

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

**Board Retreat**

Friday, August 14, 2009 and  
Saturday, August 15, 2009  
Tapatio Springs Resort  
314 Blue Heron Blvd.  
Boerne, Texas 78006

**TRUSTEES PRESENT:** Robert L. Jimenez, M.D., F.A.P.A., Chairman *(Saturday only)*  
Margaret M. Vera, Vice-Chairman  
Sam Williams, Jr., Secretary  
Diana M. Burns-Banks, M.D.  
Rebecca G. Brown  
Harry Griffin *(Saturday only)*  
Ted Terrazas

**TRUSTEES ABSENT:** Mary Rose Brown  
Carlos R. Orozco, M.D.

**STAFF PRESENT:** Leon Evans, President/Chief Executive Officer  
Charles H. Boone, Chief Operating Officer  
Mark A. Carmona, Chief Administrative Officer  
A. Camis Milam, M.D., Chief Medical Officer  
John A. Smith, General Counsel  
Gilbert Gonzales, Director of Communications-Diversion Initiatives  
Aaron Diaz, Director of Crisis/Diversion Services  
Cynthia Martinez, Director of Contract Management & Procurement  
Ramona Flores, Director of Human Resources  
Paul Sisler, Director of Information Services  
Sherry Bailey, Director of Utilization Management  
Bren Manaugh, Director of Quality Improvement  
Robert Guevara, Controller  
Tom Cobb, Director of Budget and Financial Services  
April Johnson-Calvert, Director of Third Party/Reimbursement  
Linda Rodriguez, Executive Assistant/Board Liaison  
Sara Maldonado, Administrative Technician II

**GUESTS PRESENT:** Richard P. Usatine, M.D.

The Retreat 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 Friday, August 14<sup>th</sup> and Saturday, August 15<sup>th</sup>, 2009 at Tapatio Springs Resort, 314 Blue Heron Blvd., Boerne, Texas.

## **CALL MEETING TO ORDER**

The meeting was called to order by Ms. Margaret Vera, Vice-Chair, at 2:25 p.m., with the following trustees present: Ms. Rebecca Brown and Messrs. Terrazas and Williams. Due to the lack of a quorum, the meeting could not officially proceed. However, the board members present proceeded to hear a brief introductory on new board member, Ted Terrazas, and in-coming new board member, Dr. Richard Usatine (who was not present at the time) by Ms. Vera. Upon arrival of Dr. Burns-Banks, a quorum was present and the meeting was officially called to order at 3:15 p.m.

**INVOCATION** – Given by Mr. Sam Williams, Jr.

The following represents a summary of the topics presented by staff and discussed by the board of trustees:

### **Day One: Friday, October 10, 2008**

The board was provided with the history and background on the Provider of Last Resort (POLR) and the resulting Local Network Development Plan (LNDP) as was legislatively put into place by HB 2439 during the 80<sup>th</sup> Legislative Session. It was noted that the LNDP is the structured process for planning and organizing the delivery of local mental health services.

The board was provided with an overview of the following as it relates to the LNDP:

- The Goals of the State (Department of State Health Services).
- The Key Principles in the Planning Process
- The Delineation of the Authority and Provider MH Functions
- The Center's Planning and Procurement Process
- The Role of the Public Advisory Committee (BHPNAC)
- What the Citizens of Bexar County are Asking For
- The Budgetary Impact/Impact on Center Resources/Services
- The Center's LNDP Procurement Process Timeline

Upon motion by Dr. Burns-Banks and seconded by Mr. Williams, the meeting was temporarily adjourned at 4:20 p.m., to be reconvened at 8:00 a.m. on Saturday, August 15, 2009.

### **Day Two: Saturday, August 15, 2009**

The meeting was reconvened at 8:03 a.m. on Saturday, August 15, 2009 with the following board members present: Drs. Jimenez and Burns-Banks; Mesdames Vera, RG Brown; and Messrs. Griffin, Terrazas, and Williams. Board members not present: Ms. Mary Rose Brown and Dr. Carlos Orozco.

The board was provided with an overview of the pilot proposal of the Local Planning and Network Development Plan. Following are some of the items presented for review and discussion:

- The Community's Goals and Needs
- Key Implementation Elements
- Patient and Budget Flow Processes
- Advantages and Challenges

- Comments and questions from the presentation and meeting with the Local Authority Network Advisory Committee (LANAC) in Austin on July 22, 2009

At this time, the board was informed that Mr. Evans had appointed an Authority Workgroup to work on the pilot proposal and was presented with the workgroup's considerations for review (copy on file).

Upon review and discussion, the following questions, concerns and comments were made by the board:

- Are there any other options?
- Effort to focus on:
  - Community Collaborations
  - Surveys reflective of community desire and feedback
- Continue to focus on the general principles (community desire)
- This is a dynamic living process and paradigm. Moving, changing, ever-changing.
  - Build in provisions that memorialize this
- Outcome focused in a continual quality improvement environment
- Shared learning between partners in network (e.g. CHCS knowledge of population as well as expertise) – How can we use the pilot money to influence Policy of Care?
- Build in the “optional goal” into the strategic planning work →road map.
  - If we have these things, this is what we could do (dashboard)
- Identify and develop risk mitigation strategies
  - depth of personnel
  - tools
  - capitation actuarials
- Keeping it simple in our communication with stakeholders
- What is the “critical mass” in implementation?
- Preamble that posits the case of integration of Behavioral and Physical Health
  - reference the Lancet article
  - win/win with natural partners
- Poor existing ways of sharing information
  - EMR/Sunrise
  - Advocate with State to push information-sharing
  - Possibly done with Interlocal Agreement and other agreements.
  - Possibly contract contingencies
- Ways to access TXMT data
  - trending
  - referral patterns

- Road map will show us our gaps
  - Information of today will set up next step
- Allocation of the incentive pool needs more work
- Patient Access #:
  - source of info: provider pool
  - more data to drive monitoring
- How do we build the pool of funding to do more than just the same?
  - Government help increase pool
  - Data driven arguments
  - Joint development of appeal
- 1<sup>st</sup> phase: Patients coming through the Crisis system
- Identify clinical outcomes and community outcomes
  - establish ahead of time
- Retain as many employees with new provider
  - they provide "magic touch" with our consumers
- Prepare presentation to community court
- Pre-set parameters for certain patient population
  - stability → night population
  - pull out certain T.G. and equalize incentive pool

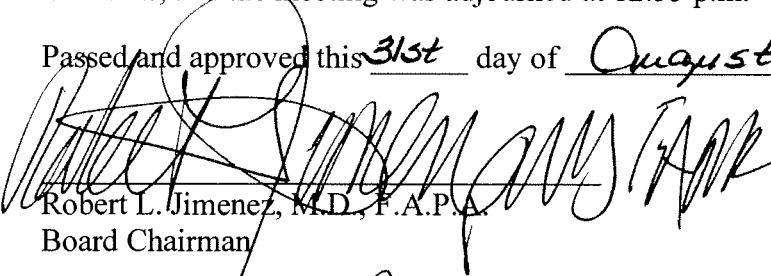
There was no official action taken by vote of the Board of Trustees on any matters presented by staff or discussed by the board during the Board Retreat.

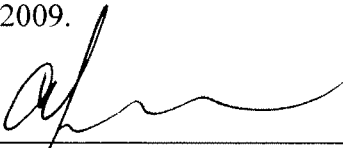
Members of the board thanked the staff for their hard work and diligence in putting the presentation together.

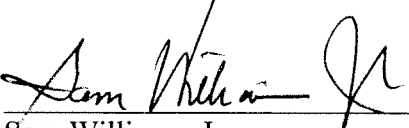
#### ADJOURNMENT

There being no further business to discuss, Dr. Burns-Banks moved for adjournment, seconded by Mr. Williams, and the meeting was adjourned at 12:35 p.m.

Passed and approved this 31<sup>st</sup> day of August, 2009.

  
Robert L. Jimenez, M.D., F.A.P.A.  
Board Chairman

  
Margaret M. Vera  
Board Vice-Chairman

  
Sam Williams, Jr.  
Secretary