

**NUECES COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS
Board of Managers - Regular Meeting
Tuesday, July 26, 2022 at 10:00 AM**

AGENDA

1. WELCOME

2. ROLL CALL OF BOARD OF MANAGERS

- Daniel W. Dain, Chairman
- Sylvia Tryon Oliver, Vice-Chairman
- Belinda Flores, R.N.
- Vishnu V. Reddy, M.D.
- John E. Valls, M.B.A.
- Mariana Garza, J.D.
- Efrain Guerrero, Jr.

3. CALL TO ORDER, ESTABLISHMENT OF QUORUM, MEETING POSTING CONFIRMATION, AND CLOSED MEETING NOTICE

A. Call to order.

B. Establish quorum.

C. Confirm posting of Meeting's public notice in accordance with Texas Open Meetings Act, Texas Government Code, Chapter 551. 8

D. Public notice is hereby given that the Board of Managers may elect to go into Closed Meeting session(s) at any time during the meeting to discuss any matter(s) listed on the agenda when so authorized by the provisions of the Open Meetings Act, Texas Government Code, Chapter 551.

4. WORKSHOP SESSION - Workshop Session is an open meeting for the purposes of information gathering and discussion between the Board of Managers and staff on the Workshop's listed agenda item(s) without taking action on the listed item(s) during the Workshop. Public comment will not be accepted during the Workshop Session.

A. Fiscal Year 2023 Budget (October 1, 2022 - September 30, 2023) and related matters.

B. Reimbursement of Nueces County's health care expenditures during Fiscal Year 2023, including reimbursement of the County's Public Health District-related expenses.

C. Provision and allocation of funding for Mental Health Programs during Fiscal Year 2023.

5. **REGULAR SESSION** - Following the Workshop Session, the Board of Managers will move into the Regular Session prior to taking any action(s) on items listed on the Consent or Regular Agendas.

A. **PUBLIC COMMENT** - Persons attending in-person and wishing to comment on any item(s) on the agenda or any subject within the Board's responsibilities must sign-in on the "Agenda Item Request to Speak" form provided at the entrance of the Board meeting room at least five (5) minutes prior to commencement of the meeting. Persons attending via audio or video conference and wishing to comment on any item(s) on the agenda or any subject within the Board's responsibilities must verbally notify the presiding officer of their desire to comment when the officer calls for public comment from those attending via audio and video conference. Commenters shall limit their comments to three (3) minutes, except that Commenters addressing the Board through a translator shall limit their comments to six (6) minutes.

B. **CONSENT AGENDA** - The Consent Agenda consists of those agenda items which are routine, administrative in nature, not in need of separate attention, and which a member of the Board has not requested be discussed separately. If requested to be discussed separately, that agenda item will be removed from the Consent Agenda by the presiding officer to the Regular Agenda and discussed as a part of the Regular Agenda at the appropriate time. All remaining items listed under the Consent Agenda will be voted upon in a single vote:

1. Approve May 23, 2022 minutes of:
 - a. Board of Managers Regular Meeting; and 18
 - b. Public Hearing relating to mandatory Health Care Provider Participation Program payments. 28
2. Receive listing of new vendors as of July 20, 2022; listing provided pursuant to Board of Managers Bylaws, §2.1.B and Texas Local Government Code, Chapter 176. 31
3. Receive summary payment information on Nueces County health care disbursements for Fiscal Year 2022 year-to-date:
 - a. Salaries, benefits, supplies, and intergovernmental transfers at/for City of Corpus Christi/Nueces County Public Health District;
 - b. Emergency medical services provided in unincorporated areas of Nueces County;

- c. Supplemental and jail diversion program funding for Nueces Center for Mental Health and Intellectual Disabilities;
- d. Medical services provided at County correctional facilities:
 - 1. Nueces County Jail; and
 - 2. Nueces County Juvenile Detention Center;
- e. Funding for alcohol and drug abuse treatment programs:
 - 1. Cenikor (Charlie's Place);
 - 2. Council on Alcohol and Drug Abuse; and
 - 3. Palmer Drug Abuse Program;
- f. Funding for diabetes prevention and supporting programs;
- g. Public health grants; and
- h. Legal and professional fees. (*Finance Committee*)

- 4. Receive summary imputed claims information on medical and hospital care provided to the Nueces Aid Program population consistent with the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement for fiscal year-to-date periods-ended May 31, 2022 and June 30, 2022. (*Finance Committee*) 32
- 5. Receive fiscal year-to-date Specified Annual Percentage-related revenue reports; revenue receipts pursuant to CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement, Section 5.03. (*Finance Committee*) 34
- 6. Receive monthly statement of escrow amounts deposited and/or withdrawn by CHRISTUS Spohn Health System Corporation; deposits pursuant to and consistent with Schedule 1 to CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement; receive statement for months-ended May 31, 2022 and June 30, 2022. (*Finance Committee*) 35
- 7. Receive statement of amounts deposited to and/or withdrawn from Local Provider Participation Fund for fiscal year-to-date; deposits and withdrawals pursuant to Board of Managers Order authorizing participation in a health care provider participation program pursuant to Texas Health and Safety Code, Chapter 298C, as amended. (*Finance Committee*) 43
- 8. Receive summary report of cumulative estimated provider payments and actual intergovernmental transfers made in support of local and other healthcare providers participating in Medicaid supplemental and 44

directed payment programs sponsored by the Texas Health and Human Services Commission (HHSC):

- a. Directed Payment Programs - Medicaid managed care organization payments to healthcare providers that support overall Medicaid program goals and objectives:
 - 1. Comprehensive Hospital Increase Reimbursement Program (CHIRP);
 - 2. Network Access Improvement Program (NAIP);
 - 3. Texas Incentives for Physicians and Professional Services (TIPPS);
 - 4. Uniform Hospital Rate Increase Program (UHRIP); and

- b. Supplemental Payment Programs - HHSC-directed payments made to hospitals for achieving certain goals or to support health care providers that see significant numbers of uninsured or persons without much money:
 - 1. Disproportionate Share Hospitals (DSH) program;
 - 2. Graduate Medical Education (GME);
 - 3. Hospital Uncompensated Care (UC) pool; and

- c. Phase-Out Programs:
 - 1. Delivery System Reform Incentive Payment (DSRIP) pool. (*Finance Committee*)

C. REGULAR AGENDA - The Regular Agenda consists of those agenda items which are non-routine, not administrative in nature, or are otherwise in need of separate attention. Each Regular Agenda item will be voted upon separately if action is required:

1. Finance Committee:

- a. Financial Statements:
 - 1. Receive and approve unaudited financial statements for the months and fiscal year-to-date periods ended May 31, 2022 and June 30, 2022. (**ACTION**) 45

- b. Investment Report:
 - 1. Receive Quarterly Investment Report for fiscal quarter-ended June 30, 2022. (**INFORMATION**) 59

- c. Investment Policy:
 - 1. Adopt Board of Managers Resolution relating to annual review of investment policy and investment strategies; adopt policy and strategies to be effective September 1, 2022; review and adoption pursuant to Texas Government Code, §2256.005(e). (**ACTION**) 66

 - 2. Adopt Board of Managers Resolution relating to annual review and adoption of listing of qualified broker/dealers 101

authorized to engage in investment transactions; adopted listing to be effective September 1, 2022; review and adoption pursuant to Texas Government Code, §2256.025. **(ACTION)**

d. Nueces Aid Program Enrollment:

1. Receive reports relating to Nueces Aid Program enrollment for the months-ended May 31, 2022 and June 30, 2022:

- 1. Total Persons and Households Enrolled; 107
- 2. Enrollment Summary; 111
- 3. Denials; 119
- 4. Application Processing Summary; and 121
- 5. Enrollment by Zip Code. **(INFORMATION)** 125

2. Federal Emergency Management Agency (FEMA):

a. Receive status report on Hagerty Consulting Project #1 (FEMA Public Assistance Project Application #674808) relating to recovery of Social Determinants of Health Study-related costs incurred in response to the COVID-19 pandemic. **(INFORMATION)** 131

3. Memorial Medical Center Demolition:

a. Receive April 22, 2022 letter from CHRISTUS Spohn Health System Corporation relating to removal of Hospital District-owned equipment located at Memorial Medical Center, 2606 Hospital Boulevard, Corpus Christi, Texas; equipment removal to precede remediation and demolition of the Memorial Medical Center facility pursuant to the CHRISTUS Spohn Health System Corporation Membership Agreement between CHRISTUS Spohn Health System Corporation, CHRISTUS Health, and Hospital District. **(INFORMATION)** 132

b. Receive May 20, 2022 letter to CHRISTUS Spohn Health System Corporation relating to requirements associated with CHRISTUS Spohn's demolition of the Memorial Medical Center Buildings and Infrastructure; requirements pursuant to Schedule 1, Section 3.5.4 of the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement between CHRISTUS Spohn Health System Corporation, CHRISTUS Health, and Hospital District. **(INFORMATION)** 134

c. Receive July 14, 2022 letter from CHRISTUS Spohn Health System Corporation providing demolition plans relating to CHRISTUS Spohn's demolition of the Memorial Medical Center Buildings and Infrastructure; demolition requirements pursuant to Schedule 1, Section 3.5.4 of the CHRISTUS Spohn Health System 136

Corporation Amended and Restated Membership Agreement between CHRISTUS Spohn Health System Corporation, CHRISTUS Health, and Hospital District. **(INFORMATION)**

4. Nueces County:

a. Discuss and consider action relating to Nueces County's request for reimbursement from the Hospital District for the County's payment of sick leave and vacation hours for County employees who worked at the Public Health District who were hired by the City of Corpus Christi after the Effective Date (March 1, 2022) of the Amended Cooperative Agreement for City-Operated Corpus Christi-Nueces County Public Health District. **(ACTION)** 149

b. Discuss proposed Interlocal Cooperation Agreement between Nueces County and Nueces County Hospital District relating to Hospital District's reimbursement of County's Public Health District-related expenses. **(INFORMATION)** 150

5. Community Mental Health Initiatives:

a. Receive and discuss information presented by Nueces County's Director of Mental Health Programs on Hospital District-funded and other mental health programs:

1. Receive Jail Diversion Programs Recommendation Report. **(INFORMATION)** 156

D. Administrator's Actions:

1. Ratify Administrator's action(s) performed as part of his duties directing the affairs of the District and/or as required by the Board of Managers; duties established pursuant to Texas Health and Safety Code, §281.026(e):

a. Extension of timeline for determining the Specified Annual Percentage for the period October 1, 2022 - September 30, 2023; process pursuant to Section 5.03 of the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement between CHRISTUS Spohn Health System Corporation, CHRISTUS Health, and Hospital District. **(ACTION)**

E. ADMINISTRATOR'S BRIEFING:

1. Next Board of Managers and Board Committee regular meetings (all meetings' dates, times, and locations are subject to change):

a. Finance Committee: August 23, 2022, 9:30 AM in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-A, Corpus Christi,

Texas 78401; and

b. Board of Managers: August 23, 2022, 10:00 AM in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-A, Corpus Christi, Texas 78401. Meeting will include Board Workshop on Hospital District's Fiscal Year 2023 Budget. **(INFORMATION)**

F. CLOSED MEETING - Public notice is hereby given that the Board of Managers may elect to go into closed meeting session(s) at any time during the meeting to discuss any matter(s) listed on the agenda, when so authorized by the provisions of the Open Meetings Act, Texas Government Code, Chapter 551 and the Board specifically expects to go into a closed session(s) on the matters listed below pursuant to the Act, §551.071 and §551.074. In the event the Board elects to go into closed session(s) regarding an agenda item(s), the section(s) of the Open Meetings Act authorizing the closed session will be publicly announced by the presiding officer. Should any final action, final decision, or final vote be required in the opinion of the Board with regard to any matter considered in closed session(s), then the final action, final decision, or final vote shall be either: (a) in the open meeting covered by the Notice upon reconvening of the public meeting; or (b) at a subsequent public meeting of the Board upon notice thereof, as the Board shall determine pursuant to applicable laws:

1. Consult with attorneys on and/or deliberate evaluation of the Administrator.
2. Consult with attorneys on matters relating to the Administrator's Employment Agreement for the period October 1, 2022 - September 30, 2026.

6. **OPEN MEETING** - Following the Closed Meeting, the Board of Managers will reconvene the Open Meeting prior to taking any action(s) on matters considered in the Closed Meeting or adjourning the meeting.

7. Consider final action, decision, or vote on matters considered in the Closed Meeting.
(ACTION AS NEEDED)

8. **ADJOURN**



Kara Sands

Nueces County Clerk
901 Leopard St #201
Corpus Christi, TX 78401

Main: (361)888-0580

Receipt: 20220722000028

Date: 07/22/2022

Time: 09:12AM

By: Brenda R

Station: CLERK02

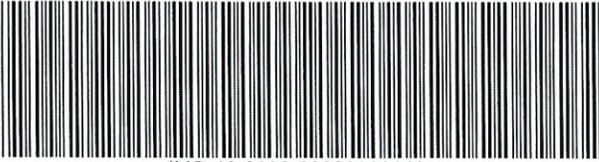
Status: DUPLICATE COPY

| <u>Seq</u> | <u>Item</u> | <u>Document Description</u> | <u>Number</u> | <u>Number Of</u> | <u>Amount</u> | <u>Serial Number</u> |
|------------|---------------|-----------------------------|---------------|------------------------|---------------|----------------------|
| 1 | Public Notice | PBN | 2022000380 | 9 | \$0.00 | |
| 2 | Public Notice | PBN | 2022000381 | 6 | \$0.00 | |
| | | | | Order Total (2) | \$0.00 | |

| <u>Seq</u> | <u>Payment Method</u> | <u>Transaction Id</u> | <u>Comment</u> | <u>Total</u> | |
|------------|-----------------------|-----------------------|----------------|---------------------------|--------|
| 1 | | | | \$0.00 | |
| | | | | Total Payments (1) | \$0.00 |
| | | | | Change Due | \$0.00 |

NUECES COUNTY HOSPITAL DISTRICT

For more information about the County Clerk's office and to search property records online, please visit <http://www.nuecesco.com/county-services/county-clerk>



VG-12-2022-2022000380

Nueces County
Kara Sands
Nueces County Clerk

Instrument Number: 2022000380

Public Notice

PUBLIC NOTICES

Recorded On: July 22, 2022 09:12 AM

Number of Pages: 9

" Examined and Charged as Follows: "

Total Recording: \$0.00



STATE OF TEXAS
Nueces County

I hereby certify that this Instrument was filed in the File Number sequence on the date/time printed hereon, and was duly recorded in the Official Records of Nueces County, Texas

Kara Sands
Nueces County Clerk
Nueces County, TX

***** THIS PAGE IS PART OF THE INSTRUMENT *****

Any provision herein which restricts the Sale, Rental or use of the described REAL PROPERTY because of color or race is invalid and unenforceable under federal law.

File Information:

Document Number: 2022000380
Receipt Number: 20220722000028
Recorded Date/Time: July 22, 2022 09:12 AM
User: Brenda R
Station: CLERK02

Record and Return To:

NUECES COUNTY HOSPITAL DISTRICT

RECEIVED

JUL 22 2022

KARA SANDS
CLERK OF THE COUNTY COURT
NUECES COUNTY, TEXAS

NOTICE OF PUBLIC MEETING

NUECES COUNTY HOSPITAL DISTRICT

BOARD OF MANAGERS

**Board of Managers - Regular Meeting
Tuesday, July 26, 2022 at 10:00 AM**

Location:

**Board of Managers Meeting Room, 555 N. Carancahua Street, Room 950-A, Corpus
Christi, Texas 78401**

MEETING IN-PERSON AND VIA VIDEOCONFERENCE

The Nueces County Hospital District (“NCHD”) Board of Managers or a Committee thereof as specified above will hold a meeting on the date and at the time and location shown above. Entry is through the main entrance of the Tower II Office Building near the intersection of North Carancahua Street and Mestina Street. The agenda item(s) for this meeting are set forth on the accompanying page(s); agenda item(s) are not necessarily considered in the order listed.

On September 1, 2021, Governor Abbott rescinded the suspension of certain Rules of the Texas Open Meetings Act which had allowed meetings to be conducted entirely virtually. The NCHD Board of Managers meeting will be conducted in-person and also via videoconference. Public participation will be available in-person as well as via videoconference as allowed under the Open Meetings Act. It is the intent that a quorum of the Board of Managers will be physically present at the location posted in this meeting notice. Any member of the Board of Managers participating by videoconference shall be visible and audible to the public whenever the member is speaking; Board member participation by audio only is no longer permitted. Although the meeting will be open to the public during the open portions of the meeting, any member of the public wishing to observe the meeting virtually and to participate virtually in public comment, may do so through the virtual meeting link shown on this meeting notice below, as well as the Nueces County Hospital District’s website.

Meeting materials are available via NCHD’s BoardBook meeting management system at: <https://meetings.boardbook.org/Public/Organization/1886>.

Attend via Videoconference, Join Zoom Meeting:

<https://nchdcc-org.zoom.us/j/5746765992?pwd=T2RVWFpZGJYdHYyQmp1VUdZeUc3Zz09>

Meeting ID: 574 676 5992

Passcode: 195957

**NUECES COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS
Board of Managers - Regular Meeting
Tuesday, July 26, 2022 at 10:00 AM**

AGENDA

1. WELCOME

2. ROLL CALL OF BOARD OF MANAGERS

- ___ Daniel W. Dain, Chairman
- ___ Sylvia Tryon Oliver, Vice-Chairman
- ___ Belinda Flores, R.N.
- ___ Vishnu V. Reddy, M.D.
- ___ John E. Valls, M.B.A.
- ___ Mariana Garza, J.D.
- ___ Efrain Guerrero, Jr.

3. CALL TO ORDER, ESTABLISHMENT OF QUORUM, MEETING POSTING CONFIRMATION, AND CLOSED MEETING NOTICE

A. Call to order.

B. Establish quorum.

C. Confirm posting of Meeting's public notice in accordance with Texas Open Meetings Act, Texas Government Code, Chapter 551.

D. Public notice is hereby given that the Board of Managers may elect to go into Closed Meeting session(s) at any time during the meeting to discuss any matter(s) listed on the agenda when so authorized by the provisions of the Open Meetings Act, Texas Government Code, Chapter 551.

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A. Fiscal Year 2023 Budget (October 1, 2022 - September 30, 2023) and related matters.

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1. Approve May 23, 2022 minutes of:

a. Board of Managers Regular Meeting; and

b. Public Hearing relating to mandatory Health Care Provider Participation Program payments.

2. Receive listing of new vendors as of July 20, 2022; listing provided pursuant to Board of Managers Bylaws, §2.1.B and Texas Local Government Code, Chapter 176.

3. Receive summary payment information on Nueces County health care disbursements for Fiscal Year 2022 year-to-date:

a. Salaries, benefits, supplies, and intergovernmental transfers at/for City of Corpus Christi/Nueces County Public Health District;

b. Emergency medical services provided in unincorporated areas of Nueces County;

c. Supplemental and jail diversion program funding for Nueces Center for Mental Health and Intellectual Disabilities;

d. Medical services provided at County correctional facilities:

1. Nueces County Jail; and
2. Nueces County Juvenile Detention Center;

e. Funding for alcohol and drug abuse treatment programs:

1. Cenikor (Charlie's Place);
2. Council on Alcohol and Drug Abuse; and
3. Palmer Drug Abuse Program;

f. Funding for diabetes prevention and supporting programs;

g. Public health grants; and

h. Legal and professional fees. (*Finance Committee*)

4. Receive summary imputed claims information on medical and hospital care provided to the Nueces Aid Program population consistent with the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement for fiscal year-to-date periods-ended May 31, 2022 and June 30, 2022. (*Finance Committee*)

5. Receive fiscal year-to-date Specified Annual Percentage-related revenue reports; revenue receipts pursuant to CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement, Section 5.03. (*Finance Committee*)

6. Receive monthly statement of escrow amounts deposited and/or withdrawn by CHRISTUS Spohn Health System Corporation; deposits pursuant to and consistent with Schedule 1 to CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement; receive statement for months-ended May 31, 2022 and June 30, 2022. (*Finance Committee*)

7. Receive statement of amounts deposited to and/or withdrawn from Local Provider Participation Fund for fiscal year-to-date; deposits and withdrawals pursuant to Board of Managers Order authorizing participation in a health care provider participation program pursuant to Texas Health and Safety Code, Chapter 298C, as amended. (*Finance Committee*)

8. Receive summary report of cumulative estimated provider payments and actual intergovernmental transfers made in support of local and other healthcare providers participating in Medicaid supplemental and directed payment programs sponsored by the Texas Health and Human Services Commission (HHSC):

a. Directed Payment Programs - Medicaid managed care organization payments to healthcare providers that support overall Medicaid program goals and objectives:

1. Comprehensive Hospital Increase Reimbursement Program (CHIRP);
2. Network Access Improvement Program (NAIP);
3. Texas Incentives for Physicians and Professional Services (TIPPS);
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1. **Finance Committee**:

a. Financial Statements:

1. Receive and approve unaudited financial statements for the months and fiscal year-to-date periods ended May 31, 2022 and June 30, 2022. (***ACTION***)

b. Investment Report:

1. Receive Quarterly Investment Report for fiscal quarter-ended June 30, 2022. (***INFORMATION***)

c. Investment Policy:

1. Adopt Board of Managers Resolution relating to annual review of investment policy and investment strategies; adopt policy and strategies to be effective September 1, 2022; review and adoption pursuant to Texas Government Code, §2256.005(e). (***ACTION***)
2. Adopt Board of Managers Resolution relating to annual review and adoption of listing of qualified broker/dealers authorized to engage in investment transactions; adopted listing to be effective September 1, 2022; review and adoption pursuant to Texas Government Code, §2256.025. (***ACTION***)

d. Nueces Aid Program Enrollment:

1. Receive reports relating to Nueces Aid Program enrollment for the months-ended May 31, 2022 and June 30, 2022:

1. Total Persons and Households Enrolled;
2. Enrollment Summary;
3. Denials;
4. Application Processing Summary; and
5. Enrollment by Zip Code. (*INFORMATION*)

2. Federal Emergency Management Agency (FEMA):

a. Receive status report on Hagerty Consulting Project #1 (FEMA Public Assistance Project Application #674808) relating to recovery of Social Determinants of Health Study-related costs incurred in response to the COVID-19 pandemic. (*INFORMATION*)

3. Memorial Medical Center Demolition:

a. Receive April 22, 2022 letter from CHRISTUS Spohn Health System Corporation relating to removal of Hospital District-owned equipment located at Memorial Medical Center, 2606 Hospital Boulevard, Corpus Christi, Texas; equipment removal to precede remediation and demolition of the Memorial Medical Center facility pursuant to the CHRISTUS Spohn Health System Corporation Membership Agreement between CHRISTUS Spohn Health System Corporation, CHRISTUS Health, and Hospital District. (*INFORMATION*)

b. Receive May 20, 2022 letter to CHRISTUS Spohn Health System Corporation relating to requirements associated with CHRISTUS Spohn's demolition of the Memorial Medical Center Buildings and Infrastructure; requirements pursuant to Schedule 1, Section 3.5.4 of the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement between CHRISTUS Spohn Health System Corporation, CHRISTUS Health, and Hospital District. (*INFORMATION*)

c. Receive July 14, 2022 letter from CHRISTUS Spohn Health System Corporation providing demolition plans relating to CHRISTUS Spohn's demolition of the Memorial Medical Center Buildings and Infrastructure; demolition requirements pursuant to Schedule 1, Section 3.5.4 of the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement between CHRISTUS Spohn Health System Corporation, CHRISTUS Health, and Hospital District. (*INFORMATION*)

4. Nueces County:

a. Discuss and consider action relating to Nueces County's request for reimbursement from the Hospital District for the County's payment of sick leave and vacation hours for County employees who worked at the Public Health District who were hired by the City of Corpus Christi after the Effective Date (March 1, 2022) of the Amended Cooperative Agreement for City-Operated Corpus Christi-Nueces County Public Health District. **(ACTION)**

b. Discuss proposed Interlocal Cooperation Agreement between Nueces County and Nueces County Hospital District relating to Hospital District's reimbursement of County's Public Health District-related expenses. **(INFORMATION)**

5. Community Mental Health Initiatives:

a. Receive and discuss information presented by Nueces County's Director of Mental Health Programs on Hospital District-funded and other mental health programs:

1. Receive Jail Diversion Programs Recommendation Report. **(INFORMATION)**

D. Administrator's Actions:

1. Ratify Administrator's action(s) performed as part of his duties directing the affairs of the District and/or as required by the Board of Managers; duties established pursuant to Texas Health and Safety Code, §281.026(e):

a. Extension of timeline for determining the Specified Annual Percentage for the period October 1, 2022 - September 30, 2023; process pursuant to Section 5.03 of the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement between CHRISTUS Spohn Health System Corporation, CHRISTUS Health, and Hospital District. **(ACTION)**

E. ADMINISTRATOR'S BRIEFING:

1. Next Board of Managers and Board Committee regular meetings (all meetings' dates, times, and locations are subject to change):

a. Finance Committee: August 23, 2022, 9:30 AM in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-A, Corpus Christi, Texas 78401; and

b. Board of Managers: August 23, 2022, 10:00 AM in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-A, Corpus Christi, Texas 78401. Meeting will include Board Workshop on Hospital District's Fiscal Year 2023 Budget. **(INFORMATION)**

F. CLOSED MEETING - Public notice is hereby given that the Board of Managers may elect to go into closed meeting session(s) at any time during the meeting to discuss any matter(s) listed on the agenda, when so authorized by the provisions of the Open Meetings Act, Texas Government Code, Chapter 551 and the Board specifically expects to go into a closed session(s) on the matters listed below pursuant to the Act, §551.071 and §551.074. In the event the Board elects to go into closed session(s) regarding an agenda item(s), the section(s) of the Open Meetings Act authorizing the closed session will be publicly announced by the presiding officer. Should any final action, final decision, or final vote be required in the opinion of the Board with regard to any matter considered in closed session(s), then the final action, final decision, or final vote shall be either: (a) in the open meeting covered by the Notice upon reconvening of the public meeting; or (b) at a subsequent public meeting of the Board upon notice thereof, as the Board shall determine pursuant to applicable laws:

1. Consult with attorneys on and/or deliberate evaluation of the Administrator.
2. Consult with attorneys on matters relating to the Administrator's Employment Agreement for the period October 1, 2022 - September 30, 2026.

6. OPEN MEETING - Following the Closed Meeting, the Board of Managers will reconvene the Open Meeting prior to taking any action(s) on matters considered in the Closed Meeting or adjourning the meeting.

7. Consider final action, decision, or vote on matters considered in the Closed Meeting.
(ACTION AS NEEDED)

8. ADJOURN

DRAFT

**MINUTES
BOARD OF MANAGERS
NUECES COUNTY HOSPITAL DISTRICT
REGULAR MEETING
MAY 23, 2022**

The Nueces County Hospital District Board of Managers met at 10:30 a.m., Monday, May 23, 2022 in the NCHD Board Room, at 555 N. Carancahua, Suite 950 – A, Corpus Christi, Texas.

HOSPITAL DISTRICT REPRESENTATIVES:

| | |
|--------------------------|--------------------------------------------------|
| Jonny F. Hipp | Administrator/CEO |
| Belinda E. Chism | Assistant Administrator, Administrative Services |
| Donna Littlefield | Director, Accounting & Finance |
| Wm Dewitt Alsup | Attorney, Alsup Law Firm |
| Mary Esther Guerra | Assistant County Attorney |
| Melissa Quintanilla | Executive Assistant/Human Resources |
| Carmina Hernandez Moreno | Administrative Assistant |

OTHERS PRESENT:

| | |
|---------------------|------------------------------------|
| Chris Nicosia | Corpus Christi Med. Ctr. |
| Javier Huerta | CIK |
| Jerry Kramer | CIK |
| Dr. Xavier Gonzales | Director of Mental Health |
| Andrea Kovarik | MHID |
| Mark Hendrix | MHID |
| Mike Davis | MHID |
| Comm JAG | Nueces County |
| Juan Pimentel | Nueces County Engineer |
| Adam Robison | Attorney – via Zoom |
| Comm Hernandez | Nueces County – via Zoom |
| Aaron V. Diaz | Deputy Director of MHP – via Zoom |
| Rebecca Rios | Christus Spohn Hospital – via Zoom |
| Robin Daniel | Adelanto Healthcare - via Zoom |
| Cleo Lawrence | Adelanto Healthcare - via Zoom |
| 151256585 | - via Zoom |
| DCH7795 | - via Zoom |

**MINUTES
BOARD OF MANAGERS
REGULAR MEETING
MAY 23, 2022**

1. WELCOME

2. ROLL CALL OF BOARD OF MANAGERS

- Daniel W. Dain, Chairman
- Sylvia Tryon Oliver, Vice-Chairman
- Belinda Flores, R.N.
- Vishnu V. Reddy, M.D.
- John E. Valls, M.B.A.
- Mariana Garza, J.D.
- Efrain Guerrero, Jr.

3. CALL TO ORDER, ESTABLISHMENT OF QUORUM, MEETING POSTING CONFIRMATION, AND CLOSED MEETING NOTICE

- A. Call to order – Mr. Daniel W. Dain, Chairman.
The meeting was called to order by Mr. Dain at 10:32 a.m.
- B. Establish quorum – Mr. Dain.
A quorum was present with six members in attendance.
- C. Confirm posting of Meeting's public notice in accordance with Texas Open Meetings Act, Texas Government Code, Chapter 551.
- D. Public notice is hereby given that the Board of Managers may elect to go into Closed Meeting session(s) at any time during the meeting to discuss any matter(s) listed on the agenda when so authorized by the provisions of the Open Meetings Act, Texas Government Code, Chapter 551.

4. REGULAR SESSION - Following the Workshop Session, the Board of Managers will move into the Regular Session prior to taking any action(s) on items listed on the Regular Agenda.

5. PUBLIC COMMENT - Persons attending in-person and wishing to comment on any item(s) on the agenda or any subject within the Board's responsibilities must sign-in on the "Agenda Item Request to Speak" form provided at the entrance of the Board meeting room at least five (5) minutes prior to commencement of the meeting. Persons attending via audio or video conference and wishing to comment on any item(s) on the agenda or any subject within the Board's responsibilities must verbally notify the presiding officer of their desire to comment when the officer calls for public comment from those attending via audio and video conference. Commenters shall limit their comments to three (3) minutes, except that Commenters addressing the Board through a translator shall limit their comments to six

**MINUTES
BOARD OF MANAGERS
REGULAR MEETING
MAY 23, 2022**

(6) minutes.

No one to speak for public comment.

6. CONSENT AGENDA - The Consent Agenda consists of those agenda items which are routine, administrative in nature, not in need of separate attention, and which a member of the Board has not requested be discussed separately. If requested to be discussed separately, that agenda item will be removed from the Consent Agenda by the presiding officer to the Regular Agenda and discussed as a part of the Regular Agenda at the appropriate time. All remaining items listed under the Consent Agenda will be voted upon in a single vote:

- A. Approve Board of Managers Regular Meeting minutes of March 22, 2022.
- B. Receive listing of new vendors as of May 19, 2022; listing provided pursuant to Board of Managers Bylaws, §2.1.B and Texas Local Government Code, Chapter 176.
- C. Receive hospital providers' quarterly reports relating to certain Indigent Care Affiliation Agreements associated with participation in the Texas Healthcare Transformation and Quality Improvement Program Medicaid 1115 Waiver for calendar quarter-ended March 31, 2022:
 - 1. CHRISTUS Spohn Health System Corporation Hospitals: Alice, Beeville, and Kleberg (Consolidated Report);
 - 2. Corpus Christi Medical Center; and
 - 3. Driscoll Children's Hospital.
- D. Receive summary payment information on Nueces County health care disbursements for Fiscal Year 2022 year-to-date:
 - 1. Salaries, benefits, supplies, and intergovernmental transfers at/for City of Corpus Christi/Nueces County Public Health District;
 - 2. Emergency medical services provided in unincorporated areas of Nueces County;
 - 3. Supplemental and jail diversion program funding for Nueces Center for Mental Health and Intellectual Disabilities;
 - 4. Medical services provided at County correctional facilities:
 - a. Nueces County Jail; and
 - b. Nueces County Juvenile Detention Center;

**MINUTES
BOARD OF MANAGERS
REGULAR MEETING
MAY 23, 2022**

5. Funding for alcohol and drug abuse treatment programs:

- a. Cenikor (Charlie's Place);
- b. Council on Alcohol and Drug Abuse; and
- c. Palmer Drug Abuse Program;

6. Funding for diabetes prevention and supporting programs;

7. Public health grants; and

8. Legal and professional fees. (*Finance Committee*)

E. Receive summary imputed claims information on medical and hospital care provided to the Nueces Aid Program population consistent with the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement for fiscal year-to-date period-ended April 30, 2022. (*Finance Committee*)

F. Receive fiscal year-to-date Specified Annual Percentage-related revenue reports; revenue receipts pursuant to CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement, Section 5.03. (*Finance Committee*)

G. Receive monthly statement of escrow amounts deposited and/or withdrawn by CHRISTUS Spohn Health System Corporation; deposits pursuant to and consistent with Schedule 1 to CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement; receive statements for months-ended March 31, 2022 and April 30, 2022. (*Finance Committee*)

H. Receive statement of amounts deposited to and/or withdrawn from Local Provider Participation Fund for fiscal year-to-date; deposits and withdrawals pursuant to Board of Managers Order authorizing participation in a health care provider participation program pursuant to Texas Health and Safety Code, Chapter 298C, as amended. (*Finance Committee*)

I. Receive summary report of cumulative estimated provider payments and actual intergovernmental transfers made in support of local and other healthcare providers participating in Medicaid supplemental and directed payment programs sponsored by the Texas Health and Human Services Commission (HHSC):

- 1. Directed Payment Programs - Medicaid managed care organization payments to healthcare providers that support overall Medicaid program goals and objectives:
 - a. Comprehensive Hospital Increase Reimbursement Program (CHIRP);
 - b. Network Access Improvement Program (NAIP);
 - c. Texas Incentives for Physicians and Professional Services (TIPPS);

**MINUTES
BOARD OF MANAGERS
REGULAR MEETING
MAY 23, 2022**

d. Uniform Hospital Rate Increase Program (UHRIP); and

2. Supplemental Payment Programs - HHSC-directed payments made to hospitals for achieving certain goals or to support health care providers that see significant numbers of uninsured or persons without much money:

- a. Disproportionate Share Hospitals (DSH) program;
- b. Graduate Medical Education (GME);
- c. Hospital Uncompensated Care (UC) pool; and

3. Phase-Out Programs:

- a. Delivery System Reform Incentive Payment (DSRIP) pool. (*Finance Committee*)

**Consent Agenda Approved. Motion by Mr. Valls
and seconded by Dr. Reddy. MOTION CARRIED.**

7. **REGULAR AGENDA** - The Regular Agenda consists of those agenda items which are non-routine, not administrative in nature, or are otherwise in need of separate attention. Each Regular Agenda item will be voted upon separately if action is required:

A. **Finance Committee**:

1. Receive and approve unaudited financial statements for the months and fiscal year-to-date periods ended March 31, 2022 and April 30, 2022. (***ACTION***)

**Motion by Mr. Valls and seconded by Mr. Guerrero.
MOTION CARRIED.**

2. Receive Quarterly Investment Report for fiscal quarter-ended March 31, 2022. (***INFORMATION***)

3. Receive reports relating to Nueces Aid Program enrollment for the months-ended March 31, 2022 and April 30, 2022:

- a. Total Persons and Households Enrolled;
- b. Enrollment Summary;
- c. Denials;
- d. Application Processing Summary; and
- e. Enrollment by Zip Code. (***INFORMATION***)

4. Receive information relating to the State Comptroller of Public Accounts' 2022 local and statewide pro rata distribution of investment proceeds from the Tobacco

**MINUTES
BOARD OF MANAGERS
REGULAR MEETING
MAY 23, 2022**

Permanent Settlement Trust Account; distributions pursuant to Texas Administrative Code, Title 25, Part 1, Chapter 102, Rule §102.2. **(INFORMATION)**

B. Memorial Medical Center:

1. Receive notice from CHRISTUS Spohn Health System Corporation relating to removal of Hospital District-owned equipment located at Memorial Medical Center, 2606 Hospital Boulevard, Corpus Christi, Texas; equipment removal to precede remediation and demolition of the Memorial Medical Center facility pursuant to the CHRISTUS Spohn Health System Corporation Membership Agreement between the parties. **(INFORMATION)**

C. Health Care Provider Participation Program:

1. Consider actions necessary for the Board of Managers to activate, implement, and operate a health care provider participation program for Fiscal Year 2022 (October 1, 2021 - September 30, 2022) (“Fiscal Year 2022”); program and actions pursuant to Texas Health and Safety Code, Chapter 298C, as amended:

a. Confirm posting of public notice of public hearing on the amounts of mandatory health care provider participation program payments that the Board of Managers intends to require of each institutional health care provider located in the Hospital District's boundaries under the program during Fiscal Year 2022 and how the revenue derived from the payments will be spent;

b. Confirm provision to each institutional health care provider of the public notice of public hearing on the amounts of mandatory health care provider participation program payments that the Board of Managers intends to require of each institutional health care provider located in the Hospital District's boundaries under the program during Fiscal Year 2022 and how the revenue derived from the payments will be spent; and

c. Adopt Board of Managers Order setting the mandatory payment rate for Fiscal Year 2022 at six percent (6%) of the net patient revenue of each institutional health care provider located in the boundaries of NCHD. **(ACTION)**

**Motion to approve Dr. Reddy and seconded by
Mr. Guerrero. MOTION CARRIED.**

MINUTES
BOARD OF MANAGERS
REGULAR MEETING
MAY 23, 2022

D. Community Mental Health Initiatives:

1. Receive and discuss information presented by Nueces County's Director of Mental Health Programs on Hospital District-funded and other mental health programs. *(INFORMATION)*

Dr. Gonzales presented a brief update.

2. Receive and discuss information and reports from the Nueces Center for Mental Health and Intellectual Disabilities ("NCMHID") relating to work performed under mental health agreements between Nueces County, NCMHID, and Nueces County Hospital District. *(INFORMATION)*

NCMHID presented an update.

E. Nueces County:

1. Discuss and consider action relating to Nueces County's request for reimbursement of the County's payment of vacation and sick leave benefits for County employees previously employed at the Public Health District prior to the current reformation agreement between the City and the County, effective March 1, 2022. *(ACTION)*

**Motion to table item E. 1. by Mr. Dain
Motion by Dr. Reddy and seconded by
Ms. Garza. MOTION CARRIED.**

2. Receive information from Commissioner Joe A. Gonzalez relating to future expansion needs of the medical examiner's facility located on Hospital District-owned property located at 2606 Hospital Boulevard, Corpus Christi, Texas. *(INFORMATION)*

8. Other Business:

- A. Adopt Board of Managers Order authorizing the sale of surplus or salvage property originating from Memorial Medical Center and other sources by online auction as determined by the Administrator; sale pursuant to Texas Health and Safety Code, §285.901. *(ACTION)*

**Motion by Dr. Reddy and seconded by Ms. Garza.
MOTION CARRIED.**

**MINUTES
BOARD OF MANAGERS
REGULAR MEETING
MAY 23, 2022**

B. Receive supporting documentation relating to Administrator's achievement of Employment Agreement-related performance goals during the fiscal year ended September 30, 2021 and approve related payment. *(INFORMATION & ACTION)*

**Motion by Dr. Reddy and seconded by Ms. Garza.
MOTION CARRIED.**

9. ADMINISTRATOR'S BRIEFING:

A. Next Board of Managers and Board Committee regular meetings (all meetings' dates, times, and locations are subject to change):

1. Finance Committee: June 28, 2022, 9:30 AM in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-A, Corpus Christi, Texas 78401; and

2. Board of Managers: June 28, 2022, 10:00 AM in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-A, Corpus Christi, Texas 78401. *(INFORMATION)*

10. **CLOSED MEETING** - Public notice is hereby given that the Board of Managers may elect to go into closed meeting session(s) at any time during the meeting to discuss any matter(s) listed on the agenda, when so authorized by the provisions of the Open Meetings Act, Texas Government Code, Chapter 551 and the Board specifically expects to go into a closed session(s) on the matters listed below pursuant to the Act, §551.071 and §551.074. In the event the Board elects to go into closed session(s) regarding an agenda item(s), the section(s) of the Open Meetings Act authorizing the closed session will be publicly announced by the presiding officer. Should any final action, final decision, or final vote be required in the opinion of the Board with regard to any matter considered in closed session(s), then the final action, final decision, or final vote shall be either: (a) in the open meeting covered by the Notice upon reconvening of the public meeting; or (b) at a subsequent public meeting of the Board upon notice thereof, as the Board shall determine pursuant to applicable laws:

A. Consult with attorneys on matters relating to Hospital District-owned real property.

B. Consult with attorneys on legal matters relating to the Hospital District's response to Nueces County's request for reimbursement of the County's payment of vacation and sick leave benefits for County employees previously employed at the Public Health

**MINUTES
BOARD OF MANAGERS
REGULAR MEETING
MAY 23, 2022**

District prior to the current reformation agreement between the City and the County, effective March 1, 2022.

C. Consult with attorneys and/or deliberate matters relating to evaluation of the Administrator.

11. **OPEN MEETING** - Following the Closed Meeting, the Board of Managers will reconvene the Open Meeting prior to taking any action(s) on matters considered in the Closed Meeting or adjourning the meeting.

Mr. Valls left meeting at 12:39 p.m.

Ms. Garza left meeting at 12:45 p.m.

12. Consider final action, decision, or vote on matters considered in the Closed Meeting. **(ACTION AS NEEDED)**

No action taken.

13. **ADJOURN**

Motion to adjourn by Mr. Dain. Motion by Mr. Guerrero and seconded by Ms. Oliver. Meeting adjourned at 1:03 p.m.

**MINUTES
BOARD OF MANAGERS
REGULAR MEETING
MAY 23, 2022**

PRESIDING OFFICER

Daniel W. Dain, Chairman

ATTEST:

Jonny F. Hipp, Secretary
Board of Managers
Nueces County Hospital District

Wm Dewitt Alsup, General Counsel
Nueces County Hospital District

DRAFT

**MINUTES
BOARD OF MANAGERS
NUECES COUNTY HOSPITAL DISTRICT
PUBLIC HEARING MEETING
MAY 23, 2022**

The Nueces County Hospital District Board of Managers met at 10:00 a.m., Monday, May 23, 2022 in the NCHD Board Room, at 555 N. Carancahua, Suite 950 – A, Corpus Christi, Texas.

HOSPITAL DISTRICT REPRESENTATIVES:

| | |
|--------------------------|--------------------------------------------------|
| Jonny F. Hipp | Administrator/CEO |
| Belinda E. Chism | Assistant Administrator, Administrative Services |
| Donna Littlefield | Director, Accounting & Finance |
| Wm Dewitt Alsup | Attorney, Alsup Law Firm |
| Mary Esther Guerra | Assistant County Attorney |
| Melissa Quintanilla | Executive Assistant/Human Resources |
| Carmina Hernandez Moreno | Administrative Assistant |

OTHERS PRESENT:

| | |
|----------------|------------------------------------------------|
| Chris Nicosia | Corpus Christi, Med. Ctr. |
| Andrea Kovarik | MHID |
| Mark Hendrix | MHID |
| Mike Davis | MHID |
| Javier Huerta | CIK |
| Jerry Kramer | CIK |
| Adam Robison | Attorney – via Zoom |
| Cleo Lawrence | Adelanto Healthcare- via Zoom |
| Luba Kubinski | - via Zoom |
| Joel Virgil | System Director, Christus Spohn – via Zoom |
| Colt Sullivan | Vice President, Adelanto Healthcare – via Zoom |
| Aaron V. Diaz | Deputy Director of MHP – via Zoom |
| Robin Daniel | Adelanto Healthcare - via Zoom |
| Rebecca Rios | Christus Spohn |
| Mike Pierce | CC Rehabilitation Hospital - via Zoom |
| 1512565852 | - via Zoom |
| DCH7795 | - via Zoom |

**MINUTES
BOARD OF MANAGERS
PUBLIC HEARING MEETING
MAY 23, 2022**

1. WELCOME

2. ROLL CALL OF BOARD OF MANAGERS

- Daniel W. Dain, Chairman
- Sylvia Tryon Oliver, Vice-Chairman
- Belinda Flores, RN
- Vishnu V. Reddy, M.D.
- John E. Valls, M.B.A.
- Mariana Garza, J.D.
- Efrain Guerrero, Jr.

3. CALL TO ORDER, ESTABLISHMENT OF QUORUM, AND PUBLIC HEARING POSTING CONFIRMATION

- A. Call to order – Mr. Daniel W. Dain, Chairman
The meeting was called to order by Mr. Dain at 10:04 a.m.
- B. Establish quorum – Mr. Dain
A quorum was present with five members in attendance.

Daniel W. Dain, Chairman – PRESENT
Sylvia Tryon Oliver, Vice-Chairman – PRESENT
John E. Valls, M.B.A., Member – PRESENT
Marian Garza, J.D., Member – PRESENT @ 10:15 a.m.
Efrain Guerrero, Jr., Member – PRESENT
Belinda Flores, RN, Member – ABSENT
Vishnu V. Reddy, M.D., Member – ABSENT

- C. Confirm posting of public hearing notice in accordance with Texas Open Meetings Act, Texas Government Code, Chapter 551.

4. OPEN PUBLIC HEARING

No one to speak for public comment.

**MINUTES
BOARD OF MANAGERS
PUBLIC HEARING MEETING
MAY 23, 2022**

5. Health Care Provider Participation Program:

A. The Nueces County Hospital District ("District") Board of Managers ("Board") will conduct a public hearing to receive public comments regarding the mandatory Health Care Provider Participation Program ("Program") payment of six percent (6%) of net patient revenue that the Board intends to require of each institutional health care provider located within the District's boundaries under the Program for District Fiscal Year 2022 (October 1, 2021 - September 30, 2022) and comments regarding the use of revenue derived from the payments; Program authorized by Texas Health & Safety Code ("Health Code"), Chapter 298C, as amended; and public hearing conducted pursuant to Health Code, §298C.101.

6. CLOSE PUBLIC HEARING

7. ADJOURN

Motion to adjourn by Mr. Dain. Motion by Mr. Valls and seconded by Mr. Guerrero. Meeting adjourned at 10:20 a.m.

**Nueces County Hospital District
Vendor Information List - Additional Vendors-Conflict of Interest Disclosure**

| <u>Vendor ID</u> | <u>Vendor Name</u> | <u>Address</u> | <u>City</u> | <u>State</u> | <u>ZIP</u> |
|------------------|--------------------------|---------------------------------------------------|----------------|--------------|------------|
| 2070 | Hagerty Consulting, Inc. | Attn: Keith King 1618 Orrington Ave, Suite 201 | Evanston | IL | 60201 |
| 2071 | Garcia, Marina | 3100 Santa Fe, Apt 27A | Corpus Christi | TX | 78404 |

**Nueces County Hospital District
Imputed Claims Experience for Calendar Year 2022
As if Adjudicated January 1, 2022 through May 31, 2022**

| Service | Claims | Billed | Contract Amt. | Co Insurance | Net |
|----------------|---------------|---------------|----------------------|---------------------|------------|
| ER | 1,570 | 9,476,739 | 1,116,241 | 51,978 | 1,064,263 |
| ASU | 363 | 6,179,013 | 520,231 | 23,667 | 496,564 |
| Clinic | 6,572 | 4,856,155 | 1,329,352 | 54,985 | 1,274,367 |
| Obs | 81 | 2,739,422 | 584,087 | 22,248 | 561,839 |
| OP | 4,453 | 18,277,425 | 4,398,571 | 173,883 | 4,224,688 |
| Subtotal | 13,039 | 41,528,754 | 7,948,482 | 326,761 | 7,621,721 |
| IP | 293 | 19,335,921 | 2,984,763 | 69,757 | 2,915,006 |
| SNF | - | | | | - |
| RX | 47,676 | 18,412,343 | 7,012,640 | 194,318 | 6,818,322 |
| Physician | 5,257 | 3,062,926 | 926,987 | 26,817 | 900,170 |
| Total | 66,265 | 82,339,944 | 18,872,872 | 617,653 | 18,255,219 |

NOTE:

The Revised and Restated Indigent Care Agreement was terminated effective September 30, 2012. After that date, the District no longer makes payment to CHRISTUS Spohn for providing health care services to the Nueces Aid Indigent population. Under the terms of the Membership Agreement amended and restated effective November 18, 2015, CHRISTUS Spohn has committed to continue to provide health care services to the Nueces Aid Indigent population and, and at the request of the District, continues to submit informational claims to the District to permit the District to monitor the volume of health care services furnished to the Nueces Aid Indigent population.

**Nueces County Hospital District
Imputed Claims Experience for Calendar Year 2022
As if Adjudicated January 1, 2022 through June 30, 2022**

| Service | Claims | Billed | Contract Amt. | Co Insurance | Net |
|----------------|---------------|-------------------|----------------------|---------------------|-------------------|
| ER | 1,483 | 8,926,914 | 1,062,054 | 52,019 | 1,010,035 |
| ASU | 313 | 5,409,217 | 438,980 | 14,427 | 424,553 |
| Clinic | 6,166 | 4,493,960 | 1,229,606 | 50,204 | 1,179,402 |
| Obs | 72 | 2,361,858 | 503,674 | 20,798 | 482,876 |
| OP | 4,104 | 17,234,554 | 4,158,463 | 166,454 | 3,992,009 |
| Subtotal | 12,138 | 38,426,503 | 7,392,777 | 303,902 | 7,088,875 |
| | | | | | |
| IP | 289 | 23,099,764 | 2,782,925 | 73,193 | 2,709,732 |
| SNF | - | | | | - |
| RX | 58,021 | 22,101,936 | 8,446,351 | 240,522 | 8,205,828 |
| Physician | 28,255 | 8,986,794 | 2,807,341 | 92,590 | 2,714,751 |
| | | | | | |
| Total | 98,703 | 92,614,997 | 21,429,394 | 710,207 | 20,719,186 |

NOTE:

The Revised and Restated Indigent Care Agreement was terminated effective September 30, 2012. After that date, the District no longer makes payment to CHRISTUS Spohn for providing health care services to the Nueces Aid Indigent population. Under the terms of the Membership Agreement amended and restated effective November 18, 2015, CHRISTUS Spohn has committed to continue to provide health care services to the Nueces Aid Indigent population and, and at the request of the District, continues to submit informational claims to the District to permit the District to monitor the volume of health care services furnished to the Nueces Aid Indigent population.

Nueces County Hospital District
 Spohn Corporate Member Revenue Analysis
 Fiscal Year 2022

Member Revenue % 3.0%

| | October | November | December | January | February | March | April | May | June | July | August | September | Totals |
|-----------------------------|--------------|------------|--------------|--------------|------------|------------|--------------|------------|--------------|------------|--------|-----------|--------------|
| Membership Revenue Deposits | | | | | | | | | | | | | |
| Week 1 | 165,178.26 | 183,713.87 | 243,955.67 | 254,373.65 | 203,576.75 | 230,983.47 | 232,339.33 | 206,540.51 | 223,259.27 | 271,196.28 | | | 2,215,117.06 |
| Week 2 | 269,943.70 | 144,144.12 | 293,334.36 | 261,243.73 | 242,771.93 | 247,322.51 | 207,626.47 | 216,345.83 | 226,428.79 | 182,609.35 | | | 2,291,770.79 |
| Week 3 | 189,474.15 | 254,845.66 | 254,569.32 | 202,153.37 | 204,783.71 | 227,240.44 | 158,636.07 | 232,094.98 | 386,278.02 | 231,254.31 | | | 2,341,330.03 |
| Week 4 | 251,640.56 | 204,063.64 | 282,539.21 | 178,046.34 | 186,845.25 | 235,735.15 | 290,899.77 | 249,808.76 | 302,176.76 | | | | 2,181,755.44 |
| Week 5 | 249,925.11 | | | 222,033.60 | | | 218,396.71 | | | | | | 690,355.42 |
| Subtotal | 1,126,161.78 | 786,767.29 | 1,074,398.56 | 1,117,850.69 | 837,977.64 | 941,281.57 | 1,107,898.35 | 904,790.08 | 1,138,142.84 | 685,059.94 | 0.00 | 0.00 | 9,720,328.74 |



Bank of America, N.A.
135 S. LaSalle Street, Suite 1840 Chicago, IL 60603

TEMP-RETURN SERVICE REQUESTED

MB 01 001300 59780 H 5 A
NUECES COUNTY HOSPITAL DISTRICT
ATTN: JONNY HIPPI
555 NORTH CARANCAHUA ST. SUITE 950
CORPUS CHRISTI TX 78401-0835

Account Number [REDACTED]
Statement Period 05/01/2022 through 05/31/2022
Account Title CHRISTUS SPOHN HEALTH SYSTEM CORP /
NUECES COUNTY HOSPITAL DISTRICT
CHRISTUS SPOHN / NUECES CNTY ESCROW

ADMINISTRATIVE OFFICER GCAS CLIENT SERVICE.
13129923272 GCAS_AMRS_ESCROW_CLIENT_SERVIC
E@BOFA.COM

ALTERNATE CONTACT CLIENT SERVICE.
13129923272 GCAS_AMRS_ESCROW_CLIENT_SERVIC
E@BOFA.COM

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PARTICIPATING PORTFOLIOS

PORTFOLIO NUMBER [REDACTED] PORTFOLIO NAME CHRISTUS SPOHN / NUECES CNTY ESCROW

PARTICIPATING PORTFOLIOS

PORTFOLIO NUMBER [REDACTED] PORTFOLIO NAME [REDACTED]

received
06/10/22



CASH AND EQUIVALENTS

| | | | |
|--------------|----------------------------------------------------|--------------|----------|
| 8,607,153.47 | BLACKROCK TREASURY TRUST - CASH MANAGEMENT 0012 | 8,607,153.47 | 7,414.20 |
|--------------|----------------------------------------------------|--------------|----------|

| | | | |
|-----------------------------------|--|---------------------|-----------------|
| TOTAL CASH AND EQUIVALENTS | | 8,607,153.47 | 7,414.20 |
|-----------------------------------|--|---------------------|-----------------|

TRANSACTION SUMMARY

| DESCRIPTION | INCOME CASH | PRINCIPAL CASH | COST |
|-----------------------------|-------------|----------------|---------------------|
| BEGINNING BALANCE | 0.00 | 0.00 | 8,607,018.59 |
| DIVIDENDS | 0.00 | 0.00 | 0.00 |
| INTEREST | 0.00 | 134.88 | 0.00 |
| OTHER INCOME | 0.00 | 0.00 | 0.00 |
| RECEIPTS & DEPOSITS | 0.00 | 0.00 | 0.00 |
| SALES & DISPOSITIONS | 0.00 | 0.00 | 0.00 |
| INTRA ACCOUNT TRANSFERS | 0.00 | 0.00 | 0.00 |
| DISTRIBUTIONS & WITHDRAWALS | 0.00 | 0.00 | 0.00 |
| PURCHASES & ACQUISITIONS | 0.00 | -134.88 | 134.88 |
| FEES & EXPENSES | 0.00 | 0.00 | 0.00 |
| MISCELLANEOUS | 0.00 | 0.00 | 0.00 |
| ENDING BALANCE | 0.00 | 0.00 | 8,607,153.47 |

TRANSACTION DETAIL

| DATE | DESCRIPTION | INCOME CASH | PRINCIPAL CASH | COST |
|----------|----------------------------------------------------|-------------|----------------|--------------|
| | BEGINNING BALANCE | 0.00 | 0.00 | 8,607,018.59 |
| 05/02/22 | INTEREST PAYMENT PAYABLE 05/01/22 | | 134.88 | |
| | BLACKROCK TREASURY TRUST - CASH MANAGEMENT 0012 | | | |

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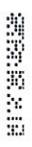
TRANSACTION DETAIL (continued)

| DATE | DESCRIPTION | INCOME CASH | PRINCIPAL CASH | COST |
|----------|----------------------------------------------------------------------|-------------|----------------|---------------------|
| 05/03/22 | SWEEP PURCHASE 134.88 SHARES | | -134.88 | 134.88 |
| | TRADE 05/03/22 BLACKROCK TREASURY TRUST - CASH MANAGEMENT 0012 | | | |
| | ENDING BALANCE | 0.00 | 0.00 | 8,607,153.47 |

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01/JUN/2022 CA NUECES COUNTY HOSPITAL DISTRICT 05/01/2022 thru 05/31/2022

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Cash Sweep Clients

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01/JUN/2022 CA NUECES COUNTY HOSPITAL DISTRICT 05/01/2022 thru 05/31/2022

CASH AND EQUIVALENTS

| | | | | |
|-----------------------------------|----------------------------------------------------|---------------------|---------------------|------------------|
| 8,607,431.37 | BLACKROCK TREASURY TRUST - CASH MANAGEMENT 0012 | 8,607,431.37 | 8,607,431.37 | 50,603.56 |
| TOTAL CASH AND EQUIVALENTS | | 8,607,431.37 | 8,607,431.37 | 50,603.56 |

TRANSACTION SUMMARY

| DESCRIPTION | INCOME CASH | PRINCIPAL CASH | COST |
|-----------------------------|-------------|----------------|---------------------|
| BEGINNING BALANCE | 0.00 | 0.00 | 8,607,153.47 |
| DIVIDENDS | 0.00 | 0.00 | 0.00 |
| INTEREST | 0.00 | 277.90 | 0.00 |
| OTHER INCOME | 0.00 | 0.00 | 0.00 |
| RECEIPTS & DEPOSITS | 0.00 | 0.00 | 0.00 |
| SALES & DISPOSITIONS | 0.00 | 0.00 | 0.00 |
| INTRA ACCOUNT TRANSFERS | 0.00 | 0.00 | 0.00 |
| DISTRIBUTIONS & WITHDRAWALS | 0.00 | 0.00 | 0.00 |
| PURCHASES & ACQUISITIONS | 0.00 | -277.90 | 277.90 |
| FEES & EXPENSES | 0.00 | 0.00 | 0.00 |
| MISCELLANEOUS | 0.00 | 0.00 | 0.00 |
| ENDING BALANCE | 0.00 | 0.00 | 8,607,431.37 |

TRANSACTION DETAIL

| DATE | DESCRIPTION | INCOME CASH | PRINCIPAL CASH | COST |
|----------|----------------------------------------------------|-------------|----------------|---------------------|
| | BEGINNING BALANCE | 0.00 | 0.00 | 8,607,153.47 |
| 06/01/22 | INTEREST PAYMENT PAYABLE 06/01/22 | | 277.90 | |
| | BLACKROCK TREASURY TRUST - CASH MANAGEMENT 0012 | | | |





TRANSACTION DETAIL (continued)

| DATE | DESCRIPTION | INCOME CASH | PRINCIPAL CASH | COST |
|----------|----------------------------------------------------------------------|-------------|----------------|---------------------|
| 06/01/22 | SWEEP PURCHASE 277.9 SHARES | | -277.90 | 277.90 |
| | TRADE 06/01/22 BLACKROCK TREASURY TRUST - CASH MANAGEMENT 0012 | | | |
| | ENDING BALANCE | 0.00 | 0.00 | 8,607,431.37 |

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01/JUL/2022 CA NUECES COUNTY HOSPITAL DISTRICT 06/01/2022 thru 06/30/2022





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Nueces County Hospital District
 Nueces LPPF Activity
 Fiscal Year 2022

| | October | November | December | January | February | March | April | May | June | July | August | September | Totals |
|-------------------------------------|-----------------------|----------------------|----------------------|-----------------------|------------------------|----------------------|----------------------|------------------------|------------------------|------------------------|-------------------|-------------------|-------------------------|
| Beginning Balan | 17,763,074.64 | 25,618,451.58 | 32,852,981.60 | 51,846,573.63 | 50,419,827.17 | 44,619,075.29 | 44,619,537.37 | 44,620,197.49 | 28,813,418.17 | 17,532,304.33 | 236,706.39 | 236,706.39 | 17,763,074.64 |
| Deposits | | | | | | | | | | | | | |
| Christus Spohn | | 7,234,287.00 | 7,234,287.00 | | 7,234,287.00 | | | 7,234,287.00 | 17,186,006.50 | | | | 46,123,154.50 |
| CCMC | 5,650,342.75 | | 5,650,342.75 | | 5,650,342.75 | | | 5,650,342.75 | 5,715,374.00 | | | | 28,316,745.00 |
| CC Rehab | 244,647.50 | | 244,647.50 | | 244,647.50 | | | 244,647.50 | 261,256.50 | | | | 1,239,846.50 |
| Driscoll | 4,669,067.75 | | 4,669,067.75 | | 4,669,067.75 | | | 4,669,067.75 | 4,689,720.50 | | | | 23,365,991.50 |
| PAM Specialty | 299,980.75 | | 299,980.75 | | 299,980.75 | | | 299,980.75 | 341,892.50 | | | | 1,541,815.50 |
| PAM Rehab | 268,249.75 | | 268,249.75 | | 268,249.75 | | | 268,249.75 | 340,715.25 | | | | 1,413,714.25 |
| S. TX Surgical | 626,744.50 | | 626,744.50 | | 626,744.50 | | | 626,744.50 | 604,730.50 | | | | 3,111,708.50 |
| Subtotal | 11,759,033.00 | 7,234,287.00 | 18,993,320.00 | 0.00 | 18,993,320.00 | 0.00 | 0.00 | 18,993,320.00 | 29,139,693.75 | 0.00 | 0.00 | 0.00 | 105,112,975.75 |
| Interest | 119.10 | 243.02 | 272.03 | 386.81 | 251.39 | 462.08 | 660.12 | 306.19 | 406.84 | | | | 3,107.58 |
| Transfers In | | | | | | | | | | | | | 0.00 |
| Total Deposits | 11,759,152.10 | 7,234,530.02 | 18,993,592.03 | 386.81 | 18,993,571.39 | 462.08 | 660.12 | 18,993,626.19 | 29,140,102.59 | 0.00 | 0.00 | 0.00 | 105,116,083.33 |
| Inter-Governmental Transfers | | | | | | | | | | | | | |
| UC | (3,903,775.16) | | | (1,427,133.27) | (24,794,323.27) | | | | | (9,817,344.67) | | | (28,698,098.43) |
| DSRIP | | | | | | | | | | | | | (11,244,477.94) |
| CHIRP | | | | | | | | (34,294,607.97) | (39,827,931.42) | | | | (74,122,539.39) |
| TIPPS | | | | | | | | (355,797.54) | (593,285.01) | | | | (949,082.55) |
| DSH | | | | | | | | | | (7,478,253.27) | | | (7,478,253.27) |
| UHRIP | | | | | | | | | | | | | 0.00 |
| Total IGT's | (3,903,775.16) | 0.00 | 0.00 | (1,427,133.27) | (24,794,323.27) | 0.00 | 0.00 | (34,650,405.51) | (40,421,216.43) | (17,295,597.94) | 0.00 | 0.00 | (122,492,451.58) |
| Transfers Out | | | | | | | | (150,000.00) | | | | | (150,000.00) |
| Bank Fees | | | | | | | | | | | | | 0.00 |
| Ending Balance | 25,618,451.58 | 32,852,981.60 | 51,846,573.63 | 50,419,827.17 | 44,619,075.29 | 44,619,537.37 | 44,620,197.49 | 28,813,418.17 | 17,532,304.33 | 236,706.39 | 236,706.39 | 236,706.39 | 236,706.39 |

Nueces County Hospital District
 Medicaid Payment Programs/Directed Payment Programs
 Estimated Provider Payments & IGT History
 FY2012 to Present

| Provider | DSRIP | UC | DSH | UHRIP | NAIP | CHIRP | TIPPS | TOTALS | |
|-----------------------------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|------------------|----------------------|-------------|
| Christus Spohn - Corpus Christi | 393,130,704 | 469,883,767 | 224,598,812 | 55,698,685 | 112,652,901 | 40,570,941 | 2,610,423 | 1,299,146,231 | 51% |
| Christus Spohn Rural (Alice/Beeville/Kleberg) | 48,398,858 | 171,637,909 | 0 | 15,020,682 | 0 | 9,821,198 | 0 | 244,878,647 | 10% |
| Corpus Christi Medical Center | 121,850,134 | 139,171,092 | 0 | 48,200,011 | 0 | 59,307,523 | 0 | 368,528,760 | 14% |
| Driscoll Childrens Hospital | 314,313,359 | 19,578,099 | 0 | 0 | 0 | 187,868,754 | 479,717 | 522,239,929 | 21% |
| Detar Hospital | 24,949,804 | 47,723,156 | 0 | 15,382,457 | 0 | 0 | 0 | 88,055,417 | 3% |
| North Bay General Hospital | 0 | 0 | 0 | 504,542 | 0 | 0 | 0 | 504,542 | 0% |
| South Texas Surgical Hospital | 0 | 0 | 0 | 904,786 | 0 | 0 | 0 | 904,786 | 0% |
| Corpus Christ Rehab Hospital | 0 | 0 | 0 | 296,670 | 0 | 0 | 0 | 296,670 | 0% |
| PAM Specialty Hospital | 0 | 0 | 0 | 1,330 | 0 | 0 | 0 | 1,330 | 0% |
| PAM Rehab Hospital | 0 | 0 | 0 | 147,501 | 0 | 0 | 0 | 147,501 | 0% |
| Nueces County Health Dept | 20,067,084 | 0 | 0 | 0 | 0 | 0 | 0 | 20,067,084 | 1% |
| TOTALS | 922,709,943 | 847,994,023 | 224,598,812 | 136,156,663 | 112,652,901 | 297,568,416 | 3,090,140 | 2,544,770,897 | 100% |

* Estimated Receipts for Entities (IGT + FMAP), Subject to HHSC Review and Administrative Fees

| IGT Source | DSRIP | UC | DSH | UHRIP | NAIP | CHIRP | TIPPS | TOTALS |
|---------------------------------|--------------------|--------------------|-------------------|-------------------|-------------------|--------------------|------------------|----------------------|
| Nueces County Hospital District | 337,517,127 | 303,167,058 | 79,808,524 | 59,437,427 | 44,144,439 | 0 | 0 | 824,074,574 |
| Nueces LPPF | 27,730,176 | 31,858,523 | 7,478,253 | 0 | 0 | 109,104,874 | 1,304,880 | 177,476,706 |
| TOTALS | 365,247,303 | 335,025,581 | 87,286,777 | 59,437,427 | 44,144,439 | 109,104,874 | 1,304,880 | 1,001,551,280 |

Nueces County Hospital District
 Combined Balance Sheet - All Fund Types & Account Groups
 As of 5/31/2022
 (In Whole Numbers)

| | General Fund | Special Revenue Fund | Trust Fund | General Fixed Assets | General Long Term Debt | TOTAL |
|----------------------------------------------|-------------------|----------------------|---------------|----------------------|------------------------|--------------------|
| Assets | | | | | | |
| Cash & Cash Equivalents | 57,113,107 * | 20,167,169 | 94,733 | 0 | 0 | 77,375,010 |
| Investments | 0 | 37,033,041 | 0 | 0 | 0 | 37,033,041 |
| Accrued Interest | 0 | 68,653 | 40 | 0 | 0 | 68,693 |
| Taxes Receivable, Net of Allowance | 4,220,478 | 0 | 0 | 0 | 0 | 4,220,478 |
| Other Receivables | 0 | 0 | 0 | 0 | 0 | 0 |
| Due from Other Funds | 21,109 | 0 | 0 | 0 | 0 | 21,109 |
| Prepaid Expenditures | 53,947 | 0 | 0 | 0 | 0 | 53,947 |
| Restricted Cash & Cash Equivalents - LPPF | 28,813,418 | 0 | 0 | 0 | 0 | 28,813,418 |
| Fixed Assets | 0 | 0 | 0 | 32,158,070 | 0 | 32,158,070 |
| Amt to be Provided for Retirement of LT Debt | 0 | 0 | 0 | 0 | 53,485 | 53,485 |
| Total Assets | <u>90,222,059</u> | <u>57,268,864</u> | <u>94,773</u> | <u>32,158,070</u> | <u>53,485</u> | <u>179,797,251</u> |
| Liabilities | | | | | | |
| Accounts Payable | 2,326,701 | 0 | 0 | 0 | 0 | 2,326,701 |
| Accrued Payroll & Related Liabilities | 334,547 | 0 | 0 | 0 | 0 | 334,547 |
| Intergovernmental Transfer Obligations | 28,813,418 | 0 | 0 | 0 | 0 | 28,813,418 |
| Due to Other Funds | 0 | 0 | 21,109 | 0 | 0 | 21,109 |
| Deferred Revenue | 4,220,478 | 0 | 0 | 0 | 0 | 4,220,478 |
| Long Term Paid Time Off | 0 | 0 | 0 | 0 | 53,485 | 53,485 |
| Total Liabilities | <u>35,695,144</u> | <u>0</u> | <u>21,109</u> | <u>0</u> | <u>53,485</u> | <u>35,769,738</u> |
| Fund Equity | | | | | | |
| Fund Balance | 37,016,159 | 0 | 73,664 | 32,158,070 | 0 | 69,247,893 |
| Committed to: | | | | | | |
| Intergovernmental Transfers | 17,510,756 | 0 | 0 | 0 | 0 | 17,510,756 |
| Indigent Care | 0 | 56,601,188 | 0 | 0 | 0 | 56,601,188 |
| Assigned to County Health Care | 0 | 667,676 | 0 | 0 | 0 | 667,676 |
| Total Fund Equity | <u>54,526,915</u> | <u>57,268,864</u> | <u>73,664</u> | <u>32,158,070</u> | <u>0</u> | <u>144,027,513</u> |
| Total Liabilities & Fund Equity | <u>90,222,059</u> | <u>57,268,864</u> | <u>94,773</u> | <u>32,158,070</u> | <u>53,485</u> | <u>179,797,251</u> |

* General Fund Cash & Equivalents balance includes \$17,510,756 in committed funds.

Nueces County Hospital District
 Statement of Revenues and Expenditures - All Governmental and Trust Funds
 General Fund
 From 5/1/2022 Through 5/31/2022
 (In Whole Numbers)

| | Current Period Actual | Current Year Actual |
|-----------------------------------------------------------|-----------------------|---------------------|
| Revenues | | |
| Taxes | 285,872 | 36,998,076 |
| Penalties & Interest - Taxes | 46,858 | 235,975 |
| Spohn Corporate Member Revenue | 904,790 | 7,897,126 |
| Investment Income | 29,743 | 59,512 |
| Other Income | 150,839 | 286,877 |
| Total Revenues | 1,418,101 | 45,477,565 |
| Current Expenditures | | |
| Intergovernmental Transfers | 594,375 | 26,880,810 |
| County Healthcare Funding | 956,501 | 6,139,393 |
| Salaries | 161,189 | 824,420 |
| Benefits | 53,044 | 433,235 |
| Legal & Professional Fees | 33,837 | 230,686 |
| Purchased Services | 78,434 | 891,303 |
| Supplies & Materials | 1,927 | 10,561 |
| Rent & Leases | 12,444 | 96,483 |
| Repairs & Maintenance | 1,273 | 2,135 |
| Utilities | 3,025 | 25,124 |
| Insurance | 2,110 | 15,239 |
| Administrative & General | 7,446 | 34,960 |
| Capital Outlay | 0 | 2,501 |
| Total Current Expenditures | 1,905,605 | 35,586,848 |
| Excess of Revenues Over Expenditures Before Sources/Uses | (487,505) | 9,890,717 |
| Excess of Revenues Over Expenditures After Sources & Uses | (487,505) | 9,890,717 |
| Fund Balance, Beginning of Year | | 44,636,198 |
| FUND BALANCE, END OF YEAR | | 54,526,915 |

Nueces County Hospital District
Statement of Revenues and Expenditures - All Governmental and Trust Funds
Special Revenue Fund
From 5/1/2022 Through 5/31/2022
(In Whole Numbers)

| | <u>Current Period Actual</u> | <u>Current Year Actual</u> |
|-----------------------------------------------------------|------------------------------|----------------------------|
| Revenues | | |
| Investment Income | 31,140 | 139,742 |
| Tobacco Settlement Proceeds | <u>0</u> | <u>666,491</u> |
| Total Revenues | <u>31,140</u> | <u>806,234</u> |
| | | |
| Excess of Revenues Over Expenditures Before Sources/Uses | <u>31,140</u> | <u>806,234</u> |
| | | |
| Excess of Revenues Over Expenditures After Sources & Uses | <u>31,140</u> | <u>806,234</u> |
| | | |
| Fund Balance, Beginning of Year | | 56,462,630 |
| | | |
| FUND BALANCE, END OF YEAR | | <u><u>57,268,864</u></u> |

Nueces County Hospital District
 Statement of Revenues and Expenditures - All Governmental and Trust Funds
 Trust Fund
 From 5/1/2022 Through 5/31/2022
 (In Whole Numbers)

| | <u>Current Period Actual</u> | <u>Current Year Actual</u> |
|-----------------------------------------------------------|------------------------------|----------------------------|
| Revenues | | |
| Investment Income | 40 | 67 |
| Total Revenues | <u>40</u> | <u>67</u> |
| Current Expenditures | | |
| Benefits | 534 | 12,375 |
| Administrative & General | 39 | 1,297 |
| Total Current Expenditures | <u>574</u> | <u>13,672</u> |
| Excess of Revenues Over Expenditures Before Sources/Uses | <u>(534)</u> | <u>(13,605)</u> |
| Excess of Revenues Over Expenditures After Sources & Uses | <u>(534)</u> | <u>(13,605)</u> |
| Fund Balance, Beginning of Year | | 87,269 |
| FUND BALANCE, END OF YEAR | | <u><u>73,664</u></u> |

Nueces County Hospital District
Statement of Revenues and Expenditures - Actual v. Budget
General Fund
From 5/1/2022 Through 5/31/2022
(In Whole Numbers)

UNAUDITED

| | Current Period Actual | Current Period Budget | Current Period Budget Variance | Current Year Actual | YTD Budget | YTD Budget Variance |
|--------------------------------------------------------------------------|--------------------------|--------------------------|-----------------------------------|------------------------|-------------------|------------------------|
| Revenues | | | | | | |
| Taxes | 285,872 | 241,252 | 44,620 | 36,998,076 | 36,554,586 | 443,490 |
| Penalties & Interest - Taxes | 46,858 | 16,862 | 29,996 | 235,975 | 218,943 | 17,032 |
| Spohn Corporate Member Revenue | 904,790 | 823,661 | 81,129 | 7,897,126 | 6,589,288 | 1,307,838 |
| Investment Income | 29,743 | 398 | 29,345 | 59,512 | 2,711 | 56,801 |
| Other Income | 150,839 | 0 | 150,839 | 286,877 | 100,000 | 186,877 |
| Total Revenues | <u>1,418,101</u> | <u>1,082,173</u> | <u>335,928</u> | <u>45,477,565</u> | <u>43,465,528</u> | <u>2,012,037</u> |
| Current Expenditures | | | | | | |
| Intergovernmental Transfers | 594,375 | 934,140 | 339,765 | 26,880,810 | 16,072,945 | (10,807,865) |
| County Healthcare Funding | 956,501 | 934,549 | (21,952) | 6,139,393 | 7,949,749 | 1,810,356 |
| Salaries | 161,189 | 118,234 | (42,955) | 824,420 | 1,057,011 | 232,591 |
| Benefits | 53,044 | 59,184 | 6,140 | 433,235 | 502,241 | 69,006 |
| Legal & Professional Fees | 33,837 | 122,500 | 88,663 | 230,686 | 980,504 | 749,818 |
| Purchased Services | 78,434 | 93,775 | 15,341 | 891,303 | 960,264 | 68,961 |
| Supplies & Materials | 1,927 | 1,750 | (177) | 10,561 | 14,000 | 3,439 |
| Rent & Leases | 12,444 | 12,625 | 181 | 96,483 | 101,004 | 4,521 |
| Repairs & Maintenance | 1,273 | 751 | (522) | 2,135 | 6,008 | 3,873 |
| Utilities | 3,025 | 4,866 | 1,841 | 25,124 | 38,936 | 13,812 |
| Insurance | 2,110 | 2,258 | 148 | 15,239 | 18,068 | 2,829 |
| Administrative & General | 7,446 | 16,632 | 9,186 | 34,960 | 133,084 | 98,124 |
| Capital Outlay | 0 | 0 | 0 | 2,501 | 163,000 | 160,499 |
| Extraordinary | 0 | 417 | 417 | 0 | 3,336 | 3,336 |
| Total Current Expenditures | <u>1,905,605</u> | <u>2,301,681</u> | <u>396,076</u> | <u>35,586,848</u> | <u>28,000,150</u> | <u>(7,586,698)</u> |
| Excess of Revenues Over Expenditures Before Sources/Uses | <u>(487,505)</u> | <u>(1,219,508)</u> | <u>732,003</u> | <u>9,890,717</u> | <u>15,465,378</u> | <u>(5,574,661)</u> |
| Other Financing Sources & Uses | | | | | | |
| Operating Transfers In | 0 | (550,000) | (550,000) | 0 | (550,000) | (550,000) |
| Total Other Financing Sources & Uses | <u>0</u> | <u>(550,000)</u> | <u>(550,000)</u> | <u>0</u> | <u>(550,000)</u> | <u>(550,000)</u> |
| Excess of Revenues Over Expenditures After Sources & Uses | <u>(487,505)</u> | <u>(669,508)</u> | <u>182,003</u> | <u>9,890,717</u> | <u>16,015,378</u> | <u>(6,124,661)</u> |
| Fund Balance, Beginning of Year | | | | 44,636,198 | 0 | 44,636,198 |
| FUND BALANCE, END OF YEAR | | | | <u>54,526,915</u> | <u>16,015,378</u> | <u>38,511,537</u> |

Nueces County Hospital District
 Statement of Revenues and Expenditures - Actual v. Budget
 Tobacco Settlement Fund
 From 5/1/2022 Through 5/31/2022
 (In Whole Numbers)

| | Current Period Actual | Current Period Budget | Current Period Budget Variance | Current Year Actual | YTD Budget | YTD Budget Variance |
|--------------------------------------------------------------|--------------------------|--------------------------|-----------------------------------|------------------------|-----------------|------------------------|
| Revenues | | | | | | |
| Investment Income | 347 | 0 | 347 | 348 | 0 | 348 |
| Tobacco Settlement Proceeds | <u>0</u> | <u>0</u> | <u>0</u> | <u>666,491</u> | <u>550,000</u> | <u>116,491</u> |
| Total Revenues | <u>347</u> | <u>0</u> | <u>347</u> | <u>666,839</u> | <u>550,000</u> | <u>116,839</u> |
| Excess of Revenues Over Expenditures Before Sources/Uses | <u>347</u> | <u>0</u> | <u>347</u> | <u>666,839</u> | <u>550,000</u> | <u>116,839</u> |
| Other Financing Sources & Uses | | | | | | |
| Operating Transfers Out | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>550,000</u> | <u>550,000</u> |
| Total Other Financing Sources & Uses | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>550,000</u> | <u>550,000</u> |
| Excess of Revenues Over Expenditures After Sources & Uses | <u>347</u> | <u>0</u> | <u>347</u> | <u>666,839</u> | <u>0</u> | <u>666,839</u> |
| Fund Balance, Beginning of Year | | | | 837 | 0 | 837 |
| FUND BALANCE, END OF YEAR | | | | <u><u>667,676</u></u> | <u><u>0</u></u> | <u><u>667,676</u></u> |

Nueces County Hospital District
Statement of Revenues and Expenditures - Actual v. Budget
Indigent Care Fund
From 5/1/2022 Through 5/31/2022
(In Whole Numbers)

UNAUDITED

| | Current Period Actual | Current Period Budget | Current Period Budget Variance | Current Year Actual | YTD Budget | YTD Budget Variance |
|--------------------------------------------------------------|--------------------------|--------------------------|-----------------------------------|------------------------|------------|------------------------|
| Revenues | | | | | | |
| Investment Income | 30,793 | 4,705 | 26,088 | 139,395 | 37,632 | 101,763 |
| Total Revenues | 30,793 | 4,705 | 26,088 | 139,395 | 37,632 | 101,763 |
| Excess of Revenues Over Expenditures Before Sources/Uses | 30,793 | 4,705 | 26,088 | 139,395 | 37,632 | 101,763 |
| Excess of Revenues Over Expenditures After Sources & Uses | 30,793 | 4,705 | 26,088 | 139,395 | 37,632 | 101,763 |
| Fund Balance, Beginning of Year | | | | 56,461,793 | 0 | 56,461,793 |
| FUND BALANCE, END OF YEAR | | | | 56,601,188 | 37,632 | 56,563,556 |

UNAUDITED

Nueces County Hospital District
Combined Balance Sheet - All Fund Types & Account Groups
 As of 6/30/2022
 (In Whole Numbers)

| | General Fund | Special Revenue Fund | Trust Fund | General Fixed Assets | General Long Term Debt | TOTAL |
|----------------------------------------------|-------------------|----------------------|---------------|----------------------|------------------------|--------------------|
| Assets | | | | | | |
| Cash & Cash Equivalents | 57,488,770 * | 19,518,048 | 94,734 | 0 | 0 | 77,101,551 |
| Investments | 0 | 37,026,110 | 0 | 0 | 0 | 37,026,110 |
| Accrued Interest | 0 | 97,164 | 77 | 0 | 0 | 97,241 |
| Taxes Receivable, Net of Allowance | 3,978,556 | 0 | 0 | 0 | 0 | 3,978,556 |
| Other Receivables | 0 | 0 | 0 | 0 | 0 | 0 |
| Due from Other Funds | 24,846 | 0 | 0 | 0 | 0 | 24,846 |
| Prepaid Expenditures | 136,064 | 0 | 0 | 0 | 0 | 136,064 |
| Restricted Cash & Cash Equivalents - LPPF | 17,532,304 | 0 | 0 | 0 | 0 | 17,532,304 |
| Fixed Assets | 0 | 0 | 0 | 32,158,070 | 0 | 32,158,070 |
| Amt to be Provided for Retirement of LT Debt | 0 | 0 | 0 | 0 | 53,485 | 53,485 |
| Total Assets | 79,160,540 | 56,641,321 | 94,811 | 32,158,070 | 53,485 | 168,108,227 |
| Liabilities | | | | | | |
| Accounts Payable | 2,525,645 | 0 | 0 | 0 | 0 | 2,525,645 |
| Accrued Payroll & Related Liabilities | 274,048 | 0 | 0 | 0 | 0 | 274,048 |
| Intergovernmental Transfer Obligations | 17,532,304 | 0 | 0 | 0 | 0 | 17,532,304 |
| Due to Other Funds | 0 | 0 | 24,846 | 0 | 0 | 24,846 |
| Deferred Revenue | 3,978,556 | 0 | 0 | 0 | 0 | 3,978,556 |
| Long Term Paid Time Off | 0 | 0 | 0 | 0 | 53,485 | 53,485 |
| Total Liabilities | 24,310,555 | 0 | 24,846 | 0 | 53,485 | 24,388,885 |
| Fund Equity | | | | | | |
| Fund Balance | 36,780,844 | 0 | 69,965 | 32,158,070 | 0 | 69,008,879 |
| Committed to: | | | | | | |
| Intergovernmental Transfers | 18,069,141 | 0 | 0 | 0 | 0 | 18,069,141 |
| Indigent Care | 0 | 56,640,578 | 0 | 0 | 0 | 56,640,578 |
| Assigned to County Health Care | 0 | 743 | 0 | 0 | 0 | 743 |
| Total Fund Equity | 54,849,985 | 56,641,321 | 69,965 | 32,158,070 | 0 | 143,719,342 |
| Total Liabilities & Fund Equity | 79,160,540 | 56,641,321 | 94,811 | 32,158,070 | 53,485 | 168,108,227 |

* General Fund Cash & Equivalents balance includes \$18,069,141 in committed funds.

Nueces County Hospital District
 Statement of Revenues and Expenditures - All Governmental and Trust Funds
 General Fund
 From 6/1/2022 Through 6/30/2022
 (In Whole Numbers)

| | Current Period Actual | Current Year Actual |
|-----------------------------------------------------------|-----------------------|---------------------|
| Revenues | | |
| Taxes | 125,719 | 37,123,795 |
| Penalties & Interest - Taxes | 38,003 | 273,978 |
| Spohn Corporate Member Revenue | 1,138,143 | 9,035,269 |
| Investment Income | 46,528 | 106,040 |
| Other Income | 45 | 286,922 |
| Total Revenues | 1,348,439 | 46,826,004 |
| Current Expenditures | | |
| Intergovernmental Transfers | 594,375 | 27,475,185 |
| County Healthcare Funding | 798,549 | 6,937,942 |
| Salaries | 105,895 | 930,315 |
| Benefits | 46,070 | 479,305 |
| Legal & Professional Fees | 48,439 | 279,125 |
| Purchased Services | 75,821 | 967,123 |
| Supplies & Materials | 920 | 11,480 |
| Rent & Leases | 13,214 | 109,697 |
| Repairs & Maintenance | 0 | 2,135 |
| Utilities | 3,062 | 28,186 |
| Insurance | 1,874 | 17,113 |
| Administrative & General | 4,151 | 39,111 |
| Capital Outlay | 0 | 2,501 |
| Total Current Expenditures | 1,692,369 | 37,279,217 |
| Excess of Revenues Over Expenditures Before Sources/Uses | (343,930) | 9,546,787 |
| Other Financing Sources & Uses | | |
| Operating Transfers In | (667,000) | (667,000) |
| Total Other Financing Sources & Uses | (667,000) | (667,000) |
| Excess of Revenues Over Expenditures After Sources & Uses | 323,070 | 10,213,787 |
| Fund Balance, Beginning of Year | | 44,636,198 |
| FUND BALANCE, END OF YEAR | | 54,849,985 |

Nueces County Hospital District
Statement of Revenues and Expenditures - All Governmental and Trust Funds
Special Revenue Fund
From 6/1/2022 Through 6/30/2022
(In Whole Numbers)

| | <u>Current Period Actual</u> | <u>Current Year Actual</u> |
|---------------------------------------------------------------|------------------------------|------------------------------|
| Revenues | | |
| Investment Income | 39,458 | 179,200 |
| Tobacco Settlement Proceeds | <u>0</u> | <u>666,491</u> |
| Total Revenues | <u>39,458</u> | <u>845,691</u> |
| Excess of Revenues Over Expenditures Before Sources/Uses | <u>39,458</u> | <u>845,691</u> |
| Other Financing Sources & Uses | | |
| Operating Transfers Out | <u>667,000</u> | <u>667,000</u> |
| Total Other Financing Sources & Uses | <u>667,000</u> | <u>667,000</u> |
| Excess of Revenues Over Expenditures After Sources & Uses | <u>(627,542)</u> | <u>178,691</u> |
| Fund Balance, Beginning of Year | | 56,462,630 |
| FUND BALANCE, END OF YEAR | | <u><u>56,641,321</u></u> |

Nueces County Hospital District
Statement of Revenues and Expenditures - All Governmental and Trust Funds
Trust Fund
From 6/1/2022 Through 6/30/2022
(In Whole Numbers)

UNAUDITED

| | Current Period Actual | Current Year Actual |
|-----------------------------------------------------------|-----------------------|---------------------|
| Revenues | | |
| Investment Income | 77 | 144 |
| Total Revenues | 77 | 144 |
| Current Expenditures | | |
| Benefits | 3,737 | 16,112 |
| Administrative & General | 39 | 1,337 |
| Total Current Expenditures | 3,777 | 17,449 |
| Excess of Revenues Over Expenditures Before Sources/Uses | (3,699) | (17,305) |
| Excess of Revenues Over Expenditures After Sources & Uses | (3,699) | (17,305) |
| Fund Balance, Beginning of Year | | 87,269 |
| FUND BALANCE, END OF YEAR | | 69,965 |

Nueces County Hospital District
Statement of Revenues and Expenditures - Actual v. Budget
General Fund
From 6/1/2022 Through 6/30/2022
(In Whole Numbers)

UNAUDITED

| | Current Period Actual | Current Period Budget | Current Period Budget Variance | Current Year Actual | YTD Budget | YTD Budget Variance |
|--------------------------------------------------------------|--------------------------|--------------------------|-----------------------------------|------------------------|-------------------|------------------------|
| Revenues | | | | | | |
| Taxes | 125,719 | 226,359 | (100,640) | 37,123,795 | 36,780,945 | 342,850 |
| Penalties & Interest - Taxes | 38,003 | 26,401 | 11,602 | 273,978 | 245,344 | 28,634 |
| Spohn Corporate Member Revenue | 1,138,143 | 823,661 | 314,482 | 9,035,269 | 7,412,949 | 1,622,320 |
| Investment Income | 46,528 | 318 | 46,210 | 106,040 | 3,029 | 103,011 |
| Other Income | 45 | 0 | 45 | 286,922 | 100,000 | 186,922 |
| Total Revenues | <u>1,348,439</u> | <u>1,076,739</u> | <u>271,700</u> | <u>46,826,004</u> | <u>44,542,267</u> | <u>2,283,737</u> |
| Current Expenditures | | | | | | |
| Intergovernmental Transfers | 594,375 | 9,398,891 | 8,804,516 | 27,475,185 | 25,471,836 | (2,003,349) |
| County Healthcare Funding | 798,549 | 934,549 | 136,000 | 6,937,942 | 8,884,298 | 1,946,356 |
| Salaries | 105,895 | 118,234 | 12,339 | 930,315 | 1,175,245 | 244,930 |
| Benefits | 46,070 | 58,969 | 12,899 | 479,305 | 561,210 | 81,905 |
| Legal & Professional Fees | 48,439 | 122,500 | 74,061 | 279,125 | 1,103,004 | 823,879 |
| Purchased Services | 75,821 | 91,215 | 15,394 | 967,123 | 1,051,479 | 84,356 |
| Supplies & Materials | 920 | 1,750 | 831 | 11,480 | 15,750 | 4,270 |
| Rent & Leases | 13,214 | 12,625 | (589) | 109,697 | 113,629 | 3,932 |
| Repairs & Maintenance | 0 | 751 | 751 | 2,135 | 6,759 | 4,624 |
| Utilities | 3,062 | 4,866 | 1,804 | 28,186 | 43,802 | 15,616 |
| Insurance | 1,874 | 2,258 | 384 | 17,113 | 20,326 | 3,213 |
| Administrative & General | 4,151 | 16,632 | 12,481 | 39,111 | 149,716 | 110,605 |
| Capital Outlay | 0 | 0 | 0 | 2,501 | 163,000 | 160,499 |
| Extraordinary | 0 | 417 | 417 | 0 | 3,753 | 3,753 |
| Total Current Expenditures | <u>1,692,369</u> | <u>10,763,657</u> | <u>9,071,288</u> | <u>37,279,217</u> | <u>38,763,807</u> | <u>1,484,590</u> |
| Excess of Revenues Over Expenditures Before Sources/Uses | <u>(343,930)</u> | <u>(9,686,918)</u> | <u>9,342,988</u> | <u>9,546,787</u> | <u>5,778,460</u> | <u>3,768,327</u> |
| Other Financing Sources & Uses | | | | | | |
| Operating Transfers In | <u>(667,000)</u> | <u>0</u> | <u>667,000</u> | <u>(667,000)</u> | <u>(550,000)</u> | <u>117,000</u> |
| Total Other Financing Sources & Uses | <u>(667,000)</u> | <u>0</u> | <u>667,000</u> | <u>(667,000)</u> | <u>(550,000)</u> | <u>117,000</u> |
| Excess of Revenues Over Expenditures After Sources & Uses | <u>323,070</u> | <u>(9,686,918)</u> | <u>10,009,988</u> | <u>10,213,787</u> | <u>6,328,460</u> | <u>3,885,327</u> |
| Fund Balance, Beginning of Year | | | | 44,636,198 | 0 | 44,636,198 |
| FUND BALANCE, END OF YEAR | | | | <u>54,849,985</u> | <u>6,328,460</u> | <u>48,521,525</u> |

Nueces County Hospital District
Statement of Revenues and Expenditures - Actual v. Budget
Tobacco Settlement Fund
From 6/1/2022 Through 6/30/2022
(In Whole Numbers)

| | Current Period Actual | Current Period Budget | Current Period Budget Variance | Current Year Actual | YTD Budget | YTD Budget Variance |
|--------------------------------------------------------------|--------------------------|--------------------------|-----------------------------------|------------------------|----------------|------------------------|
| Revenues | | | | | | |
| Investment Income | 68 | 0 | 68 | 415 | 0 | 415 |
| Tobacco Settlement Proceeds | <u>0</u> | <u>0</u> | <u>0</u> | <u>666,491</u> | <u>550,000</u> | <u>116,491</u> |
| Total Revenues | <u>68</u> | <u>0</u> | <u>68</u> | <u>666,906</u> | <u>550,000</u> | <u>116,906</u> |
| Excess of Revenues Over Expenditures Before Sources/Uses | <u>68</u> | <u>0</u> | <u>68</u> | <u>666,906</u> | <u>550,000</u> | <u>116,906</u> |
| Other Financing Sources & Uses | | | | | | |
| Operating Transfers Out | <u>667,000</u> | <u>0</u> | <u>(667,000)</u> | <u>667,000</u> | <u>550,000</u> | <u>(117,000)</u> |
| Total Other Financing Sources & Uses | <u>667,000</u> | <u>0</u> | <u>(667,000)</u> | <u>667,000</u> | <u>550,000</u> | <u>(117,000)</u> |
| Excess of Revenues Over Expenditures After Sources & Uses | <u>(666,932)</u> | <u>0</u> | <u>(666,932)</u> | <u>(94)</u> | <u>0</u> | <u>(94)</u> |
| Fund Balance, Beginning of Year | | | | 837 | 0 | 837 |
| FUND BALANCE, END OF YEAR | | | | <u>743</u> | <u>0</u> | <u>743</u> |

Nueces County Hospital District
Statement of Revenues and Expenditures - Actual v. Budget
Indigent Care Fund
From 6/1/2022 Through 6/30/2022
(In Whole Numbers)

UNAUDITED

| | <u>Current Period Actual</u> | <u>Current Period Budget</u> | <u>Current Period Budget Variance</u> | <u>Current Year Actual</u> | <u>YTD Budget</u> | <u>YTD Budget Variance</u> |
|--------------------------------------------------------------|----------------------------------|----------------------------------|-------------------------------------------|--------------------------------|-------------------|--------------------------------|
| Revenues | | | | | | |
| Investment Income | <u>39,390</u> | <u>4,706</u> | <u>34,684</u> | <u>178,785</u> | <u>42,338</u> | <u>136,447</u> |
| Total Revenues | <u>39,390</u> | <u>4,706</u> | <u>34,684</u> | <u>178,785</u> | <u>42,338</u> | <u>136,447</u> |
| Excess of Revenues Over Expenditures Before Sources/Uses | <u>39,390</u> | <u>4,706</u> | <u>34,684</u> | <u>178,785</u> | <u>42,338</u> | <u>136,447</u> |
| Excess of Revenues Over Expenditures After Sources & Uses | <u>39,390</u> | <u>4,706</u> | <u>34,684</u> | <u>178,785</u> | <u>42,338</u> | <u>136,447</u> |
| Fund Balance, Beginning of Year | | | | 56,461,793 | 0 | 56,461,793 |
| FUND BALANCE, END OF YEAR | | | | <u>56,640,578</u> | <u>42,338</u> | <u>56,598,240</u> |

**NUECES COUNTY HOSPITAL DISTRICT
 QUARTERLY INVESTMENT REPORT
 April 1, 2022 - June 30, 2022**

Summary Holdings Statistics:

| Portfolio/Fund Group | Prior | | | Current | | | | | | | | |
|---------------------------------------------|--------------------|----------------------------------|---------------|------------|--------------------|--------------------|------------------|-------------------|----------------|---------------|------------|--|
| | Book Value | Market Value | WAM | WAM | Book Value | Market Value | Accrued Interest | Investment Income | % of Portfolio | WAY | WAM | |
| <u>Unrestricted Funds</u> | | | | | | | | | | | | |
| General Fund | 58,250,419 | 58,250,419 | 0.154% | 1 | 57,488,770 | 57,488,770 | 0 | 89,117 | 43.67% | 0.991% | 1 | |
| Indigent Care Fund | 56,489,398 | 55,396,771 | 0.411% | 435 | 56,531,829 | 55,203,532 | 97,164 | 92,734 | 42.94% | 0.839% | 415 | |
| Tobacco Fund | 837 | 837 | 0.154% | 1 | 743 | 743 | 0 | 415 | 0.00% | 1.001% | 1 | |
| Trust Fund | 95,765 | 95,765 | 0.140% | 1 | 94,734 | 94,734 | 77 | 133 | 0.07% | 1.310% | 1 | |
| <u>Restricted Funds</u> | | | | | | | | | | | | |
| General Fund - LPPF | 44,619,537 | 44,619,537 | 0.170% | 1 | 17,532,304 | 17,532,304 | 0 | 1,373 | 13.32% | 0.280% | 1 | |
| Total | 159,455,957 | 158,363,329 | 0.249% | 155 | 131,648,380 | 130,320,083 | 97,241 | 183,772 | 100.00% | 0.831% | 179 | |
| Change in Market Value | | (28,043,247) ¹ | | | | | | | | | | |
| Quarter Average Yield - NCHD | | | 0.577% | | | | | | | | | |
| Quarter Average Yield - 6 Mth T-Bill | | | 1.650% | | | | | | | | | |

This report reflects Nueces County Hospital District's investment policy and strategies in accordance with the Public Funds Investment Act.

INVESTMENT OFFICERS:


 JONNY F. HIPPI, ADMINISTRATOR


 BELINDA CHISM, ASSISTANT ADMINISTRATOR


 DONNA LITTLEFIELD, DIRECTOR OF ACCOUNTING & FINANCE

Notes

1. Change in Market Value is required data, but will primarily reflect the receipt and expenditure of the District's funds from quarter to quarter.

Nueces County Hospital District
Inventory Report - Holdings by Fund
As of: 06/30/2022

| Settle Date | Maturity Date | Location | Security | CUSIP | Avg Yield/ Coupon | Purchase Price | PAR | Beginning Book Value 03/31/2022 | Beginning Market Value 03/31/2022 | Ending Book Value 06/30/2022 | Ending Market 06/30/2022 | Gain/Loss | Accrued Interest | Yield Y-T-M | Days to Maturity |
|---------------------------|---------------|-------------|------------------------|-----------|----------------------|----------------|------------|------------------------------------|--------------------------------------|---------------------------------|-----------------------------|-------------|------------------|----------------|---------------------|
| Indigent Care Fund | | | | | | | | | | | | | | | |
| 06/30/2022 | 07/01/2022 | TexPool | Investment Pool | #00002 | 1.001% | 2,275,544 | 2,275,544 | 2,271,902 | 2,271,902 | 2,275,544 | 2,275,544 | 0 | 0 | 1.001% | 1 |
| 06/30/2022 | 07/01/2022 | LOGIC | Investment Pool | | 1.180% | 12,470,556 | 12,470,556 | 14,444,167 | 14,444,167 | 12,470,556 | 12,470,556 | 0 | 0 | 1.180% | 1 |
| 06/30/2022 | 07/01/2022 | TexSTAR | Investment Pool | | 0.985% | 4,771,204 | 4,771,204 | 4,737,780 | 4,737,780 | 4,771,204 | 4,771,204 | 0 | 0 | 0.985% | 1 |
| 08/12/2020 | 08/10/2023 | Safekeeping | FNMA - Qrtly Call | 3135G05R0 | 0.300% | 3,983,000 | 4,000,000 | 3,987,751 | 3,907,352 | 3,989,606 | 3,984,368 | (105,238) | 4,667 | 0.359% | 406 |
| 08/28/2020 | 08/18/2023 | Safekeeping | FNMA - Semi-ann Call | 3135G05V1 | 0.360% | 4,000,000 | 4,000,000 | 4,000,000 | 3,908,012 | 4,000,000 | 3,884,100 | (115,900) | 5,280 | 0.360% | 414 |
| 09/22/2020 | 08/15/2022 | Safekeeping | Arlington TX GO | 041796XH1 | 0.306% | 1,000,000 | 1,000,000 | 1,000,000 | 996,780 | 1,000,000 | 997,790 | (2,210) | 1,148 | 0.306% | 46 |
| 10/29/2020 | 02/15/2023 | Safekeeping | Mansfield TX ISD | 564396RS1 | 4.000% | 1,751,220 | 1,820,000 | 1,670,205 | 1,648,966 | 1,655,972 | 1,632,182 | (23,790) | 24,300 | 0.447% | 230 |
| 12/03/2020 | 11/30/2023 | Safekeeping | FFCB Call Note | 3133EMHL9 | 0.310% | 3,986,600 | 4,000,000 | 4,000,000 | 3,878,176 | 4,000,000 | 3,853,028 | (146,972) | 1,033 | 0.339% | 518 |
| 03/12/2021 | 03/12/2024 | Safekeeping | FHLB Call Note | 3130ALJ70 | 0.400% | 4,000,000 | 4,000,000 | 4,000,000 | 3,850,352 | 4,000,000 | 3,826,520 | (173,480) | 4,800 | 0.400% | 621 |
| 07/26/2021 | 07/26/2024 | Safekeeping | FHLB Call Note | 3130ANM44 | 0.500% | 3,000,000 | 3,000,000 | 3,000,000 | 2,876,541 | 3,000,000 | 2,853,111 | (146,889) | 6,417 | 0.500% | 757 |
| 08/26/2021 | 08/26/2024 | Safekeeping | FHLB Call Note | 3130ANM77 | 0.520% | 4,000,000 | 4,000,000 | 4,000,000 | 3,846,532 | 4,000,000 | 3,814,420 | (185,580) | 7,164 | 0.520% | 788 |
| 10/06/2021 | 02/01/2024 | Safekeeping | Tx Public Finance Auth | 882659CN2 | 2.000% | 2,071,440 | 2,000,000 | 2,066,613 | 1,984,160 | 2,048,947 | 1,958,860 | (90,087) | 16,556 | 0.450% | 581 |
| 10/28/2021 | 10/28/2024 | Safekeeping | FHLB Call Note | 3130APK79 | 0.700% | 3,000,000 | 3,000,000 | 3,000,000 | 2,879,178 | 3,000,000 | 2,852,898 | (147,102) | 3,617 | 0.700% | 851 |
| 11/04/2021 | 08/15/2024 | Safekeeping | Cedar Pk TX Dev Corp | 15046PBJ6 | 0.860% | 310,000 | 310,000 | 310,000 | 297,147 | 310,000 | 293,734 | (16,266) | 1,000 | 0.860% | 777 |
| 11/18/2021 | 11/18/2024 | Safekeeping | FHLB Qrtly Call | 3130APNET | 0.900% | 2,000,000 | 2,000,000 | 2,000,000 | 1,917,974 | 2,000,000 | 1,900,154 | (98,846) | 2,100 | 0.900% | 872 |
| 02/25/2022 | 02/25/2025 | Safekeeping | FHLB Qrtly Call | 3130AQSK0 | 1.600% | 2,000,000 | 2,000,000 | 2,000,000 | 1,951,950 | 2,000,000 | 1,930,330 | (69,670) | 11,111 | 1.600% | 971 |
| 05/19/2022 | 05/19/2025 | Safekeeping | FHLB Qrtly Call | 3130ARVU0 | 3.500% | 2,000,000 | 2,000,000 | 0 | 1,954,732 | 2,000,000 | 1,994,732 | (5,268) | 7,972 | 3.500% | 1,054 |
| | | | Subtotal | | | 56,639,564 | 56,447,304 | 56,489,388 | 55,996,771 | 56,531,829 | 55,203,532 | (1,328,297) | 97,164 | 0.839% | 415 |

| Settle Date | Maturity Date | Location | Security | CUSIP | Avg Yield/ Coupon | Purchase Price | PAR | Beginning Book Value 03/31/2022 | Beginning Market Value 03/31/2022 | Ending Book Value 06/30/2022 | Ending Market 06/30/2022 | Gain/Loss | Accrued Interest | Yield Y-T-M | Days to Maturity |
|--------------------------------|---------------|----------|-----------------|--------|----------------------|----------------|-----|------------------------------------|--------------------------------------|---------------------------------|-----------------------------|-----------|------------------|----------------|---------------------|
| Tobacco Settlement Fund | | | | | | | | | | | | | | | |
| 06/30/2022 | 07/01/2022 | TexPool | Investment Pool | #00007 | 1.001% | 743 | 743 | 837 | 837 | 743 | 743 | 0 | 0 | 1.001% | 1 |
| | | | Subtotal | | | 743 | 743 | 837 | 837 | 743 | 743 | 0 | 0 | 1.001% | 1 |

| Settle Date | Maturity Date | Location | Security | CUSIP | Avg Yield/ Coupon | Purchase Price | PAR | Beginning Book Value 03/31/2022 | Beginning Market Value 03/31/2022 | Ending Book Value 06/30/2022 | Ending Market 06/30/2022 | Gain/Loss | Accrued Interest | Yield Y-T-M | Days to Maturity |
|----------------------------------------------------|---------------|-------------|-----------------------|-----------|----------------------|----------------|--------|------------------------------------|--------------------------------------|---------------------------------|-----------------------------|-----------|------------------|----------------|---------------------|
| Trust Fund - Employee Health Benefits Trust | | | | | | | | | | | | | | | |
| 06/30/2022 | 07/01/2022 | Frost Trust | Invesco Stit Treasury | 825252406 | 1.310% | 94,734 | 94,734 | 95,765 | 95,765 | 94,734 | 94,734 | 0 | 77 | 1.310% | 1 |
| | | | Subtotal | | | 94,734 | 94,734 | 95,765 | 95,765 | 94,734 | 94,734 | 0 | 77 | 1.310% | 1 |

| Settle Date | Maturity Date | Location | Security | CUSIP | Avg Yield/ Coupon | Purchase Price | PAR | Beginning Book Value 03/31/2022 | Beginning Market Value 03/31/2022 | Ending Book Value 06/30/2022 | Ending Market 06/30/2022 | Gain/Loss | Accrued Interest | Yield Y-T-M | Days to Maturity |
|---------------------|---------------|--------------|----------------------|-----------|----------------------|----------------|------------|------------------------------------|--------------------------------------|---------------------------------|-----------------------------|-----------|------------------|----------------|---------------------|
| General Fund | | | | | | | | | | | | | | | |
| 06/30/2022 | 07/01/2022 | Cash on hand | Petty Cash | | 0.000% | 150 | 150 | 150 | 150 | 150 | 150 | 0 | 0 | 0.000% | 1 |
| 06/30/2022 | 07/01/2022 | TexPool | Investment Pool-GF | #00004 | 1.001% | 38,569,450 | 38,569,450 | 40,083,807 | 40,083,807 | 38,569,450 | 38,569,450 | 0 | 0 | 1.001% | 1 |
| 06/30/2022 | 07/01/2022 | TexPool | Investment Pool-MR | #00009 | 1.001% | 18,069,141 | 18,069,141 | 18,017,383 | 18,017,383 | 18,069,141 | 18,069,141 | 0 | 0 | 1.001% | 1 |
| 06/30/2022 | 07/01/2022 | Frost Bank | Checking - Operating | 664053079 | 0.280% | 796,510 | 796,510 | 145,561 | 145,561 | 796,510 | 796,510 | 0 | 0 | 0.280% | 1 |
| 06/30/2022 | 07/01/2022 | Frost Bank | Checking - Payroll | 664027221 | 0.280% | 53,518 | 53,518 | 3,518 | 3,518 | 53,518 | 53,518 | 0 | 0 | 0.280% | 1 |
| | | | Subtotal | | | 57,488,770 | 57,488,770 | 58,250,419 | 58,250,419 | 57,488,770 | 57,488,770 | 0 | 0 | 0.991% | 1 |

| | | | | | | | | | | | | | | | | | | | | |
|---------------------------------|--|--|--|--|--|--|--|--|--|--|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------|--------|-----|
| TOTAL UNRESTRICTED FUNDS | | | | | | | | | | | 114,223,811 | 114,031,551 | 114,836,420 | 113,743,792 | 114,116,075 | 112,787,779 | (1,328,297) | 97,241 | 0.916% | 206 |
|---------------------------------|--|--|--|--|--|--|--|--|--|--|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------|--------|-----|

| Settle Date | Maturity Date | Location | Security | CUSIP | Avg Yield/ Coupon | Purchase Price | PAR | Beginning Book Value 03/31/2022 | Beginning Market Value 03/31/2022 | Ending Book Value 06/30/2022 | Ending Market 06/30/2022 | Gain/Loss | Accrued Interest | Yield Y-T-M | Days to Maturity |
|---------------------------------------|---------------|------------|------------------------|-----------|----------------------|----------------|------------|------------------------------------|--------------------------------------|---------------------------------|-----------------------------|-----------|------------------|----------------|---------------------|
| Restricted Cash - General Fund | | | | | | | | | | | | | | | |
| 06/30/2022 | 07/01/2022 | Frost Bank | Checking - Nueces LPPF | 664043316 | 0.280% | 17,532,304 | 17,532,304 | 44,619,537 | 44,619,537 | 17,532,304 | 17,532,304 | 0 | 0 | 0.280% | 1 |
| | | | Subtotal | | | 17,532,304 | 17,532,304 | 44,619,537 | 44,619,537 | 17,532,304 | 17,532,304 | 0 | 0 | 0.280% | 1 |

| | | | | | | | | | | | | | | | | | | | | |
|------------------------|--|--|--|--|--|--|--|--|--|--|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------|--------|-----|
| TOTAL PORTFOLIO | | | | | | | | | | | 131,756,115 | 131,563,855 | 159,455,957 | 158,363,329 | 131,648,380 | 130,320,083 | (1,328,297) | 97,241 | 0.831% | 179 |
| | | | | | | | | | | | | | | | | | | | | WAM |

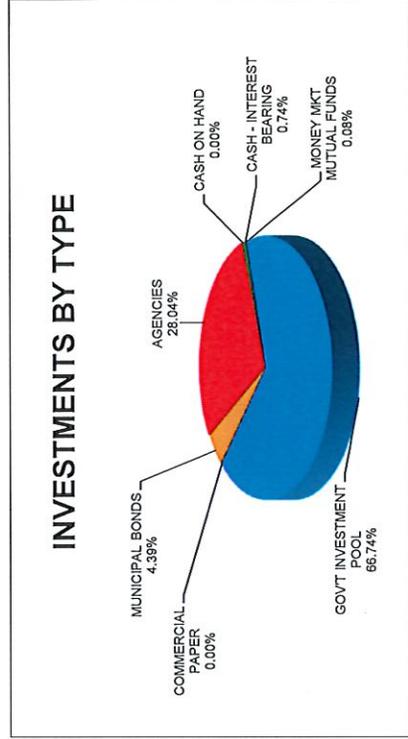
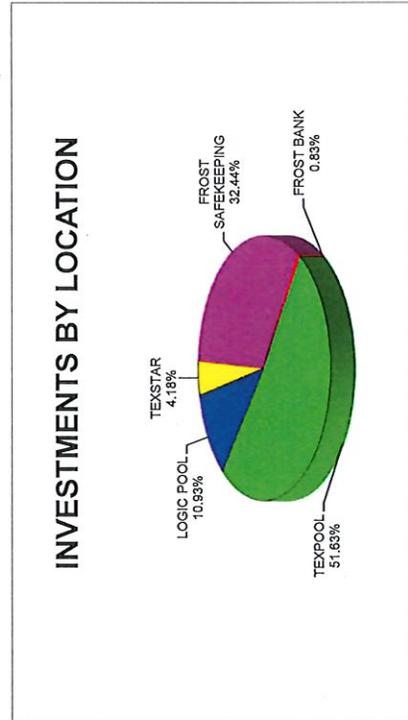
Nueces County Hospital District
Investment Transaction Activity
April 1, 2022 - June 30, 2022

| Settle Date | Maturity | Call Date | Type | CUSIP | Coupon | Price | Par | Principal | Acc'd Interest | Total Settlement | Yield to Mat/Call | Broker |
|--------------------------------|------------|------------|-----------------|-----------|--------|----------|---------------------|---------------------|----------------|---------------------|-------------------|-----------------|
| <u>Purchases</u> | | | | | | | | | | | | |
| 05/19/2022 | 05/19/2025 | 08/19/2022 | FHLB Qrtly Call | 3130ARVV0 | 3.500% | 100.0000 | 2,000,000.00 | 2,000,000.00 | 0.00 | 2,000,000.00 | 3.500% | Stifel Nicolaus |
| Total Purchases: | | | | | | | 2,000,000.00 | 2,000,000.00 | 0.00 | 2,000,000.00 | | |
| <u>Maturities/Calls</u> | | | | | | | | | | | | |
| Total Maturities/Calls: | | | | | | | 0.00 | 0.00 | 0.00 | 0.00 | | |

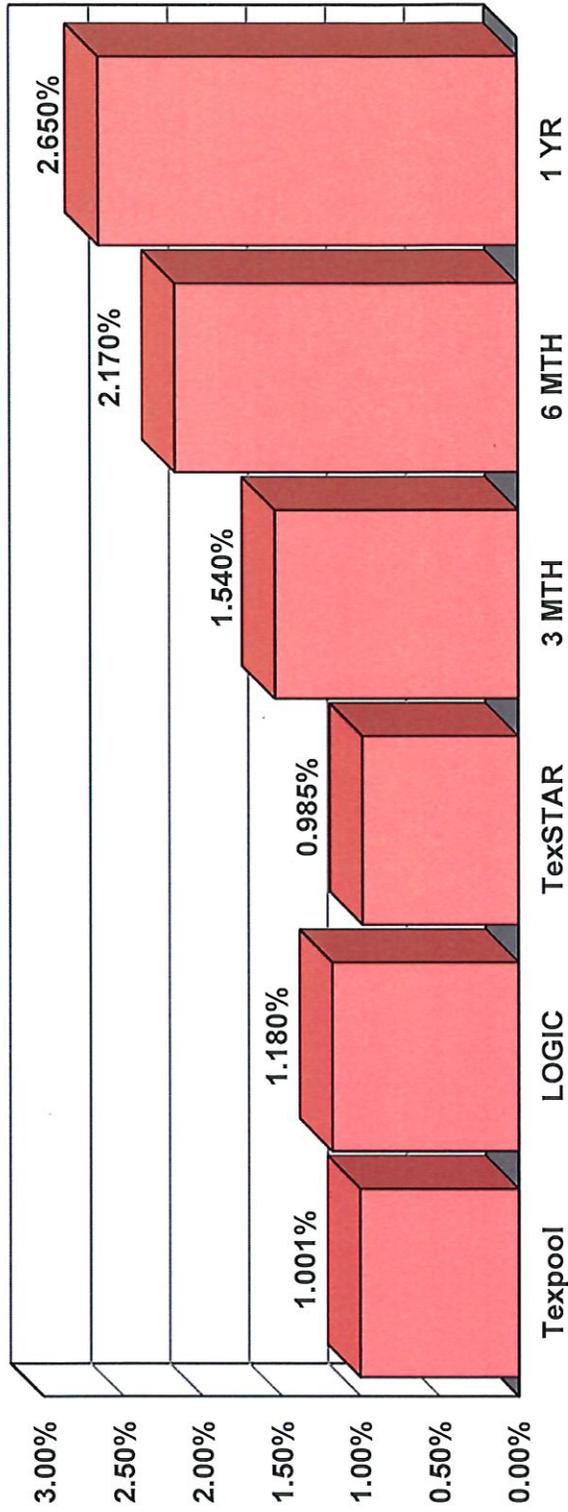
NUECES COUNTY HOSPITAL DISTRICT
 INVESTMENTS SUMMARY BY MARKET SECTOR
 UNRESTRICTED FUNDS
 FY 2022 3RD QUARTER (APRIL 1 - JUNE 30, 2022)

| | FROST BANK | TEXPOOL | LOGIC | TEXSTAR | FROST SAFEKEEPING | TOTAL | PERCENT BY TYPE OF INVESTMENT |
|--------------------------|------------------|---------------------|---------------------|--------------------|---------------------|----------------------|-------------------------------|
| CASH ON HAND | \$150 | \$0 | \$0 | \$0 | \$0 | \$150 | 0.00% |
| CASH - INTEREST BEARING | \$850,028 | \$0 | \$0 | \$0 | \$0 | \$850,028 | 0.74% |
| MONEY MKT MUTUAL FUNDS | \$94,734 | \$0 | \$0 | \$0 | \$0 | \$94,734 | 0.08% |
| GOVT INVESTMENT POOLS | \$0 | \$58,914,879 | \$12,470,556 | \$4,771,204 | \$0 | \$76,156,639 | 66.74% |
| COMMERCIAL PAPER | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | 0.00% |
| MUNICIPAL BONDS | \$0 | \$0 | \$0 | \$0 | \$5,014,919 | \$5,014,919 | 4.39% |
| TREASURY NOTES AND BONDS | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | 0.00% |
| AGENCIES | \$0 | \$0 | \$0 | \$0 | \$31,999,606 | \$31,999,606 | 28.04% |
| TOTAL INVESTMENTS | \$944,912 | \$58,914,879 | \$12,470,556 | \$4,771,204 | \$37,014,525 | \$114,116,075 | 100.00% |

| PERCENT BY HOLDER OF INVESTMENTS | 51.63% | 10.93% | 4.18% | 32.44% | 100.00% |
|----------------------------------|--------|--------|-------|--------|---------|
|----------------------------------|--------|--------|-------|--------|---------|

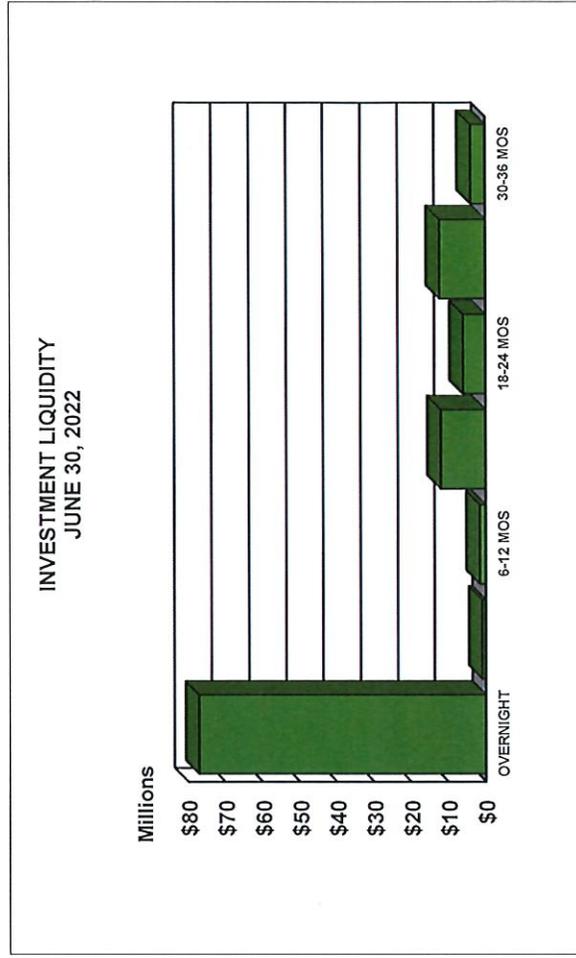


NUECES COUNTY HOSPITAL DISTRICT POOL RATES V. TREASURIES JUNE 30, 2022

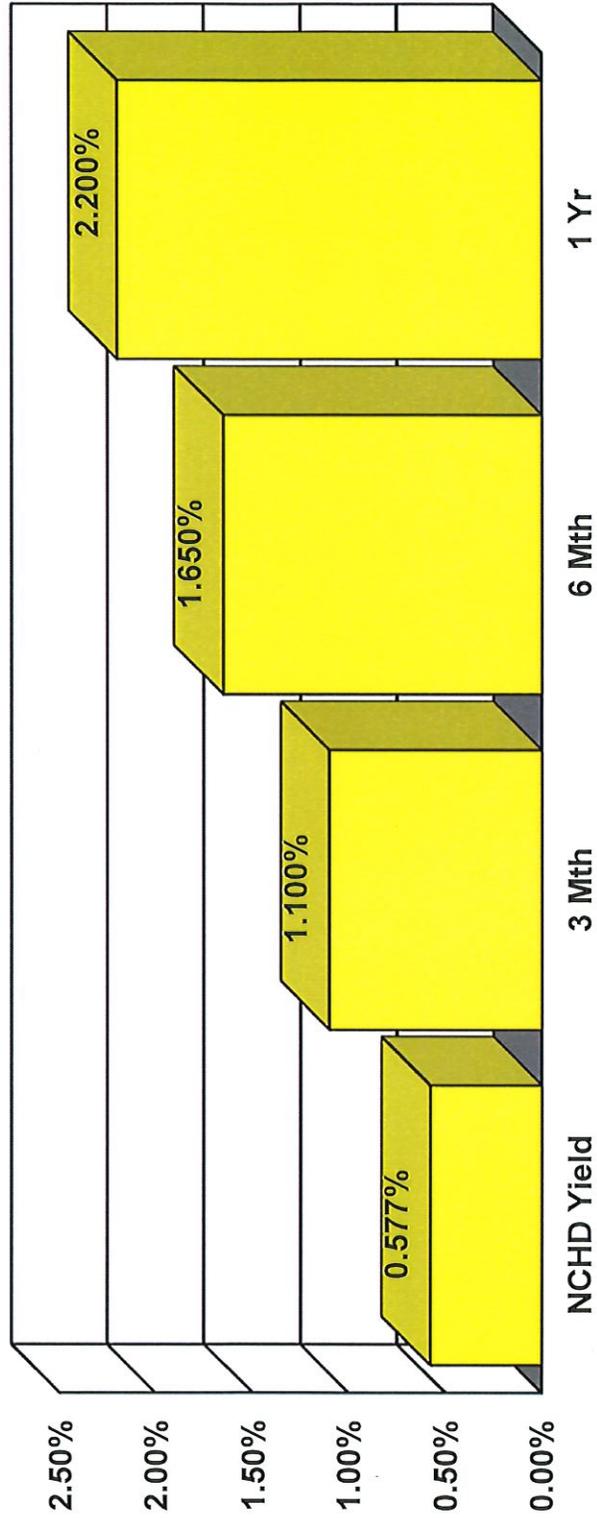


**NUECES COUNTY HOSPITAL DISTRICT
 INVESTMENT SUMMARY BY LIQUIDITY
 UNRESTRICTED FUNDS
 FY 2022 3RD QUARTER (APRIL 1 - JUNE 30, 2022)**

| <u>INVESTMENT-YRS TO MATURITY</u> | <u>AMOUNT</u> | |
|-----------------------------------|----------------------|---------------|
| CASH & CASH EQUIVALENTS | \$77,101,551 | 67.6% |
| MATURES IN 0-6 MONTHS | \$1,000,000 | 0.9% |
| MATURES IN 6-12 MONTHS | \$1,655,972 | 1.5% |
| MATURES IN 12-18 MONTHS | \$11,999,606 | 10.5% |
| MATURES IN 18-24 MONTHS | \$6,048,947 | 5.3% |
| MATURES IN 24-30 MONTHS | \$12,310,000 | 10.8% |
| MATURES IN 30-36 MONTHS | \$4,000,000 | 3.5% |
| TOTAL | \$114,116,075 | 100.0% |



NUECES COUNTY HOSPITAL DISTRICT QUARTERLY BENCHMARK COMPARISON JUNE 30, 2022





Administrative Offices

555 N. Carancahua Street, Suite 950
Corpus Christi, Texas 78401-0835

Office: (361) 808-3300

Fax: (361) 808-3274

www.nchdcc.org

BOARD OF MANAGERS RESOLUTION

JULY 26, 2022

A RESOLUTION RELATING TO ANNUAL REVIEW AND ADOPTION OF INVESTMENT POLICY AND INVESTMENT STRATEGIES

WHEREAS, the Nueces County Hospital District (the “Hospital District” or “District”) is a political subdivision of the State of Texas, established and created pursuant to the Texas Constitution, Article IX, Section 4 and the Texas Health and Safety Code, Chapter 281 (the “Health Code”), and operated in accordance with the Health Code and other applicable laws of the State of Texas, including the Texas Government Code, Chapter 2256 relating to public funds investment (the “Public Funds Investment Act”);

WHEREAS, the Hospital District’s Board of Managers (the “Board”) have been duly appointed pursuant to Health Code, §281.021(a);

WHEREAS, pursuant to collective authorities of Health Code, §281.047 and §281.048, the Board is the Hospital District’s governing body and the Board has, and at the time of adoption of this Resolution had, full power and authority to manage, control, administer, and to adopt rules governing operation of the Hospital District;

WHEREAS, the Board desires to comply with annual requirements of the Public Funds Investment Act and Act, §2256.005(e), requires the Board to review, not less than annually, the District’s investment policy and investment strategies, adopt a written instrument stating that they have reviewed the policy and strategies, and record therein any changes made to the policy and the strategies;

WHEREAS, the Board: (i) adopted the original form of the Hospital District’s investment policy and investment strategies on March 31, 1998; (ii) previously amended portions of the policy and/or strategies on July 7, 1998; September 8, 1998; April 24, 2001; April 7, 2009; July 26, 2011, July 23, 2013, June 6, 2019, July 21, 2020, and September 1, 2021; (iii) has not amended the policy and/or strategies since September 1, 2021; and (iv) does not herein amend the current investment policy and investment strategies.

WHEREAS, in accordance with Public Funds Investment Act, §2256.005(e), the Board hereby desires to: (i) review the current District’s investment policy and investment strategies; (ii) does not herein amend the current investment policy and investment strategies; and (iii) adopt the investment policy and investment strategies attached hereto and identified as Exhibit “A” to supersede and replace the current policy and strategies to be effective September 1, 2022.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF MANAGERS OF THE NUECES COUNTY HOSPITAL DISTRICT, THAT:

1. The Board has reviewed the Hospital District's current investment policy and investment strategies.
2. The Board hereby adopts the investment policy and investment strategies attached hereto and identified as Exhibit "A" to supersede and replace the current policy and strategies to be effective September 1, 2022.
3. The Board hereby adopts this Resolution to affirm the preceding Resolves as required by Public Funds Investment Act, §2256.005(e).
4. The Administrator shall be and is expressly authorized and directed to do and perform all acts, and to execute all instruments and other related documents, whether or not herein cited, as required to carry out the intent, terms, and provisions of this Resolution, such execution to be conclusively evidenced by the performance of such acts.
5. The Administrator, in his capacity as the Secretary of the Hospital District Board, be and is hereby legally authorized and empowered to perform all acts described above and certify these resolutions and that the provisions hereof are in conformance with the laws of the State of Texas and the Governing Board Bylaws of the District.
6. This Resolution shall take effect and be in full force and effect upon and after its passage.
7. The Board retains its right to amend or repeal this Resolution at any time.

**NUECES COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS**

Daniel W. Dain
Chairman

Sylvia Tryon Oliver
Vice Chairman

Belinda Flores, RN
Member

Vishnu V. Reddy, M.D.
Member

John E. Valls
Member

Mariana Garza, J.D.
Member

Efrain Guerrero, Jr.
Member

Exhibit "A"

NUECES COUNTY HOSPITAL DISTRICT

REVISED INVESTMENT POLICY AND INVESTMENT STRATEGIES
(COMPARISON TO PRIOR VERSION)

Original Adoption: March 31, 1998

Amended: July 7, 1998

Amended: September 8, 1998

Amended: April 24, 2001

Amended: April 7, 2009

Amended: July 26, 2011

Amended: July 23, 2013

Amended: June 6, 2019

Amended: July 21, 2020

Last Amended: September 1, 2021



NUECES COUNTY HOSPITAL DISTRICT

INVESTMENT STRATEGY & INVESTMENT POLICY

EFFECTIVE SEPTEMBER 1, 2022

Administrative Offices

555 North Carancahua St., Suite 950
Corpus Christi, Texas 78401-0835
Telephone: (361) 808-3300
Facsimile: (361) 808-3274

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PREFACE

The Nueces County Hospital District (the "Hospital District" or "District") is a political subdivision of the State of Texas, established and created in 1968 pursuant to Article IX, Section 4 of the Texas Constitution, and operated in accordance with Chapter 281, Texas Health and Safety Code and other applicable state laws, including Chapter 2256, Texas Government Code, the Public Funds Investment Act (the "Act") and Texas Government Code 2257, the Public Funds Collateral Act.

The Hospital District recognizes effective cash management is essential to good fiscal management. The District will pursue an active cash management and investment policy to take advantage of investment interest as a viable and material contribution to the revenues of the District. The District's portfolio shall be designed and managed in a manner responsive to the public trust and consistent with state law.

POLICY

It is the policy of the Hospital District that after allowing for the anticipated cash flow requirements of the District and giving due consideration to the safety and risk of investments, the District shall manage and invest its idle cash with these objectives which are listed in order of priority: safety of principal, liquidity of principal, investment diversification, yield, and public trust. The safety of the principal invested and liquidity always remain the primary objectives. The District shall design and manage all investments in a manner that is advantageous to the District, responsive to the public trust, and consistent with applicable law.

All investments made by the Hospital District shall comply with the Act and all federal, state, and local statutes, rules or regulations.

PURPOSE

The purpose of this Investment Policy is to set forth specific investment policy and strategy guidelines for the Hospital District. This Policy also serves to satisfy requirements of the Act, which requires public entities such as the District, to define, adopt, and review a formal investment strategy and policy regarding its funds and the funds under its control.

ADOPTION & REVIEW

The Hospital District's Board of Managers (the "Board"), based on advice and counsel from the Investment Committee and the Administrator, shall review and adopt by resolution, its investment strategies and policy not less than annually. Adopting resolutions shall include a record of changes made to either the investment policy or strategy.

INVESTMENT STRATEGY

The Hospital District maintains a comprehensive, conservative and proactive cash management program designed to monitor and control all District funds to ensure maximum use and reasonable market yield. The basic and underlying strategy of this program is that all of the District funds earn continuously. The District shall maintain a flexible investment design and be prepared to modify the investment strategy as market conditions dictate. The investment strategies described herein are based on the District's conservative philosophy and predicated on repetitive cash flow conditions. As such, the market strategies supporting these overall strategies are subject to change as conditions warrant.

The Hospital District shall manage and invest its funds with these objectives, listed in order of priority: safety of principal, liquidity of principal, investment diversification, yield, and public trust. The safety of the principal invested and liquidity always remain the primary objectives. The District shall design and manage all investments in a manner that are favorable to the District, responsive to the public trust, and consistent with applicable law.

Within these investment objectives, the investment strategy is to utilize Investment Policy authorized investments to gain maximum advantage for the Hospital District.

- In accordance with the District's intermediate and long-term plans and strategies, the District will maintain one combined portfolio. At least annually, the District's Investment Committee will evaluate the usefulness of this approach as compared to the District's current and future asset use needs as well as contemporaneous market conditions and trends. The principal investment strategies for this aggregate portfolio are to assure that the District's cash assets are safe and that anticipated cash needs of the District are matched with sufficient liquidity.
 1. To assure safety, the District shall utilize only high-credit quality securities such as U.S. government and agency issues and other securities that assure the return of principal when held to maturity. Additionally, the District shall qualify and monitor financial institutions and brokers/dealers with whom the District transacts business. Compliance with this Policy is to assure safety. As a guideline, at least 33% of the District's investments shall be U.S. government or agency issued securities. The District will not invest in securities maturing more than 3 years from the date of purchase.

The District shall limit its acquisition of securities to those that are commonly traded by governmental entities and have proven resale markets. The District shall select brokers/dealers that regularly deal with governmental entities.

2. To assure liquidity, the District shall ensure that a minimum of 10% of its portfolio is invested in securities which mature or could be liquidated (without penalty) within 60-90 days. The District will utilize local government pools and money market funds or interest bearing depository accounts to achieve needed liquidity. The maximum dollar

weighted average maturity (“WAM”) of the District's portfolio will be one year or less, calculated on the stated final maturity date of each security. The District shall match its periods of high cash consumption with matching amounts of liquidating securities when tax revenues are not adequate. Similarly, the District will strive to assure that its cash outlays are paid in a timely fashion by coordinating the establishment of maturity dates of various securities to cover periodic annual outlay needs not fully covered by then available tax revenues. Additional liquidity will be made available to cover the debt service payments on the required payment dates if needed.

3. To assure diversification and to avoid incurring unreasonable risks from over concentration of investments in a specific maturity, a specific issue, or a specific class or type of securities, the District shall maintain a diversified portfolio. The District will diversify so that potential losses on individual securities do not exceed the investment income generated from the remainder of the portfolio, taking into account current and projected yields and other market considerations.

Diversification will be served by the District matching the District’s annual business plan and projected strategic plan to its investment plan. Diversification will be served by competitive bidding and monitoring of all authorized market sectors for value. The District shall concurrently monitor the progress of the operating and investment plans. The District shall select a number of brokers/dealers that regularly deal with governmental entities and are familiar with their business cycles and ongoing business strategies as well as to provide competition.

4. To assure yield and risks stay within safe limits, the District shall structure its portfolio to meet or exceed the risk benchmark. The District shall pursue an overall average benchmark yield on the six-month U.S. Treasury Bill which is comparable to the District's average WAM, and consistent with the investments authorized as well as limitations in this Investment Policy.
- To increase earnings for assets identified as available for investment over longer periods (based on a long-range cash requirement projection) the Hospital District will consider the following additional strategies:
 1. Evaluating longer term investment opportunities.
 2. Building a ladder of Investment Policy authorized securities with staggered maturities for all or part of the longer term investable funds. The benefits of this ladder approach include:
 - It is straightforward and easily matched to cash needs.
 - It will require a minimum of time and investment expertise to administer.

- It represents a safe option to meet cash needs.
 - All investments remain within the approved maturity horizon.
 - It will assure the District that it will capture the most reasonable section of the yield curve at the time of purchase.
 - It provides predictable cash flow with scheduled maturities and reinvestment.
3. Utilizing the services of a reputable and respected independent, third-party SEC-registered investment advisor to assist the District in preparing a plan to achieve a higher yield on the assets available for longer term investment.
- The Hospital District’s investment strategy for handling investments that are not presently statutorily authorized but were so authorized at the time of their purchase; or were previously purchased and exceed the maximum allowable maturity stated under this Investment Policy, shall have as its primary objective that the District will liquidate such investments if it is prudent to do so under the District’s investment objectives, but only when so authorized by the Investment Committee created under this Investment Policy. Upon liquidation, such funds shall be reinvested in a manner consistent with this Investment Policy.

If an existing investment that requires a minimum rating under this Investment Policy loses that required rating the District shall undertake all prudent measures that are consistent with this Investment Policy to liquidate an investment in a timely manner.

- Unless otherwise directed by the Investment Committee or Board, interest earnings received from investments of Hospital District funds shall be allocated back to the appropriate fund, unless indicated otherwise by generally accepted accounting principles or law.

INVESTMENT POLICY

I. SCOPE

This Investment Policy shall govern all cash and investment assets of the Hospital District. This Policy also governs all of the District's trust and escrow agreements and other similarly functioning agreements. Similarly, this Policy governs the District's depository agreement with its depository financial institution as it relates to collateral and collateral investment requirements. This Policy does not apply to funds the District maintains or administers under a deferred compensation plan, the federal income tax treatment of which is governed by Section 401(k) or 457 of the Internal Revenue Code of 1986 (26 U.S.C. Sections 401(k) and 457).

II. INVESTMENT OBJECTIVES

The Hospital District shall maintain a comprehensive cash management program that includes collection of accounts receivable, vendor payment according to invoice terms, and prudent investment of available cash. Cash management is the process of managing monies to insure cash availability and maximum yield on short-term investment of pooled cash.

It is the intent of the Hospital District that after allowing for the anticipated cash flow requirements of the District and giving due consideration to the safety and risk of investments, all available funds shall be fully invested in conformance with this Investment Policy and at the highest reasonable rates obtainable at the time of investment within the limits of this policy.

The Hospital District shall manage and invest in accordance with these objectives, listed in order of priority: safety of principal, liquidity of principal, investment diversification, yield, and public trust. The safety of the principal invested and liquidity always remains the primary objectives. All investments shall be designed and managed in a manner favorable to the District, responsive to the public trust, and consistent with applicable law.

A. SAFETY OF PRINCIPAL

Safety of principal invested is the primary objective in investment decisions of the Hospital District. Each investment transaction shall seek to ensure the preservation of capital. The District shall control investing risk by utilizing high credit quality securities and through portfolio diversification.

B. MAINTENANCE OF ADEQUATE LIQUIDITY

The investment portfolio shall be managed to maintain adequate liquidity to ensure that funds will be available to meet cash flow requirements that might be reasonably anticipated and by investing in securities with active secondary markets. A security may be liquidated to meet unanticipated cash requirements or otherwise to favorably adjust the Hospital District's investment portfolio.

The Hospital District will match its investments with anticipated cash flow requirements in a laddered strategy by matching investment maturities with forecasted cash flow requirements and by investing in securities with active secondary markets. Recognizing that not all funds are needed for cash flow purposes, cash may be invested to longer maturities to best utilize the funds.

C. INVESTMENT DIVERSIFICATION

The Hospital District shall diversify its investments to spread market and credit risk. The District will invest in a planned mix of investments, maturities, and/or investment categories to reduce credit and market risk.

D. YIELD

The Hospital District's cash management portfolio shall be designed with the objective of regularly exceeding the average yield on the six-month U.S. Treasury Bill which compares to the District's average WAM. The investment program shall seek to augment earnings above this threshold consistent with risk limitations identified herein and prudent investment policies.

E. PUBLIC TRUST

All participants in the Hospital District's investment program shall seek to act responsibly as custodians of the public trust. Investment officers shall avoid any transaction that might impair public confidence in the District's ability to govern effectively.

III. RESPONSIBILITY AND CONTROL

A. DELEGATION OF AUTHORITY FOR PROGRAM MANAGEMENT

Overall management responsibility for the Hospital District's investment program is hereby delegated to the Administrator who shall be responsible for all operations of the District's investment program and transactions undertaken. The Administrator and other employees shall be designated Investment Officers in accordance with the Act. Investment Officers are designated by resolution of the Board.

B. PRUDENCE

The standard of prudence to be applied by the Hospital District's investment officers shall be the "prudent person" rule, which states:

"Investments shall be made with judgment and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, not for speculation, but for investment, considering the probable safety of their capital as well as the probable income to be derived."

In determining whether an investment officer has exercised prudence with respect to an investment decision, the determination shall be made taking into consideration: (1) the investment of all funds, or funds under the Hospital District's control, over which the officer had responsibility rather than a consideration as to the prudence of a single investment, and (2) whether the investment decision was consistent with the written investment policy of the District. The investment officers acting according to written policies and procedures and exercising due diligence, shall not be held personally liable for a specific security's credit risk or market price changes, if these deviations are reported in a timely manner and that appropriate action is taken to control adverse developments.

For purposes of this Investment Policy, "investment officer" means all Hospital District employees designated by Board resolution and involved in investment activities. All employees involved in investment transactions will be bonded. The District shall bear the cost of such bonding.

C. ETHICAL STANDARDS AND CONFLICTS OF INTEREST

All Hospital District investment officers having a direct or indirect role in the investment of Hospital District funds shall act as custodians of the public trust avoiding any transaction that might involve a conflict of interest, the appearance of a conflict of interest, or any activity that might otherwise discourage public confidence. All persons involved in the District's investment process shall refrain from personal business activity that could conflict with proper execution of the investment program, or which could impair their ability to make impartial investment decisions.

District staff shall disclose to the Administrator, or in the case of the Administrator, the Investment Committee and Board, any material financial interests in financial institutions, with dealers, brokers, or investment pools, collectively referred to "business entities," that conduct business with the District and they shall further disclose positions that could be related to the performance of the District's portfolio. District staff shall subordinate their personal financial transactions to those of the District, particularly with regard to timing of purchases and sales.

In accordance with the Act (§2256.005(i)), “an investment officer who has a personal business relationship with a business organization offering to engage in an investment transaction with the Hospital District shall file a statement disclosing that personal business interest. An investment officer who is related within the second degree by affinity or consanguinity to an individual seeking to sell an investment to the District shall file a statement disclosing that relationship. Such statement must be filed with the District’s Investment Committee and Board.

In accordance with the Act, an investment officer must disclose to the Texas Ethics Commission if he has a personal business relationship with a business organization in which: (1) the investment officer owns 10% or more of the voting stock or shares of the business entity or owns \$5,000 or more of the fair market value of the business organization; or (2) funds received by the investment officer from the business entity exceed 10% of the investment officer’s gross income for the previous year; or (3) the investment officer has acquired from the business entity during the previous year investments with a book value of \$2,500 or more for the personal account of the investment officer”. (Attachment “A”)

D. INVESTMENT COMMITTEE

There is hereby created by the Board an Investment Committee, consisting of all members of the Board of Manager’s Finance Committee, the Hospital District’s Administrator, and primary and secondary investment officers. The Chairman of the Finance Committee shall be Chairman of the Investment Committee. Those Committee members who are District employees shall be ex officio members of the Committee. All members of the Investment Committee should have an understanding of the suitability of the District’s investment instruments as they relate to the financial, cash flow and long-term debt requirements of the District. The Investment Committee shall meet at least quarterly, usually in conjunction with Finance Committee meetings, to monitor the investment plan, set general strategies, and to review results. The Investment Committee shall include in its deliberations such topics as: performance reports, economic outlook, portfolio diversification, portfolio structure, potential risk to and opportunities for the District’s funds, authorized financial institutions, brokers/dealers, investment pools, and the overall target yield on the investment portfolio. The Administrator shall prepare an agenda for all Investment Committee meetings. The Administrative Assistant shall maintain minutes of such meetings. The Investment Committee shall operate according to the terms and conditions of the Board’s Bylaws. Either the Committee’s Chairman or the Administrator may request special meetings. A majority of the non-employee members shall form a quorum. The Committee shall establish its own rules of procedure if not so provided by the Board’s Bylaws.

E. DELEGATION OF AUTHORITY TO ACT AS INVESTMENT OFFICERS

Authority to act as an investment officer in the Hospital District's investment program is derived solely by resolution of the District's Board. Only persons authorized by Board resolution may deposit, withdraw, transfer, or manage in any other manner, the cash and investment assets of the District. Such persons shall manage the District's funds according to this Investment Policy. Such authority is effective until rescinded by the Board or until termination of employment. The Board may appoint one or more investment officers. When more than one investment officer is appointed the Board shall designate one primary investment officer and the remainder shall be secondary investment officer(s). In the absence or unavailability of the primary investment officer, the secondary investment officers are responsible for investment decisions and activities.

F. TRAINING

Within one year of becoming or assuming their duties, investment officers shall receive not less than 10 hours of instruction relating to investment responsibilities under the Act from an independent source approved by Board resolution. After that, the investment officers shall attend 10 hours of investment training not less than once in each succeeding two-year period that begins on the first day of the Hospital District's fiscal year and consists of the two consecutive fiscal years after that date, and instruction shall relate to investment responsibilities under the Act. Such training shall at least include education in investment controls, security risks, strategy risks, market risks, diversification of investment portfolio, and compliance with the Act.

The Board shall from time-to-time, approve by resolution investment training courses applicable to this paragraph. The Hospital District shall bear the costs of such training.

G. INTERNAL CONTROLS

The Administrator shall establish a system of internal controls to regulate the activities of all investment officers. This system of controls shall be designed to provide reasonable assurance that the assets of the Hospital District are protected from loss, theft or misuse. The concept of reasonable assurance recognizes that: (1) the cost of a control should not exceed the benefits likely to be derived; and (2) the valuation of costs and benefits requires estimates and judgments by management. Additionally, the Administrator shall assure that written procedures are established for the operation of the investment program, consistent with this Investment Policy. Such procedures shall explicitly address delegation of authority to persons responsible for investment transactions. No persons may engage in an investment transaction except as provided under the terms of this Investment Policy and the internal control procedures established by the Administrator. In addition, the internal controls shall at least address the following points:

1. Control of collusion;
2. Separation of transaction authority from accounting and record keeping;
3. Custodial safekeeping;
4. Clear delegation of authority to subordinate staff members;
5. Written confirmation for all transactions for investments and wire transfers;
and
6. Maintenance of a log detailing all investment bids solicited and purchases by investment officers.

The investment officer(s) shall monitor, on no less than a monthly basis, the credit rating on all authorized investments in the portfolio based upon independent information from a nationally recognized rating agency. If any security falls below the minimum rating required by Policy, the investment officer(s) shall notify the Investment Committee of the loss of rating, conditions affecting the rating and possible loss of principal along with liquidation options available,

The investment officer shall monitor, on no less than a weekly basis, the status and ownership of all banks issuing brokered CDs owned by the District based upon information from the FDIC. If any bank has been acquired or merged with another bank in which brokered CDs are owned, the investment officer shall immediately liquidate any brokered CD which is above the FDIC insurance level.

H. COMPLIANCE AUDIT

The Administrator shall assure that an internal controls compliance audit is performed in conjunction with the Hospital District's annual independent financial audit. Such compliance audit shall at least focus on management controls, adherence to this Investment Policy, and compliance with applicable laws. The results of this compliance audit shall be incorporated into the independent auditor's annual report to the Board.

If the Hospital District invests in other than money market mutual funds, investment pools or CDs the quarterly reports associated with those activities shall be formally reviewed, at least annually, by an independent auditor and the results of the review shall be reported to the Board by the independent auditor. This shall be done in conjunction with the independent auditor's annual report to the Board.

I. MANAGEMENT REPORTS

At least monthly, the investment officers shall jointly compile a written report for the Administrator and other management's use in monitoring the Hospital District's investment program. The report must:

1. Contain a detailed description of each investment position of the District on the date of the report.
2. Be prepared jointly and signed by all District investment officers.
3. Contain a summary statement, prepared in compliance with generally accepted accounting principles, of each pooled funds group that states:
 - a. Beginning market value for the reporting period.
 - b. Additions and changes to the market value during the period.
 - c. Ending market value for the period.
 - d. Fully accrued interest and total earnings (net amortization/accretion) for the reporting period.
4. State the book value and market value of each separately invested asset at the beginning and end of the reporting period by the type of asset and fund type invested.
5. State the maturity date of each separately invested asset that has a maturity date. (Liquid investments have a one-day maturity date.)
6. State the account or fund or pooled group fund in the District for which each individual investment was acquired, if applicable.
7. State the compliance of the investment portfolio of the District as it relates to the District's Investment Policy and relevant provisions of law.

Market prices will be obtained from independent financial sources such as the Wall Street Journal for reporting purposes.

In addition to the above, but not less than quarterly, the Administrator and investment officers shall collectively prepare and submit to the Board an additional written report of investment transactions for the portfolio. The report shall be based on the District's fiscal year quarters and shall be presented to the Board within a reasonable time after the end of such periods. The report shall cover element's 1 -7 above.

IV. INVESTMENT PORTFOLIO

A. AUTHORIZED AND ACCEPTABLE INVESTMENTS

Only the following investments are authorized for investment by the Hospital District:

1. Obligations of the United States, its agencies and instrumentalities and full faith and credit obligations of the U.S. Government, excluding all mortgage backed securities with a maximum maturity of three years.
2. Direct obligations of the State of Texas or its agencies or instrumentalities; other obligations, the principal and interest of which are unconditionally guaranteed or insured by, or backed by the full faith and credit, of the United States. Obligations of the State of Texas, or their respective agencies and instrumentalities; obligations of the states, agencies, counties, cities, and other political subdivisions of any state rated as to investment quality by a nationally recognized investment rating firm not less than A or its equivalent.
3. Depository certificates of deposit issued by a state or national bank doing business in Texas that are:
 - a. guaranteed or insured by the FDIC or its successor; and
 - b. secured by obligations defined by this Policy; and
 - c. collateralized to 102% of District deposits, which collateral is held by an independent third-party custodian approved by the District.

Depository certificate of deposit spread programs entered into through a Texas bank are authorized under this provision.

4. FDIC-insured brokered CDs purchased from a broker on the District list or a bank in Texas, delivered versus payment to the District's safekeeping agent, not to exceed one year to maturity. Before purchase, the Investment Officer must verify the FDIC status of the bank (on www.FDIC.gov or equivalent) to assure that the bank is FDIC-insured.
5. Fully collateralized repurchase agreements that have a defined termination date not to exceed one year, are secured by obligations of the United States or its agencies and instrumentalities, are cleared delivery versus payment and held in the District's name by a custodian approved by the District, and placed through a primary governmental securities dealer, as defined by the Federal Reserve or a financial institution doing business in Texas.

Reverse repurchase agreements not to exceed 90 days. Funds received under the terms of a reverse repurchase agreement shall be used to acquire additional authorized investments, but the term of the authorized investments acquired must mature not later than the expiration date stated in the reverse repurchase agreement.

6. Commercial paper that has a stated maturity of 270 days or less from the date of purchase and is dual rated A1-1 or P-1 or equivalent by at least two nationally recognized credit rating agencies.
7. AAA-rated, no-load money market mutual funds that:
 - a. are registered with and regulated by the Securities and Exchange Commission;
 - b. has a dollar-weighted average stated maturity of 60 days or fewer; and
 - c. includes in its investment objectives the maintenance of a stable net asset value of \$1 for each share.
8. Texas public funds investment pools which strive to maintain a \$1 net asset value and meet the requirements of the Act, if the Board authorizes the investment in the pool by resolution.
9. Fully insured or collateralized interest bearing accounts in any Texas bank to include spread demand deposit programs entered into through a Texas bank.

All investments must comply with all policy, federal, state, and local statutes, rules or regulations.

All security transactions will be made on a competitive bidding basis and all transactions will be settled into the District's custodian on a delivery versus payment basis.

B. UNAUTHORIZED INVESTMENTS

State law specifically prohibits investment in the following investment securities:

1. Obligations whose payment represents the coupon payments on the outstanding principal balance of the underlying mortgage-backed security collateral and pay no principal.
2. Obligations whose payment represents the principal stream of cash flow from the underlying mortgage-backed security collateral and bears no interest.

3. Collateralized mortgage obligations that have a stated final maturity date of greater than ten years.
4. Collateralized mortgage obligations the interest rate of which is determined by an index that adjusts opposite to the changes in a market index.

C. MAXIMUM MATURITIES

The longer the maturity of investments becomes, the greater their risk and price volatility but also the greater the yield normally. Accordingly, it is the Hospital District’s policy to invest in a ladder structure to approximate investments to cash flow needs and provide for adequate liquidity. In periods of declining interest rates the portfolio may be extended to lock in rates. In periods of rising interest rates the portfolio may be kept more liquid. The District will not directly invest in individual securities maturing more than 3 years from the date of purchase. Collateral provided for certain investments, however, may be collateralized using longer date instruments. The WAM of the portfolio will not exceed one year.

D. AUTHORIZED DEPOSITORY FINANCIAL INSTITUTION, BROKER/DEALERS AND INVESTMENT POOLS

Conditioned on formal approval by the Investment Committee and satisfactory compliance with this Investment Policy (including applicable laws), a depository financial institution and brokers/dealers of government securities are hereby authorized under this Investment Policy. Investment pools are additionally authorized when approved by resolution of the Board.

1. DEPOSITORY FINANCIAL INSTITUTION

The depository financial institution selected by the Hospital District at least every four years shall be used for initial placement of District’s demand deposits and as a source for placement of time deposits (CDs) pursuant to the requirements set forth in this Investment Policy. Such institution shall be a bank doing business in the State of Texas.

The Hospital District shall select one depository financial institution no less than every four years on a competitive basis pursuant to Texas Health and Safety Code, §281.093(a)(1) and pursuant to the selection process set forth in Texas Local Government Code, Chapter 116. The banking services depository will not be used as a broker for security purchases in order to perfect the delivery versus payment settlement on all transactions.

Hospital District investment officers may not place time or demand deposits requiring collateral with any financial institution that does not have a valid depository agreement with the District. However, investment officers may

place time deposits (CDs) with financial institutions, other than the depository financial institution, provided they have been approved by the Investment Committee and are located in the State and, if above FDIC insurance limits, has an executed depository/collateral agreement with the District. All collateral agreements will be in writing and must be approved by the Bank Board or Loan Committee to perfect the provisions of FIRREA.

Policy Certification

Hospital District investment officers may not participate in any pool which has not delivered to the District the policy certification of having read the District's Investment Policy, including an acknowledgment of implementing reasonable procedures and controls, as required below.

2. BROKERS/DEALERS

Investment officers shall not knowingly conduct business with any firm with whom public entities have sustained losses on investments. All securities brokers/dealers shall provide the District with references from public entities which they are currently serving. The Investment Committee shall annually adopt and review a list of qualified brokers/dealers authorized to engage in investment transactions with the District.

Policy Certification

Hospital District investment officers will deliver the current investment policy to all brokers, but certification is not required.

3. REQUIREMENTS COMMON TO FINANCIAL INSTITUTIONS AND BROKERS AND DEALERS

All financial institutions and brokers/dealers who desire to become the depository or qualified bidders for investment transactions must supply the Hospital District with the following information, as appropriate:

- a. current audited financial statements provided on an annual basis;
- b. proof of Financial Industry Regulatory Agency (FINRA) registration (CRD #) (brokers only);
- c. proof of state registration (brokers only);
- d. For pools, a signed *Policy Certification*; acknowledging that the pool has implemented reasonable procedures and controls in an effort to preclude imprudent investment activities arising out of investment transactions conducted between the District and the pool;

- e. completed *Nueces County Hospital District Broker/Dealer Questionnaire* (Attachment “B”).

For purposes of this Investment Policy, a “qualified representative” means a person who holds a position with a business organization, who is authorized to act on behalf of the business organization as defined by the Act.

An annual review of the financial condition and registration of qualified broker/dealers shall be conducted by the Hospital District’s Administrator.

4. INVESTMENT POOLS

The Hospital District may invest its funds in eligible investment pools which strive to maintain a \$1 net asset value and as defined by the Act and this Policy provided that the Board adopts a resolution authorizing investment in that particular pool.

Once an investment pool is approved for use by the Board, to maintain eligibility to receive Hospital District funds and invest funds on behalf of the District pursuant to the Act, the investment pool must furnish to the District’s Administrator or investment officers periodic reports as defined by the Act.

E. COMPETITIVE BIDDING FOR ALL INVESTMENTS

To purchase or sell investment securities, the Hospital District’s investment officers shall solicit independent bids/offers from at least 3 authorized brokers/dealers from the list approved by the Investment Committee. For CDs, the investment officers shall solicit independent bids from 3 financial institutions. All bids/offers for investment securities or instruments shall be solicited by an investment officer via any of the following methods but must be documented.

- 1. Orally (but confirmed in writing);
- 2. In writing;
- 3. Electronically; or
- 4. Any combination of the above methods.

F. DELIVERY VERSUS PAYMENT

It is the policy of the Hospital District that all security transactions entered into by the District shall be conducted on a “delivery versus payment” basis. That is, the depository acting as safekeeping agent for the District shall not release District funds until verification has been made that the correct security was received. The security

shall be held in the name of the District by the safekeeping agent. The records shall assure the notation of the District's ownership of the securities. The original copy of all safekeeping receipts shall be delivered to the District. For purposes of this Investment Policy, safekeeping receipt shall mean evidence of receipt, identification and recording, including a written or electronically transmitted advice of transaction.

G. SAFEKEEPING OF SECURITIES

All securities owned by the Hospital District shall be held in its banking services depository or a depository chosen by the District. Safekeeping will be controlled by a written Safekeeping agreement executed by the District and bank.

H. DEPOSITORY COLLATERAL

All collateral pledged to secure time and demand deposits shall be custodied in an independent custodial institution approved by the Hospital District to include the Federal Reserve.

The collateral agreement shall be executed by the Hospital District and the pledging bank and be in writing on the terms and conditions for securing the deposit of District funds, including the procedural steps for gaining access to the collateral. The Agreement shall be adopted by resolution of the Bank Board or the Bank's Loan Committee and executed before funds are moved into the depository. If the Federal Reserve is used as the custodian, a Pledge Agreement Form (Circular 7) of the Fed will be executed. Such agreements shall include the signatures of all authorized representatives of the District. Original safekeeping trust receipts shall be obtained. The District or its agent may inspect, at any time, an investment security evidenced by a receipt.

The Custodian shall provide to the Hospital District monthly collateral reports listing the securities pledged.

1. Consistent with the requirements of the Public Funds Collateral Act (Texas Government Code, §2257 et seq.) it is the policy of the Hospital District to require that the depository financial institution pledge collateralization for all District funds in demand and time deposits, that are in excess of the amount insured by the FDIC. The following are applicable to such collateralization:
 - a. The District shall be the final authority when determining the market value of securities pledged to secure District deposits for the purpose of determining adequacy of the amount of collateral. The District's valuation of the securities is final and not subject to review;
 - b. The total value of eligible security used to collateralize deposits of the

District shall be not less than 102% of total market value on the deposits less an amount insured by the FDIC. Preferably, the Custodian shall report to the District, at least monthly, collateral reports listing the securities pledged;

- c. If the market value of the securities pledged by the depository financial institution becomes less than the amount of the total deposit in the depository, the District shall require that additional collateral be pledged immediately. If the collateral pledged by the depository financial institution is in excess of the percentage amount required above, the District may permit the release of the excess collateral if the collateral's market value exceeds the required amount. If the balance of District deposits in the depository financial institution is increased, the depository financial institution shall immediately increase the collateral for the deposits to the percentage amount required above. The bank shall be liable for monitoring and maintaining the required margin of 102% at all times;
- d. The depository financial institution may substitute securities pledged with the District, if the market value of the replacing securities are equal to or greater than the required collateral value and the new securities are received by the custodian before release of existing collateral;
- e. If the depository financial institution fails to credit a deposit or part of deposit made by the District, the District will notify and may sell or otherwise convert the securities to cash in accordance with the Public Funds Collateral Act's events of default.
- f. For purposes of this Investment Policy, collateral eligible to be pledged to secure District deposits at the District's depository financial institution shall be in accordance with the Act and limited to:
 - (1) Direct obligations of the United States government, its agencies or instrumentalities, excluding letters of credit; and
 - (2) Direct obligations backed by the full faith and credit of the United States government;
 - (3) Municipal and state obligations rated A or better by two nationally recognized rating agencies.
- g. The depository financial institution shall maintain a separate, accurate, and complete record relating to a pledged investment security, a deposit of demand or time deposit funds (including accrued

interest), and a transaction related to a pledged investment security.

2. All collateral and related information shall be subject to examination, verification and audit by the District or its agents (including its independent auditors) at any reasonable time.
3. The collateral pledged shall be reviewed at least monthly by the District's investment officers.
4. As a part of its independent annual audit, the District's auditor shall examine and verify pledged investment securities and its market value and records maintained and report any significant or material noncompliance with the Investment Policy to the Board. Such report shall be prepared in conjunction with the independent auditor's annual report to the Board.
5. The pledging financial institution shall be responsible for monitoring and maintaining the margins at all times.

I. MONITORING MARKET PRICES

On at least a monthly basis, the investment officers shall obtain the market price of owned securities investments using financial periodicals (i.e., Wall Street Journal, etc.), on-line investment monitoring services, and/or other market information sources. Market prices will be used to establish market value.



GLOSSARY OF COMMON TREASURY TERMS

Agencies: Federal agency securities.

Asked Price: The price at which securities are purchased by the District. The opposite of a bid.

Basis Point: Equal to 1/100 of one percent to measure price and yield. If interest rates rise 0.25%, the difference is referred to as an increase of 25 basis points.

Bid: The price at which the District sells a security. The opposite of an offer.

Book Value: The value of a security owned by the District equal to the purchase cost plus/minus the net of amortization/accretion.

Broker: An individual or firm who brings buyers and sellers together. In the money markets, all prices for securities are net priced reflecting all costs.

Certificate of Deposit – Depository (CD): Notes issued by banks that guarantee payment of a fixed interest rate until a future date (the maturity date) which are FDIC-insured up to \$250,000.

Certificate of Deposit – Brokered: Securities issued by a bank as certificates of deposit but securitized by the bank and sold on the open market by brokers. Brokered CDs are securities and have additional risk/control elements to be addressed, such as safekeeping. Only FDIC-insured brokered CDs safe kept by the District's safekeeping agent are authorized for purchase by the District.

Collateral: Securities pledged to the District for time and demand deposits over FDIC insurance coverage.

Commercial Paper: An unsecured promissory note issued primarily by corporations for a specific amount and maturing on a specific day. The maximum for commercial paper is 270 days, but most is sold with maturities of up to 90 days. The credit risk is rated by nationally recognized rating agencies.

Coupon: A certificate attached to any security with an original maturity over one year evidencing interest due semi-annually. (Coupon rate * face amount)

Custodial Agreement: A written contract establishing the responsibilities of a custodian who holds collateral for deposits or securities.

Dealer: A dealer, as opposed to a broker, acts as a principal in all transactions, buying and selling for his own account. A firm that has an inventory and can sell securities.

Debenture: A bond secured only by the general credit of the issuer.

Delivery versus Payment (DVP): There are two methods of delivery of securities: Delivery versus payment and delivery versus receipt (DVR) (also called free).

- (a) Delivery versus payment means delivery of securities with an exchange of money for the securities.
- (b) Delivery versus receipt means delivery of securities with an exchange of a signed receipt for the securities.

Depository Insurance: Insurance on deposits with financial institutions. FDIC and some state governments provide this insurance.

Deposits: In the context of required note disclosures, cash and near cash items placed on account with a financial institution or fiscal agent. Some deposits (e.g., checking accounts) are subject to withdrawal on demand without notice or penalty (demand deposits) and others (e.g., CDs) can only be withdrawn without penalty upon completion of a fixed period (time deposits).

Discount: The difference between the cost price of a security and its value at maturity when quoted at lower than face value. A security selling below original offering price shortly after sale also is considered to be at a discount.

Discount Securities: Non-interest bearing money market instruments that are issued at a discount and redeemed at maturity for full face value; for example, U.S. Treasury bills.

Federal Deposit Insurance Corporation (FDIC): A federal agency that insures deposits of federally chartered banks, currently up to \$250,000 per deposit.

Federal Reserve System: The central bank of the United States created by Congress and consisting of a seven-member Board of Governors in Washington, D.C., 12 regional banks, and about 5,700 commercial banks that are members of the system.

Fixed-Income Securities: Securities with a set interest rate for the life of the security.

Governmental Accounting Standards Board (GASB): The authoritative accounting and financial reporting standard-setting body for government entities.

Interest Rate Risk: The degree of uncertainty in the prices of securities associated with changes in interest rates; the value of the securities moves in inverse relation to interest rates. This term is generally associated with bond prices, but applies to all investments.

Investment Risk: Any of several risks incurred when making investments. Examples include credit risk, market risk, reinvestment risk, and volatility risk.

Letters of Credit: A financial institution's written guarantee of a customer's drafts, up to a specified amount, for a certain period of time.

Liquidity: A liquid asset is one that can be converted easily and rapidly into cash without a substantial loss of value. In the money market, a security is said to be liquid if the spread between bid and asked prices is narrow and reasonable quantities can be purchased at those quotes.

Local Government Investment Pool (LGIP): The aggregate of funds from political subdivisions participating in a commingled investment vehicle for investment and reinvestment.

Margin: A percentage above market value used to protect against fluctuations in market value.

Market Risk: Risk coming from price fluctuations for a whole market, for an entire industrial group, or for a particular security, as a result of factors such as economic, political, or social events.

Market Value: The price at which a security could presumably be purchased or sold.

Master Repurchase Agreement: A written agreement between the investor and the financial institution or dealer. The Bond Market Association Master Agreement is the standard for this agreement.

Maturity: The final stated date on which the principal or stated value of an investment becomes due and payable.

Money Market: The market in which short-term debt instruments (bills, commercial paper, banker's acceptances, etc) are issued and traded.

Money Market Mutual Funds: A defined SEC registered commingled investment security which strives to maintain a net asset value of \$1 at all times and provides daily liquidity

Mortgage-Backed Securities (MBS): Securities created from pools of home mortgages that pay the investor as principal and interest is paid by the home-owner. These securities are highly volatile because they are directly affected by economic conditions and mortgage rates. Some MBS pools are further divided into separate securities called collateralized mortgage obligations (CMO) each of which has unique and often complex risk profiles.

Par Value: The face value of the security.

Portfolio: Collection of securities held by an investor.

Premium: The excess of the price of a security over its face value, excluding any amount of accrued interest bought or sold.

Primary Dealer: Government securities dealers included in the "List of Government Securities Dealers Reporting to the Market Reports Division of the Federal Reserve Bank of New York (N.Y.

Fed)” that submit daily reports of market activity and positions and monthly financial statements to the N.Y. Fed and are subject to its informal oversight. Primary dealers include SEC-registered securities brokers-dealers, banks and a few unregulated firms.

Principal: In the context of bonds other than deep-discount debt, the face value or par value of a bond or issue of bonds payable on the stated dates of maturity.

Ratings: An evaluation of credit-worthiness performed by an independent rating service.

Repurchase Agreement (RP or REPO): A buy-sell transaction in which an entity buys securities for a specified period and the seller agrees to repurchase the securities plus interest.

Safekeeping: A service including clearing, safekeeping and income distribution rendered by banks for a fee whereby securities and valuables of all types and descriptions are held on the record of the bank.

Secondary Market: A market in which securities are traded after initial distribution by the issuer.

Securities: A negotiable or nonnegotiable instrument that signifies an ownership interest, the right to an ownership interest or creditor status.

U.S. Treasury Securities: Securities issued by the U.S. Treasury and secured by the taxing ability of the U.S. These securities are highly liquid.

Weighted Average Maturity (WAM): WAM refers to the weighted average maturity of all positions in a portfolio.

Yield: The rate of annual income return on an investment, expressed as a percentage.

ATTACHMENT "A"

**STATEMENT OF
PERSONAL BUSINESS RELATIONSHIP**

I, _____, am an investment officer for the Nueces County Hospital District (the "Hospital District").

I have a personal business relationship (as defined by the Hospital District's Investment Policy) with _____, a business entity offering to engage in an investment transaction with the Hospital District. This business organization is _____
_____. I (or name of relative and relationship)
_____ (insert name of relative or describe relationship) have/has a personal business relationship with this business organization for the following reasons: (Designate all which are applicable):

- 1) My/his/her ownership of 1% or more of the voting stock or shares of the business organization;
- 2) My/his/her ownership of \$250 or more of the fair market value of the business organization;
- 3) Funds received from the business organization exceed 1% of my/his/her income for the previous year;
- 4) During the previous year I/he/she acquired from the business organization investment with a book value of \$100 or more for my/his/her personal account.

Signed this _____ day of _____, _____.

Signature

Title

ATTACHMENT "B"

**NUECES COUNTY HOSPITAL DISTRICT
BROKER/DEALER QUESTIONNAIRE**

Page 1 – To be completed by all banks and broker/dealers

Name of Firm: _____

Address: _____

Ownership/affiliation, if appropriate: _____

Primary representative on account: _____

Telephone: _____

Fax: _____

E-Mail: _____

Backup representative or trading assistant: _____

Telephone: _____

Branch Manager: _____

Telephone: _____

Fax: _____

E-Mail: _____

Is the firm designated as a Primary Dealer by the Federal Reserve? _____

Is the firm registered with the Texas Securities Board? _____

Are the firm and its representative registered with the NASD? _____

CRD Number: _____

How long has the designated representative been an institutional fixed income broker at this firm?
_____ A broker? _____

In what market sectors does the primary account representative specialize? _____

Delivery Instructions:

All transactions shall be completed delivery versus payment.

BROKER/DEALER QUESTIONNAIRE

Page 2 – To be completed only by Non-Primary Dealers

Name of Firm: _____ CRD #: _____

Years in business at this location: _____ Total years: _____

Indicate the approximate sales volume in the following sectors for the previous year.

| | |
|-----------------|-------|
| U.S. Treasuries | _____ |
| Repo | _____ |
| U.S. Agencies | _____ |
| MBS | _____ |
| CP | _____ |
| Other? | _____ |

Has your firm, or this account representative, been subject to a regulatory agency, state of _____, or federal investigation for alleged improper, disreputable, unfair, (or) fraudulent activities related to the sale of securities or money market instruments in the past five years? Are there any outstanding claims? If yes, please explain.

Please attach a sample of your standard confirmation to be provided to clients.

Please provide the firm's most recent audited financial statements.
(This will be required annually)

What portfolio information do you require from your clients?

What market information do you routinely offer your clients?

CERTIFICATE FOR RESOLUTION

**A RESOLUTION RELATING TO ANNUAL REVIEW AND
ADOPTION OF INVESTMENT POLICY AND INVESTMENT STRATEGIES**

THE STATE OF TEXAS §
 §
COUNTY OF NUECES §

I the undersigned Secretary of the Board of Managers of the Nueces County Hospital District, hereby attest as follows:

1. The Board of Managers of said District convened in regular meeting on the 26th day of July 2022, at the regular meeting place, and the roll was called of the duly constituted officers and members of said Board of Managers, to wit:

Daniel W. Dain, Chairman
Sylvia Tryon Oliver, Vice-Chairman
Belinda Flores, RN
Vishnu V. Reddy, M.D.
John E. Valls
Mariana Garza, J.D.
Efrain Guerrero, Jr.

and all of said persons were present, except the following absentees: _____, _____, _____, and _____ thus constituting a quorum. Whereupon, among other business, the following was transacted at said Meeting: A written

**A RESOLUTION RELATING TO ANNUAL REVIEW AND
ADOPTION OF INVESTMENT POLICY AND INVESTMENT STRATEGIES**

was introduced for the consideration of said District and read in full. It was then duly moved and seconded that said Resolution be passed, and, after due discussion, said motion, carrying with it the passage of said Resolution, prevailed, and carried by the following vote:

YEAS: _____
NAYS: _____
PRESENT NOT VOTING: _____
ABSENT: _____

2. That a true, full and correct copy of the aforesaid Resolution passed at the meeting described in the above and forgoing paragraph is attached to and follows this Certificate; that said Resolution has been duly recorded in the minutes of said Meeting; that the above and forgoing paragraph is a true, full, and correct excerpt from the minutes of said Meeting pertaining to and passage of said Resolution; that the persons named in the above and forgoing paragraph are the duly appointed, qualified, and acting members of the Board of Managers of said District as indicated therein; that each of the members of the Board of Managers of said District was duly and sufficiently notified officially and personally, in advance, of the time, place, and purpose of aforesaid Meeting, and that said Resolution would be introduced and considered for passage at said Meeting, and that each of said members consented, in advance, to holding of said Meeting for such purpose; and that said Meeting was open to the public, and public notice of the date, time, place, and purpose of said Meeting was given all as required by Texas Government Code, §551.001 et.seq.

SIGNED AND SEALED THIS 26th day of July 2022.

ATTEST:

Jonny F. Hipp
Secretary, Board of Managers
Nueces County Hospital District

{SEAL}



Administrative Offices

555 N. Carancahua Street, Suite 950
Corpus Christi, Texas 78401-0835

Office: (361) 808-3300

Fax: (361) 808-3274

www.nchdcc.org

BOARD OF MANAGERS RESOLUTION

JULY 26, 2022

**A RESOLUTION REVIEWING & ADOPTING
LISTING OF QUALIFIED BROKER/DEALERS
AUTHORIZED TO ENGAGE IN INVESTMENT TRANSACTIONS**

WHEREAS, the Nueces County Hospital District (the “Hospital District” or “District”) is a body politic and corporate and a political subdivision of the State of Texas, established and created pursuant to the Texas Constitution, Article IX, Section 4 and the Texas Health and Safety Code (the “Health Code”), Chapter 281, and operated in accordance with the Health Code and other applicable laws of the State of Texas, including Texas Government Code, Chapter 2256 relating to public funds investment (the “Public Funds Investment Act” or “Act”);

WHEREAS, the Hospital District’s Board of Managers (the “Board”) have been duly appointed pursuant to Health Code, §281.021(a);

WHEREAS, pursuant to collective authorities of Health Code, §281.047 and §281.048, the Board is the Hospital District’s governing body and the Board has, and at the time of adoption of this Resolution had, full power and authority to manage, control, administer, and to adopt rules governing operation of the District;

WHEREAS, the Hospital District is governed by the Public Funds Investment Act and the Board has previously adopted an (i) investment policy, and (ii) list of qualified broker/dealers, both in accordance with the Act;

WHEREAS, the Board desires to comply with annual requirements of the Public Funds Investment Act and §2256.025 thereof requires the Board, or investment committee, to at least annually, review and adopt a list of qualified brokers that are authorized to engage in investment transactions with the Hospital District; and

WHEREAS, in accordance with Public Funds Investment Act, §2256.025, the Board hereby desires to: (i) review its current listing of broker/dealers authorized to engage in investment transactions with the Hospital District; and (ii) adopt, effective September 1, 2022, the listing attached hereto and identified as Exhibit “A” as the District’s authorized broker/dealers list to supersede and replace the current listing.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF MANAGERS OF THE NUECES COUNTY HOSPITAL DISTRICT, THAT:

1. The Board has reviewed the Hospital District's current list of qualified broker/dealers authorized to engage in investment transactions with the District.
2. The Board hereby adopts the Authorized Broker/Dealer List attached hereto and identified as Exhibit "A" to supersede and replace the current list as the Hospital District's list of qualified broker/dealers who are authorized to engage in investment transactions with the District (the "Authorized Broker/Dealer List"); the Authorized Broker/Dealer List is to be effective September 1, 2022.
3. The broker/dealers shown in the Authorized Broker/Dealer List shall complete and submit the questionnaire forms identified in and required by the District's Investment Policy; acceptability of submitted questionnaire forms shall be determined by the District's Administrator.
4. The Board hereby adopts this Resolution to affirm the preceding Resolves as required by Public Funds Investment Act, §2256.025.
5. The Administrator shall be and is expressly authorized and directed to do and perform all acts, and to execute all instruments and other related documents, whether herein cited, as required to carry out the intent, terms, and provisions of this Resolution, such execution to be conclusively evidenced by the performance of such acts.
6. The Administrator, in his capacity as the Secretary of the Hospital District Board, be and is hereby legally authorized and empowered to perform all acts described above and certify these resolutions and that the provisions hereof are in conformance with the laws of the State of Texas and the Governing Board Bylaws of the Hospital District.
7. This Resolution shall take effect and be in full force and effect upon and after its passage.
8. The Board retains its right to amend or repeal this Resolution at any time.

**NUECES COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS**

Daniel W. Dain
Chairman

Sylvia Tryon Oliver
Vice Chairman

Belinda Flores, RN
Member

Vishnu V. Reddy, M.D.
Member

John E. Valls
Member

Mariana Garza, J.D.
Member

Efrain Guerrero, Jr.
Member

Exhibit "A"

NUECES COUNTY HOSPITAL DISTRICT

AUTHORIZED BROKER/DEALER LIST

Effective September 1, 2022

Bank of America Merrill Lynch
BOK Financial Corporation (Bank of Oklahoma)
Cantor Fitzgerald
FHN Financial
StoneX Group Inc.
Mizuho Securities
Morgan Stanley
Oppenheimer
Piper Sandler
Raymond James
RBC (Royal Bank of Canada)
Robert W. Baird Securities
Siebert Williams Shank
Stifel Nicolaus
UBS
Vining Sparks
Wells Fargo

#

CERTIFICATE FOR RESOLUTION

**A RESOLUTION REVIEWING & ADOPTING
LISTING OF QUALIFIED BROKER/DEALERS
AUTHORIZED TO ENGAGE IN INVESTMENT TRANSACTIONS**

THE STATE OF TEXAS §
 §
COUNTY OF NUECES §

I the undersigned Secretary of the Board of Managers of the Nueces County Hospital District, hereby attest as follows:

1. The Board of Managers of said District convened in regular meeting on the 26th day of July 2022, at the regular meeting place, and the roll was called of the duly constituted officers and members of said Board of Managers, to wit:

Daniel W. Dain, Chairman
Sylvia Tryon Oliver, Vice-Chairman
Belinda Flores, RN
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John E. Valls
Mariana Garza, J.D.
Efrain Guerrero, Jr.

and all of said persons were present, except the following absentees: _____, _____, _____, and _____ thus constituting a quorum. Whereupon, among other business, the following was transacted at said Meeting: A written

**A RESOLUTION REVIEWING & ADOPTING
LISTING OF QUALIFIED BROKER/DEALERS
AUTHORIZED TO ENGAGE IN INVESTMENT TRANSACTIONS**

was introduced for the consideration of said District and read in full. It was then duly moved and seconded that said Resolution be passed, and, after due discussion, said motion, carrying with it the passage of said Resolution, prevailed, and carried by the following vote:

YEAS: _____
NAYS: _____
PRESENT NOT VOTING: _____
ABSENT: _____

2. That a true, full and correct copy of the aforesaid Resolution passed at the meeting described in the above and forgoing paragraph is attached to and follows this Certificate; that said Resolution has been duly recorded in the minutes of said Meeting; that the above and forgoing paragraph is a true, full, and correct excerpt from the minutes of said Meeting pertaining to and passage of said Resolution; that the persons named in the above and forgoing paragraph are the duly appointed, qualified, and acting members of the Board of Managers of said District as indicated therein; that each of the members of the Board of Managers of said District was duly and sufficiently notified officially and personally, in advance, of the time, place, and purpose of aforesaid Meeting, and that said Resolution would be introduced and considered for passage at said Meeting, and that each of said members consented, in advance, to holding of said Meeting for such purpose; and that said Meeting was open to the public, and public notice of the date, time, place, and purpose of said Meeting was given all as required by Texas Government Code, §551.001 et.seq.

SIGNED AND SEALED THIS 26th day of July 2022.

ATTEST:

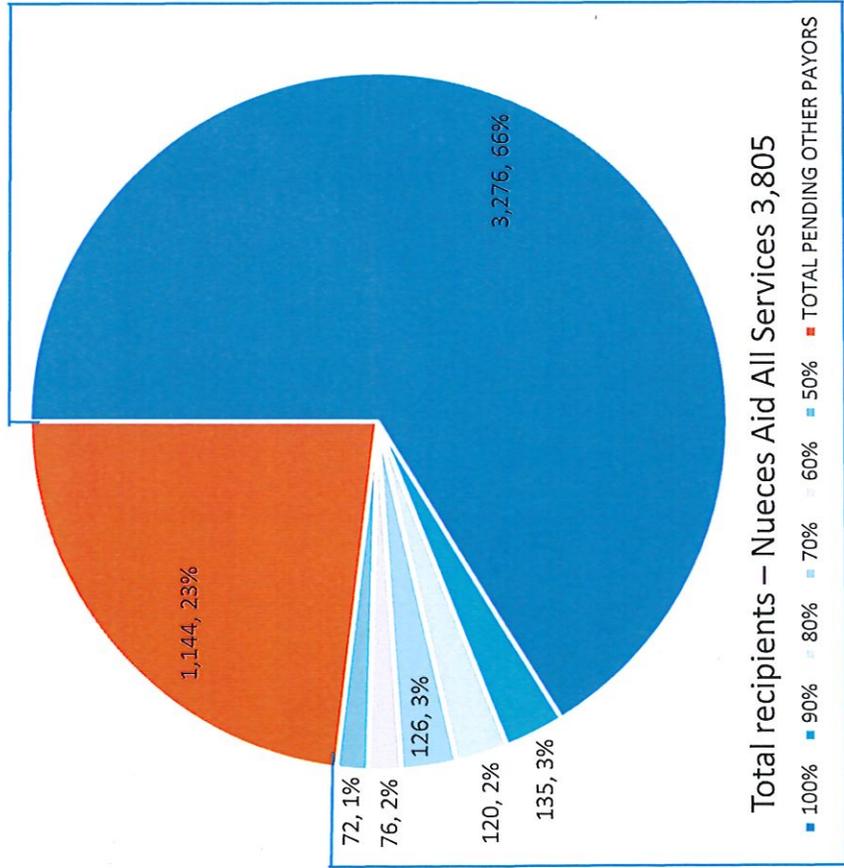
Jonny F. Hipp
Secretary, Board of Managers
Nueces County Hospital District

{SEAL}

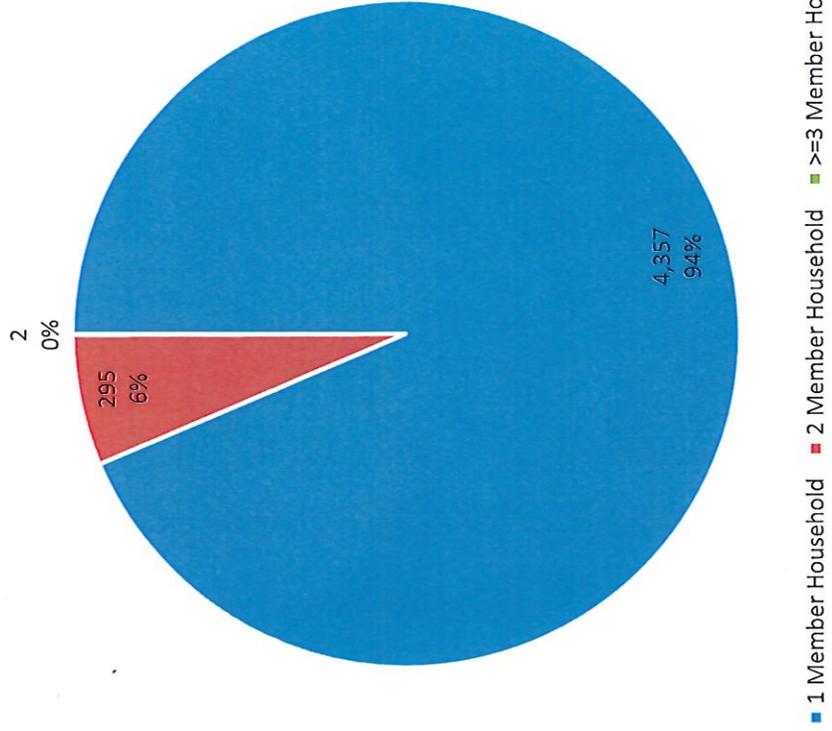
May 2022

Nueces Aid Program Enrollment

Total Enrolled
4,949



Total Households
4,654

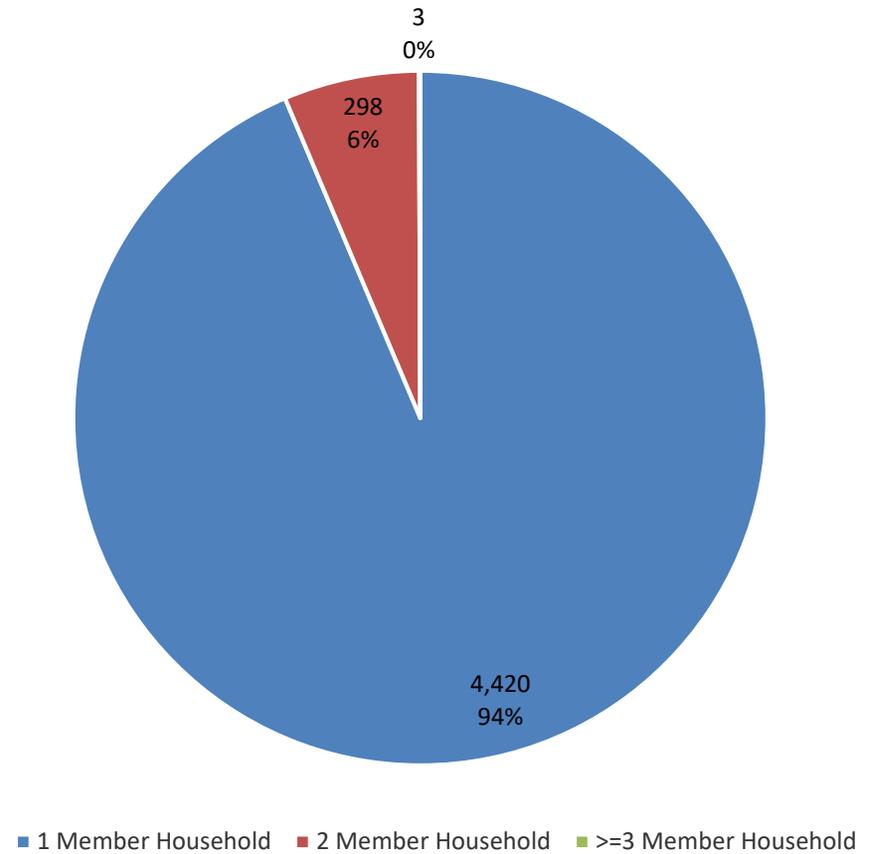
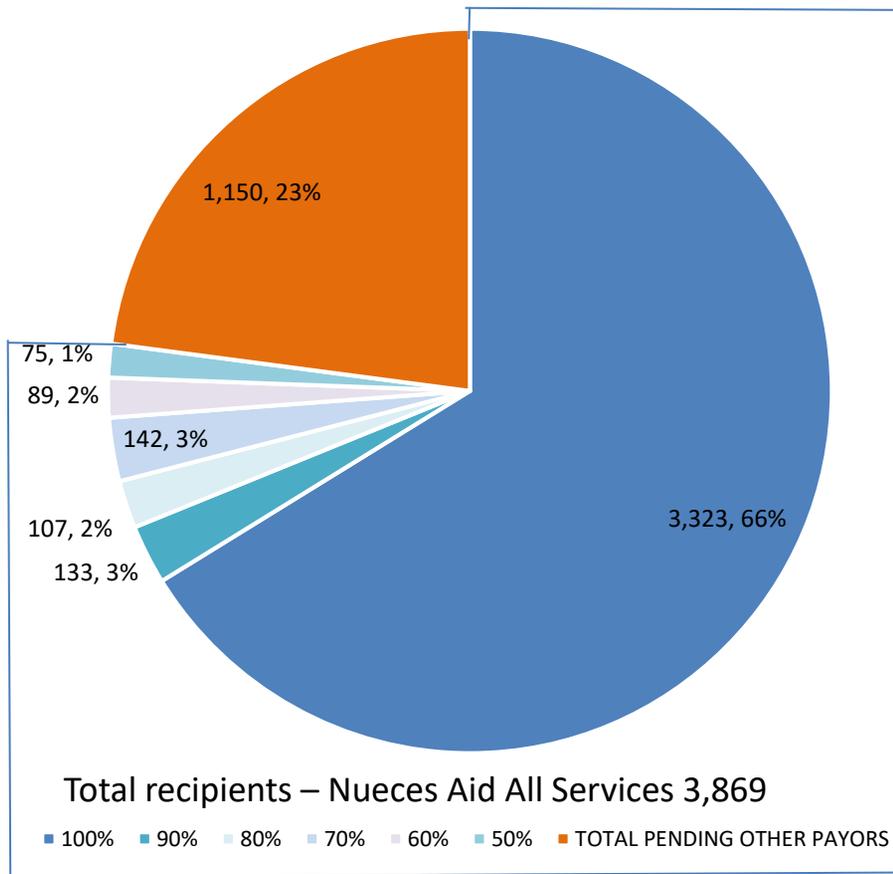


June 2022

Nueces Aid Program Enrollment

Total Enrolled
5,019

Total Households
4,721



**Nueces Aid Program
Enrollment Summary Calendar Year 2022**

| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | YTD 2022 Average | Comments |
|-----------------------------------|-------|-------|-------|-------|-------|-----|-----|-----|-----|-----|-----|-----|---------------------|-------------------------------------------------------|
| PENDING OTHER PAYORS | | | | | | | | | | | | | | |
| TANF | 71 | 56 | 75 | 69 | 70 | | | | | | | | 68 | |
| % | 6.5% | 5.3% | 6.8% | 6.2% | 6.1% | | | | | | | | 6.2% | |
| SS/SSID | 633 | 617 | 633 | 643 | 653 | | | | | | | | 636 | |
| % | 57.9% | 56.2% | 57.0% | 57.8% | 57.1% | | | | | | | | 57.6% | These individuals are eligible for NCHD assistance if |
| Other Payor | 389 | 388 | 402 | 401 | 421 | | | | | | | | 400 | denied assistance by other |
| % | 35.6% | 36.6% | 36.2% | 36.0% | 36.8% | | | | | | | | 36.2% | payer. |
| TOTAL PENDING OTHER PAYORS | 1,093 | 1,061 | 1,110 | 1,113 | 1,144 | | | | | | | | 1,104 | |
| | 22.4% | 22.2% | 22.9% | 22.9% | 23.1% | | | | | | | | 22.7% | |
| HOUSEHOLDS BY SIZE | | | | | | | | | | | | | | |
| 1 Member Household | 4,304 | 4,209 | 4,276 | 4,292 | 4,357 | | | | | | | | 4,288 | The percentage for each size |
| % | 93.7% | 93.7% | 93.7% | 93.7% | 93.6% | | | | | | | | 93.7% | household is calculated by |
| 2 Member Household | 283 | 280 | 285 | 287 | 295 | | | | | | | | 286 | dividing the number of each |
| % | 6.2% | 6.2% | 6.2% | 6.3% | 6.3% | | | | | | | | 6.2% | member household by the |
| >=3 Member Household | 4 | 4 | 3 | 3 | 2 | | | | | | | | 3 | total number of households. |
| % | 0.1% | 0.1% | 0.1% | 0.1% | 0.0% | | | | | | | | 0.1% | |
| TOTAL HOUSEHOLDS | 4,591 | 4,493 | 4,564 | 4,582 | 4,654 | | | | | | | | 4,577 | |

**NCHD
Eligibility History**

| | Jan | Feb | Mar | Apr | May | Jun | July | Aug | Sep | Oct | Nov | Dec | CY Total | Avg |
|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|
| 2017 | | | | | | | | | | | | | | |
| NCHD | 6,018 | 5,963 | 5,969 | 5,961 | 5,966 | 5,951 | 5,905 | 5,798 | 5,769 | 5,789 | 5,696 | 5,593 | 70,378 | 5,865 |
| Pend | 1,333 | 1,332 | 1,303 | 1,327 | 1,357 | 1,382 | 1,397 | 1,386 | 1,404 | 1,443 | 1,450 | 1,431 | 16,545 | 1,379 |
| Total | 7,351 | 7,295 | 7,272 | 7,288 | 7,323 | 7,333 | 7,302 | 7,184 | 7,173 | 7,232 | 7,146 | 7,024 | 86,923 | 7,244 |
| % of PY | 97% | 96% | 96% | 95% | 96% | 95% | 95% | 94% | 94% | 96% | 97% | 97% | 96% | 96% |
| 2018 | | | | | | | | | | | | | | |
| NCHD | 5,630 | 5,708 | 5,674 | 5,613 | 5,471 | 5,481 | 5,492 | 5,438 | 5,396 | 5,467 | 5,673 | 5,235 | 66,278 | 5,523 |
| Pend | 1,488 | 1,483 | 1,398 | 1,386 | 1,349 | 1,336 | 1,324 | 1,317 | 1,337 | 1,327 | 1,313 | 1,270 | 16,328 | 1,361 |
| Total | 7,118 | 7,191 | 7,072 | 6,999 | 6,820 | 6,817 | 6,816 | 6,755 | 6,733 | 6,794 | 6,986 | 6,505 | 82,606 | 6,884 |
| % of PY | 97% | 99% | 97% | 96% | 93% | 93% | 93% | 94% | 94% | 94% | 98% | 93% | 95% | 95% |
| 2019 | | | | | | | | | | | | | | |
| NCHD | 5,277 | 5,181 | 5,075 | 5,024 | 4,957 | 4,961 | 4,996 | 4,943 | 4,970 | 5,064 | 4,944 | 4,821 | 60,213 | 5,018 |
| Pend | 1,294 | 1,260 | 1,289 | 1,305 | 1,274 | 1,281 | 1,330 | 1,356 | 1,339 | 1,357 | 1,330 | 1,277 | 15,692 | 1,308 |
| Total | 6,571 | 6,441 | 6,364 | 6,329 | 6,231 | 6,242 | 6,326 | 6,299 | 6,309 | 6,421 | 6,274 | 6,098 | 75,905 | 6,325 |
| % of PY | 92% | 90% | 90% | 91% | 92% | 92% | 93% | 93% | 94% | 95% | 90% | 94% | 92% | 92% |
| 2020 | | | | | | | | | | | | | | |
| NCHD | 4,963 | 4,955 | 4,903 | 4,731 | 5,132 | 4,698 | 4,198 | 3,660 | 3,260 | 3,604 | 3,752 | 3,868 | 51,724 | 4,310 |
| Pend | 1,268 | 1,243 | 1,218 | 1,141 | 1,187 | 1,106 | 1,043 | 968 | 861 | 899 | 923 | 945 | 12,802 | 1,067 |
| Total | 6,231 | 6,198 | 6,121 | 5,872 | 6,319 | 5,804 | 5,241 | 4,628 | 4,121 | 4,503 | 4,675 | 4,813 | 64,526 | 5,377 |
| % of PY | 95% | 96% | 96% | 93% | 101% | 93% | 83% | 73% | 65% | 70% | 75% | 79% | 92% | 92% |
| 2021 | | | | | | | | | | | | | | |
| NCHD | 3,806 | 3,678 | 3,567 | 3,521 | 3,667 | 3,852 | 3,953 | 4,080 | 4,142 | 4,091 | 3,948 | 3,863 | 46,168 | 3,847 |
| Pend | 932 | 921 | 922 | 964 | 981 | 1,014 | 1,052 | 1,028 | 1,039 | 1,060 | 1,070 | 1,076 | 12,059 | 1,005 |
| Total | 4,738 | 4,599 | 4,489 | 4,485 | 4,648 | 4,866 | 5,005 | 5,108 | 5,181 | 5,151 | 5,018 | 4,939 | 58,227 | 4,852 |
| % of PY | 76% | 74% | 73% | 76% | 74% | 84% | 95% | 110% | 126% | 114% | 107% | 103% | 92% | 92% |
| 2022 | | | | | | | | | | | | | | |
| NCHD | 3,781 | 3,711 | 3,738 | 3,755 | 3,805 | | | | | | | | 18,790 | 3,768 |
| Pend | 1,093 | 1,061 | 1,110 | 1,113 | 1,144 | | | | | | | | 5,521 | 1,104 |
| Total | 4,874 | 4,772 | 4,848 | 4,868 | 4,949 | | | | | | | | 24,311 | 4,862 |
| % of PY | 103% | 104% | 108% | 109% | 106% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |



**Annual Comparative Enrollment Report
Calendar Year 2022**

| Month | Enrollment | | Increase/(Decrease) | |
|-------|------------|-------|---------------------|-----------|
| | 2022 | 2021 | % | Enrollees |
| Jan | 4,874 | 4,738 | 2.87% | 136 |
| Feb | 4,772 | 4,599 | 3.76% | 173 |
| Mar | 4,848 | 4,489 | 8.00% | 359 |
| Apr | 4,868 | 4,485 | 8.54% | 383 |
| May | 4,949 | 4,648 | 6.48% | 301 |
| Jun | | | | |
| Jul | | | | |
| Aug | | | | |
| Sep | | | | |
| Oct | | | | |
| Nov | | | | |
| Dec | | | | |

**Nueces Aid Program
Enrollment Summary Calendar Year 2022**

| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | YTD 2022 Average | Comments |
|-----------------------------------|-------|-------|-------|-------|-------|-------|-----|-----|-----|-----|-----|-----|---------------------|-------------------------------------------------------|
| PENDING OTHER PAYORS | | | | | | | | | | | | | | |
| TANF | 71 | 56 | 75 | 69 | 70 | 75 | | | | | | | 69 | |
| % | 6.5% | 5.3% | 6.8% | 6.2% | 6.1% | 6.5% | | | | | | | 6.2% | |
| SSI-SSID | 633 | 617 | 633 | 643 | 653 | 649 | | | | | | | 638 | |
| % | 57.9% | 56.2% | 57.0% | 57.8% | 57.1% | 56.4% | | | | | | | 57.4% | These individuals are eligible for NCHD assistance if |
| Other Payor | 389 | 388 | 402 | 401 | 421 | 426 | | | | | | | 405 | denied assistance by other |
| % | 35.6% | 36.6% | 36.2% | 36.0% | 36.8% | 37.0% | | | | | | | 36.4% | payer. |
| TOTAL PENDING OTHER PAYORS | 1,093 | 1,061 | 1,110 | 1,113 | 1,144 | 1,150 | | | | | | | 1,112 | |
| % | 22.4% | 22.2% | 22.9% | 22.9% | 23.1% | 22.9% | | | | | | | 22.7% | |
| HOUSEHOLDS BY SIZE | | | | | | | | | | | | | | |
| 1 Member Household | 4,304 | 4,209 | 4,276 | 4,292 | 4,357 | 4,420 | | | | | | | 4,310 | The percentage for each size |
| % | 93.7% | 93.7% | 93.7% | 93.7% | 93.6% | 93.6% | | | | | | | 93.7% | household is calculated by |
| 2 Member Household | 283 | 280 | 285 | 287 | 295 | 298 | | | | | | | 288 | dividing the number of each |
| % | 6.2% | 6.2% | 6.2% | 6.3% | 6.3% | 6.3% | | | | | | | 6.3% | member household by the |
| >=3 Member Household | 4 | 4 | 3 | 3 | 2 | 3 | | | | | | | 3 | total number of households. |
| % | 0.1% | 0.1% | 0.1% | 0.1% | 0.0% | 0.1% | | | | | | | 0.1% | |
| TOTAL HOUSEHOLDS | 4,591 | 4,493 | 4,564 | 4,582 | 4,654 | 4,721 | | | | | | | 4,601 | |

NCHD

Eligibility History

| | Jan | Feb | Mar | Apr | May | Jun | July | Aug | Sep | Oct | Nov | Dec | CY Total | Avg |
|---------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|
| 2017 | | | | | | | | | | | | | | |
| NCHD | 6,018 | 5,963 | 5,969 | 5,961 | 5,966 | 5,951 | 5,905 | 5,798 | 5,769 | 5,789 | 5,696 | 5,593 | 70,378 | 5,865 |
| Pend | 1,333 | 1,332 | 1,303 | 1,327 | 1,357 | 1,382 | 1,397 | 1,386 | 1,404 | 1,443 | 1,450 | 1,431 | 16,545 | 1,379 |
| Total | 7,351 | 7,295 | 7,272 | 7,288 | 7,323 | 7,333 | 7,302 | 7,184 | 7,173 | 7,232 | 7,146 | 7,024 | 86,923 | 7,244 |
| % of PY | 97% | 96% | 96% | 95% | 96% | 95% | 95% | 94% | 94% | 96% | 97% | 97% | 96% | 96% |
| 2018 | | | | | | | | | | | | | | |
| NCHD | 5,630 | 5,708 | 5,674 | 5,613 | 5,471 | 5,481 | 5,492 | 5,438 | 5,396 | 5,467 | 5,673 | 5,235 | 66,278 | 5,523 |
| Pend | 1,488 | 1,483 | 1,398 | 1,386 | 1,349 | 1,336 | 1,324 | 1,317 | 1,337 | 1,327 | 1,313 | 1,270 | 16,328 | 1,361 |
| Total | 7,118 | 7,191 | 7,072 | 6,999 | 6,820 | 6,817 | 6,816 | 6,755 | 6,733 | 6,794 | 6,986 | 6,505 | 82,606 | 6,884 |
| % of PY | 97% | 99% | 97% | 96% | 93% | 93% | 93% | 94% | 94% | 94% | 98% | 93% | 95% | 95% |
| 2019 | | | | | | | | | | | | | | |
| NCHD | 5,277 | 5,181 | 5,075 | 5,024 | 4,957 | 4,961 | 4,996 | 4,943 | 4,970 | 5,064 | 4,944 | 4,821 | 60,213 | 5,018 |
| Pend | 1,294 | 1,260 | 1,289 | 1,305 | 1,274 | 1,281 | 1,330 | 1,356 | 1,339 | 1,357 | 1,330 | 1,277 | 15,692 | 1,308 |
| Total | 6,571 | 6,441 | 6,364 | 6,329 | 6,231 | 6,242 | 6,326 | 6,299 | 6,309 | 6,421 | 6,274 | 6,098 | 75,905 | 6,325 |
| % of PY | 92% | 90% | 90% | 90% | 91% | 92% | 93% | 93% | 94% | 95% | 90% | 94% | 92% | 92% |
| 2020 | | | | | | | | | | | | | | |
| NCHD | 4,963 | 4,955 | 4,903 | 4,731 | 5,132 | 4,698 | 4,198 | 3,660 | 3,260 | 3,604 | 3,752 | 3,868 | 51,724 | 4,310 |
| Pend | 1,268 | 1,243 | 1,218 | 1,141 | 1,187 | 1,106 | 1,043 | 968 | 861 | 899 | 923 | 945 | 12,802 | 1,067 |
| Total | 6,231 | 6,198 | 6,121 | 5,872 | 6,319 | 5,804 | 5,241 | 4,628 | 4,121 | 4,503 | 4,675 | 4,813 | 64,526 | 5,377 |
| % of PY | 95% | 96% | 96% | 93% | 101% | 93% | 83% | 73% | 65% | 70% | 75% | 79% | 92% | 92% |
| 2021 | | | | | | | | | | | | | | |
| NCHD | 3,806 | 3,678 | 3,567 | 3,521 | 3,667 | 3,852 | 3,953 | 4,080 | 4,142 | 4,091 | 3,948 | 3,863 | 46,168 | 3,847 |
| Pend | 932 | 921 | 922 | 964 | 981 | 1,014 | 1,052 | 1,028 | 1,039 | 1,060 | 1,070 | 1,076 | 12,059 | 1,005 |
| Total | 4,738 | 4,599 | 4,489 | 4,485 | 4,648 | 4,866 | 5,005 | 5,108 | 5,181 | 5,151 | 5,018 | 4,939 | 58,227 | 4,852 |
| % of PY | 76% | 74% | 73% | 76% | 74% | 84% | 95% | 110% | 126% | 114% | 107% | 103% | 103% | 103% |
| 2022 | | | | | | | | | | | | | | |
| NCHD | 3,781 | 3,711 | 3,738 | 3,755 | 3,805 | 3,869 | | | | | | | 22,659 | 3,777 |
| Pend | 1,093 | 1,061 | 1,110 | 1,113 | 1,144 | 1,150 | | | | | | | 6,671 | 1,112 |
| Total | 4,874 | 4,772 | 4,848 | 4,868 | 4,949 | 5,019 | | | | | | | 29,330 | 4,888 |
| % of PY | 103% | 104% | 108% | 109% | 106% | 103% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 1% |



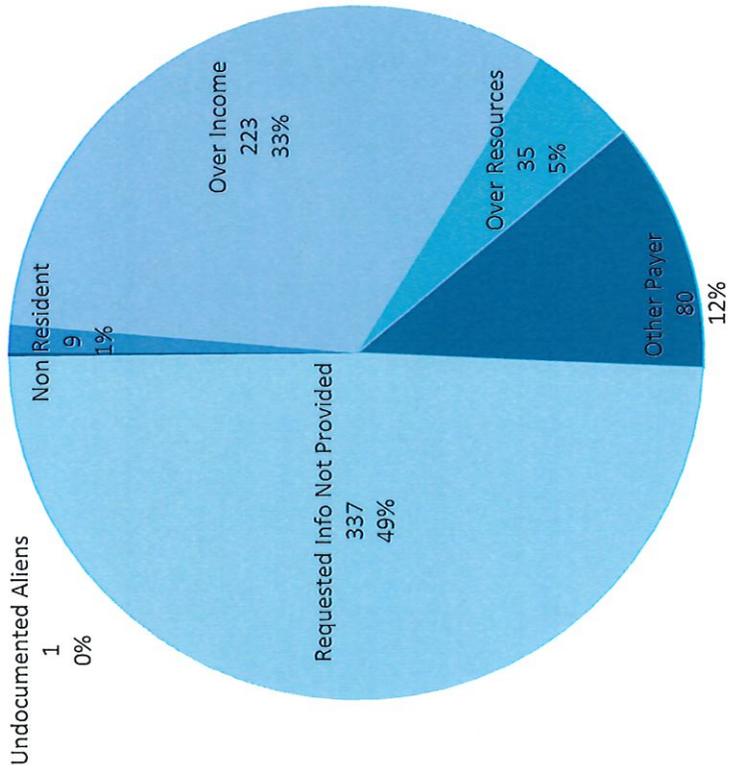
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Calendar Year 2022**

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|-------|------------|-------|---------------------|-----------|
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| Mar | 4,848 | 4,489 | 8.00% | 359 |
| Apr | 4,868 | 4,485 | 8.54% | 383 |
| May | 4,949 | 4,648 | 6.48% | 301 |
| Jun | 5,019 | 4,866 | 3.14% | 153 |
| Jul | | | | |
| Aug | | | | |
| Sep | | | | |
| Oct | | | | |
| Nov | | | | |
| Dec | | | | |

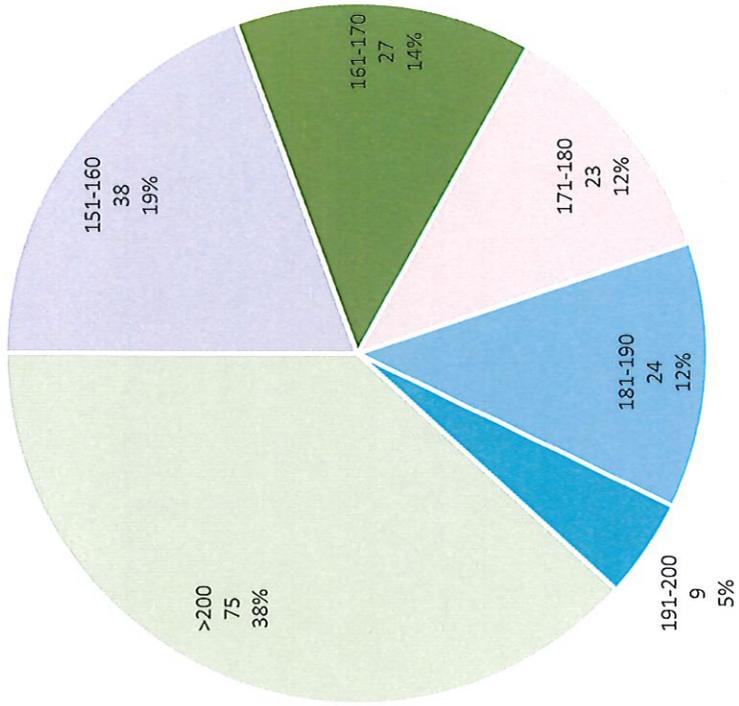
NUECES AID DENIALS

Calendar Year 2022
January-May

Denial Reasons



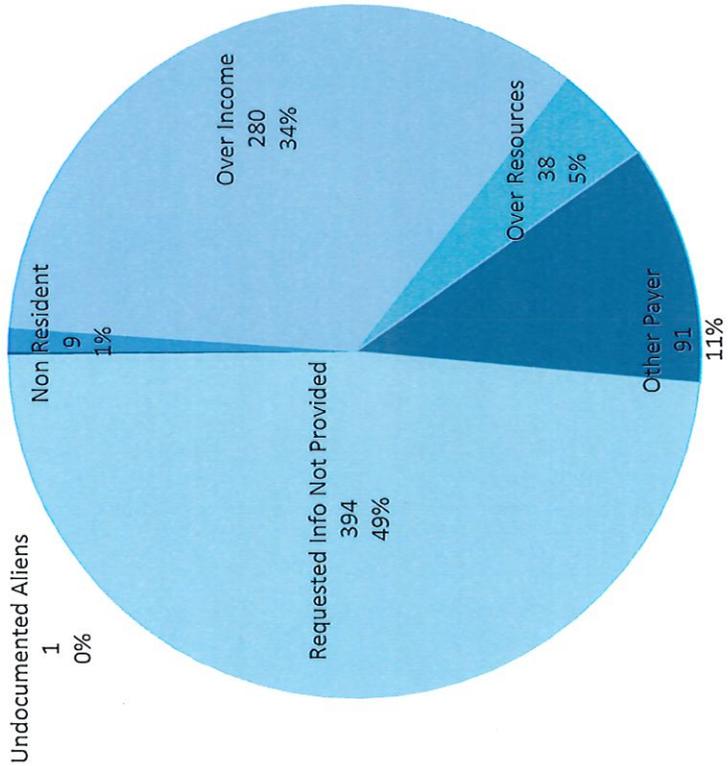
Comparison of Over Income Case
to 2022 HHS Poverty Guidelines



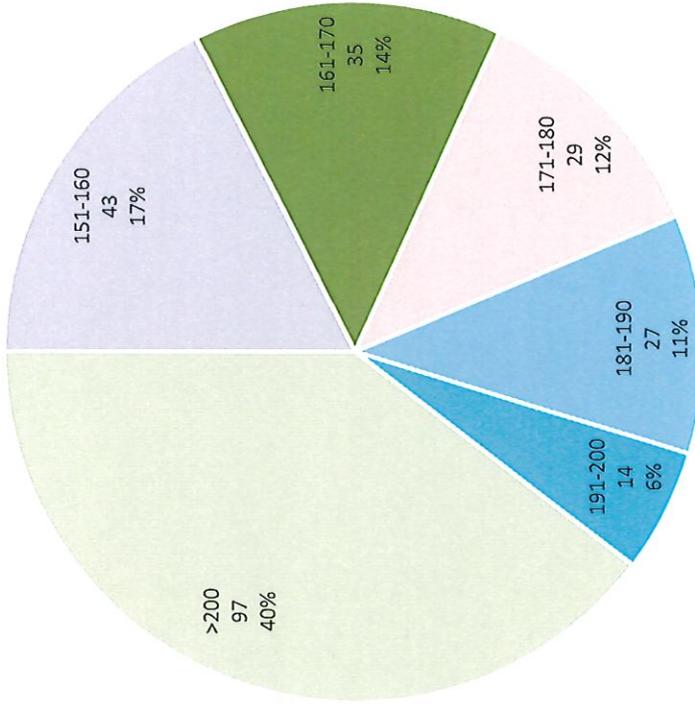
NUECES AID DENIALS

Calendar Year 2022
January-June

Denial Reasons



Comparison of Over Income Case
to 2022 HHS Poverty Guidelines



**Nueces Aid Program
Application Processing Summary Calendar Year 2022**

| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | YTD 2022 | Comments |
|--------------------------------------|-------|-------|-------|-------|-------|-----|-----|-----|-----|-----|-----|-----|-------------|-------------------------------------------------------|
| TOTAL APPLICATIONS | 849 | 838 | 1,007 | 884 | 924 | | | | | | | | 4,502 | |
| - Approved | 725 | 728 | 865 | 747 | 752 | | | | | | | | 3,817 | |
| % | 85.4% | 86.9% | 85.9% | 84.5% | 81.4% | | | | | | | | 84.8% | Since FY 1999, the denial rate is based on all denied |
| - Denied | 124 | 110 | 142 | 137 | 172 | | | | | | | | 685 | individuals in the household. |
| % | 14.6% | 13.1% | 14.1% | 15.5% | 18.6% | | | | | | | | 15.2% | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| APPROVALS BY PLAN TYPE | | | | | | | | | | | | | | |
| NUECES AID - All Services | | | | | | | | | | | | | | |
| 100% | 511 | 540 | 612 | 530 | 503 | | | | | | | | 2,696 | |
| % | 70.5% | 74.2% | 70.8% | 71.0% | 66.9% | | | | | | | | 70.6% | |
| 90% | 18 | 19 | 22 | 18 | 26 | | | | | | | | 103 | |
| % | 2.5% | 2.6% | 2.5% | 2.4% | 3.5% | | | | | | | | 2.7% | |
| 80% | 17 | 18 | 25 | 17 | 19 | | | | | | | | 96 | |
| % | 2.3% | 2.5% | 2.9% | 2.3% | 2.5% | | | | | | | | 2.5% | |
| 70% | 17 | 15 | 30 | 27 | 22 | | | | | | | | 111 | The percentage of approvals |
| % | 2.3% | 2.1% | 3.5% | 3.6% | 2.9% | | | | | | | | 2.9% | by plan option is calculated |
| 60% | 13 | 8 | 16 | 12 | 14 | | | | | | | | 63 | by dividing the number for |
| % | 1.8% | 1.1% | 1.8% | 1.6% | 1.9% | | | | | | | | 1.7% | each plan option by the |
| 50% | 11 | 11 | 15 | 16 | 13 | | | | | | | | 66 | total number of approved |
| % | 1.5% | 1.5% | 1.7% | 2.1% | 1.7% | | | | | | | | 1.7% | applications. |
| TOTAL | 587 | 611 | 720 | 620 | 597 | | | | | | | | 3,135 | |
| % | 81.0% | 83.9% | 83.2% | 83.0% | 79.4% | | | | | | | | 82.1% | |
| | | | | | | | | | | | | | | |
| HOUSEHOLDS BY SIZE - APPROVED | | | | | | | | | | | | | | |
| 1 Member Household | 628 | 656 | 739 | 663 | 664 | | | | | | | | 3,350 | The percentage for each size |
| % | 92.8% | 94.8% | 92.0% | 94.0% | 93.8% | | | | | | | | 93.4% | household is calculated by |
| 2 Member Household | 48 | 36 | 63 | 42 | 44 | | | | | | | | 233 | dividing the number of house- |
| % | 7.1% | 5.2% | 7.8% | 6.0% | 6.2% | | | | | | | | 6.5% | holds in the category by the |
| 3 or > Member Household | 1 | 0 | 1 | 0 | 0 | | | | | | | | 2 | total number of approved |
| % | 0.1% | 0.0% | 0.1% | 0.0% | 0.0% | | | | | | | | 0.1% | households. |
| | | | | | | | | | | | | | | 2 Households pending other |
| | | | | | | | | | | | | | | payors are not included. |
| TOTAL HOUSEHOLDS APPROVED | 677 | 692 | 803 | 705 | 708 | | | | | | | | 3,585 | |

**Nueces Aid Program
Application Processing Summary Calendar Year 2022**

| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | YTD 2022 | Comments |
|-------------------------------------------|-------|-------|------|------|-------|-----|-----|-----|-----|-----|-----|-----|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| NCHD DENIALS - Reasons for Denials | | | | | | | | | | | | | | |
| Non Resident % | 0 | 0 | 4 | 2 | 3 | | | | | | | | | 9 The percentage for each denial reason is calculated by dividing the number of individuals for each reason by the total number of individuals denied. |
| Over Income % | 46 | 37 | 46 | 46 | 48 | | | | | | | | | 223 |
| Over Resources % | 9 | 4 | 12 | 6 | 4 | | | | | | | | | 35 |
| Other Payer % | 18 | 13 | 22 | 14 | 13 | | | | | | | | | 80 |
| Requested Info Not Provided % | 51 | 56 | 58 | 69 | 103 | | | | | | | | | 337 |
| Undocumented Aliens % | 0 | 0 | 0 | 0 | 1 | | | | | | | | | 49.2% |
| TOTAL DENIALS | 124 | 110 | 142 | 137 | 172 | | | | | | | | | 685 |
| HOUSEHOLDS BY SIZE - DENIED | | | | | | | | | | | | | | |
| 1 Member Household % | 85 | 90 | 121 | 115 | 133 | | | | | | | | | 544 |
| 2 Member Household % | 16.8% | 10.0% | 8.3% | 8.7% | 12.3% | | | | | | | | | 69 |
| 3 or > Member Household % | 3.7% | 0.0% | 0.0% | 0.0% | 1.3% | | | | | | | | | 6 |
| TOTAL HOUSEHOLDS DENIED | 107 | 100 | 132 | 126 | 154 | | | | | | | | | 619 |
| PENDING APPLICATIONS | | | | | | | | | | | | | | |
| Pending documentation | 95 | 83 | 123 | 136 | 89 | | | | | | | | | The YTD number for incomplete applications is the average of the monthly incomplete applications. |
| TANF | 19 | 10 | 30 | 14 | 22 | | | | | | | | | 105 |
| SSI-SSID | 64 | 57 | 45 | 63 | 46 | | | | | | | | | 22 |
| Other Payor | 55 | 40 | 70 | 50 | 87 | | | | | | | | | 46 |
| | | | | | | | | | | | | | | 87 |

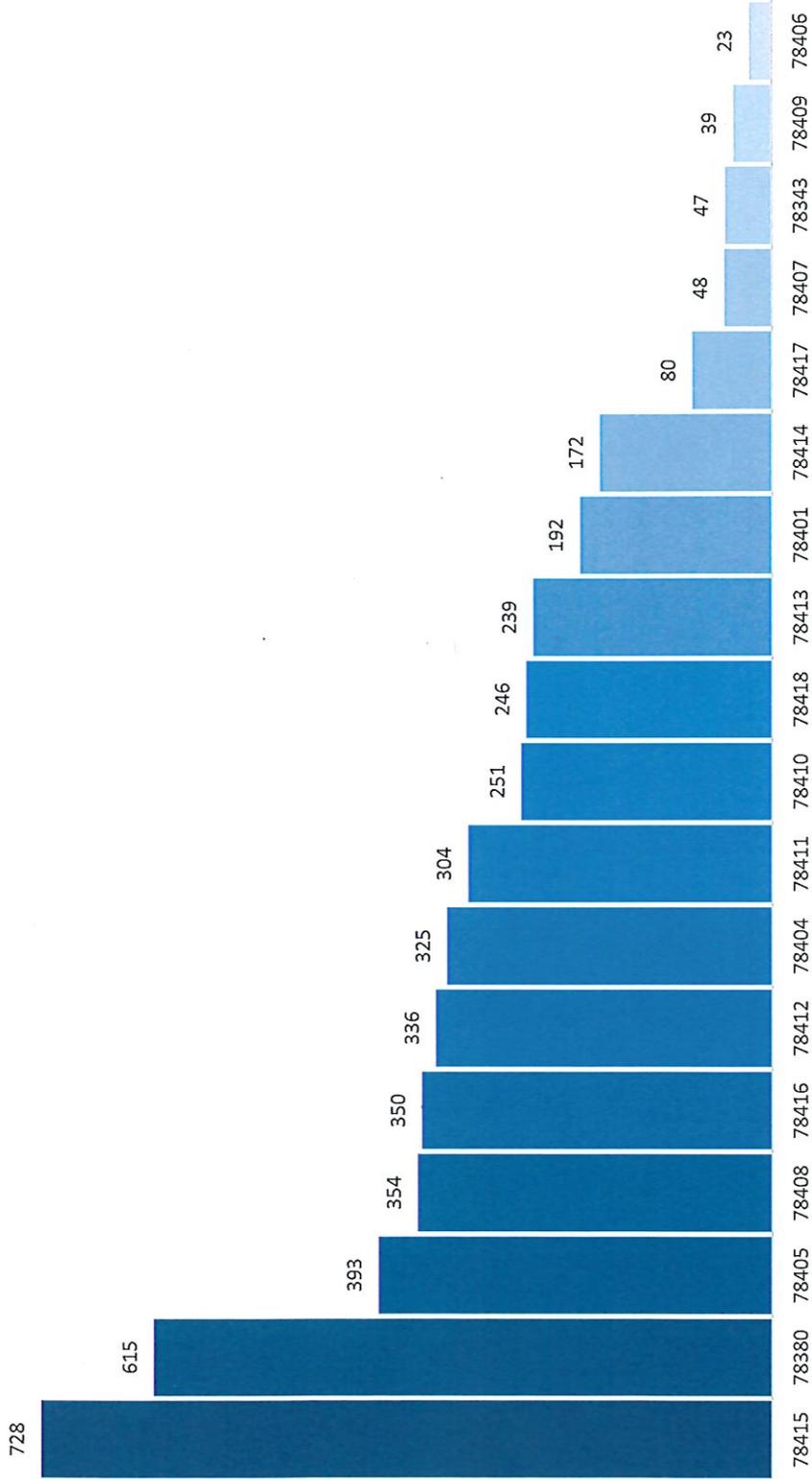
**Nueces Aid Program
Application Processing Summary Calendar Year 2022**

| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | YTD 2022 | Comments |
|-------------------------------------------|-------------|-------------|--------------|--------------|--------------|-------------|-----|-----|-----|-----|-----|-----|--------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| NCHD DENIALS - Reasons for Denials | | | | | | | | | | | | | | |
| Non Resident % | 0 0.0% | 0 0.0% | 4 2.8% | 2 1.5% | 3 1.7% | 0 0.0% | | | | | | | 9 1.1% | The percentage for each denial reason is calculated by dividing the number of individuals for each reason by the total number of individuals denied. |
| Over Income % | 46 37.1% | 37 33.6% | 46 32.4% | 46 33.6% | 48 27.9% | 57 44.5% | | | | | | | 280 34.4% | |
| Over Resources % | 9 7.3% | 4 3.6% | 12 8.5% | 6 4.4% | 4 2.3% | 3 2.3% | | | | | | | 38 4.7% | |
| Other Payer % | 18 14.5% | 13 11.8% | 22 15.5% | 14 10.2% | 13 7.6% | 11 8.6% | | | | | | | 91 11.2% | |
| Requested Info Not Provided % | 51 41.1% | 56 50.9% | 58 40.8% | 69 50.4% | 103 59.9% | 57 44.5% | | | | | | | 394 48.5% | |
| Undocumented Aliens % | 0 0.0% | 0 0.0% | 0 0.0% | 0 0.0% | 1 0.6% | 0 0.0% | | | | | | | 1 0.1% | 1 Note: UA code eff 08/01/01 |
| TOTAL DENIALS | 124 | 110 | 142 | 137 | 172 | 128 | | | | | | | 813 | |
| HOUSEHOLDS BY SIZE - DENIED | | | | | | | | | | | | | | |
| 1 Member Household % | 85 79.4% | 90 90.0% | 121 91.7% | 115 91.3% | 133 86.4% | 94 84.7% | | | | | | | 638 87.4% | The denial percentage for each size household is calculated by dividing the number for each household size by the total number of denied households. |
| 2 Member Household % | 18 16.8% | 10 10.0% | 11 8.3% | 11 8.7% | 19 12.3% | 17 15.3% | | | | | | | 86 11.8% | |
| 3 or > Member Household % | 4 3.7% | 0 0.0% | 0 0.0% | 0 0.0% | 2 1.3% | 0 0.0% | | | | | | | 6 0.8% | Households pending other payors are not included. |
| TOTAL HOUSEHOLDS DENIED | 107 | 100 | 132 | 126 | 154 | 111 | | | | | | | 730 | |
| PENDING APPLICATIONS | | | | | | | | | | | | | | |
| Pending documentation | 95 | 83 | 123 | 136 | 89 | 101 | | | | | | | 125 | The YTD number for incomplete applications is the average of the monthly incomplete applications. |
| TANF | 19 | 10 | 30 | 14 | 22 | 20 | | | | | | | 20 | |
| SSI-SSID | 64 | 57 | 45 | 63 | 46 | 46 | | | | | | | 46 | |
| Other Payor | 55 | 40 | 70 | 50 | 87 | 77 | | | | | | | 77 | |



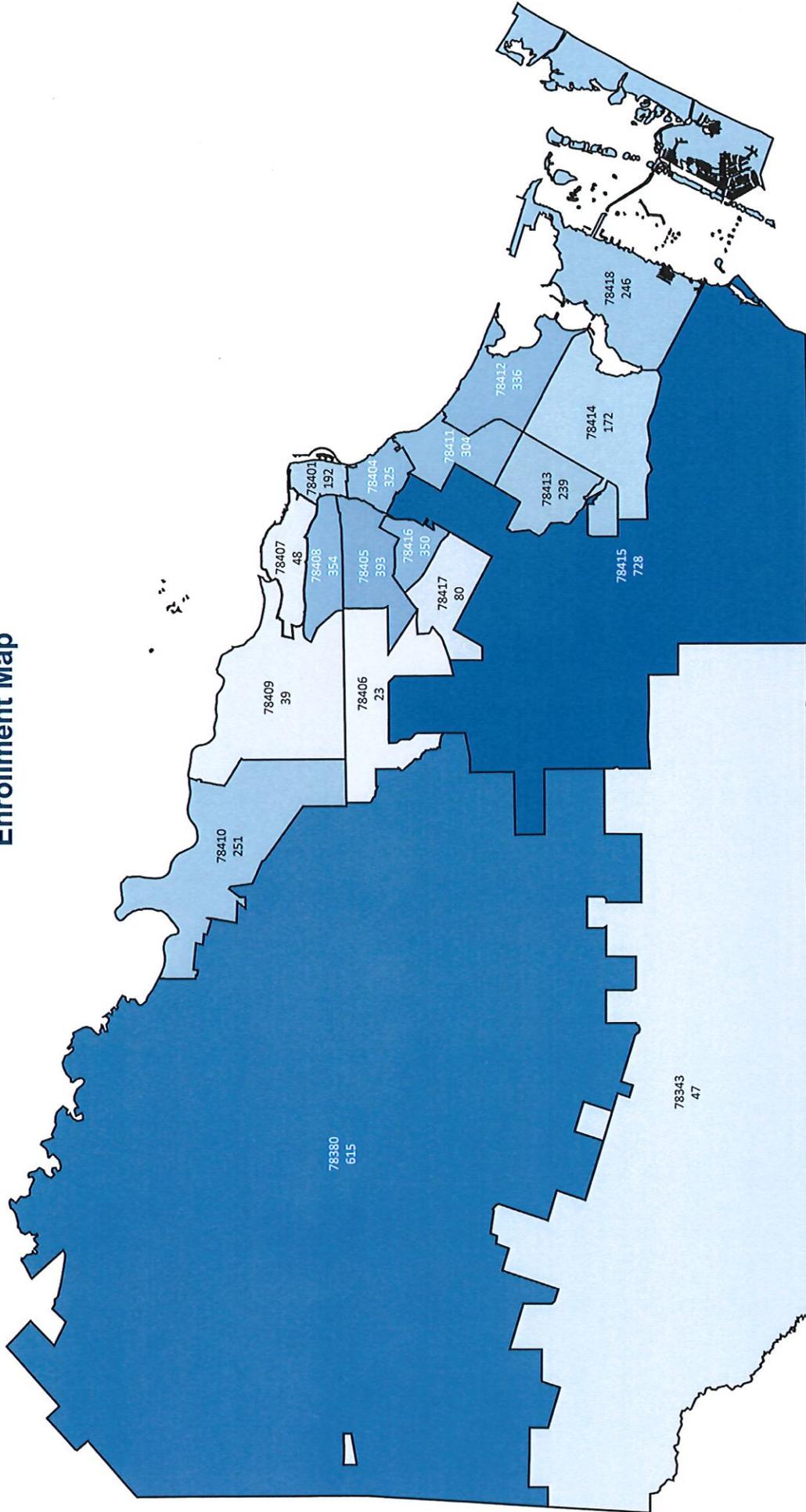
Nueces County Hospital District

Enrollment by Zipcode as of May 2022





**Nueces County
Hospital District
Enrollment Map**



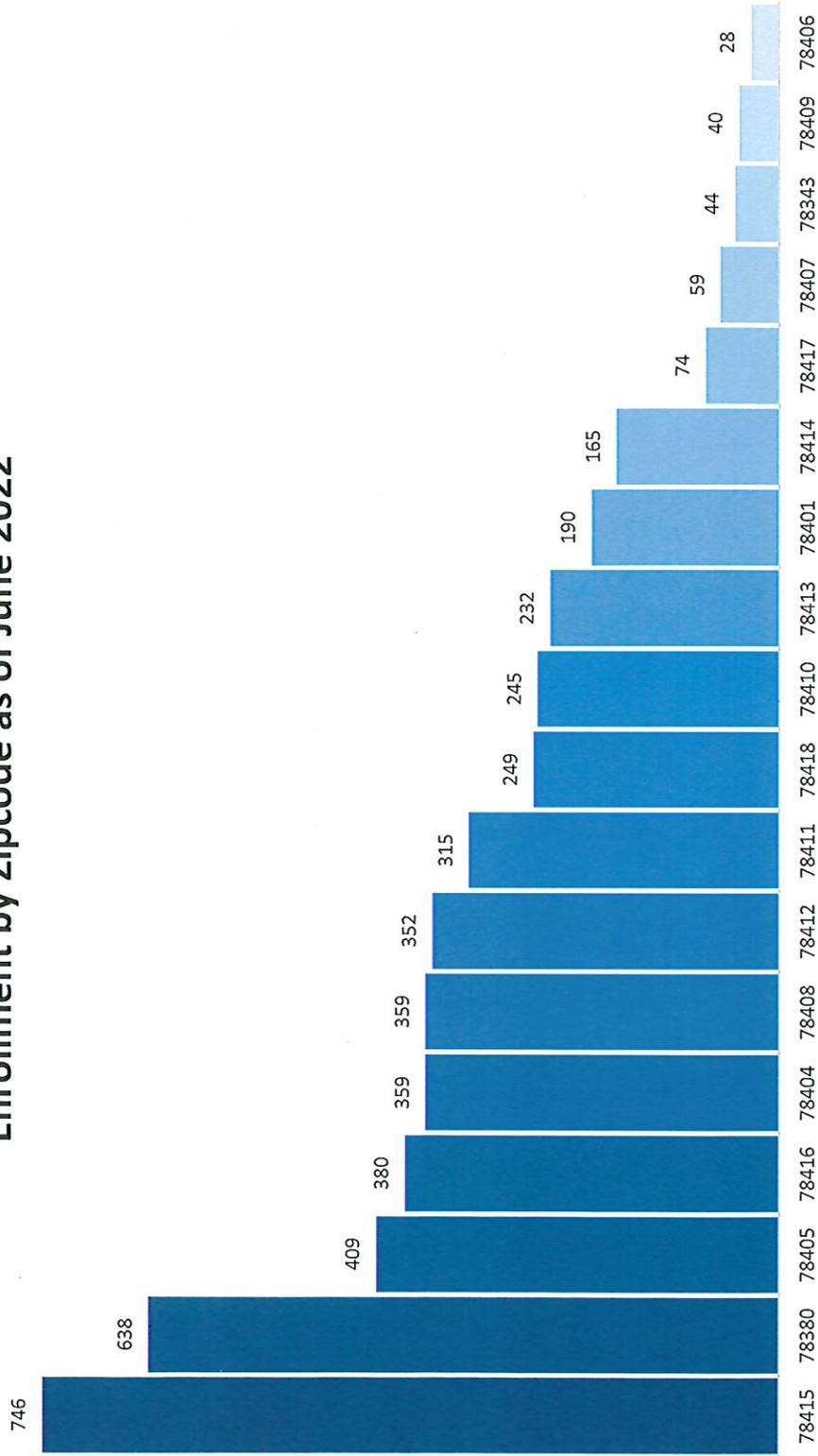
**Nueces County Hospital District
Enrollment by Zip Code
As of 5/31/2022**

| Zip Code | Description | Members | % to Total |
|-----------------|--------------------------------------------------------------------|----------------|-------------------|
| 78415 | CC:FM 665 to CR 61 to County Line to Weber & Crosstown | 728 | 15% |
| 78380 | Robstown | 615 | 12% |
| 78405 | CC:19th to Port Ave to Agnes, includes HPG | 393 | 8% |
| 78408 | CC:Hwy 358 to Lipan Between I-37 & Agnes | 354 | 7% |
| 78416 | CC:Hwy 358 to Old Brownsville to Tarlton to Weber, includes Molina | 350 | 7% |
| 78412 | CC:Airline to Hwy 358 to Ennis Joslin to Ocean Drive | 336 | 7% |
| 78404 | CC:Six Points | 325 | 7% |
| 78411 | CC:Ocean Drive to So Staples to Hwy 358 to Weber to Kostoryz | 304 | 6% |
| 78410 | CC:Annville and Calallen | 251 | 5% |
| 78418 | CC:Flour Bluff | 246 | 5% |
| 78413 | CC:Weber to Holly rd to So Staples to Oso Pkwy | 239 | 5% |
| 78401 | CC:Downtown and Cargo Docks | 196 | 4% |
| 78414 | CC:So Staples to Holly Rd to Cayo Del Oso to Oso Creek | 172 | 3% |
| 78417 | CC:Old Brownsville to Ayers to Saratoga | 80 | 2% |
| 78407 | CC: I-37 Up River Rd to South Port Ave to Joe Fulton Corridor | 48 | 1% |
| 78343 | Bishop + FM 665 to CR 107 W to CR 57E | 47 | 1% |
| 78409 | CC:Hwy 44 to Up River Rd to Rand Morgan E to Hwy 358 | 39 | 1% |
| 78406 | CC: Clarkwood and San Juan | 23 | 0% |
| | Subtotal | 4,746 | 96% |
| | Total | 4,949 | |



Nueces County Hospital District

Enrollment by Zipcode as of June 2022

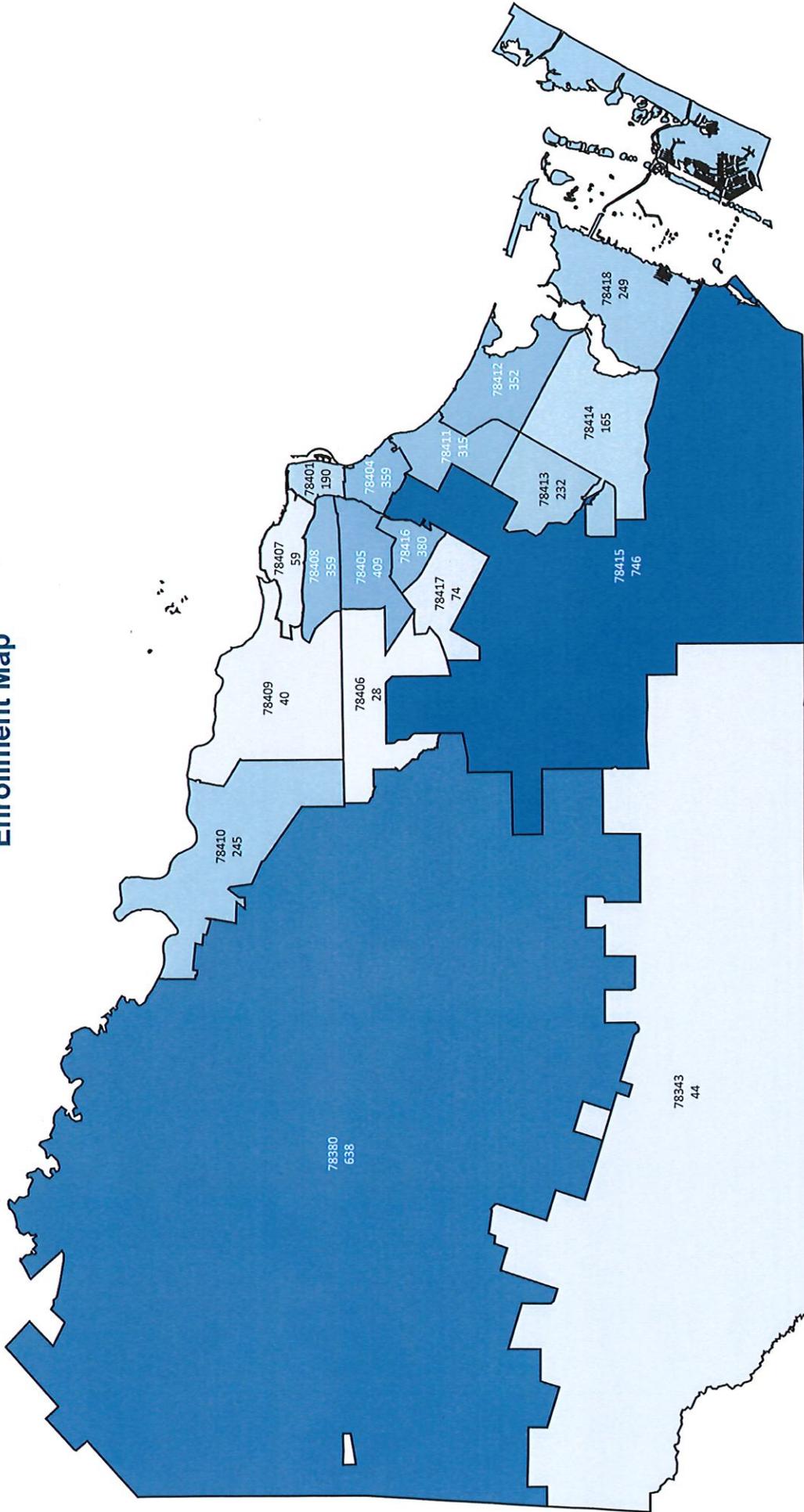


**Nueces County Hospital District
Enrollment by Zip Code
As of 6/30/2022**

| Zip Code | Description | Members | % to Total |
|-----------------|--------------------------------------------------------------------|----------------|-------------------|
| 78415 | CC:FM 665 to CR 61 to County Line to Weber & Crosstown | 746 | 15% |
| 78380 | Robstown | 638 | 13% |
| 78405 | CC:19th to Port Ave to Agnes, includes HPG | 409 | 8% |
| 78416 | CC:Hwy 358 to Old Brownsville to Tarlton to Weber, includes Molina | 380 | 8% |
| 78404 | CC:Six Points | 359 | 7% |
| 78408 | CC:Hwy 358 to Lipan Between I-37 & Agnes | 359 | 7% |
| 78412 | CC:Airline to Hwy 358 to Ennis Joslin to Ocean Drive | 352 | 7% |
| 78411 | CC:Ocean Drive to So Staples to Hwy 358 to Weber to Kostoryz | 315 | 6% |
| 78418 | CC:Flour Bluff | 249 | 5% |
| 78410 | CC:Annville and Calallen | 245 | 5% |
| 78413 | CC:Weber to Holly rd to So Staples to Oso Pkwy | 232 | 5% |
| 78401 | CC:Downtown and Cargo Docks | 194 | 4% |
| 78414 | CC:So Staples to Holly Rd to Cayo Del Oso to Oso Creek | 165 | 3% |
| 78417 | CC:Old Brownsville to Ayers to Saratoga | 74 | 1% |
| 78407 | CC: I-37 Up River Rd to South Port Ave to Joe Fulton Corridor | 59 | 1% |
| 78343 | Bishop + FM 665 to CR 107 W to CR 57E | 44 | 1% |
| 78409 | CC:Hwy 44 to Up River Rd to Rand Morgan E to Hwy 358 | 40 | 1% |
| 78406 | CC: Clarkwood and San Juan | 28 | 1% |
| | Subtotal | 4,888 | 97% |
| | Total | 5,019 | |



**Nueces County
Hospital District
Enrollment Map**



Powered by Blue
© TomTom



COVID-19 Cost Recovery Services: NCHD Project Summary

Nueces County Hospital District | FEMA Public Assistance (PA)

KEY ACCOMPLISHMENTS

As a part of this effort, Hagerty conducted and coordinated outreach within NCHD staff and County stakeholders to help document disaster-related costs.

Engagement efforts concluded with the first application submission on July 21, 2022.

CONTRACT & BUDGET STATUS



■ Remaining ■ Expended

- *Contract Term: April 1, 2022, through March 31, 2024*
- *71.7% of budget remaining as of July 15, 2022*

CURRENT PROJECT TEAM



Hagerty Consulting currently has two project consultants mobilized to assist with the Nueces County Hospital District's COVID-19 Recovery efforts.

PROGRESS TO DATE

Hagerty Consulting has been supporting the Nueces County Hospital District's COVID-19 Cost Recovery efforts since May 2022. Ongoing activities include:

- Cost documentation review and validation
- FEMA Project Formulation
- FEMA Grants Portal Project Development & Submission*
* Submissions to FEMA for potential reimbursement are dependent on FEMA's determination of eligibility for work conducted and are subject to change.

SUBMITTED FEMA PROJECT(S)

| Project Application #647808 | Emergency Protective Measures |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| Social Determinants of Health Expenses | Total Claim Amount: \$503,127.00 |
| Included costs associated with Accenture, LLP and the Texas Health Institute for the development of the COVID-19 Dashboard and Social Determinants of Health Study | <u>Total Costs per Vendor</u> Accenture (2 Contracts): \$385,000.00 Texas Health Institute: \$118,127.00 |

ANTICIPATED FEMA PROJECT(S)

Following the submission of the Nueces County Hospital District's first COVID-19 Public Assistance project, the Hagerty team will begin validation and formulation efforts for the following incurred costs:

- COVID-19 Testing Mutual Aid
- Hospital Bed Projection Study
- Management Costs
- Safe Opening & Operating Costs for NCHD Facilities (PPE, Disinfectants, & other materials)



April 22, 2022

Jonny F. Hipp, ScD, FACHE
Administrator and Chief Executive Officer
Nueces County Hospital District
555 N. Carancahua St, Suite 950
Corpus Christi, TX 78401-0835

*via Courier; USPS Certified Mail
Return Receipt Requested
and Email at
jonny.hipp@nchdcc.org*

RE: Resumption of Memorial Medical Center Equipment Removal Request

Dear Mr. Hipp:

We are writing to provide you with notice regarding the disposition of the District's hospital equipment located at Memorial Medical Center under the terms of the CHRISTUS Spohn Health System Corporation Membership Agreement ("Membership Agreement").

On April 17, 2020, CHRISTUS Spohn Health System ("Spohn") provided the Nueces County Hospital District ("District") written notice to remove its hospital equipment from the Memorial hospital building and other structures and infrastructure situated on the Main Campus (collectively, "Memorial Buildings and Infrastructure"). On July 16, 2020, Spohn agreed to suspend the District's obligation to remove its equipment for thirty (30) days in consideration of the District's request and the COVID-19 pandemic, with the option for further extensions as appropriate. COVID-19 subsequently continued to impact the Nueces community and interfere with the demolition process, but the parties did not formally extend the timeline for the District to remove its equipment.

Spohn is resuming the steps to initiate demolition this summer, starting with the remediation of the Memorial Buildings and Infrastructure. Spohn is now sending this letter to ensure it fully resolves the Membership Agreement's notice requirements regarding removal of the District's equipment. Given the length of time since the parties discussed the suspension of the original equipment removal notice in 2020, Spohn hereby provides a new notice to the District.

Schedule 1, Section 3.10.4 of the Membership Agreement requires that Spohn provide the District with not less than sixty (60) days' notice prior to the demolition of the Memorial Buildings and Infrastructure so that the District may comply with its statutory salvage requirements. Section 3.10.4 further requires that the District promptly remove its hospital equipment from the Memorial Buildings and Infrastructure upon receipt of this notice. Any District hospital equipment remaining within or comprising the Memorial Buildings and Infrastructure as of the effective date of demolition shall belong to Spohn.



In compliance with Schedule 1, Section 3.9.2, Spohn has maintained all District asset tags on the District's hospital equipment. Additionally, we note Spohn provided an inventory list to the District on April 14, 2022 to satisfy Spohn's obligations under Section 3.10.4 to describe each piece of equipment at issue for removal pursuant to this notice.

Spohn would like to assist the District in meeting its statutory obligations and work collaboratively to address the disposition of the District's hospital equipment in a timely manner. Spohn now requests that the District remove its hospital equipment from the Memorial Buildings and Infrastructure pursuant to Section 3.10.4 of the Membership Agreement.

As always, CHRISTUS Spohn will continue to coordinate with the District to provide appropriate and timely notice of the Memorial demolition and as required by the Membership Agreement.

Very truly yours,

Osbert Blow, MD, PhD, FACS
Chief Executive Officer
CHRISTUS Spohn Health System

Dominic Dominguez
Senior Vice President Group Operations
CHRISTUS South Texas

cc: Belinda Chism
Adam Robison
William Dewitt Alsup
Lance Ramsey
Jennifer Gurevitz
Becky Rios

belinda.chism@nchdcc.org
arobison@kslaw.com
wd_alsup@swbell.net
ramsey@gl-law.com
jennifer.gurevitz@christushealth.org
becky.rios@christushealth.org



Nueces County Hospital District

Administrative Offices

555 N. Carancahua Street, Suite 950
Corpus Christi, Texas 78401-0835

Office: (361) 808-3300

Fax: (361) 808-3274

www.nchdcc.org

Via Email

May 20, 2022

Osbert Blow, MD, PhD, FACS
Chief Executive Officer
CHRISTUS Spohn Health System
1702 Santa Fe
Corpus Christi, Texas 78404

Dominic Dominguez
Senior Vice President Group Operations
CHRISTUS South Texas
1702 Santa Fe
Corpus Christi, Texas 78404

Re: Request for Removal of Hospital Equipment at Memorial Medical Center

Dear Dr. Blow and Mr. Dominguez:

I am in receipt of both (i) your letter dated April 22, 2022 regarding the request for removal of the Nueces County Hospital District's (the "District") equipment located at the Memorial hospital building and other structures and infrastructure situated on the Main Campus (collectively, "Memorial Buildings and Infrastructure") under the terms of the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement ("Membership Agreement") and (ii) the inventory list of such equipment sent by CHRISTUS Spohn Health System ("Spohn") on April 14, 2022. It is my understanding, based on your April 22, 2022 letter, that Spohn plans to initiate demolition of the Memorial Buildings and Infrastructure this summer.

The District acknowledges its obligation under Schedule 1, Section 3.10.4 of the Membership Agreement to promptly remove the District's equipment, fixtures, and other structural components, infrastructure, or materials located within or comprising the Memorial Buildings and Infrastructure. The District is currently taking steps in accordance with Section 3.10.4 to remove such equipment as provided on the inventory list and will continue to coordinate with Spohn personnel on the removal and/or auction of such equipment.

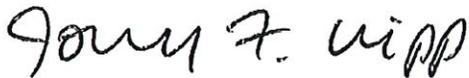
As a reminder, pursuant to Schedule 1, Section 3.5.4 of the Membership Agreement, Spohn is required to comply with the following in connection with the demolition of Memorial Buildings and Infrastructure:

- Spohn must provide the District a copy of the plans for demolition ("Demolition Plans") and consult with the District regarding the Demolition Plans at least 10 business days before commencement of the demolition.
- The demolition must be conducted by a qualified contractor engaged by Spohn at Spohn's sole cost and expense in accordance with the Demolition Plans.

- The demolition must be conducted by the contractor in a reasonable, good, and workmanlike manner and in accordance with generally accepted demolition practices and applicable legal requirements.
- Spohn must use reasonable efforts to re-use or recycle building materials where applicable to reduce the volume of refuse from the demolition.
- The demolition must result in the complete removal of the Memorial Buildings and Infrastructure (including, without limitation, the basement infrastructure, underground storage tanks, and any other existing above ground or below ground infrastructure) from the portion of the Demolition Area¹ in such a manner that said area, including the former sites of the Memorial Buildings and Infrastructure will be suitable for future development, including for the construction of facilities that require deep foundations.
- Spohn must provide periodic (but in no event less frequent than monthly) status reports to the District on the status of the demolition during the demolition process. Spohn must also cooperate with any inspections of the demolition conducted by the District or its agents or representatives for compliance with Schedule 1, Section 3.5.4 within 10 business days after the District's receipt of each such status report.
- Prior to completion of the demolition, Spohn must provide the District with written notice that the demolition is nearing completion and cooperate with any inspections conducted by the District or its agents or representatives for compliance with Schedule 1, Section 3.5.4 within 10 business days after the District receives such written notice.

The District will continue to coordinate with Spohn on the removal of the District's equipment from the Memorial Buildings and Infrastructure and the demolition of Memorial Buildings and Infrastructure in accordance with the requirements set forth in the Membership Agreement.

Very truly yours,



Jonny F. Hipp, ScD, FACHE
Administrator and Chief Executive Officer

¹ "Demolition Area" as defined in Schedule 1, Section 3.5.3 of the Membership Agreement.



July 14, 2022

Jonny F. Hipp, ScD, FACHE
Administrator and Chief Executive Officer
Nueces County Hospital District
555 N. Carancahua St, Suite 950
Corpus Christi, TX 78401-0835

*Via Courier; USPS Certified Mail
Return Receipt Requested
and Email at
jonny.hipp@nchdcc.org*

RE: Memorial Medical Center Demolition Process

Dear Mr. Hipp:

We are in receipt of your letter dated May 20, 2022 regarding the Memorial hospital building demolition. We are responding regarding the Demolition Plans referenced in your letter and to provide additional information about the next steps leading up to demolition.

Enclosed is a copy of the Demolition Plans. The CHRISTUS and Spohn teams and contractors are beginning the mobilization process next week, anticipate beginning abatement in the West Building in August 2022, and anticipate commencing the demolition itself in October 2022. By providing these Demolition Plans, Spohn is satisfying the requirement to provide copies of the plans to the District at least ten business days before commencing demolition, as required under Schedule 1, Section 3.5.4 of the Membership Agreement.

Spohn and CHRISTUS representatives have consulted with the District over the past few months regarding various demolition-related matters, and will continue to consult with the District. Spohn views this as satisfying the Membership Agreement requirement to consult with the District regarding the Demolition Plans, but is also available to discuss any questions the District may have upon review of the Demolition Plan documents themselves. Spohn acknowledges its obligation to provide no less frequent than monthly status reports to the District once the demolition formally commences later this year.

Spohn requests the District's continued flexibility and cooperation regarding issues surrounding the demolition process that are not strictly tied to the Membership Agreement timeline or terms. There are important and meaningful steps leading up to demolition that require Spohn and the District to work together outside of formal contract requirements. For example, Spohn is in receipt of your request to send a representative to the upcoming Nueces County Commissioners Court meeting on July 27, 2022 that will include a discussion on the demolition process, and plans to do so.



We appreciate your assistance in this process, and look forward to your response.

Very truly yours,

A handwritten signature in blue ink, appearing to read "Osbert Blow".

Osbert Blow, MD, PhD, FACS
Chief Executive Officer
CHRISTUS Spohn Health System

A handwritten signature in blue ink, appearing to read "Dominic Dominguez".

Dominic Dominguez
Senior Vice President Group Operations
CHRISTUS South Texas

Enclosures sent electronically via Email

cc: Belinda Chism
Adam Robison
William Dewitt Alsup
Lance Ramsey
Jennifer Gurevitz
Becky Rios

belinda.chism@nchdcc.org
arobison@kslaw.com
wd_alsup@swbell.net
ramsey@gl-law.com
jennifer.gurevitz@christushealth.org
becky.rios@christushealth.org

MEMORIAL HOSPITAL DEMOLITION CHRISTUS SPOHN - CORPUS CHRISTI

2606 HOSPITAL BLVD.
CORPUS CHRISTI, TEXAS



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DRAWING LEGEND:

COVER SHEET

ARCHITECTURAL

| | |
|-------|-----------------------------------------------------------------|
| A-0.0 | DEMOLITION SITE PLAN |
| A-1.0 | DEMOLITION BASEMENT AND DEMOLITION FIRST FLOOR |
| A-1.1 | DEMOLITION SECOND FLOOR AND DEMOLITION THIRD FLOOR |
| A-1.2 | DEMOLITION FOURTH, FIFTH, SIXTH, SEVENTH, EIGHT FLOOR AND NINTH |
| A-1.3 | DEMOLITION PHOTOS |

CIVIL

| | |
|---------|----------------------------|
| C-MD101 | CIVIL SITE DEMOLITION PLAN |
| C-MD201 | CIVIL GRADING PLAN |
| C-MD301 | SWPPP PLAN |
| C-MD401 | SWPPP DETAILS AND NOTES |

LANDSCAPE

| | |
|-----|---------------------------|
| L-1 | LANDSCAPE DEMOLITION PLAN |
|-----|---------------------------|

PROJECT INFORMATION

| | |
|--------------------|------------------------------------|
| PROJECT NUMBER: | 202036 |
| CONSTRUCTION TYPE: | NA |
| OCCUPANCY: | NA |
| BUILDING CODE: | 2015 INTERNATIONAL BUILDING CODE |
| LIFE SAFETY CODE: | 2012 NFPA 101 LIFE SAFETY CODE |
| PLUMBING: | 2015 PLUMBING CODE |
| MECHANICAL: | 2015 INTERNATIONAL MECHANICAL CODE |
| ELECTRICAL: | 2017 NATIONAL ELECTRIC CODE |
| ENERGY: | 2015 INTERNATIONAL ENERGY CODE |



GENERAL NOTES

- General Contractor shall, by submission of his bid, obligate himself to all requirements of the General Contractor as stated on these drawings.
- Prior to bid submittal, the General Contractor shall carefully study and compare the Contract Documents with existing conditions and with information furnished by the building owner, and shall at once report to the Architect and owner's representative, errors, inconsistencies or omissions discovered.
- Prior to bid submittal, the General Contractor shall visit the site and verify field conditions and carefully compare such field conditions and other information known to the Contractor with the Contract Documents. Errors, inconsistencies, or omissions discovered shall be reported to the Architect and Owner's representative at once.
- General Contractor shall bid the plans and specifications as detailed in documents and ensure a full finished project with no additional costs involved over what is included in the documents.
- General Contractor shall take field measurements and verify field conditions and shall carefully compare such field measurements and conditions and other information known to the Contractor with the Contract Documents before bidding & commencing building activities.
- General Contractor shall supervise and direct the Work, using the Contractor's best skill and attention. The Contractor shall be solely responsible for construction means, methods, techniques, sequences, and procedures and for coordinating all trades, and all portions of the Work under the Contract, unless Contract Documents give other specific instructions.
- General Contractor shall report any unforeseen field conditions, errors, inconsistencies or omissions discovered at any time before and during the Work to the Architect, before proceeding with that portion of the work, as he will be responsible for all Work affecting the project.
- General Contractor shall be responsible to the Owner for acts and omissions of the Contractor's employees, Subcontractors and their agents and employees, and other persons performing portions of his Work under a contract with the General Contractor.
- If a change is requested by the Owner, Lincoln Harris' construction manager shall issue an appropriate Change Order request, which the General Contractor shall price out accordingly.
- General Contractor shall cover no work until required inspections have been made.
- All work shall conform to International Building Code 2015 Edition and to all Corpus Christi City Amendments. Contractor shall include cost of permits in bid.

SITE DEMOLITION GENERAL NOTES

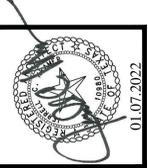
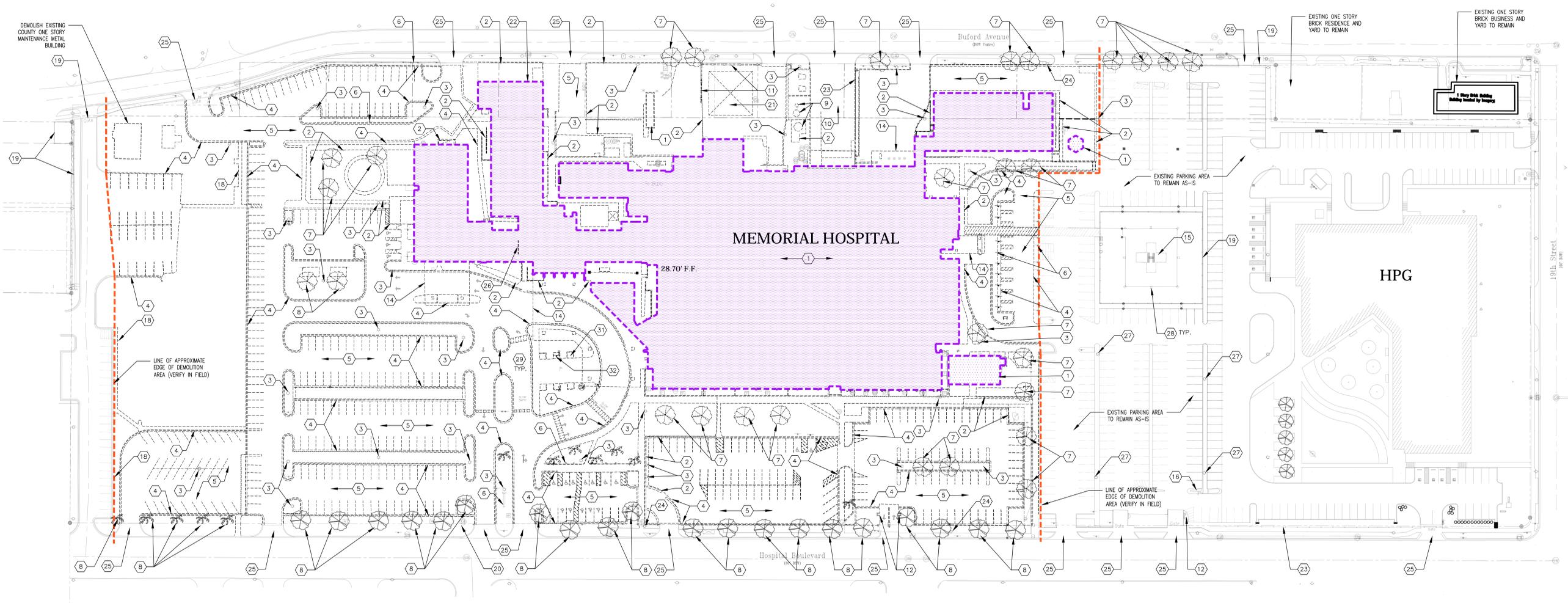
- CONTRACTOR SHALL VISIT THE SITE AND BECOME FAMILIAR WITH THE EXISTING CONDITIONS. CONTRACTOR SHALL BRING ANY DISCREPANCIES BETWEEN ACTUAL CONDITIONS AND THE DEMOLITION PLANS TO THE PROJECT MANAGER'S ATTENTION BEFORE COMMENCING ANY WORK.
- ITEMS SHOWN DASHED SHALL BE DEMOLISHED UNLESS OTHERWISE NOTED (U.N.O.).
- CONTRACTOR SHALL SECURE ALL NECESSARY PERMITS FROM APPROPRIATE JURISDICTIONS BEFORE COMMENCING WORK.
- ALL DEMOLITION WORK SHALL COMPLY WITH APPLICABLE CODES.
- THE GENERAL CONTRACTOR SHALL RESPECT THE SITE AND CALL ATTENTION TO THE OWNER OF ANY ENVIRONMENTAL HAZARDS. REMOVAL OF SAID HAZARDS ARE OUTSIDE OF THE SCOPE OF THIS WORK. REMOVAL IS TO ADHERE TO THE ENVIRONMENTAL PROTECTION AGENCY'S AND LOCAL GUIDELINES.
- THE GENERAL CONTRACTOR SHALL FURNISH ALL LABOR AND MATERIAL AS REQUIRED TO COMPLETE DEMOLITION AND REMOVAL OF ALL ITEMS AS INDICATED IN THE DRAWINGS OR AS OTHERWISE DIRECTED BY THE PROJECT MANAGER.
- ALL WORK DEMOLISHED SHALL BE REMOVED FROM THE PREMISES EXCEPT ITEMS TO BE REUSED OR RETURNED TO OWNER OR AS OTHERWISE NOTED.
- THE GENERAL CONTRACTOR SHALL AT ALL TIMES PROTECT THE PROPERTY OF THE BUILDING OWNER. EXCEPT FOR ITEMS AS CALL OUT IN THESE PLANS TO BE DEMOLISHED.
- THE GENERAL CONTRACTOR SHALL CAP, TERMINATE AND FLUSH FINISH ALL PROJECTING PLUMBING AND ELECTRICAL AS WELL AS ALL OTHER PROJECT ITEMS WHICH ARE BEING ABANDONED.
- THIS DEMOLITION SITE PLAN WAS GENERATED FROM DRAWINGS PROVIDED BY OTHERS. ALL ITEMS SHOWN ON THIS PLAN SHALL BE VERIFIED BY CONTRACTOR PRIOR TO PROCEEDING WITH DEMOLITION OR REMOVAL. ALL UTILITIES SHALL BE REMOVED AND CAPPED AT THE PROPERTY LINE OR AS VERIFIED WITH THE CIVIL ENGINEER AND THE APPROPRIATE UTILITY COMPANIES AND/OR CITY AUTHORITIES.
- EXISTING FLAG POLE SHALL BE REMOVED AND STORED FOR REUSE IN ANOTHER PROJECT.
- EXISTING CROSS LOCATED ON FACE OF THE EXISTING BUILDING STRUCTURE SHALL BE CAREFULLY REMOVED AND STORED FOR REUSE IN ANOTHER PROJECT.
- ALL BASEMENT AND RECESSED GRADED AREAS TO BE BACKFILLED WITH STANDARD FILL SIMILAR TO NATIVE SOIL AND GRADED WITH 1% DRAINAGE.
- ALL EXISTING CONCRETE PIERS SHALL BE DEMOLISHED TO WITHIN 48" BELOW FINISHED GRADE AND SHALL BE DESTROYED ON THE SURVEY DRAWINGS. COORDINATE WITH CIVIL ENGINEERS SO THAT THEY CAN UPDATE CIVIL DRAWINGS FOR RECORD OF PORTIONS OF PIERS TO REMAIN.
- REMOVE EXISTING 5K GALLON DIESEL UNDERGROUND STORAGE TANK WITH APPROXIMATELY 3K GALLONS OF FUEL.
- THE FOLLOWING ITEMS TO BE SALVAGED AND RETURNED TO OWNER DURING DEMOLITION:
 - GENERATOR
 - DIESEL FIRE PUMP
 - (2) AIR COMPRESSORS THAT WERE USE FOR MECHANICAL AIR
 - MEDICAL AIR COMPRESSORS
 - (6) VACUUM PUMPS
- PROVIDE PEDESTRIAN PROTECTION AT EXISTING SIDEWALKS ALONG BUFORD STREET AND HOSPITAL BLVD FOR THE FULL LENGTH OF DEMOLITION AREA.

MEP DEMOLITION GENERAL NOTES

- PRIOR TO COMMENCEMENT OF ANY DEMOLITION WORK, EXISTING CONDITIONS SHOULD BE VERIFIED. REMOVED ITEMS SHALL BE TURNED OVER TO THE OWNER UNLESS OTHER DIRECTION IS RECEIVED. REMOVE FROM SITE AND LEGALLY DISPOSE OF ALL ITEMS THE OWNER CHOOSES NOT TO ACCEPT.
- ALL MEP SYSTEMS WITHIN THE BUILDING SHALL BE REMOVED IN THEIR ENTIRETY.
- UNDERGROUND SANITARY SEWER PIPING FROM THE BUILDING SHOULD BE REMOVED BACK TO THE PROPERTY LINE. APPROVED CAPPING METHODS SHOULD BE FOLLOWED AT ALL CONNECTION POINTS. VERIFY WITH CIVIL DRAWINGS.
- UNDERGROUND STORM PIPING FROM THE BUILDING SHOULD BE REMOVED BACK TO THE TIE-IN POINTS WITH CITY UTILITIES. REQUIRED SITE DRAINAGE TO REMAIN SHOULD BE COORDINATED WITH THE CIVIL ENGINEER AND AUTHORITIES HAVING JURISDICTION.
- UNDERGROUND NATURAL GAS LINES DOWNSTREAM OF ANY GAS METER SHOULD BE REMOVED. RELOCATION OR REMOVAL OF GAS METER SHOULD BE COORDINATED WITH OWNER.
- UNDERGROUND WATER DISTRIBUTION PIPING TO THE BUILDING SHALL BE REMOVED. RELOCATION OR REMOVAL OF WATER METER SHOULD BE COORDINATED WITH PROVIDED.
- ELECTRICAL SERVICE TO SITE SHOULD BE REMOVED BACK TO THE ELECTRIC UTILITY SERVICE PROVIDER'S POINT OF DISCONNECT. THE REMOVAL OF ANY PAD MOUNTED TRANSFORMERS, UTILITY SWITCHES, METERS, ETC. SHOULD BE COORDINATED WITH THE LOCAL ELECTRIC SERVICE PROVIDER.

SITE DEMOLITION KEYED NOTES

- DEMOLISH EXISTING BUILDING AS SHOWN ON THESE DRAWINGS (ARCHITECTURAL, CIVIL AND LANDSCAPE). ALL ITEMS SHALL BE VERIFIED PRIOR TO DEMOLITION. ANY DISCREPANCIES SHALL BE BROUGHT TO THE ATTENTION OF THE ARCHITECT PRIOR TO PROCEEDING WITH THAT PHASE OF DEMOLITION.
- REMOVE EXISTING CHAIN LINK OR WROUGHT IRON FENCING AND GATES.
- REMOVE EXISTING PARKING LOT LIGHT POLES AND FIXTURES WITH IN THE LIMITS OF THE DEMOLITION AREA. UNDERGROUND CONDUITS AND WIRING SHALL BE RETAINED.
- DEMOLISH EXISTING PARKING LOT CURBS AND GUTTERS.
- DEMOLISH EXISTING PARKING LOT ASPHALT OR CONCRETE SURFACING.
- REMOVE EXISTING HOSPITAL SIGNAGE. CITY REQUIRED STREET SIGNAGE TO REMAIN AS-IS. SIGN POSTS WITH NO SIGNS SHALL BE REMOVED UNLESS LOCATED WITHIN THE CITY RIGHT OF WAY.
- REMOVE EXISTING TREE OR SHRUB.
- RETAIN AND PROTECT EXISTING TREE.
- REMOVE EXISTING STORAGE TANKS.
- DEMOLISH EXISTING CONCRETE RAMP AND RETAINING WALLS. RECESS IN GRADE TO BE FILLED IN WITH STANDARD FILL SIMILAR TO NATIVE SOIL.
- DEMOLISH EXISTING CONCRETE BLOCK WALL.
- REMOVE EXISTING PARKING LOT SECURITY LIGHT GATE SYSTEM. VERIFY DISPOSITION WITH OWNER.
- REMOVE EXISTING SATELLITE SYSTEM. VERIFY DISPOSITION WITH OWNER.
- DEMOLISH EXISTING BUILDING CANOPY AND STRUCTURAL SUPPORTS.
- EXISTING HELIPAD TO REMAIN AS-IS.
- EXISTING WINDSOCK IN PARKING AREA TO REMAIN AS-IS.
- EXISTING BUS STOP TO REMAIN AS-IS IN PUBLIC RIGHT OF WAY.
- COORDINATE DEMOLITION OF EXISTING CURBS AND PAVING IN THIS AREA WITH PROJECT ARCHITECT PRIOR TO DEMOLITION.
- EXISTING CHAIN LINK FENCE AND GATES TO REMAIN AS-IS.
- EXISTING LANDSCAPING AND HEDGES ADJACENT TO PUBLIC RIGHT OF WAY TO REMAIN AS-IS.
- DEMOLISH EXISTING BUILDING CHILLER SYSTEM.
- DEMOLISH EXISTING ONE STORY METAL BUILDING.
- DEMOLISH EXISTING FENCE / WALL.
- VERIFY DISPOSITION OF THIS EXISTING LIGHT FIXTURE WITH ARCHITECT.
- EXISTING DRIVEWAY AND APRON TO REMAIN.
- SALVAGE EXISTING CROSS CURRENTLY MOUNTED ON UPPER FACE OF BUILDING TOWER. PROTECT FOR REINSTALLATION AT LATER DATE BY OTHERS.
- EXISTING PARKING LOT LIGHTING LOCATED IN AREA OF EXISTING PARKING LOT THAT WILL REMAIN AS-IS SHALL REMAIN. POLES AND FIXTURES SHALL REMAIN AS-IS WITH NO CIRCUITRY.
- EXISTING HELIPAD LIGHTING TO BE ABANDONED. POLES AND FIXTURES SHALL REMAIN AS-IS WITH NO CIRCUITRY.
- EXISTING SHRUBS AND GROUND COVER WITHIN DEMOLITION AREA SHALL BE REMOVED UNLESS OTHERWISE NOTED.
- DEMOLISH EXISTING SIDEWALK WITHIN DEMOLITION AREA.
- REMOVE EXISTING JESUS STATUE AND PEDESTAL. RELOCATE TO HPG COURTYARD.
- REMOVE EXISTING HPG PLAQUE AND PEDESTAL. RELOCATE TO HPG ENTRY. EXACT NEW LOCATION TO BE DETERMINED AT A LATER DATE.

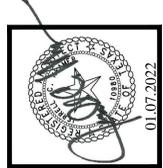


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CHRISTUS SPOHN - CORPUS CHRISTI
DEMOLITION SITE PLAN
CORPUS CHRISTI, TEXAS
JOB NO. 202036
DRN. BY CF
CKD. BY JCK
DATE 01.07.2022
REVISIONS
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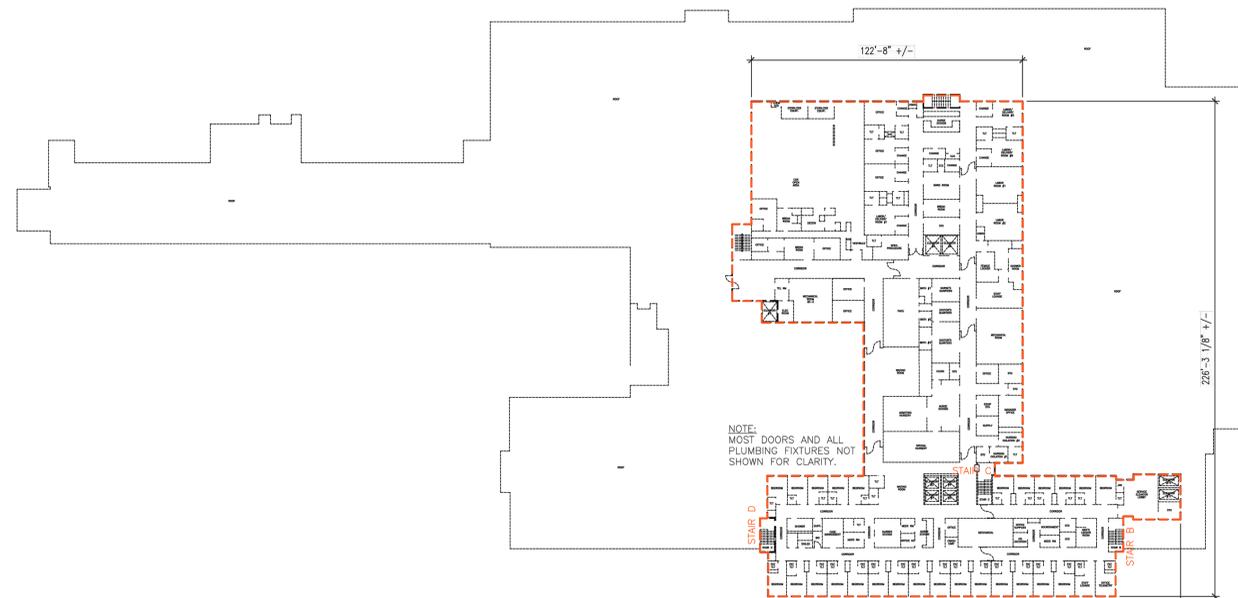


DEMOLITION PLAN GENERAL NOTES

1. CONTRACTOR SHALL VISIT THE SITE AND BECOME FAMILIAR WITH THE EXISTING CONDITIONS PRIOR TO BIDDING. CONTRACTOR SHALL BRING ANY DISCREPANCIES BETWEEN ACTUAL CONDITIONS AND THE DEMOLITION PLANS TO THE PROJECT MANAGERS ATTENTION BEFORE COMMENCING ANY WORK.
2. ITEMS SHOWN DASHED SHALL BE DEMOLITION UNLESS OTHERWISE NOTED (U.N.O.). REMOVE ELECTRICAL TO SOURCE PANELS.
3. CONTRACTOR SHALL SECURE ALL NECESSARY PERMITS FROM APPROPRIATE JURISDICTIONS BEFORE COMMENCING WORK.
4. ALL DEMOLITION WORK SHALL COMPLY WITH APPLICABLE CODES.
5. THE GENERAL CONTRACTOR SHALL INSPECT THE SITE AND CALL ATTENTION TO THE OWNER OF ANY ENVIRONMENTAL HAZARDS. REMOVAL OF SAID HAZARDS ARE OUTSIDE OF THE SCOPE OF THIS WORK. REMOVAL IS TO ADHERE TO THE ENVIRONMENTAL PROTECTION AGENCYS AND LOCAL GUIDELINES.
6. THE GENERAL CONTRACTOR SHALL FURNISH ALL LABOR AND MATERIAL AS REQUIRED TO COMPLETE DEMOLITION AND REMOVAL OF ALL ITEMS AS INDICATED IN THE DRAWINGS OR AS OTHERWISE DIRECTED BY THE PROJECT MANAGER.
7. ALL WORK DEMOLISHED SHALL BE REMOVED FROM THE PREMISES EXCEPT ITEMS TO BE REUSED OR RETURNED TO OWNER OR AS OTHERWISE NOTED.
8. THE GENERAL CONTRACTOR SHALL AT ALL TIMES PROTECT THE PROPERTY OF THE BUILDING OWNER, EXCEPT FOR ITEMS AS CALL OUT IN THESE PLANS TO BE DEMOLISHED.
9. THE GENERAL CONTRACTOR SHALL CAP, TERMINATE AND FLUSH FINISH ALL PROJECTING PLUMBING AND ELECTRICAL AS WELL AS ALL OTHER PROJECT ITEMS WHICH ARE BEING ABANDONED.

DEMOLITION PLAN KEYED NOTES

1. REMOVE EXISTING PLUMBING FIXTURES AS SHOWN OR IMPLIED.
2. DEMOLISH ALL EXISTING INTERIOR PARTITIONS, CEILINGS, DOORS AND DOOR FRAMES.
3. DEMOLISH EXISTING EXTERIOR PERIMETER WALLS.
4. DEMOLISH EXISTING CONCRETE SLAB.
5. REMOVE ALL EXISTING MECHANICAL EQUIPMENT. REFER TO MECHANICAL DRAWINGS

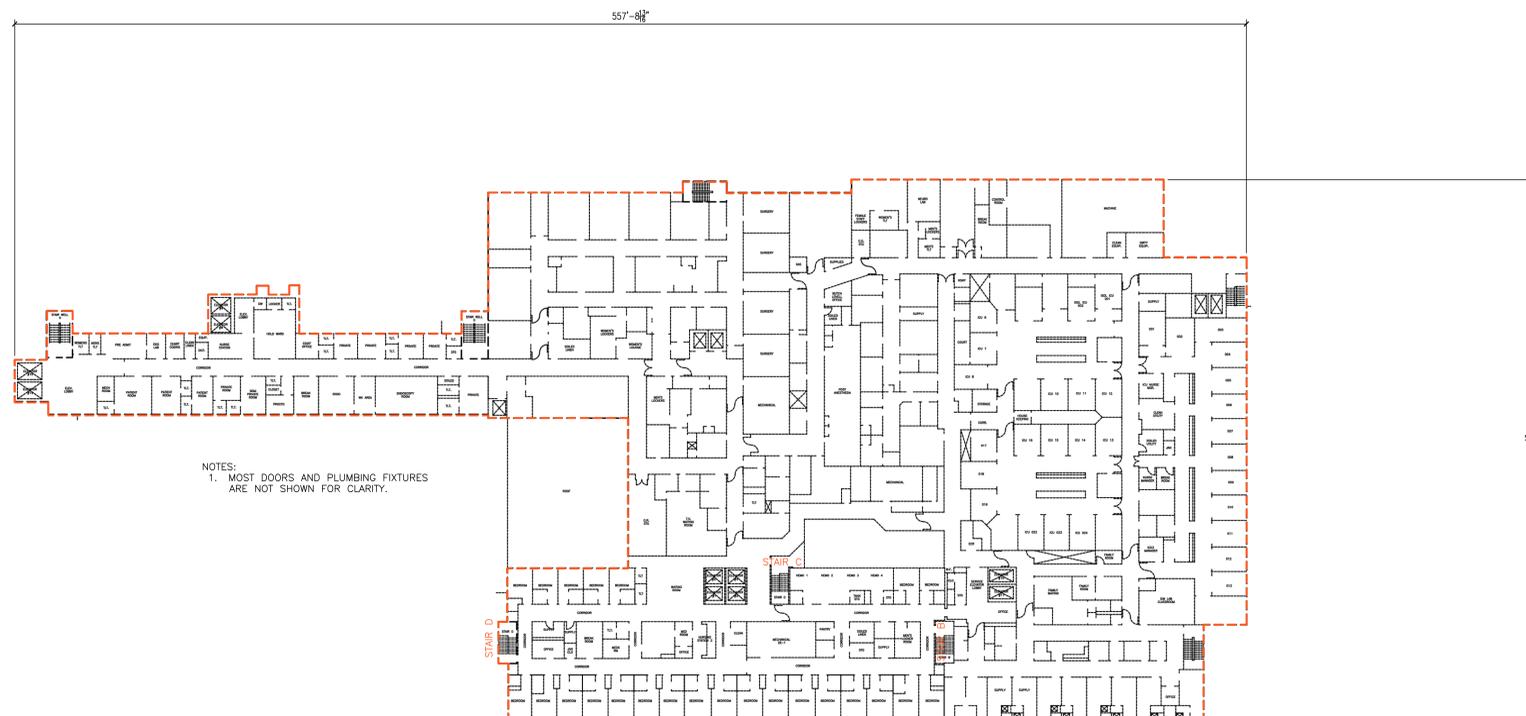


THIRD FLOOR TOTAL: 26,991 SF

- ①
- ②
- ③
- ④
- ⑤

2 DEMOLITION PLAN - THIRD FLOOR

A-1.1 1/32" = 1'-0"



SECOND LEVEL TOTAL: 85,509 SF

- ①
- ②
- ③
- ④
- ⑤

1 DEMOLITION PLAN - SECOND FLOOR

A-1.1 1/32" = 1'-0"



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DEMOLITION PLANS - SECOND AND THIRD FLOOR

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| CKD. BY | JCK |
| DATE | 01.07.2022 |
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FLOWABLE FILL MATERIAL

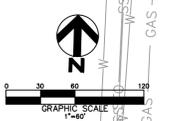
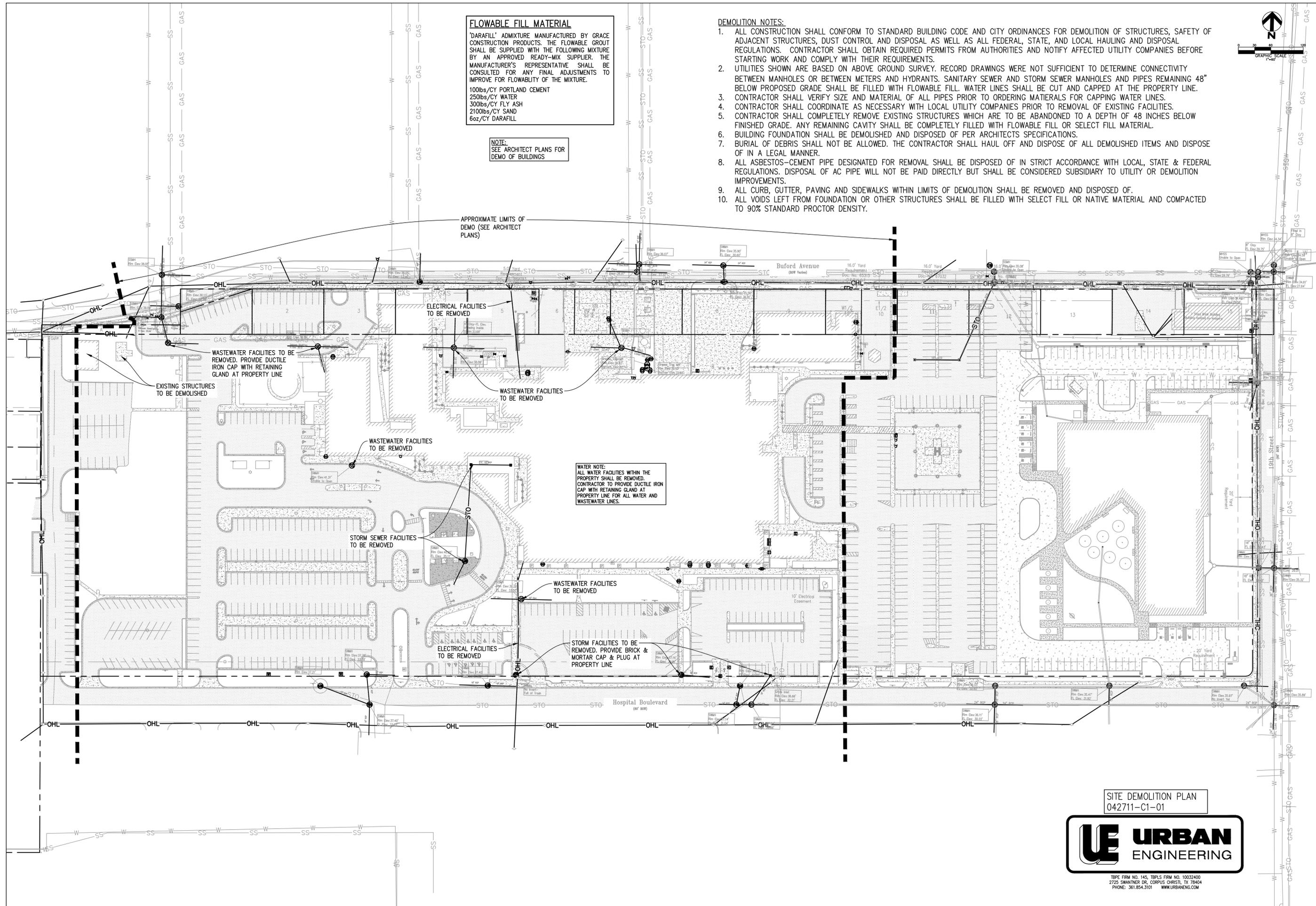
'DARAFILL' ADMIXTURE MANUFACTURED BY GRACE CONSTRUCTION PRODUCTS. THE FLOWABLE GROUT SHALL BE SUPPLIED WITH THE FOLLOWING MIXTURE BY AN APPROVED READY-MIX SUPPLIER. THE MANUFACTURER'S REPRESENTATIVE SHALL BE CONSULTED FOR ANY FINAL ADJUSTMENTS TO IMPROVE FOR FLOWABILITY OF THE MIXTURE.

- 100lbs/CY PORTLAND CEMENT
- 250lbs/CY WATER
- 300lbs/CY FLY ASH
- 2100lbs/CY SAND
- 6oz/CY DARAFILL

NOTE:
SEE ARCHITECT PLANS FOR DEMO OF BUILDINGS

DEMOLITION NOTES:

1. ALL CONSTRUCTION SHALL CONFORM TO STANDARD BUILDING CODE AND CITY ORDINANCES FOR DEMOLITION OF STRUCTURES, SAFETY OF ADJACENT STRUCTURES, DUST CONTROL AND DISPOSAL AS WELL AS ALL FEDERAL, STATE, AND LOCAL HAULING AND DISPOSAL REGULATIONS. CONTRACTOR SHALL OBTAIN REQUIRED PERMITS FROM AUTHORITIES AND NOTIFY AFFECTED UTILITY COMPANIES BEFORE STARTING WORK AND COMPLY WITH THEIR REQUIREMENTS.
2. UTILITIES SHOWN ARE BASED ON ABOVE GROUND SURVEY. RECORD DRAWINGS WERE NOT SUFFICIENT TO DETERMINE CONNECTIVITY BETWEEN MANHOLES OR BETWEEN METERS AND HYDRANTS. SANITARY SEWER AND STORM SEWER MANHOLES AND PIPES REMAINING 48" BELOW PROPOSED GRADE SHALL BE FILLED WITH FLOWABLE FILL. WATER LINES SHALL BE CUT AND CAPPED AT THE PROPERTY LINE.
3. CONTRACTOR SHALL VERIFY SIZE AND MATERIAL OF ALL PIPES PRIOR TO ORDERING MATERIALS FOR CAPPING WATER LINES.
4. CONTRACTOR SHALL COORDINATE AS NECESSARY WITH LOCAL UTILITY COMPANIES PRIOR TO REMOVAL OF EXISTING FACILITIES.
5. CONTRACTOR SHALL COMPLETELY REMOVE EXISTING STRUCTURES WHICH ARE TO BE ABANDONED TO A DEPTH OF 48 INCHES BELOW FINISHED GRADE. ANY REMAINING CAVITY SHALL BE COMPLETELY FILLED WITH FLOWABLE FILL OR SELECT FILL MATERIAL.
6. BUILDING FOUNDATION SHALL BE DEMOLISHED AND DISPOSED OF PER ARCHITECTS SPECIFICATIONS.
7. BURIAL OF DEBRIS SHALL NOT BE ALLOWED. THE CONTRACTOR SHALL HAUL OFF AND DISPOSE OF ALL DEMOLISHED ITEMS AND DISPOSE OF IN A LEGAL MANNER.
8. ALL ASBESTOS-CEMENT PIPE DESIGNATED FOR REMOVAL SHALL BE DISPOSED OF IN STRICT ACCORDANCE WITH LOCAL, STATE & FEDERAL REGULATIONS. DISPOSAL OF AC PIPE WILL NOT BE PAID DIRECTLY BUT SHALL BE CONSIDERED SUBSIDIARY TO UTILITY OR DEMOLITION IMPROVEMENTS.
9. ALL CURB, GUTTER, PAVING AND SIDEWALKS WITHIN LIMITS OF DEMOLITION SHALL BE REMOVED AND DISPOSED OF.
10. ALL VOIDS LEFT FROM FOUNDATION OR OTHER STRUCTURES SHALL BE FILLED WITH SELECT FILL OR NATIVE MATERIAL AND COMPACTED TO 90% STANDARD PROCTOR DENSITY.



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MEMORIAL HOSPITAL DEMOLITION
CHRISTUS SPOHN - CORPUS CHRISTI
CORPUS CHRISTI, TEXAS

SITE DEMOLITION PLAN
042711-C1-01



TYPE FIRM NO. 145; TEMPL FIRM NO. 10033400
2725 SWANTNER DR., CORPUS CHRISTI, TX 78404
PHONE: 361.884.3101 WWW.URBANENG.COM

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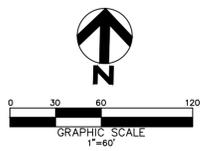
LEGEND

--- LIMITS OF CONSTRUCTION
 [41.5] PROPOSED FINISHED GRADE

NOTE:
 SEE LANDSCAPE & IRRIGATION
 PLANS FOR SEEDING AND
 TEMPORARY IRRIGATION.

GENERAL NOTES:

1. ALL CONSTRUCTION AND MATERIALS SHALL BE IN ACCORDANCE WITH THE CITY OF CORPUS CHRISTI STANDARDS AND PRACTICES.
2. IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO NOTIFY ALL APPROPRIATE UTILITY COMPANIES 48 HOURS PRIOR TO ACTUAL CONSTRUCTION FOR THE EXACT LOCATION OF EXISTING UTILITIES AND UNDERGROUND IRRIGATION SYSTEMS.
3. BARRICADE AND TRAFFIC CONTROL SHALL COMPLY WITH "UNIFORM BARRICADE STANDARDS AND PRACTICES"; CORPUS CHRISTI, TEXAS.
4. CONTRACTOR IS RESPONSIBLE FOR OBTAINING ALL APPLICABLE PERMITS AND/OR PAYING ANY NECESSARY FEES. NO SEPARATE PAYMENT WILL BE ALLOWED.
5. THE CONTRACTOR MUST COMPLY WITH PROVISIONS OF THE CITY OF CORPUS CHRISTI WATER CONSERVATION AND DROUGHT CONTINGENCY PLAN AS AMENDED. COMPLIANCE INCLUDES INCORPORATION OF THE VARIABLE WATER CONSERVATION MEASURES ESTABLISHED FOR ENVIRONMENTAL CONDITIONS. CONTRACTOR MUST COMPLY WITH AND KEEP A COPY OF THESE PROVISIONS ON THE PROJECT SITE THROUGHOUT THE ENTIRE CONSTRUCTION.
6. A PERMIT IS REQUIRED FOR ANY EXCAVATION IN PUBLIC RIGHT OF WAY. EXCAVATION MEANS AN ACTIVITY THAT CUTS, PENETRATES, OR BORES UNDER ANY PORTION OF THE PUBLIC RIGHT OF WAY THAT HAS BEEN IMPROVED WITH A PAVED SURFACE FOR STREET, SIDEWALK, SURFACE DRAINAGE, OR RELATED PUBLIC TRANSPORTATION INFRASTRUCTURE PURPOSES. PERMITS WILL NOT BE ISSUED FOR EXCAVATION IN ANY PUBLIC WAY THAT HAS BEEN CONSTRUCTED, RECONSTRUCTED, REPAVED, OR RESURFACED IN THE PRECEDING PERIOD OF FIVE YEARS FROM THE DATE OF ACCEPTANCE BY THE PUBLIC WORKS CONSTRUCTION ENTITY.
7. THE TOP 4" FROM PROPOSED GRADE SHALL BE NATIVE CLAY MATERIAL OR OTHER ENGINEER APPROVED FILL SUITABLE FOR GROWING NATIVE GRASSES.



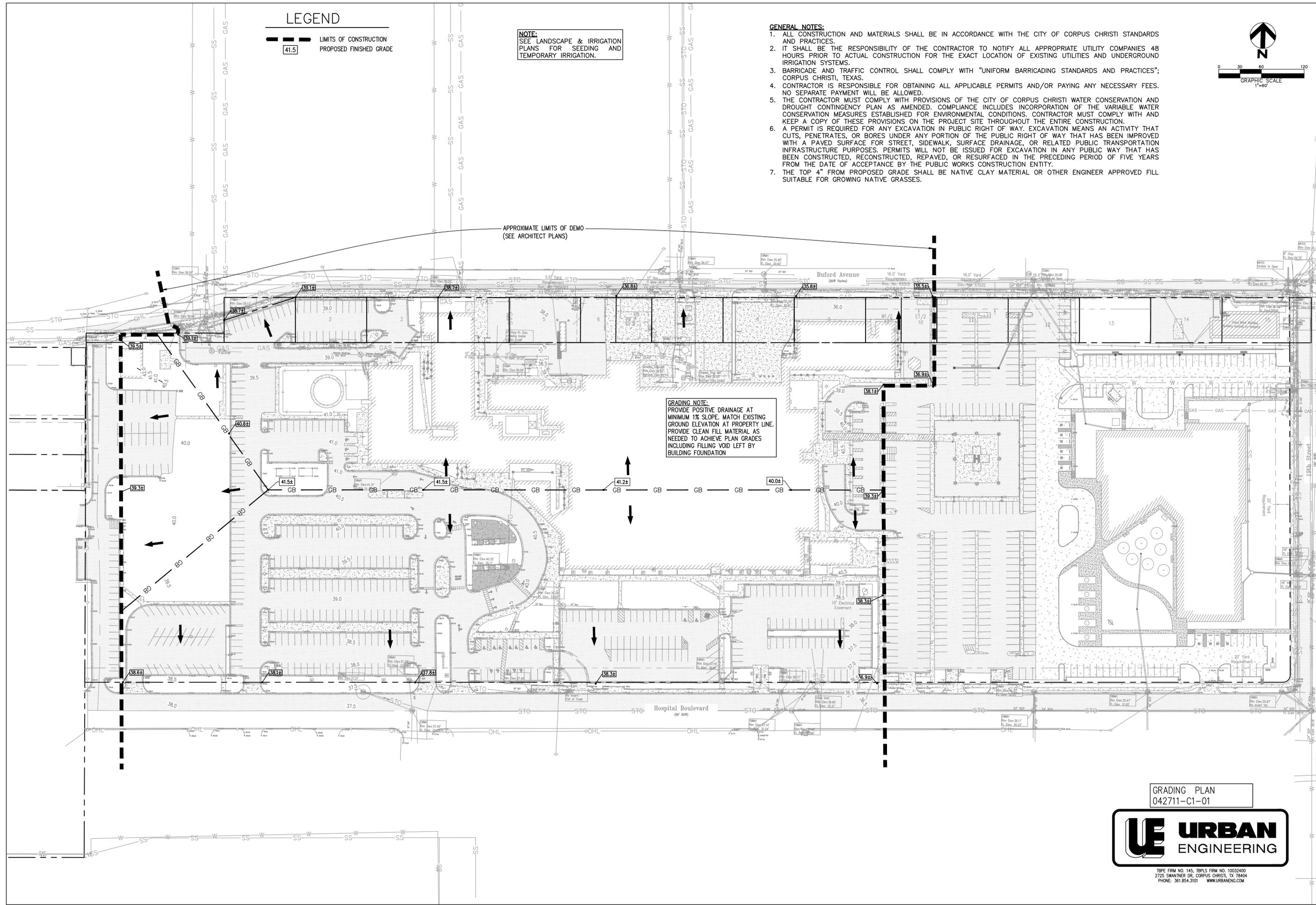
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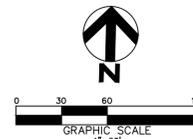
GRADING PLAN
 042711-C1-01



TRPE FIRM NO. 145, TRPLS FIRM NO. 10032400
 2725 SWANTNER DR., CORPUS CHRISTI, TX 78404
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LEGEND

-  SILT FENCE
-  SURFACE FLOW DIRECTION



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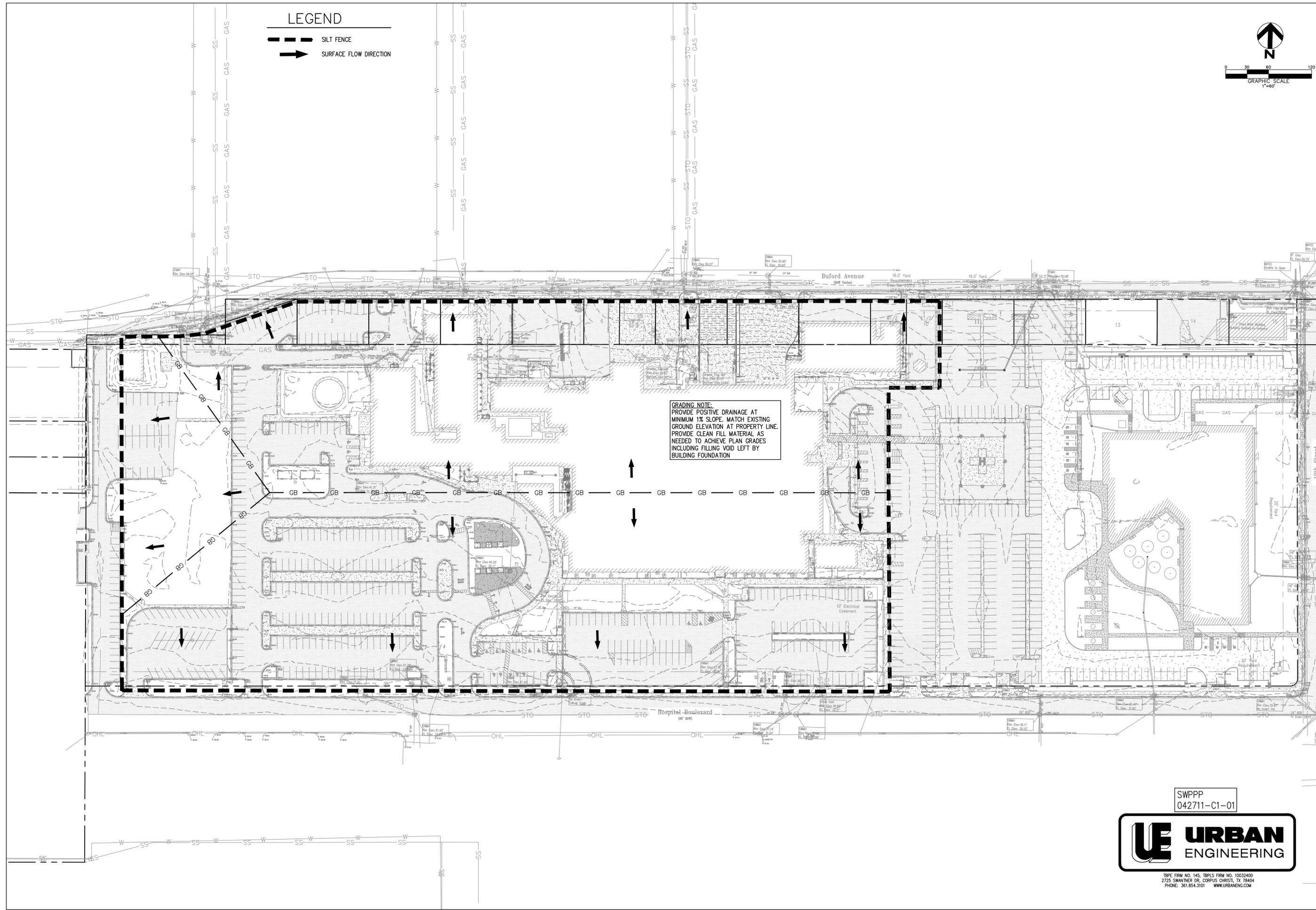
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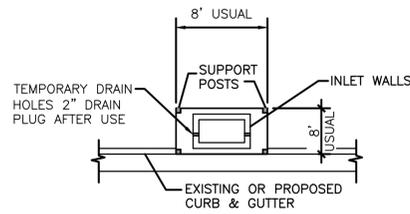
GRADING NOTE:
PROVIDE POSITIVE DRAINAGE AT
MINIMUM 1% SLOPE. MATCH EXISTING
GROUND ELEVATION AT PROPERTY LINE.
PROVIDE CLEAN FILL MATERIAL AS
NEEDED TO ACHIEVE PLAN GRADES
INCLUDING FILLING VOID LEFT BY
BUILDING FOUNDATION

SWPPP
042711-C1-01



TRPE FIRM NO. 145, TRPLS FIRM NO. 10032400
2725 SWANTNER DR., CORPUS CHRISTI, TX 78404
PHONE: 361.854.3101 WWW.URBANENG.COM

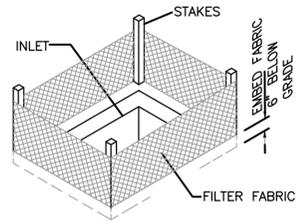




NOTE:
TYPICAL SILT FENCE INSTALLATION AT CURB INLET PRIOR TO PLACEMENT OF CURB AND INLET TOP.

CURB INLET - PLAN

NOT TO SCALE

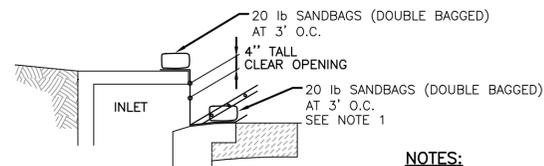
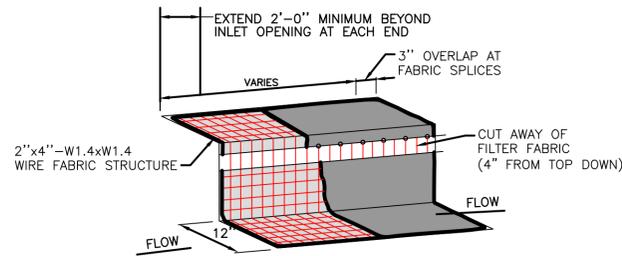


NOTES:

1. FILTER FABRIC INLET PROTECTION SHALL BE USED DURING CONSTRUCTION TO CONTROL SEDIMENTATION.
2. PERIMETER SILT FENCING AROUND INLET LOCATIONS SHALL BE INSTALLED AFTER PIPE IS PLACED.
3. FABRIC MATERIAL SHALL BE A NET-REINFORCED FENCE, USING WOVEN GEOTEXTILE FABRIC.
4. FENCE SHOULD BE REMOVED UPON COMPLETION OF CONSTRUCTION.

TEMPORARY FILTER FABRIC INLET PROTECTION DETAIL

NOT TO SCALE



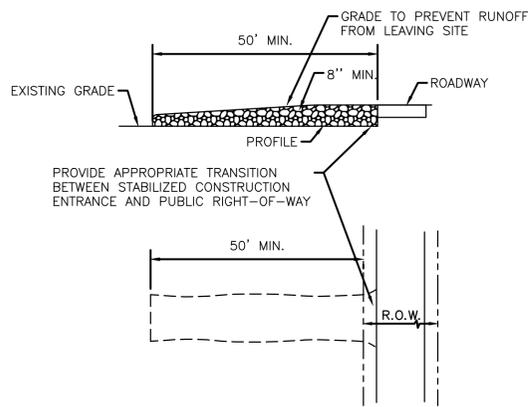
NOTES:
TYPICAL EROSION CONTROL INSTALLATION AT CURB INLET AFTER PLACEMENT OF CURB AND INLET TOP.

CURB INLET PROTECTION DETAIL

NOT TO SCALE

CURB INLET PROTECTION NOTES:

1. TO HOLD THE FILTER DIKE IN PLACE, 20 LB SANDBAGS SHALL BE USED AT 3' O.C. WHERE MINIMUM CLEARANCES CAUSE TRAFFIC TO DRIVE IN THE GUTTER, THE CONTRACTOR MAY SUBSTITUTE A 1"x4" BOARD, SECURED WITH 1/4" OR 3/8" CONCRETE SCREWS. THE 1/4" OR 3/8" CONCRETE SCREWS SHALL BE ATTACHED TO THE GUTTER BY DRILLING AN APPROPRIATE PILOT HOLE WITH A CONCRETE BIT AND INSERT PLASTIC FASTENERS. THE TOP OF THE SCREW SHALL BE RECESSED BELOW THE TOP OF THE BOARD. THE SCREWS SHALL BE PLACED ON 3' O.C. THIS METHOD IS USED IN LIEU OF SANDBAGS, IN THE GUTTER ONLY, TO HOLD THE FILTER DIKE IN PLACE. UPON REMOVAL, EITHER LEAVE THE PLASTIC FASTENERS IN PLACE, OR REMOVE THE PLASTIC FASTENERS, CLEAN ANY DIRT/DEBRIS FROM THE SCREW LOCATIONS, APPLY CHEMICAL SANDING AGENT AND APPLY NON-SHRINK GROUT FLUSH WITH THE SURFACE OF THE GUTTER. THIS METHOD SHALL NOT BE USED ON THE INLET IN LIEU OF SANDBAGS.
2. A SECTION OF FILTER FABRIC SHALL BE REMOVED AS SHOWN ON THIS DETAIL OR AS DIRECTED BY THE ENGINEER OR DESIGNATED REPRESENTATIVE. FABRIC MUST BE SECURED TO WIRE BACKING WITH CLIPS OR HOG RINGS AT THIS LOCATION.
3. DAILY INSPECTION SHALL BE MADE BY THE CONTRACTOR AND SILT ACCUMULATION MUST BE REMOVED WHEN DEPTH REACHES 2". INLET PROTECTION SHALL BE REPLACED AS NECESSARY DURING CONSTRUCTION DUE TO DAMAGE OR DETERIORATION (SUBSIDIARY TO INLET PROTECTION).
4. CONTRACTOR SHALL MONITOR THE PERFORMANCE OF INLET PROTECTION DURING EACH RAINFALL EVENT AND ONLY REMOVE INLET PROTECTION IF DIRECTED BY THE CITY OF CORPUS CHRISTI, OR IF CONTRACTOR OBSERVES AN IMMINENT THREAT OF FLOODING OF SURROUNDING PROPERTY.
5. INLET PROTECTIONS SHALL BE REMOVED AS SOON AS THE SOURCE OF SEDIMENT IS STABILIZED.



PROVIDE APPROPRIATE TRANSITION BETWEEN STABILIZED CONSTRUCTION ENTRANCE AND PUBLIC RIGHT-OF-WAY

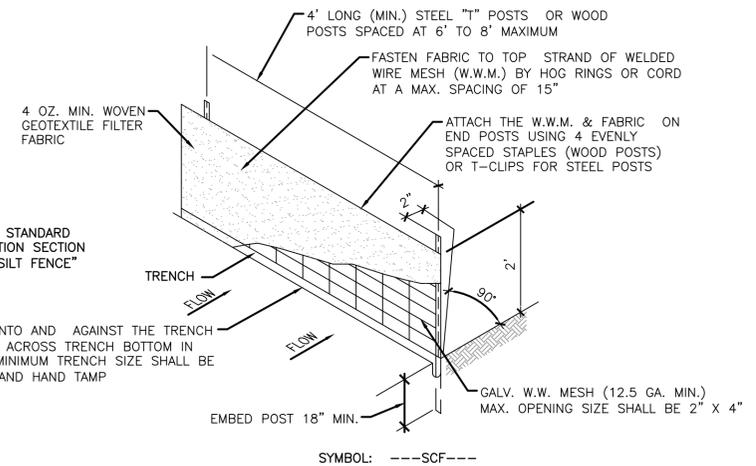
PLAN

STABILIZED CONSTRUCTION ENTRANCE

NOT TO SCALE

CONSTRUCTION ENTRANCE NOTES:

1. STONE SIZE: 3-5" OPEN GRADED ROCK.
2. LENGTH: AS EFFECTIVE BUT NOT LESS THAN 50'.
3. THICKNESS: NOT LESS THAN 8".
4. WIDTH: NOT LESS THAN FULL WIDTH OF ALL POINTS OF INGRESS/EGRESS.
5. WASHING: WHEN NECESSARY, VEHICLE WHEELS SHALL BE CLEANED TO REMOVE SEDIMENT PRIOR TO ENTRANCE ONTO PUBLIC ROADWAY. WHEN WASHING IS REQUIRED, IT SHALL BE DONE ON AN AREA STABILIZED WITH CRUSHED STONE AND DRAINS INTO AN APPROVED TRAP OR SEDIMENT BASIN. ALL SEDIMENT SHALL BE PREVENTED FROM ENTERING ANY STORM DRAIN, DITCH OR WATERCOURSE USING APPROVED METHODS.
6. MAINTENANCE: THE ENTRANCE SHALL BE MAINTAINED IN A CONDITION THAT WILL PREVENT TRACKING OR FLOWING OF SEDIMENT ONTO PUBLIC ROADWAY. THIS MAY REQUIRE PERIODIC TOP DRESSING WITH ADDITIONAL STONE AS CONDITIONS DEMAND, AS WELL AS REPAIR AND CLEAN OUT OF ANY MEASURE DEVICES USED TO TRAP SEDIMENT. ALL SEDIMENTS THAT IS SPILLED, DROPPED, WASHED OR TRACKED ONTO PUBLIC ROADWAY MUST BE REMOVED IMMEDIATELY.
7. DRAINAGE: ENTRANCE MUST BE PROPERLY GRADED OR INCORPORATE A DRAINAGE SWALE TO PREVENT RUNOFF FROM LEAVING THE CONSTRUCTION SITE.



NOTE:
REFER TO STANDARD SPECIFICATION SECTION 022420 "SILT FENCE"

PLACE 6" OF FABRIC INTO AND AGAINST THE TRENCH WALL AND APPROX. 2" ACROSS TRENCH BOTTOM IN UPSTREAM DIRECTION MINIMUM TRENCH SIZE SHALL BE 6" SQUARE. BACKFILL AND HAND TAMP

TEMPORARY SEDIMENT CONTROL FENCE DETAIL

NOT TO SCALE

SEDIMENT CONTROL FENCE USAGE GUIDELINES:

SEDIMENT CONTROL FENCE MAY BE CONSTRUCTED NEAR THE DOWNSTREAM PERIMETER OF A DISTURBED AREA ALONG A CONTOUR TO INTERCEPT SEDIMENT FROM OVERLAND RUNOFF. A 2 YEAR STORM FREQUENCY MAY BE USED TO CALCULATE THE FLOW RATE TO BE FILTERED.
SEDIMENT CONTROL FENCE SHOULD BE SIZED TO FILTER A MAX. FLOW THROUGH RATE OF 100 GPM/FT. SEDIMENT CONTROL FENCE IS NOT RECOMMENDED TO CONTROL EROSION FROM A DRAINAGE LARGER THEN 2 ACRES.

* THE GUIDELINES SHOWN HERE ARE SUGGESTIONS ONLY AND MAY BE MODIFIED BY THE ENGINEER.

SWPPP DETAILS AND NOTES
042711-C1-01



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2725 SWANNINER DR, CORPUS CHRISTI, TX 78404
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TX Firm Registration #BR-719



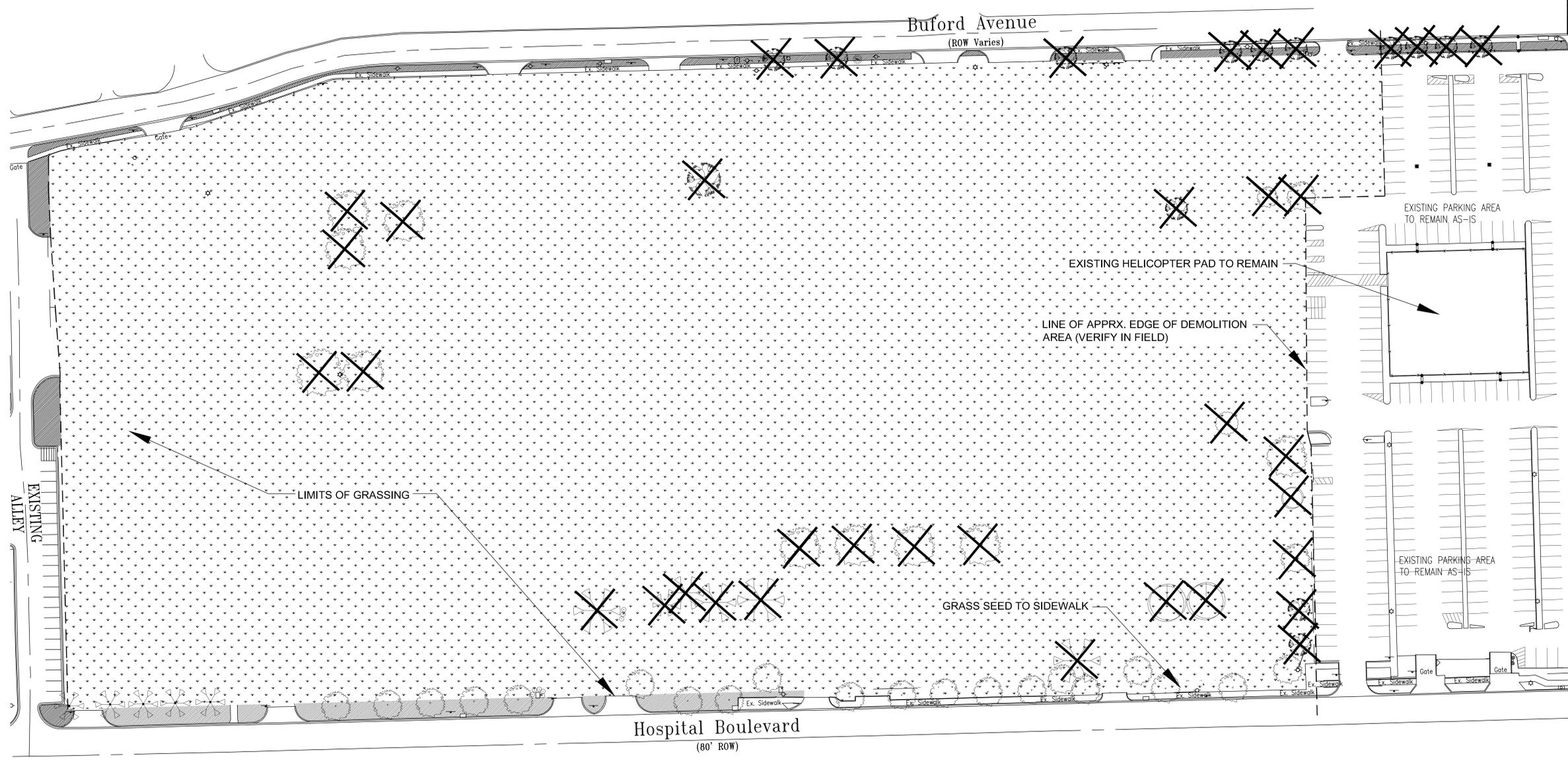
MEMORIAL HOSPITAL DEMOLITION
CHRISTUS SPOHN - CORPUS CHRISTI
CORPUS CHRISTI, TEXAS

| | |
|-----------|------------|
| JOB NO. | 202036 |
| DRN. BY | CF |
| CKD. BY | ICK |
| DATE | 10-29-2021 |
| REVISIONS | |
| mark | date |
| ▲ | |
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SHEET NUMBER

C-MD401

of 11 sheets 14



GRASSING & TREE PROTECTION PLAN
 SCALE: 1"=40'



LANDSCAPE NOTES:

- CONTRACTOR SHALL BE RESPONSIBLE FOR BECOMING FAMILIAR WITH ALL UNDERGROUND UTILITIES, PIPES AND LINE RUNS. CONTRACTOR SHALL LOCATE AND ESTABLISH ALL EXISTING UTILITIES IN THE CONSTRUCTION AREA BEFORE ANY EXCAVATION SHALL OCCUR.
- CONTRACTOR SHALL VISIT THE SITE TO EXAMINE THE CONDITIONS, AS THEY EXIST. DETERMINE THE NATURE OF THE MATERIALS TO BE USED, AND ALL OTHER PERTINENT INFORMATION TO THE WORK.
- LANDSCAPE CONTRACTOR SHALL BE RESPONSIBLE FOR ANY COORDINATION WITH SUBCONTRACTORS AS REQUIRED TO ACCOMPLISH ALL LANDSCAPE OPERATIONS.
- CONTRACTOR IS RESPONSIBLE FOR ALL GRADING. ALL SOIL WORK BY CONTRACTOR (VERIFY). CONTRACTOR SHALL PROVIDE PROPER AND POSITIVE DRAINAGE IN ALL DRAINAGE AREAS.
- CONTRACTOR SHALL SUBMIT MAINTENANCE INSTRUCTIONS RECOMMENDING PROCEDURES TO BE ESTABLISHED BY OWNER FOR MAINTENANCE OF THE LAWN AREAS DURING AN ENTIRE YEAR. MAINTENANCE INCLUDES BUT IS NOT LIMITED TO: WEED CONTROL, FERTILIZING, TRIMMING, PRUNING, WATERING, EDGING, AND MOWING. A TYPEWRITTEN MAINTENANCE PROGRAM/SCHEDULE TO BE SUBMITTED TO OWNER AT FINAL ACCEPTANCE.
- SEEDED AREA CONTRACTOR SHALL BE TILLED TO A 2" DEPTH AND SEED. CONTRACTOR IS RESPONSIBLE FOR GERMINATION SEED MIXTURE TO BE.
- ANY DAMAGE TO EXISTING GRASS AREAS SHALL BE SEEDED & REPAIRED TO ORIGINAL CONDITIONS.
- ALL LAWN AREAS TO HAVE 4" OF TOPSOIL. TOPSOIL TO BE BROWN IN COLOR, FRIABLE AND HAVE PH OF 6.5-7.5. SUBMIT SAMPLE FOR APPROVAL.
- CONTRACTOR TO PROVIDE ONE STRIP OF BERMUDA SOD WHERE SEEDING CONTACTS ANY FLAT WORK OR CONCRETE.
- TAG ALL TREE REMOVALS FOR APPROVAL FROM L.A.
- ALL EXISTING TREES SHALL BE PRUNED TO REMOVE ALL DAMAGE LIMBS, IMPROPER BRANCHING, RAISE CANOPY, SHAPING AND ANY DEAD WOOD. PRUNING TO BE APPROVED BY THE L.A. AND SHALL BE DONE ACCORDING TO STANDARDS OF INDUSTRY (REFERENCE THE NATIONAL ARBORIST ASSOCIATES PRUNING STANDARDS FOR SHADE TREES).
- TAG OR MARK ALL REMOVALS FOR APPROVAL FROM LANDSCAPE ARCHITECT & PROJECT MANAGER.
- REMOVE ALL EXISTING PLANTINGS, TREES & SHRUBS IN THE MAJOR INTERIOR AREA DUE TO THE EXTENT OF THE DEMOLISHING.

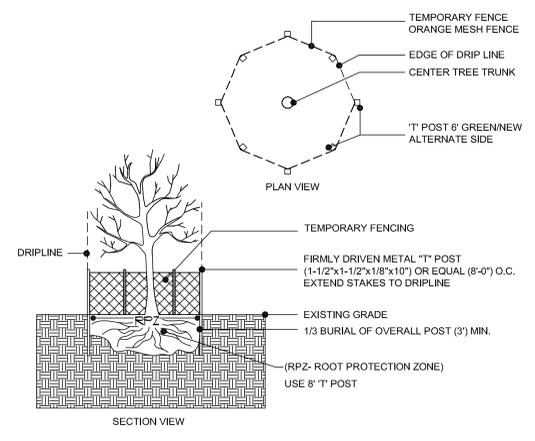
SEEDING NOTES:

- REMOVE ALL ROCKS, DEBRIS OR STONES GREATER THAN 1 1/2".
- LOOSEN SURFACE SOIL TO A DEPTH OF AT LEAST 2".
- LEGALLY DISPOSE WASTE MATERIAL OFF OWNER'S PROPERTY.
- SOW SEED WITH SPREADER OR SEEDING MACHINE. DO NOT BROADCAST OR DROP SEED WHEN WIND VELOCITY IS HIGH. EVENLY DISTRIBUTE SEED BY SOWING EQUAL QUANTITIES IN TWO DIRECTIONS AT RIGHT ANGLES TO EACH OTHER.
- SOW SEED AT THE SPECIFIED RATE. RAKE SEED LIGHTLY INTO TOP 1" OF SOIL. ROLL LIGHTLY, AND WATER WITH FINE SPRAY.
- PROTECT SEEDED AREAS FROM HOT, DRY WEATHER OR DRYING WINDS BY APPLYING COMPOST MULCH, SOIL OR PLANTING SOIL WITHIN 24 HOURS AFTER COMPLETING SEEDING OPERATIONS. ROW IN SEEDED AREAS.

TURF MAINTENANCE

- MAINTAIN AND ESTABLISH TURF BY WATERING, ORGANIC FERTILIZING, WEEDING, MOWING, TRIMMING, REPLANTING, AND PERFORMING OTHER OPERATIONS AS REQUIRED TO ESTABLISH HEALTHY, VIABLE TURF. ROLL, REGRADE, AND REPLANT BARE OR ERODED AREAS AND REMULCH TO PRODUCE A UNIFORMLY SMOOTH TURF. PROVIDE MATERIALS AND INSTALLATION THE SAME AS THOSE USED IN THE ORIGINAL INSTALLATION.
- FILL IN AS NECESSARY SOIL SUBSIDENCE THAT MAY OCCUR BECAUSE OF SETTLING OR OTHER PROCESSES. REPLACE MATERIALS AND TURF DAMAGED OR LOST IN AREAS OF SUBSIDENCE.
- IN AREAS WHERE MULCH HAS BEEN DISTURBED BY WIND OR MAINTENANCE OPERATIONS, ADD NEW MULCH AND ANCHOR AS REQUIRED TO PREVENT DISPLACEMENT.
- APPLY TREATMENTS AS REQUIRED TO KEEP TURF AND SOIL FREE OF PESTS AND PATHOGENS OR DISEASE. USE INTEGRATED PEST MANAGEMENT PRACTICES WHENEVER POSSIBLE TO MINIMIZE THE USE OF PESTICIDES AND REDUCE HAZARD.
- WATERINGS: INSTALL AND MAINTAIN TEMPORARY PIPING, HOSES, AND TURF-WATERING EQUIPMENT TO CONVEY WATER FROM SOURCES AND TO KEEP TURF UNIFORMLY MOIST TO A DEPTH OF 2'-4".
 - SCHEDULE WATERINGS TO PREVENT WILTING, PUDDLING, EROSION, AND DISPLACEMENT OF SEED OR MULCH. LAY OUT WATERING SYSTEM TO AVOID WALKING OVER MUDDY OR NEWLY PLANTED AREAS.
 - WATER TURF WITH FINE SPRAY AT A MINIMUM RATE OF 1" PER WEEK UNLESS RAINFALL PRECIPITATION IS ADEQUATE.

NOTE: GROUPING OF TREE PROTECTION IS ALLOWABLE



STANDARD NOTES FOR TREE PROTECTION

- EXISTING TREE SHOWN ON PLAN TO BE PRESERVED SHALL BE PROTECTED DURING CONSTRUCTION WITH TEMPORARY FENCING.
- PROTECTIVE FENCES SHALL BE ERECTED AS DETAILED.
- PROTECTIVE FENCES SHALL BE INSTALLED PRIOR TO THE START OF ANY SITE PREPARATION WORK (CLEARING, GRUBBING OR GRADING), AND SHALL BE MAINTAINED THROUGHOUT THE FUTURE CONSTRUCTION PROJECT.
- PROTECTIVE FENCES SHALL SURROUND THE TREE, AND WILL BE LOCATED AT THE OUTER MOST LIMIT OF BRANCHES (DRIFLINE), TO PREVENT THE FOLLOWING:
 - SOIL COMPACTION IN THE ROOT ZONE AREA RESULTING FROM VEHICULAR TRAFFIC OR STORAGE OF EQUIPMENT OR MATERIALS.
 - ROOT ZONE DISTURBANCES DUE TO GRADE CHANGES (GREATER THAN 6 INCHES CUT OR FILL), OR TRENCHING.
 - WOUNDS TO EXPOSED ROOTS, TRUNK OR LIMBS BY MECHANICAL EQUIPMENT.
 - OTHER ACTIVITIES DETRIMENTAL TO TREES SUCH AS CHEMICAL STORAGE, CEMENT TRUCK CLEANING, AND FIRES.
- TREES & UNDER STORAGE PLANT MATERIAL APPROVED FOR REMOVAL SHALL BE REMOVED IN A MANNER WHICH DOES NOT IMPACT TREES TO BE PRESERVED. ALL SHRUBBING (UNDER STORAGE) TO BE REMOVED.
- ANY ROOTS EXPOSED BY CONSTRUCTION ACTIVITY SHALL BE PRUNED FLUSH WITH THE SOIL. BACK FILL ROOT AREAS WITH GOOD QUALITY TOP SOIL AS SOON AS POSSIBLE. IF EXPOSED ROOT AREAS ARE NOT BACK FILLED WITH 2 DAYS, COVER THEM WITH ORGANIC MATERIAL IN A MANNER WHICH REDUCES SOIL TEMPERATURE AND MINIMIZES WATER LOSS DUE TO EVAPORATION.
- NO LANDSCAPE TOPSOIL DRESSING GREATER THAN 4 INCHES SHALL BE PERMITTED WITHIN THE DRIFLINE OF TREES. NO SOIL IS PERMITTED ON THE ROOT FLARE OF ANY TREE.
- PRUNING TO PROVIDE CLEARANCE FOR FUTURE STRUCTURES, VEHICULAR TRAFFIC AND EQUIPMENT SHALL TAKE PLACE BEFORE DAMAGE OCCURS (RIPPING OF BRANCHES, ETC.). ALL PRUNING TO BE APPROVED & DIRECTED BY THE LANDSCAPE ARCHITECT.
- ALL FINISHED PRUNING SHALL BE DONE ACCORDING TO RECOGNIZED, APPROVED STANDARDS OF THE INDUSTRY (REFERENCE THE NATIONAL ARBORIST ASSOCIATION PRUNING STANDARDS FOR SHADE TREES).
- ALL TREE WITHIN THE CONSTRUCTION LIMITS THAT HAVE WORK WITHIN THE DRIP LINE SHALL HAVE ROOT STIMULATOR APPLIED.
- EXISTING TREE IN THE CONSTRUCTION AREA MAY REQUIRE GRADING AROUND TRUNK & WITHIN THE DRIP LINE TO MAINTAIN THE EXISTING GRADE AND BE DISHELD/BOVLED FORM OR A RETAINING WALL TO MAINTAIN THE EXISTING GRADE.

LEGEND

- EXISTING GRASS/LAWN TO REMAIN & PROTECT
- NEW NATIVE GRASS SEED MIXTURE
 - 30% BUFFALO (PRIMED)-*Bouteloua dactyloides*
 - 4% CURLY MESQUITE-*Hilaria belangeri*
 - 30% BLUE GRAMA-*Bouteloua gracilis*
 - 26% BRISTLEGRASS-*Setaria leucopila*
 - 10% GREEN SPRANGLETOP-*Leptochloa filiformis*
- EXISTING MEXICAN FAN PALM TO BE REMOVED
- EXISTING TREES TO REMAIN & PROTECT. TREES ARE: LIVE OAK, SYCAMORE, CREPE MYRTLE, & ORNAMENTAL TREES
- EXISTING TREES TO REMOVED & DISPOSED

MEMORIAL HOSPITAL DEMOLITION
 CHRISTUS SPOHN - CORPUS CHRISTI
 CORPUS CHRISTI, TEXAS

| | |
|-----------|------------|
| JOB NO. | 202036 |
| DRN. BY | C.T. |
| CKD. BY | R.G. |
| DATE | 10.01.2021 |
| REVISIONS | |
| mark | date |
| | |
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SHEET NUMBER
L1.0
 of 1 sheets

***** GRAND TOTALS *****

| PAYMENTS | | | | DEDUCTIONS | | | CONTRIBUTIONS | | |
|----------|----------|-------------|------------|------------|-----|------------|---------------|-----|-----------|
| Desc. | Cmnt No. | Hours | Payments | Desc. | No. | Amount | Desc. | No. | Amount |
| VACATION | 022 | 45.54568 | 0.00 | TCDRS | 100 | 4,339.58 | TCDRS | 100 | 8,877.53 |
| VAC | 024 | -695.65014 | 0.00 | FICA | 101 | 10,997.48 | FICA | 101 | 10,997.48 |
| SIC | 033 | 42.16568 | 0.00 | FIT | 103 | 40,848.68 | UNEMP | 105 | 159.65 |
| SIC | 034 | -351.44116 | 0.00 | MEDICARE | 107 | 2,571.98 | MEDICARE | 107 | 2,571.98 |
| REGULAR | 123 | 522.59000 | 9,451.04 | DIR C IN | 902 | 118,480.85 | | | |
| VAC REG | 202 | 828.41000 | 15,544.39 | DIR SAV | 905 | 140.00 | **TOTAL: | | 22,779.09 |
| SIC REG | 203 | 1,609.42000 | 28,010.15 | | | | | | |
| COMP REG | 204 | 2.05000 | 28.91 | **TOTAL: | | 177,378.57 | | | |
| OVERTIME | 205 | 2.40000 | 53.87 | | | | | | |
| LWOP REG | 210 | 385.49000 | 0.00 | | | | | | |
| CPAY | 216 | 36.05000 | 787.58 | | | | | | |
| ARPA P | 627 | | 7,739.28 | | | | | | |
| RET PAY | 628 | | 115,384.68 | | | | | | |
| SAL ADJ | 726 | | 377.09 | | | | | | |
| OT ADJ | 733 | | 1.58 | | | | | | |
| **TOTAL: | | 2,339.31870 | 177,378.57 | | | | | | |

Based on Dept 3091 Health Dept. Total Vacation and Sick Leave Payout
 Pay Cycle period 2/19/2022-03/04/2022 = \$43,554.54

← 893.34 → Employee next
 Dep 3091
\$ 42,661.20

**INTERLOCAL COOPERATION AGREEMENT BETWEEN
NUECES COUNTY HOSPITAL DISTRICT AND NUECES COUNTY
RELATING TO REIMBURSEMENT OF NUECES COUNTY'S
PUBLIC HEALTH-RELATED EXPENSES**

THE STATE OF TEXAS §

COUNTY OF NUECES §

THIS INTERLOCAL COOPERATION AGREEMENT (“Agreement”) is made by and between **NUECES COUNTY HOSPITAL DISTRICT**, (“Hospital District”), acting by and through its duly authorized designee, Administrator/CEO, upon the authority of its governing body, the Nueces County Hospital District Board of Managers and **NUECES COUNTY** (“County”), acting by and through its duly authorized designee, Nueces County Judge upon the authority of its governing body, the Nueces County Commissioners Court (“Commissioners Court”) pursuant to and in accordance with the provisions of Chapter 791, as amended, Texas Government Code. Hospital District and County may sometimes hereafter be referred to collectively as “Parties.”

WITNESSETH

WHEREAS, on July 31, 1984, the County and the City of Corpus Christi (“City”) entered into a Cooperative Agreement To Operate A Public Health District (“Original Agreement”), which created the City of Corpus Christi-Nueces County Public Health District (“Public Health District”). The Public Health District was created for the purpose of providing local public health programs for the citizens of Corpus Christi and residents throughout Nueces County;

WHEREAS, effective March 01, 2022, the County and the City entered into an Amended Cooperative Agreement for City-Operated Corpus Christi-Nueces County Public Health District which supersedes the Original Agreement (“Amended Agreement”). The Amended Agreement reassigned operation of the Public Health District from both parties to sole management by the City over all operations of the Public Health District;

WHEREAS, as a cooperative member of the Public Health District and pursuant to the Amended Agreement, the County is responsible for a portion of the Public Health District’s operating expenses relating to the Public Health District’s provision of public health services to residents of Nueces County;

WHEREAS, Texas Health and Safety Code (“Health Code”) §281.002 authorizes the Hospital District to furnish medical aid and hospital care to indigent and needy persons residing within the Hospital District’s boundaries and as authorized by §281.094 of the Health Code, the Hospital District may fund public health services, with the approval of Commissioner’s Court;

WHEREAS, the County is authorized to provide public health services and has requested related reimbursement funding assistance from the Hospital District for the County’s Public Health District financial obligations and vector control services expenses, and expenses associated with other public health services programs operated by the County;

WHEREAS, the Hospital District desires to support the County by providing reimbursement funds to the County to be used by the County to support the County's (i) provision of public health services provided by the Public Health District (ii) County's vector control services, and (iii) other public health services programs operated by the County ("County Public Health Expenditures").

WHEREAS, the Hospital District recognizes and acknowledges that its funding made available to the County for (i) public health services provided by the Public Health District, (ii) the County's vector control services, and (iii) other public health services programs operated by the County will benefit the residents of Nueces County; and

WHEREAS, Texas Government Code, §791.028 authorizes the Hospital District and County to enter into this Agreement.

NOW, THEREFORE, in consideration of the premises and of the mutual covenants and agreements of the parties hereto, to be by them respectively kept and performed as hereinafter set forth, the Hospital District and the County do hereby agree as follows:

AGREEMENT

SECTION 1. PURPOSE.

For purposes of this Agreement, it is the intent of the Hospital District to support the County by providing funding hereunder for reimbursement the County's Public Health District obligation and vector control services expenses, and other public health programs operated by the County for benefit of Nueces County's residents.

SECTION 2. TERM.

The term of this Agreement shall be for a period of one (1) year commencing on October 01, 2022 and ending on September 30, 2023 ("Term").

SECTION 3. SCOPE.

This Agreement is intended to enable the Hospital District to support the County by providing reimbursement funds to the County to be used by the County to support the (i) County's provision of public health services provided by the Public Health District (ii) County's vector control services, and (iii) other public health services programs operated by the County (collectively "County Public Health Expenditures").

This Agreement does not and shall not be construed to apply to any funding requests related to the City's, County's (e.g., County's Department 1377 or any other County Department applicable or pertaining to the DSRIP Program), or Public Health District's participation in the Delivery System Reform Incentive Payment DSRIP Program ("DSRIP Program") operated by the Texas Health and Human Services Commission's ("Commission") Medicaid 1115 Waiver . Under this Agreement, the Hospital District does not and will not provide funding to the City, County, or Public Health District for any items, charges, expenses, or intergovernmental transfers related to or for benefit of the DSRIP Program.

This Agreement does not and shall not be construed to apply to any funding requests related to the City's, County's (e.g., any other County Department applicable or pertaining to the PHP-CCP), or Public Health District's participation in the Public Health Provider-Charity Care Program ("PHP-CCP") operated by the Commission as part of the Medicaid 1115 Waiver. Under this Agreement, the Hospital District does not and will not provide funding to the City, County, or Public Health District for any items, charges, expenses, or intergovernmental transfers related to or for benefit of the PHP-CCP.

SECTION 4. OBLIGATIONS OF HOSPITAL DISTRICT AND COUNTY.

For and in consideration of the recitals, covenants and agreements of the Hospital District and County set forth herein, the Parties agree as follows:

A. HOSPITAL DISTRICT:

1. Under the terms of this Agreement, the Hospital District's maximum funding to the County during the Term shall not exceed Two Million Dollars (\$2,000,000.00) ("Maximum Funding Amount"). In the event that Hospital District's funding to the County under this Agreement reaches the Maximum Funding Amount during the Term, the Hospital District's funding obligations hereunder shall end and the Hospital District shall not provide any additional funding to County during the Term for purposes of this Agreement.
2. Upon receipt of copies of proof of payment and expense documentation for the County Public Health Expenditures, the Hospital District will review all said items and if appropriate, approve said items for payment and remit payment to County within 60 days.
3. Hospital District reserves the right to disapprove payment of any proof of payment and expense documentation submitted by the County for the County Public Health Expenditures, which Hospital District in its sole discretion, may deem to be questionable, unjustified, excessive, inappropriate, improper, misapplied, misclassified, or which in the Hospital District's sole judgment do not qualify as valid expenses.
4. Hospital District will provide prompt notice to the County within 15 days of any proof of payment and expense documentation items submitted by the County for the County Public Health Expenditures that are disapproved by the District.

B. COUNTY:

1. The County will strive to provide (i) public health services through its cooperative membership in the Public Health District, (ii) vector control services, or (iii) operate other public health services programs.
2. When requesting disbursement of Hospital District funding the County shall submit to the Hospital District copies of canceled checks and associated detailed trial balance supporting payment by the County to the City for the County's portion of the Public Health District's operating expenses.

3. When requesting disbursement of Hospital District funding the County shall submit to the Hospital District an invoice and associated detailed trial balance or an invoice and copies of canceled checks for expenses associated with County vector control services .
4. When requesting disbursement of Hospital District funding the County shall submit to the Hospital District an invoice and associated detailed trial balance or an invoice and copies of canceled checks for other public health services programs operated by the County.
5. County shall exercise reasonable care before submitting proof of payment and expense documentation relating to Sections 4b – 4d hereof to the Hospital District to ensure that items submitted have been properly reviewed, screened, classified, and authorized and that all amounts reflected are for appropriate and proper public health services, vector control services, or other public health services programs operated by the County.
6. County shall submit proof of payment and expense documentation for each preceding quarter relating to Sections 4b - 4d hereof to the Hospital District no later than 45 days after the end of each of the Hospital District's fiscal quarters. Proof of payment and expense documents submitted to the Hospital District later than 45 days after the end of any Hospital District fiscal quarter may be considered untimely and may not be processed for payment at the sole discretion of the Hospital District.
7. County shall respond to and provide the Hospital District with all reasonable information within 15 days, which the Hospital District may request regarding the underlying expense details supporting the proof of payment and expense documentation for the County Public Health Expenditures for which the County requested disbursement of Hospital District funding.
8. Nothing in this Agreement shall be construed by the County to require or cause the Hospital District to fund any amount more than the Maximum Funding Amount for the County Public Health Expenditures during the Term of this Agreement.

SECTION 5. HOSPITAL DISTRICT AND COUNTY.

For purposes of this Agreement:

- A. the term “public health services” shall have the meaning collectively ascribed to the terms (i) “Essential public health services” defined at §121.002(1), Health Code and (ii) “public health services” defined at §121.006(d), Health Code.
- B. the term “vector control” shall mean any method to limit or eradicate the mammals, birds, insects, or arthropods which transmit disease pathogens.

SECTION 6. MISCELLANEOUS.

- A. Payments. Any payment made by either party hereto for any of the services provided pursuant to this Agreement shall be made from current revenues available to the Hospital District and County as required by Chapter 791, Texas Government Code, or any other manner permitted by law, as permitted by and in accordance with §791.028, Texas Government Code, as amended.
- B. Severability. In the event any term, covenant or condition herein contained shall be held to be invalid by any court of competent jurisdiction, such invalidity shall not affect any other term, covenant, or condition herein contained, provided that such invalidity does not materially prejudice either Hospital District or County in their respective rights and obligations contained in the valid terms, covenants, or conditions hereof.
- C. Entire Agreement. This Agreement will constitute the sole agreement of the parties hereto and supersedes any prior understandings or any written or oral agreements between the parties with respect to the subject matter herein. This Agreement may not be modified or amended except by written instrument signed by both Parties hereto.
- D. Written Amendment. This Agreement may be modified or amended only by written instrument duly executed by both parties. The authorized representatives of the parties may execute minor amendments without obtaining prior approval from their respective governing bodies if the minor amendment does not change the term, the maximum amount to be paid herein, nor the responsibilities agreed to by either party under this original Agreement.
- E. Notices. All notices required or permitted must be in writing and given by hand delivery, registered or certified mail, postage prepaid; or overnight delivery. Notice shall be delivered or mailed to the Parties at the following addresses or at such other places as either party shall designate in writing:

HOSPITAL DISTRICT

Nueces County Hospital District
Attn: Administrator/CEO
555 N. Carancahua St., Suite 950
Corpus Christi, Texas 78401

COUNTY

Nueces County
Attn: Nueces County Judge
901 Leopard St., Room 303
Corpus Christi, Texas 78401

- F. Non-Waiver. Failure of any party hereto to insist on the strict performance of any of the agreements herein or to exercise any rights or remedies accruing hereunder upon default or failure of performance shall not be considered a waiver of the right to insist on, and to enforce by any appropriate remedy, strict compliance with any other obligation hereunder or to exercise any right or remedy occurring as a result of any future default or failure of performance.
- G. Successors. This Agreement shall bind and benefit the parties and their legal successors. This Agreement does not create any personal liability on the part of any board member, officer, agent, or employee of the Hospital District; or County Judge, or any County Commissioner, officer or agent or employee of the County.

Jail Diversion Programs Recommendation Report

The following report by the Department of Mental Health Programs (MHP) is a **summary of recommendations** to the Nueces County Commissioners Court for purposes of **facilitating informed decisions on financial and resource support for jail diversion programs**. The primary goals of the recommendations are to 1.) improve access to behavioral health services to Nueces County residents; 2.) impede individuals with mental illness and substance use disorder from entering into the justice system due to their ailment; 3.) reduce the number of individuals in the County jail that would benefit more from behavioral health treatment than incarceration; 4.) further address recommendations highlighted by the behavioral health needs assessment completed by the Meadows Mental Health Policy Institute (**Meadows Institute**). For clarity of the recommendations, it is important to initially define the terms integrated care, sequential intercept model (SIM), jail diversion, jail diversion center (JDC), and behavioral health super-utilizer.

Integrated Care is a general term for any attempt to fully or partially blend behavioral health services with general and/or specialty medical services. This blending can occur within inpatient or ambulatory clinical settings.

The Sequential Intercept Model (SIM) (see Fig. 1a) details how individuals with mental and substance use disorders come into contact with and move through the criminal justice system. The SIM helps communities identify resources and gaps in services at each intercept and develop local strategic action plans.

Jail Diversion is defined as those programs that divert individuals with serious mental illness and/or substance use disorders away from jail and provide links to community-based treatment and support services. The individual thus avoids arrest or spends a significantly reduced time period in jail and/or lockups on the current charge or on violations of probation resulting from previous charges; simply stated pre- and post- arrest jail diversion. **Figure 1a** is an example of jail diversion programs across the sequential intercept model.

A **Jail Diversion (Restoration) Center (JDC)** are specialized law enforcement friendly drop off locations that provide all encompassing treatment for individuals in crisis that would otherwise end up in jails or emergency rooms. A primary benefit of a JDC is the enhancement of law enforcement utilization of jail diversion programs by allowing for streamlined transition of those in crisis to be taken to a comprehensive behavioral health service site while reducing officer time away from the patrol.

Behavioral Health Super-Utilizer is an individual whose complex physical, behavioral, and social needs are not well met through the current health care system. As a result, these individuals often bounce from emergency department to emergency department, from inpatient admission to readmission or institutionalization—all costly, chaotic, and ineffective ways to provide care and improve patient outcomes. Further several of these individuals frequently cycle through the justice system and end up in jail (see Fig.1b).

The Department of Mental Health Programs recommends the 1.) creating and supporting a Behavioral Health Consortium; 2.) developing a county jail diversion and behavioral health Quality Assessment Program; 3.) funding collaborating Behavioral Health Service Providers to enhance jail diversion in the County by adding a crisis care center, sobering center, and expanded transitional recovery housing. These recommendations were derived through evaluation of the completed Meadows Institute report, discussions with local Behavioral Health stakeholders, consultations with the Bexar County and Fort Bend County Behavioral Health Programs directors, and assessments of the Bexar County and Harris County jail diversion centers and the Travis County and Harris County sobering centers.

1. Create and support a Behavioral Health Consortium

Who: The Behavioral Health Consortium will initially consist of law enforcement and behavioral health service providers that currently receive funding from the NC Commissioners Court or Hospital District (see Fig. 2a.1).

Purpose: To allow for increased collaboration amongst behavioral health service provider stakeholders and to improve County decision making on addressing behavioral health needs for its residents. Further, the collaboration would allow incorporation of integrated care in jail diversion programs as well as determining effective use of community and program (state and federal) funds for jail diversion and behavioral health services.

How: Obtain a signed letter of intent to collaborate in enhancing jail diversion programs and behavioral health services. Have the consortium detail plans on leveraging resources amongst organizations to support and sustain expanded jail diversion programs. Recognize the consortium as an official group and support their efforts through utilization of County resources, such as, grants and mental health programs departments.

2. Develop a county jail diversion and behavioral health Quality Assessment Program (see Fig. 2a.2)

Who: The Quality Assessment Program will consist of having an (a.) oversite committee and (b.) data collection and analysis team. The oversite committee will consist of a representative from 1.) County Mental Health Programs; 2.) County Commissioners Court; 3.) NAMI; 4.) City-County Health District; 5.) County Judicial; 6.) Law enforcement; 7.) Behavioral Health Medical; 8.) External. **Table 2** list the suggested representatives for the oversite committee. The oversite committee will evaluate jail diversion programs to ensure integrity of collaborative operations and sustainability practices. The data collection and analysis team will be a collaborative between MHP and Texas A&M University Corpus Christi. The team lead by the MHP director along with a Senior Judicial Program

Jail Diversion Programs Recommendation Report

Analyst will collect data from County jail diversion programs across the SIM to determine the impact on behavioral health in-patient and out-patient services, law enforcement, first responders, emergency rooms, the County Court Judicial system, the City detention center, and the County jail.

Purpose: To make data driven decisions on jail diversion and behavioral health care in Nueces County. Further, this will improve the judicial services integration with behavioral health programs as well as increase coordination of programs and grants in each area of service. Additionally, it will allow for evaluation of actual behavioral health expenditures within the County.

How: The Commissioners Court approves the creation of the Quality Assessment Program as well as the selection of the members of the oversight committee. The MHP director will discuss with the NC Hospital District on expanding department services by funding a Senior Judicial Program Analyst and developing a work site to host a quality care assessment internship program. The MHP director will work with TAMUCC College of Nursing to develop MOUs that will allow for development of a quality care assessment internship program that will include doctoral, masters, and undergraduate students in nursing and health administration programs. The Commissioners Court approves the Senior Judicial Program Analyst position to be added to the MHP department based on additional funding granted to the department by the NC Hospital District.

3. Build jail diversion capacity in Nueces County by funding infrastructure and operations for a crisis care center (a), sobering center (b), and expanded transitional recovery housing (c). (see Fig. 2a.3 & Fig2b)

Who: The entities that have been suggested to form the Behavioral Health Consortium and Nueces County MHP & Judicial Services

Purpose: To expand and optimize jail diversion in Nueces County. Further, it would improve behavioral health services in the County and increase community collaboratives. Additionally, it would reduce the number of behavioral health super-utilizers and individuals entering into the County Jail (**see Fig 1b**). Later, it would support the Mental Health Public Defenders Office by providing outpatient treatment centers to divert clients.

Expanded Purpose Discussion: Currently, jail diversion centers are being sought after by several Texas counties. Especially since two of the national models for jail diversion centers are found in Texas, the Bexar County Roberto J. Jimenez M.D. Restoration Center and the Harris County Judge Ed Emmett Mental Health Diversion Center. MHP representatives have visited both centers and evaluated program practices. The Bexar County Roberto J. Jimenez M.D. Restoration Center is a model jail diversion center encompassing several treatment best practices at one site as well as meeting law enforcement needs to be able to drop off a person in crisis and return to the field in less than 10 minutes. The center is operated 24/7 and consists of the following: 1.) Crisis Care Center; 2.) Crisis Observation Unit; 3.) Sobering Center; 4.) Injured Detainee & Minor Medical Clinic; 5.) Residential Detoxification Program; 6.) Outpatient Substance Abuse Treatment; 7.) Drug Court Outpatient Program; 8.) Mommies Specialized Female Outpatient Substance Abuse Program; 9.) Opioid Addiction Treatment Services (OATS); 10.) Co-Occurring Psychiatric and Substance Abuse Disorders Program; 11.) Individual and Group Therapy; 12.) Case Management; 13.) Medication Management; 14.) Mobile Crisis Outreach Team (MCOT) 15.) Outpatient Crisis Transitional Services; 16.) Integrated Wellness Clinic; 17.) Primary Care Clinic; 18. Integrated Treatment Program; 19. Probation Program; 20.) HIV Prevention Program and (1.) offsite Recovery (Respite) Center. The department of MHP is currently **NOT** recommending the development of New Building that contains all of the programs listed under the Bexar County Restoration Center. We **RECOMMEND** collaborating with Behavioral Health Service Provider Stakeholders to refurbish existing resources and integrate current programs to build jail diversion capacity in Nueces County. By adding the suggested programs and encouraging the collaboration through the Consortium, Nueces County would significantly move forward to having the majority of the services provided by the Bexar County Restoration Center without expending the cost of a new facility nor trying to determine how to sustain the programming in County facility. The County would provide funding to established behavioral health service providers to remodel existing facilities (**see Fig. 2b**) that would house the proposed jail diversion programs. These same service providers previously proposed in this document as the Consortium will need some operational startup funding; however, they will be required to work together to leverage their current programming and funding to circumvent cost and sustain the newly developed programs. **Table 1** is a breakdown of the cost of infrastructure (existing facility remodeling), 1 year of operations (without leveraging funding sources) and suggested County funding sources to implement the project. The department of MHP strongest recommendation for the Commissioners Court if they choose to provide funding for this project is to insist that potential Consortium partners sign binding MOUs that state interagency collaboration, sustainability planning, resource/funding leveraging, and agree to the suggested program leads for the various jail diversion components that would be created with the addition of the **crisis care center (a), sobering center (b), and expanded transitional recovery housing (c)** (**see Table 3**).

How: Commissioners Court approves the suggested infrastructure and operational funding to create expanded jail diversion programs (**see Fig. 2b**). Funding should be managed by the Department of MHP and be dependent on Consortium members signing MOUs to work together to develop the programs and create sustainability plans. Allow the Consortium members three months to come up with a clear plan on how they will work together on the implementation and sustainability of the programs for the next five years.

Jail Diversion Programs Recommendation Report

Figure 1a. Overview of pre- and post-comprehensive jail diversion programs in Bexar County

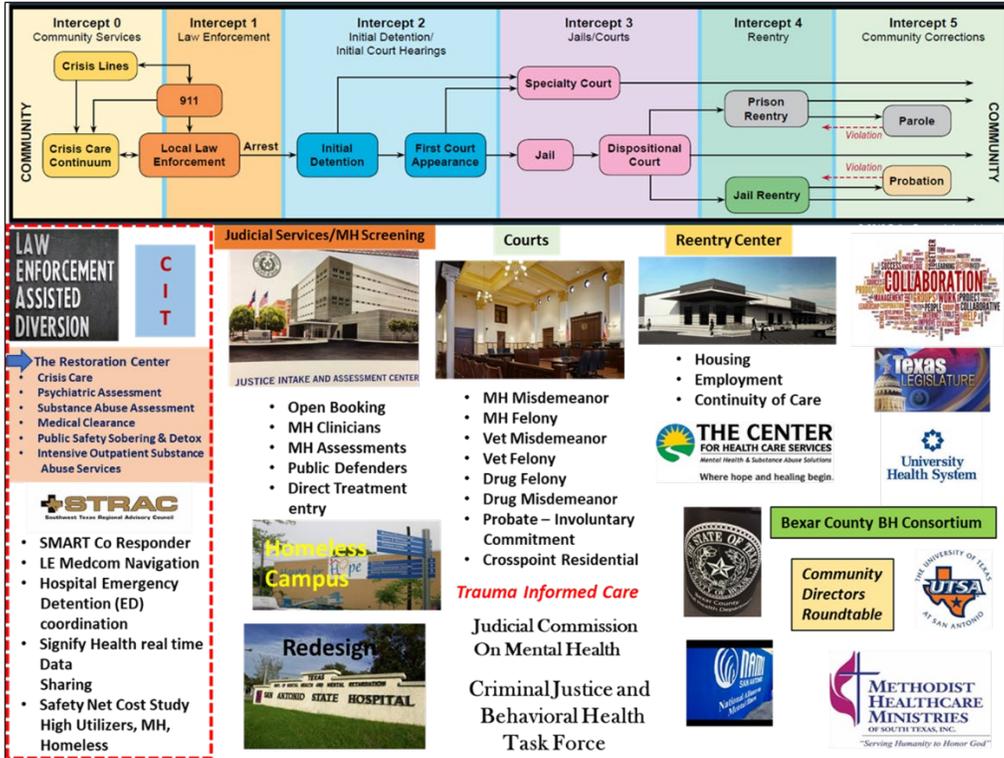


Figure 1b. Comprehensive jail diversion programs limit frequency of behavioral health super-utilizers ending up at inappropriate treatment locations



Jail Diversion Programs Recommendation Report

Figure 2a. Jail diversion program capacity building in Nueces County

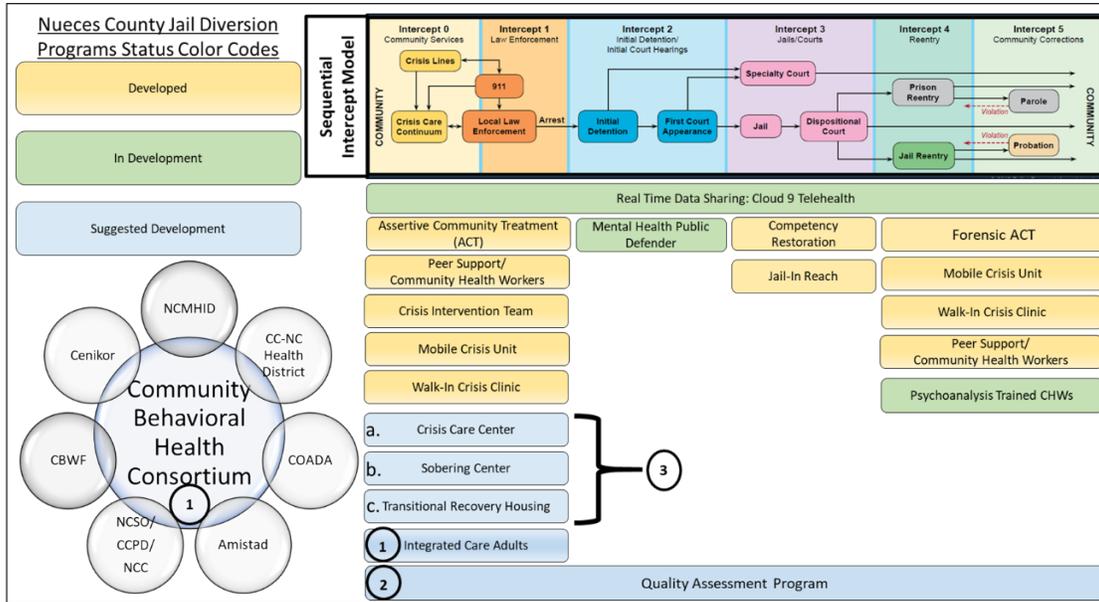


Figure 2b. Sites that would be refurbished for expanded jail diversion programs by proposed funding considerations.



Jail Diversion Programs Recommendation Report

Table 1. Estimated funding costs for jail diversion programs lacking in Nueces County

| Jail Diversion Programs Capacity Building | | | | |
|------------------------------------------------------------------------------------------------|------------------------|---------------------------|----------------------------|---------------------------|
| Proposed Projects | Infrastructure Cost(#) | Suggested Funding Sources | Year 1 Operational Cost(#) | Suggested Funding Sources |
| Crisis Care Center (a) | 3.5 | ARPA | 1.9 | NCHD |
| Sobering Center (b) | 0.3 | ARPA | 1.4 | SRF1377 |
| Transitional Recovery Housing (c) | 3.5* | SRF1377/ARPA | 1.5 | SRF1377/NCHD |
| Infrastructure = Build out or expansion of existing structure and facility equipment/materials | | | | |
| Cost = estimated costs determined by behavioral health stakeholders | | | | |
| # = million | | | | |
| ARPA = American Rescue Plan Act | | | | |
| SRF1377 = Special Revenue Funds from reimbursement of Texas' 1115 Medicaid waiver | | | | |
| NCHD = Nueces County Hospital District | | | | |
| * = Cenikor will provide matching funds towards this amount to complete project | | | | |

Table 2. Suggested oversight committee members for Jail Diversion Quality Assessment Program

| Quality Assessment Program Oversight Committee | |
|-------------------------------------------------------|----------------------------------------------------|
| Representative | Organization |
| Aaron Diaz | Nueces County Department of Mental Health Programs |
| Commissioner Robert Hernandez | Nueces County Commissioners Court |
| Angela Horner | NAMI President |
| Kevin Hensley | City-County Public Health District |
| Judge Inna Klein | Nueces County District Court |
| Assistant Chief Schauer | Corpus Christi Police Department |
| Dr. John Lusins | Psychiatrist in Nueces County |
| Gilbert Gonzales | Bexar County Department of Behavioral Health |

Table 3. Collaborative organizational operational leads for proposed expanded jail diversion programs

| Expanded Jail Diversion Programs Operational Leads | |
|-------------------------------------------------------------|-------------------------------------------------------------------|
| Program(s) | Organization |
| Crisis Care Center (a) | Nueces Center on Mental Health & Intellectual Disabilities (MHID) |
| Sobering Center (b) | Coastal Bend Wellness Foundation (CBWF) |
| Transitional Recovery Housing (c) | Cenikor |
| Integrated Care and Minor Medical Access | Amistad |
| Warm handoffs & Outpatient Substance Use Disorder Treatment | The Council on Alcohol and Drug Abuse (the Council) |
| Prevention | City-County Public Health District |

Jail Diversion Programs Recommendation Report

Appendix A: Crisis Care Center

The suggested operational lead is MHID. MHID owns the building where the crisis care center and minor medical clinic is proposed to be developed. MHID is designated as, and contracted with Health and Human Services Commission as the “Local Mental Health Authority” (LMHA), for Nueces County. Pursuant to the provisions of “Interlocal Cooperation contracts,” Chapter 791 of the Texas Government Code and Chapters 533 and 534 of the Texas Health and Safety Code. They are one of 39 LMHA’s in the State of Texas who provide a wide array of mental health and intellectual disability services to all 254 counties in Texas. MHID is a unit of local government and are governed by a 9 member board of trustees. Further, they are one of only 6 LMHA’s accredited by the Joint Commission for behavioral health. They have variety of fund sources including state and federal grants, the core of their services are funded by the Health and Human Services Commission.

MHID highlights that center will be a single point of drop off for law enforcement that will reduce unnecessary arrests and hospitalizations. There will be 24/7 hour monitoring, support and engagement with access to psychiatric medication management and treatment as part of engagement in longer term outpatient services and supports as well as recovery oriented programming including access to peer support. The center should be operated in collaboration with law enforcement and the District Attorney’s Office with the support of the Jail and courts. Further it should integrate and interface with other community resources and supports to create a truly community based entry point for services

Programming would include, but is not limited to the following:

- Provide up to 32 beds (16 males, 16 females).
- Integrated treatment, recovery planning to assist in an individual’s stabilization and engagement in care.
- Medication prescribing, management, and access.
- On site primary care.
- On site psychiatric care.
- Psychosocial rehabilitation services.
- Substance use disorder interventions.
- Respite services up to 30 days to allow for individuals to establish care and begin their recovery.
- Peer support.
- Extensive discharge planning to coordinate access to housing, social services and treatment post discharge, utilizing case managers and peer support.
- Walk in crisis care.
- Employment focused psychosocial rehabilitation.
- Permanent Supported Housing assistance.
- Care coordination and patient navigation.

Projected Operational Cost on Next Page

NCMHID Diversion Center Operational Budget Estimate:

Legal Name of Respondent:

NCMHID Diversion Center Operational Budget - Year 1

| Budget Categories | A | B | C | D | E | F | G |
|----------------------------------------|--------------|----------------------|----------------------|-------------------------------------------------|------------------------------------|----------------------------------------------|---------------|
| | Total Budget | DSHS Requested Funds | Direct Federal Funds | Other State Agency Funds Check if Cash Match | Other Funds Check if Cash Match | Local Funding Sources Check if Cash Match | In-Kind Match |
| A. Personnel | \$1,095,612 | | | | \$425,424 | \$670,188 | \$0 |
| B. Fringe Benefits | \$320,839 | | | | \$78,993 | \$241,847 | \$0 |
| C. Travel | \$1,000 | | | | \$0 | \$1,000 | \$0 |
| D. Equipment | \$122,300 | | | | \$0 | \$122,300 | \$0 |
| E. Supplies | \$54,000 | | | | \$23,435 | \$30,565 | \$0 |
| F. Contractual | \$131,400 | | | | \$1,375 | \$130,025 | \$0 |
| G. Other | \$31,938 | | | | \$78,211 | -\$46,273 | \$0 |
| H. Total Direct Costs | \$1,757,089 | | \$0 | \$0 | \$607,438 | \$1,149,651 | \$0 |
| I. Indirect Costs | \$114,965 | | | | | | \$0 |
| J. Total (Sum of H and I) | \$1,872,054 | | \$0 | \$0 | \$607,438 | \$1,149,651 | \$0 |
| K. Program Income - Projected Earnings | \$ | | \$0 | \$0 | \$0 | \$0 | \$0 |

| Budget Category | Distribution Total | Budget Total | Budget Category | Distribution Total | Budget Total |
|-----------------|--------------------|--------------|-----------------|--------------------|--------------|
| Personnel | \$1,095,612 | \$1,095,612 | Fringe Benefits | \$320,839 | \$320,839 |
| Travel | \$1,000 | \$1,000 | Equipment | \$122,300 | \$122,300 |
| Supplies | \$54,000 | \$54,000 | Contractual | \$131,400 | \$131,400 |
| Other | \$31,938 | \$31,938 | Indirect Costs | \$0 | \$114,965 |

| | | | | |
|-------------------|----------------------------|--------------------|---------------------|--------------------|
| TOTAL FOR: | Distribution Totals | \$1,149,651 | Budget Total | \$1,872,054 |
|-------------------|----------------------------|--------------------|---------------------|--------------------|

Jail Diversion Programs Recommendation Report

Appendix B: Sobering Center

The suggested operational lead is Coastal Bend Wellness Foundation (CBWF). NCMHID owns the building that the sobering center is being suggested to be developed. **NCMHID has stated in documentation provided to MHP that this facility could be operated and staffed by outside collaborative partners under lease from NCMHID.**

The Opioid Task Force had a substantial role in the suggestion of a Sobering Center. The current chair of the Opioid Task Force is Alison Johnson. She is also the Director of Community Health Outreach for the CBWF.

The sobering center will serve as a point of contact for individuals at their most vulnerable end in their fight with substance use disorder and mental illness. The center purpose and design was envisioned by many members of the Opioid Task Force that included law enforcement, health care providers, policy makers, and citizens concerned with declining behavioral health in the community. The strength around the center is collaboration. The center will serve as a HUB to provide warmlines to services for those impacted from substance use disorders. Further, it will give individuals a chance to get immediate help before having them fall deeper into troubles with the legal system. A suggested name for the sobering center is “A New Day for Brandi Sobering Center”

Who is Brandi?

Brandi is everyone who has fought with getting past chemical dependency. Brandi was a local resident a wife and a daughter whose life was cut short as she was working to be free from alcohol and drugs. Her husband was Brannon Prevertt who was the law enforcement lead for the Opioid Task Force. Many of his initiatives on the task force have now moved forward and currently impacting behavioral health in the community.

General Operations:

The center will have a sobering unit and a stimulation unit as well as onsite medical assessment. The center will allow a team of Mental Health Professionals, Chemical Dependency Counselors, and EMTs to screen and refer to treatment centers at the earliest time in their addiction or medical need and refer to the proper facility while limiting individuals passing through the City Detention Center (CDC) and returning to the streets without offering treatment.

Programming would include, but is not limited to the following:

- Consist of sobering unit and a stimulant reduction unit
- 10 available beds with mobile partitioned to separate males and females
- Clients 18 years or older are brought to the Sobering Center via law enforcement, EMS, or by one of the Sobering Center’s other referral partners.
- Short term intervention for substance use
- Safe environment with basic EMT level screening and monitoring while client is sobering up or coming down from a stimulant.
- Peer Recovery Support Specialists offering individual recovery guidance.
- Chemical dependency programming, counseling, and supports.
- Licensed Chemical Dependency Counselors for clients interested in substance use treatment services.
- Community resource specialist works with clients to obtain housing assessments, medical and mental health service referrals.
- Medication Assisted Therapies.
- Medication management and monitoring.
- Integrated Physical Healthcare.
- Integrated Psychiatric Care.
- Integration of community partner services.
- Care Coordination and patient navigation.
- Showers and change of clothes.

Projected Operational Cost on Next Page

**NUECES COUNTY SOBRIETY CENTER INITIATIVE
COASTAL BEND WELLNESS FOUNDATION
YEARLY OPERATING BUDGET**

| Title | Staff Name | Annual Salary | No of Mths | % Time | Budget |
|--------------------------------------------------------------|-------------------|-----------------------------------|-------------------|---------------|------------------|
| Project Director | | 75,000 | 12 | 100.00% | 75,000 |
| Coordinator | | 62,000 | 12 | 100.00% | 62,000 |
| EMT | | 42,000 | 12 | 100.00% | 42,000 |
| EMT | | 42,000 | 12 | 100.00% | 42,000 |
| EMT | | 42,000 | 12 | 100.00% | 42,000 |
| Case Manager (LCDC) | | 42,000 | 12 | 100.00% | 42,000 |
| Case Manager (LCDC) | | 42,000 | 12 | 100.00% | 42,000 |
| Case Manager (LCDC) | | 42,000 | 12 | 100.00% | 42,000 |
| Direct Care | | 36,000 | 12 | 100.00% | 36,000 |
| Direct Care | | 36,000 | 12 | 100.00% | 36,000 |
| Direct Care | | 36,000 | 12 | 100.00% | 36,000 |
| TOTAL SALARIES | | | | | 497,000 |
| Employment Taxes | | | 7.65% | | 38,021 |
| Retirement Program | | | 3.00% | | 14,910 |
| Unemployment Taxes | | | 1.41% | | 7,008 |
| Workers Compensation Insurance | | | 0.50% | | 2,485 |
| Group Health Insurance | | 500 per month x 1 staff | | | 66,000 |
| TOTAL FRINGE BENEFITS | | | | | 128,423 |
| <u>***Notice collaborative partners in bold text.</u> | | | | | |
| PATIENT CONTRACTED SERVICES | | | | | |
| Medical Detox (CENIKOR) | | \$300/day x 7 days x 24 patients | | | 50,400 |
| Residential (CENIKOR) | | \$125/day x 28 days x 48 patients | | | 168,000 |
| Supportive Residential (CENIKOR) | | \$50/day x 30 days x 48 patients | | | 72,000 |
| Medical Assitance Treatment (STSARS) | | \$50/week x 40 patients | | | 104,000 |
| Suboxone (Amistad, CBWF, STSARS) | | \$85/week x 20 patients | | | 88,400 |
| Medication Support (mpsychiatry) | | \$20 script/month x 75 patients | | | 16,800 |
| TOTAL SUPPLIES | | | | | 499,600 |
| OTHER DIRECT EXPENSES | | | | | |
| Pateint Food | | | | | 21,900 |
| Cleaning Supplies | | | | | 600 |
| Office Supplies | | | | | 600 |
| Insurance - All | | | | | 9,000 |
| WiFi | | | | | 1,800 |
| Repairs & Maintenance | | | | | 150 |
| Security | | | | | 3,000 |
| Telephone | | | | | 1,800 |
| Training/Staff Development | | | | | 5,500 |
| OTHER DIRECT COSTS | | | | | 44,350 |
| TOTAL DIRECT COSTS | | | | | 1,169,373 |
| TOTAL INDIRECT COSTS | | | | | 129,220 |
| TOTAL PROGRAM BUDGET | | | | | 1,298,593 |

Jail Diversion Programs Recommendation Report

Appendix C: Expanded Transitional Recovery Housing

The suggested program lead is Cenikor. Cenikor owns the building that the expanded transitional recovery housing is being suggested to be developed. Cenikor has been serving residents since 1967. Their spectrum of care in Corpus Christi consists of detoxification, short-term residential, and recovery housing. In 2018, Cenikor acquired a local non-profit that had been serving the Corpus community for over 50 years. Last year, Cenikor served 2055 clients in Corpus Christi. The majority of the residents came in for detoxification and were state payor. Those clients that came through their facility in Corpus Christi, came all over Texas. Many came into their program because of probation or by the justice system and out of those clients, almost 56% successfully completed the program.

Programming would include, but is not limited to the following:

Increased recovery housing total available beds (including a veteran's specific wing)

Updated intensive residential unit and detoxification unit

Current ADA and Fire Code amendments for housing