
Appraisal District Svcs	1,213,118	1,249,512	36,394	3%
Tax Collection Expense	1,084,297	1,116,826	32,529	3%
<b>Total Administration</b>	<b>28,647,031</b>	<b>36,428,128</b>	<b>7,781,096</b>	<b>27%</b>
UT Affiliation Agreement	35,000,000	35,000,000	-	0%
<b>TRANSFERS OUT</b>				
Transfer to capital reserve		50,000,000	50,000,000	100%
Transfer to emergency reserve	8,019,240	9,979,490	1,960,250	24%
<b>RESERVES</b>				
Contingency Reserves	377,296,303	409,782,928	32,486,626	9%
<b>TOTAL EXPENSES</b>	<b>744,209,380</b>	<b>880,327,679</b>	<b>136,118,299</b>	<b>18%</b>



# Attachment C

DESCRIPTION	FY 2025 PROPOSED BUDGET 6/12/2024
<b>RESTRICTED Revenue</b>	
Opioid Litigation Settlement	3,800,000
<b>RESTRICTED Expense</b>	
Opioid Abatement Expenses	3,800,000
<b>Ending Balance</b>	-

# FY 2024 Budget Resolution Key Takeaways

Project	Status	Updates
Clinical Facilities		
Hornsby Bend Health & Wellness	Green	10/13/23 Go-Live
Del Valle Health & Wellness	Yellow	Summer 24 Go-Live
Colony Park Design	Yellow	Launch 4/24
East Austin Specialty	Green	10/23 Go-Live
Rosewood-Zaragosa Specialty	Yellow	8/5/24 Go-Live
Navigation Center		
Navigation Center Implementation	Green	5/5/2023 Go-Live
Eligibility		
12-month MAP eligibility	Red	Q3 Board Discussion RE: Eligibility & Enrollment Process Improvement
Performance Review		
Mazars Performance Review	Yellow	Anticipate Completion by June
Clinical Services		
Jail Specialty Care	Green	Services to Begin in June
Street/Mobile/Bridge Teams for People Experiencing Homelessness	Green	Staffing 3rd CUC Team; CH Bridge
Transitions of Care Embedded in Hospital	Green	2/1/23 Dell Seton Medical Center; 3/13/24 Seton Medical Center Austin
Our Providers in Skilled Nursing Facilities	Green	11/1/23 Go-Live
Transitional Care at Home Services	Green	03/13/24 Go-Live
Respite	Green	8/1/23 Go-Live
Cancer Screening Performance Improvement	Yellow	Developing Key Performance Indicators with CUC/Sendero
Expansion of Integral Care (IC) Base Services	Green	10/1/23 Base Expand
Mental Health Diversion Services Pilot	Green	IC Psychiatric Emergency Services (PES) Amendment 2/1/24

Project	Status	Updates
Clinical Services – Specialty Care		
Medical Respite	Green	8/23/23 Go-Live
Gastroenterology (GI) and Pulmonology	Green	10/2/23 Go-Live @ East
Podiatry	Green	10/23/23 Go-Live @ East
Pulmonary Function Tests	Green	11/28/23 Go-Live @ East
GI and Pulmonology	Green	1/16/24 Transition to Cap Plaza
Nephrology	Green	2/1/24 Go-Live @ Cap Plaza
Palliative Care	Green	2/5/24 Go-Live @ Cap Plaza
Wound Care	Green	2/5/24 Go-Live @ East
Hepatology	Green	2/15/24 Go-Live @ Cap Plaza
X-Ray	Green	2/15/24 Go-Live @ East
Infectious Disease	Green	2/20/24 Go-Live @ Cap Plaza
Behavioral Health	Green	3/20/24 Go-Live
Pre-op Clearance	Green	3/20/24 Go-Live
Ultrasound	Green	3/25/24 Go-Live
Clinical Pharmacy	Green	4/3/24 Go-Live
Psychiatry	Yellow	Launch in Fall
Cardiology	Yellow	Launch in Fall
Neurology	Red	Developing Letter of Intent (LOI)

# Healthcare Equity Strategic Plan

The Central Health system is committed to developing an **equitable** system of care that is **comprehensive** and **accountable**, while optimizing the **collective** use of **Travis County's capabilities and resources** to serve the safety-net population.

STRATEGIC IMPERATIVES

Access and Capacity

Appropriate Capacity and Access to Services,  
Providers and Care Teams

Care Coordination

Optimizing Transitions of Care, Including  
Effective Data Sharing Across Points of Care

Member Enrollment and  
Engagement

Enhancing Engagement for Enrollees and Expanding  
Enrollment in High-Need Regions

System of Care Infrastructure

Joint Service-Delivery Planning and  
Timely Sharing of Healthcare Data

# Access and Capacity

Value: Increase access and capacity to comprehensive, high-quality, equitable health care services.

Community Need	FY 2025 Budget Highlights
Expand Access to Specialty Care	<p><b>\$24.7M</b> increase from FY2024 Direct Healthcare Services including:</p> <ul style="list-style-type: none"> <li>➤ Adding Endocrinology, Rheumatology, Psychiatry and expanding other Specialties with opening of Rosewood-Zaragosa Multispecialty Clinic</li> </ul>
Healthcare for the Homeless	<p><b>\$2.3M</b> for the addition of two Bridge Teams, one mobile and one clinic based</p>
Access to Mental Health Services	<p><b>\$2.7M</b> Added in in Direct Healthcare services for Psychiatry, therapy and counseling services</p>
Robust Post Acute Care, including Respite and Extensivists	<p><b>\$2M</b> increase to expand respite capacity and expand teams within skilled nursing facilities</p> <p><b>\$4M</b> in contracts with skilled nursing facilities</p>

# Access and Capacity continued

Value: Increase access and capacity to comprehensive, high-quality, equitable health care services.

Community Need	FY 2025 Budget Highlights
Substance Use Treatment and Addiction Medicine Services	<ul style="list-style-type: none"><li>➤ <b>\$6.2M</b> in Specialty Behavioral Health including substance use treatment<ul style="list-style-type: none"><li>• Peer Recovery support staff and treatment services in Behavioral Health</li></ul></li></ul>
Expanded Access to Dental Care	<ul style="list-style-type: none"><li>➤ <b>\$15.8M</b> in Specialty and Primary Care Dental Services<ul style="list-style-type: none"><li>• Adding Dental Care capacity at Del Valle Health &amp; Wellness Center</li><li>• Investing in facilities to expand capacity with the addition of future services at Hancock Specialty Clinic and Colony Park Health Center</li></ul></li></ul>

# Care Coordination

Value: Enhance the quality, safety, efficiency and effectiveness of care transitions to better meet patient needs, remove barriers and improve outcomes.

Community Need	FY 2025 Budget Highlights
Program Alignment and Augmentation	<ul style="list-style-type: none"> <li>➤ <b>\$3.5M</b> increase and 21 additional FTEs at Patient Navigation center</li> </ul>
Access to Hospital Care	<ul style="list-style-type: none"> <li>➤ <b>\$1M</b> increase and 12 additional staff within Transitions of Care to add additional care teams in emergency rooms and inpatient floors who will               <ul style="list-style-type: none"> <li>• Support care coordination with Central Health network providers</li> <li>• Identify, screen, track and monitor care to achieve better patient outcomes</li> <li>• Work with hospital case management teams to identify patients at high risk of readmission to proactively facilitate discharge planning</li> </ul> </li> </ul>
Social Determinants of Health (SDoH)	<ul style="list-style-type: none"> <li>➤ <b>\$875K</b> in Community Health Initiatives Fund expanding programs including food insecurity</li> </ul>

# Member Enrollment and Engagement

Value: Enhance member enrollment and engagement through multiple outreach, communication touch points and drive effective use of coverage program benefits.

Community Need	FY 2025 Budget Highlights
Enrollment and Eligibility	<ul style="list-style-type: none"><li>➤ <b>\$2.7M</b> increase in the Eligibility and Enrollment budget to expand:<ul style="list-style-type: none"><li>• On-site enrollment services at clinical locations</li><li>• Virtual enrollment options</li><li>• Justice involved screening and enrollment</li><li>• MAP and SOAR disability application assistance for individuals experiencing homelessness</li></ul></li></ul>
Coverage Programs, Benefits, and Structures	<ul style="list-style-type: none"><li>➤ Continue exploring opportunities to increase standard MAP enrollment period to 12 months</li><li>➤ Additional patient transitions to Sendero for dialysis, organ transplants and STEM cell therapy</li></ul>

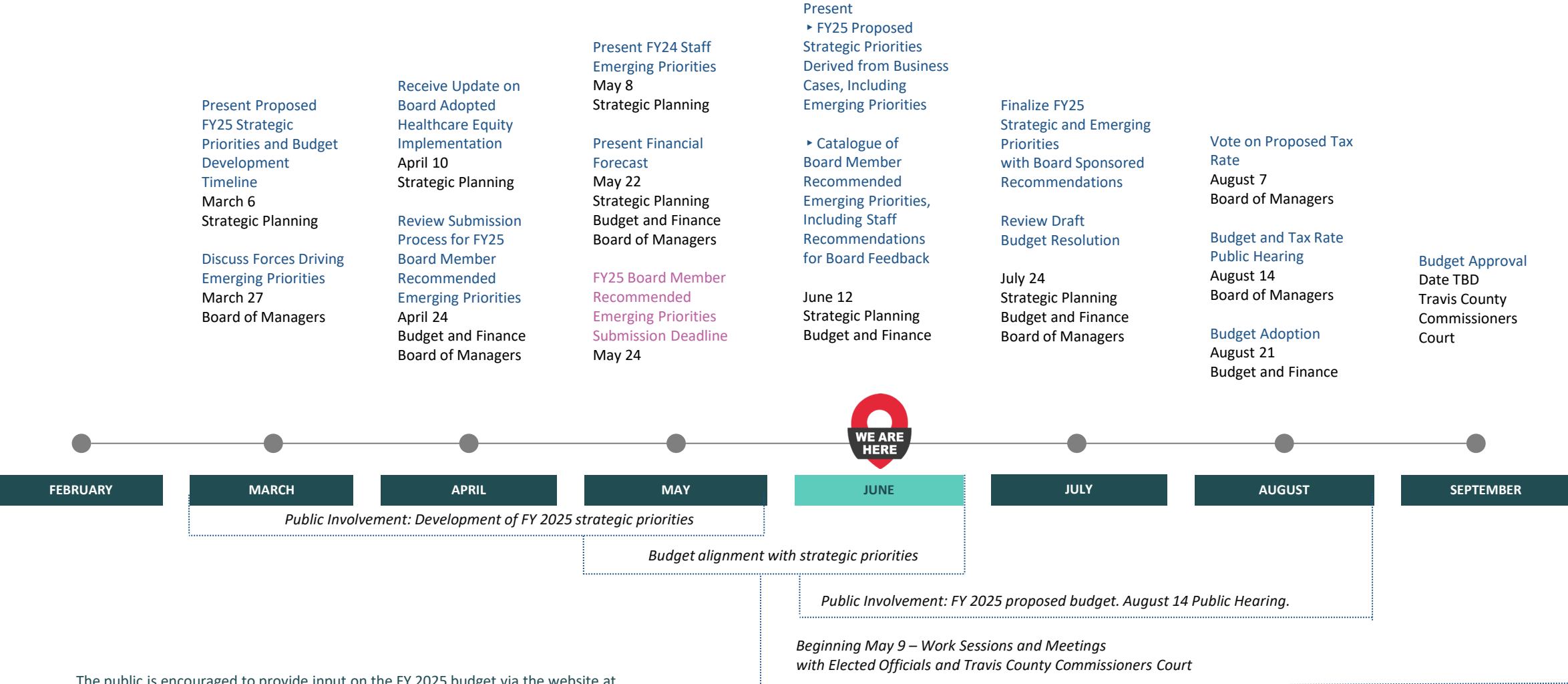


# System Of Care Infrastructure

Value: Strengthen organizational infrastructure, coordination and integration to support growth, joint service-delivery planning and timely sharing of healthcare data.

Community Need	FY 2025 Budget Highlights
Health Systems Interoperability and Technology/Data and Analytics	<ul style="list-style-type: none"><li>➤ <b>\$1.5M</b> increase with 13 additional FTEs to support the electronic medical records system and analyze data for performance and quality monitoring and reporting</li><li>➤ <b>\$5.8M</b> increase with 12 FTEs to support technology and cybersecurity enhancements necessary to operate a high functioning healthcare system</li></ul>
Foundation Enablers	<ul style="list-style-type: none"><li>➤ <b>\$17.4M</b> increase for clinical facilities and support costs</li><li>➤ <b>\$7.8M</b> to increase human resources needs, administration, compliance, revenue cycle functions, financial support, and community outreach and education to effectively communicate with the public and other stakeholders</li></ul>

# FY 2025 Strategic Priorities and Budget Development Timeline



The public is encouraged to provide input on the FY 2025 budget via the website at [centralhealth.net](http://centralhealth.net), at Board of Managers and committee meetings, during Community Conversations, and at public hearings.



" We are strongest  
when we are

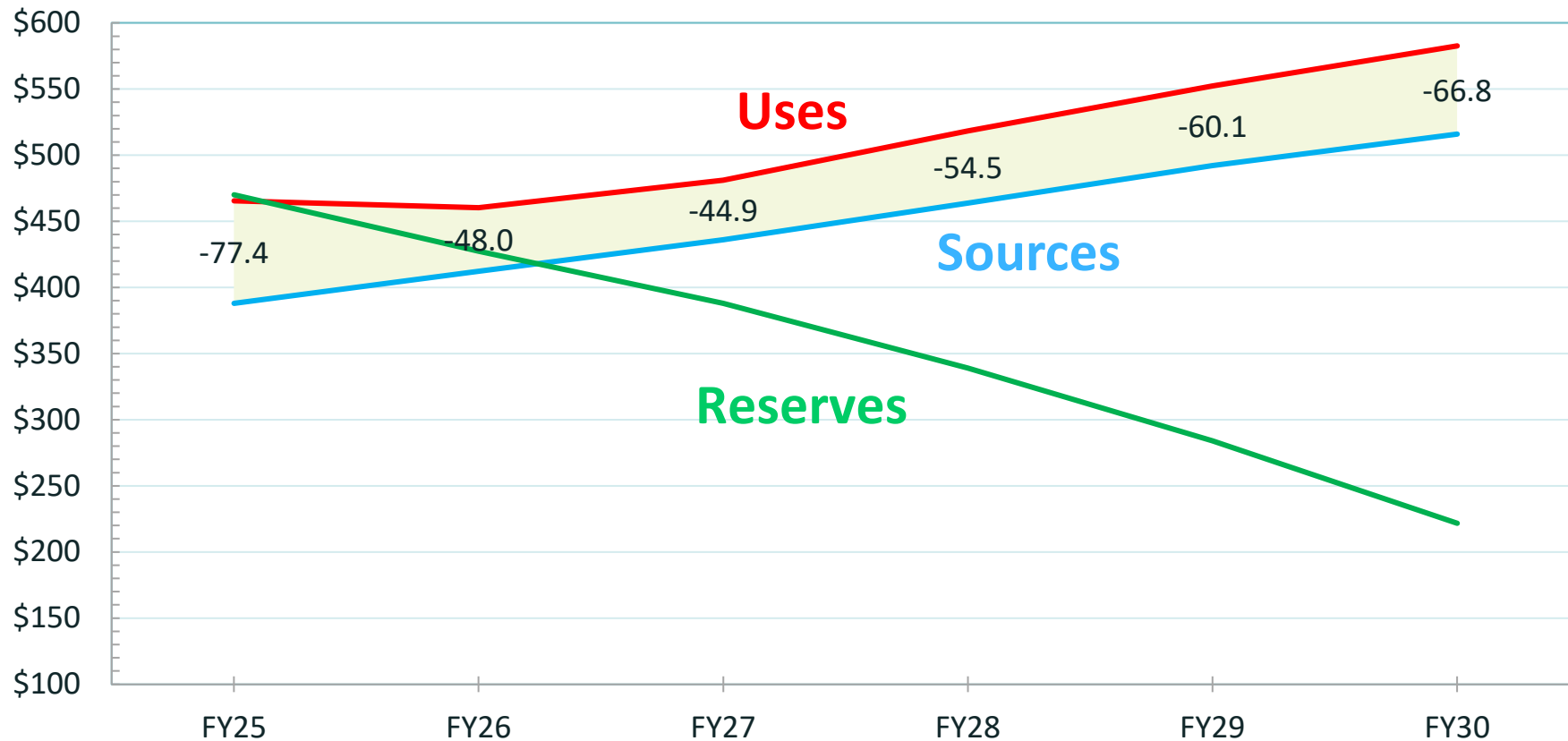
One Trunk, Many Branches"



# Thank you

Questions?

# Sources, Uses and Reserves Forecast



	FY25	FY26	FY27	FY28	FY29	FY30
Sources	\$388.1	\$412.3	\$436.1	\$463.9	\$492.2	\$515.9
Uses	\$465.5	\$460.2	\$481.0	\$518.4	\$552.3	\$582.7
Difference	-\$77.4	-\$48.0	-\$44.9	-\$54.5	-\$60.1	-\$66.8
Total Reserves	\$470.0	\$427.4	\$387.9	\$339.0	\$284.0	\$221.7



CENTRAL HEALTH

**Our Vision**

Central Texas is a model healthy community.

**Our Mission**

By caring for those who need it most, Central Health improves the health of our community.

**Our Values**

Central Health will achieve excellence through:

*Stewardship* - We maintain public trust through fiscal discipline and open and transparent communication.

*Innovation* - We create solutions to improve healthcare access.

*Right by All* - By being open, anti-racist, equity-minded, and respectful in discourse, we honor those around us and do right by all people.

*Collaboration* - We partner with others to improve the health of our community.

## **BUDGET & FINANCE COMMITTEE MEETING**

**June 12, 2024**

### **AGENDA ITEM 4**

Confirm the next Budget and Finance Committee meeting date, time, and location. (*Informational Item*)