

**NUECES COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS
Board of Managers - Regular Meeting
Tuesday, March 26, 2024 at 12:00 PM**

AGENDA

1. WELCOME

2. ROLL CALL OF BOARD OF MANAGERS

- ___ John E. Valls, MBA, Chairman
- ___ Vishnu V. Reddy, M.D., Vice Chairman
- ___ Sylvia Tryon Oliver
- ___ Belinda Flores, R.N.
- ___ Judge Mariana Garza
- ___ Efrain Guerrero, Jr.
- ___ Arthur Granado

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.

7

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. ANNOUNCEMENT ON DISCLOSURE OF CONFLICTS OF INTEREST. Any Conflicts of Interest or Appearance of a Conflict of Interest with items on this agenda shall be declared at this time. Members with conflicts will refrain from voting and are asked to refrain from discussion on such items. Conflicts discovered later in the meeting shall be disclosed at that time.

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 (6) minutes.

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 February 27, 2024. 17

- B. Receive summary payment information on Nueces County health care disbursements for Fiscal Year 2024 year-to-date: 27
 - 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;
 - 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.

- C. 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 February 29, 28

2024.

D. 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.	29
E. 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 month-ended February 29, 2024.	30
F. 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.	33
G. 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):	34
1. <u>Directed Payment Programs</u> - 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);	
d. Uniform Hospital Rate Increase Program (UHRIP); and	
2. <u>Supplemental Payment Programs</u> - 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. <u>Phase-Out Programs</u> :	
a. Delivery System Reform Incentive Payment (DSRIP) pool.	
H. Receive reports relating to Nueces Aid Program enrollment for the month-ended February 29, 2024:	
1. Total Persons and Households Enrolled;	35
2. Enrollment Summary;	36
3. Denials;	

4. Application Processing Summary; and	39
5. Enrollment by Zip Code.	43
I. Receive information relating to U.S. Department of Health and Human Services (HHS) Poverty Guidelines:	
1. Annual update of the HHS Poverty Guidelines from Federal Register, Vol. 89, No. 11, January 17, 2024, pp. 2961-2963; and	46
2. Prior HHS Poverty Guidelines and Federal Register References, 1982 - 2024. (INFORMATION)	
J. Receive notice of annual increase adjustments of Nueces Aid Program's Eligibility Guidelines; adjustments effective March 1, 2024 for:	49
1. Household Resources as required by Program's Handbook Policy No. NA002, Attachment 2, Sections I-B, I-C-1, I-C-23, and I-F; and	
2. Household Income as required by Program's Handbook Policy No. NA002, Attachment 4, Section I-F-3. (INFORMATION)	60
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:	
1. <u>Financial Statements:</u>	
a. Receive and approve unaudited financial statements for the month and fiscal year-to-date period ended February 29, 2024. (ACTION)	61
8. ADMINISTRATOR'S BRIEFING:	
A. Receive update on appointment to CHRISTUS Spohn Health System Corporation's Board of Directors for three-year term commencing January 1, 2024 and ending December 31, 2026. (INFORMATION)	68
B. Receive information on rebasing of Hospital District's Local Provider Participation Fund (LPPF) for Fiscal Year 2024; paying hospital's FY 2024 amounts owed rebased using most recently reported net patient revenue data from the 2022 DSHS/AHA/THA Annual Survey of Hospitals pursuant to Rule 9(d) of the District's LPPF Rules; LPPF authorized by Texas Health and Safety Code, Chapter 298C, as amended. (INFORMATION)	70
C. Receive update on recovery of management costs incurred in the administration of Hospital District's Project FEMA-4485-DR-TX under the FEMA Public Assistance Program, Category Z; Category Z management costs refer to the administrative costs incurred in the preparation of a FEMA	71

application for all projects submitted under one disaster. **(INFORMATION)**

D. Receive information on Texas Comptroller of Public Accounts' final rule 34 TAC 16.222 relating to Texas Opioid Abatement Fund Council's distribution of settlement funds and hospital districts' receipt of those funds; rule implements part of Senate Bill (SB) 1827, 87th Legislature, Regular Session, requiring a portion of money received from statewide settlement agreements to be distributed to hospital districts. **(INFORMATION)** 73

E. Receive update on Cimbar Resources Inc. request for Letter of Support/Non-Objection relating to its intent to establish a mineral processing-related Foreign Trade Zone at 322 Manning Road, Corpus Christi, Texas, subject to a Payment In Lieu of Taxes Agreement between Cimbar and the Hospital District. **(INFORMATION)** 76

F. Next scheduled Board of Managers regular meeting (meeting date, time, and location are subject to change):

1. Board of Managers: Tuesday, April 23, 2024, 12 Noon in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-A, Corpus Christi, Texas 78401. **(INFORMATION)**

9. CLOSED MEETING - Public Notice is hereby given that the Board of Managers may 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. *To the extent there has been a past practice of distinguishing items for public deliberation and those for executive session, the public is advised that the Board is departing from that practice and reserves the right to discuss any listed agenda items in a closed meeting when authorized by law to do so.* When the Board goes 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. The Board specifically expects to go into a closed session(s) on the matters listed below pursuant to the Act, §551.071.

A. Consult with attorneys on matters relating to provisions of the CHRISTUS Spohn Health System Corporation Membership Agreement, Escrow Agreement, and Memorandum of Understanding Related to Termination of the Membership Agreement, and related matters.

10. 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.

A. Discuss and consider final action, decision, or vote on matters considered in Closed Meeting. (***ACTION AS NEEDED***)

11. ADJOURN



Kara Sands

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

Main: (361)888-0580

Receipt: 20240322000031

Date: 03/22/2024

Time: 09:43AM

By: Margarita S

Station: CLERK03

Status: ORIGINAL COPY

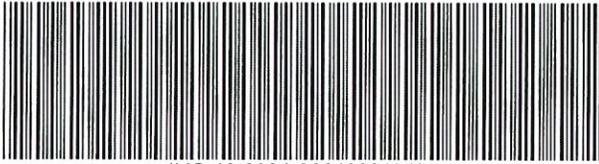
<u>Seq</u>	<u>Item</u>	<u>Document Description</u>	<u>Number</u>	<u>Number Of</u>	<u>Amount</u>	<u>Serial Number</u>
1	Public Notice	PBN	2024000134	9	\$0.00	

Order Total (1) \$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-12-2024-2024000134

Nueces County
Kara Sands
Nueces County Clerk

Instrument Number: 2024000134

Public Notice

PUBLIC NOTICES

Recorded On: March 22, 2024 09:43 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: 2024000134
Receipt Number: 20240322000031
Recorded Date/Time: March 22, 2024 09:43 AM
User: Margarita S
Station: CLERK03

Record and Return To:

NUECES COUNTY HOSPITAL DISTRICT

RECEIVED

MAR 22 2024

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, March 26, 2024 at 12:00 PM**

Location:

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

MEETING IN-PERSON AND VIA VIDEOCONFERENCE CALL

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. 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 ("Act") which had allowed meetings to be conducted entirely virtually. The specified NCHD Board of Managers meeting will be held both in-person and via videoconference call. Public participation will be available in-person as well as via videoconference call as allowed under the Act. It is the intent that a quorum of the Board of Managers as required for the specified meeting will be physically present at the location posted in this meeting notice. It is also the intent that the Board member presiding over the meeting be physically present for the specified meeting at the location posted in this meeting notice. Any member of the Board of Managers participating by videoconference call 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 may do so via videoconference call and as well as participate via videoconference call in public comment, may do so through the videoconference call Zoom meeting link shown on this meeting notice below, as well as shown on NCHD's website.

The Texas Open Meetings Act defines a "videoconference call" as a communication conducted between two or more persons in which one or more of the participants communicate with the other participants through duplex audio and video signals transmitted over a telephone network, a data network, or the Internet. Zoom is an Internet-based communications platform that allows users to connect with duplex audio and video signals. Using Zoom requires an Internet connection and a supported device.

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

Attend Meeting via Videoconference, Join Zoom Meeting:

<https://nchdcc-org.zoom.us/j/5746765992?pwd=T2RVWFBoZGJYdHYyQmp1VUdZeUc3Zz09>
Meeting ID: 574 676 5992
Passcode: 195957

**NUECES COUNTY HOSPITAL DISTRICT
BOARD OF MANAGERS
Board of Managers - Regular Meeting
Tuesday, March 26, 2024 at 12:00 PM**

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- Vishnu V. Reddy, M.D., Vice Chairman
- Sylvia Tryon Oliver
- Belinda Flores, R.N.
- Judge Mariana Garza
- Efrain Guerrero, Jr.
- Arthur Granado

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.

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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;
5. Funding for alcohol and drug abuse treatment programs:
 - a. Cenikor (Charlie's Place);
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8. Legal and professional fees.

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D. 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.

E. 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 month-ended February 29, 2024.

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G. 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);
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- a. Delivery System Reform Incentive Payment (DSRIP) pool.

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1. Total Persons and Households Enrolled;
2. Enrollment Summary;
3. Denials;
4. Application Processing Summary; and
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1. Annual update of the HHS Poverty Guidelines from Federal Register, Vol. 89, No. 11, January 17, 2024, pp. 2961-2963; and
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J. Receive notice of annual increase adjustments of Nueces Aid Program's Eligibility Guidelines; adjustments effective March 1, 2024 for:

1. Household Resources as required by Program's Handbook Policy No. NA002, Attachment 2, Sections I-B, I-C-1, I-C-23, and I-F; and
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A. Finance:

1. Financial Statements:

- a. Receive and approve unaudited financial statements for the month and fiscal year-to-date period ended February 29, 2024. *(ACTION)*

8. ADMINISTRATOR'S BRIEFING:

A. Receive update on appointment to CHRISTUS Spohn Health System Corporation's Board of Directors for three-year term commencing January 1, 2024 and ending December 31, 2026. *(INFORMATION)*

B. Receive information on rebasing of Hospital District's Local Provider Participation Fund (LPPF) for Fiscal Year 2024; paying hospital's FY 2024 amounts owed rebased using most recently reported net patient revenue data from the 2022 DSHS/AHA/THA Annual Survey of Hospitals pursuant to Rule 9(d) of the District's LPPF Rules; LPPF authorized by Texas Health and Safety Code, Chapter 298C, as amended. *(INFORMATION)*

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from statewide settlement agreements to be distributed to hospital districts. **(INFORMATION)**

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10. **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.

A. Discuss and consider final action, decision, or vote on matters considered in Closed Meeting. **(ACTION AS NEEDED)**

11. **ADJOURN**

DRAFT

**MINUTES
BOARD OF MANAGERS
NUECES COUNTY HOSPITAL DISTRICT
REGULAR MEETING
FEBRUARY 27, 2024**

The Nueces County Hospital District Board of Managers met at 12:00 p.m. February 27, 2024 in the NCHD Board Room at 555 N. Carancahua, Suite 950 – A Corpus Christi, Texas.

HOSPITAL DISTRICT REPRESENTATIVES:

Jonny F. Hipp	Administrator/CEO
Belinda Espinoza	Asst. Administrator, Admin. Services
Donna Littlefield	Director, Accounting & Finance
Mary Esther Guerra	Assistant County Attorney
John B. Martinez	General Counsel
Melissa Quintanilla	Executive Assistant/Human Resources
Carmina Hernandez Moreno	Administrative Assistant

OTHERS PRESENT:

Adam Robison	Attorney
Francisco Zamora	Nueces County Attorney
David Henrick	Cimbar
John Lusins, MD	Psychiatry
LaShae Kuykendall	Collier, Johnson & Woods
Brigid Cook	Collier, Johnson & Woods
Brittany Sotelo	CCREDC
Dominic Dominguez	Christus Spohn
Suzanne Smith	Cimbar – via Zoom
Danielle Converse	Port of Corpus Christi – via Zoom
David McElwain	Meeder – via Zoom
Mark Hendrix	NCMHID – via Zoom

**BOARD OF MANAGERS
REGULAR MEETING
MINUTES
FEBRUARY 27, 2024**

1. WELCOME

2. ROLL CALL OF BOARD OF MANAGERS

- John E. Valls, MBA, Chairman
- Vishnu V. Reddy, M.D., Vice Chairman
- Sylvia Tryon Oliver
- Belinda Flores, R.N.
- Judge Mariana Garza
- Efrain Guerrero, Jr.
- Arthur Granado

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

- A. Call to order – Mr. John E. Valls, Chairman.
The meeting was called to order y Mr. Valls at 12:39.
- B. Establish quorum – Mr. Valls, Chairman.
A quorum was present with all members in atendance.

John E. Valls, MBA, Chairman – PRESENT
Vishnu V. Reddy, M.D., Vice Chairman – PRESENT
Sylvia Tryon Oliver, Member – PRESENT
Belinda Flores, R.N., Member – PRESENT – via Zoom
Judge Mariana Garza, Member – PRESENT - via Zoom
Efrain Guerrero, Jr., Member – PRESENT
Arthur Granado, Member – PRESENT

- 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.

**BOARD OF MANAGERS
REGULAR MEETING
MINUTES
FEBRUARY 27, 2024**

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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 December 12, 2023.
- B. Receive annual listing of vendors as of January 19, 2024; listing provided pursuant to Board of Managers Bylaws, §2.1.B and Texas Local Government Code, Chapter 176.
- C. Receive listings of new vendors for January 2024; listings provided pursuant to Board of Managers Bylaws, §2.1.B and Texas Local Government Code, Chapter 176.
- D. Receive summary payment information on Nueces County health care disbursements for Fiscal Year 2024 year-to-date:
 - 1. Salaries, benefits, supplies, and intergovernmental transfers at/for City of Corpus Christi/Nueces County Public Health District;

**BOARD OF MANAGERS
REGULAR MEETING
MINUTES
FEBRUARY 27, 2024**

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;
 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.
- 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 periods-ended November 30, 2023 - January 31, 2024.
- 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.
- 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 statement for months-ended November 30, 2023 - January 31, 2024.
- 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.

**BOARD OF MANAGERS
REGULAR MEETING
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FEBRUARY 27, 2024**

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);

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.

J. Receive reports relating to Nueces Aid Program enrollment for the months-ended November 30, 2023 - January 31, 2024:

1. Total Persons and Households Enrolled;

2. Enrollment Summary;

3. Denials;

4. Application Processing Summary; and

5. Enrollment by Zip Code.

Consent Agenda approved. Motion by Dr. Reddy and seconded by Ms. Flores. 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:

**BOARD OF MANAGERS
REGULAR MEETING
MINUTES
FEBRUARY 27, 2024**

A. Finance:

1. Annual Financial Report:

- a. Discuss and consider acceptance of Annual Financial Report from Collier, Johnson, & Woods, P.C., Certified Public Accountants on Nueces County

Hospital District's governmental activities financial statements, major funds, and aggregate remaining funds for fiscal year ended September 30, 2023. *(ACTION)*

**Motion by Mr. Guerrero and seconded by Ms. Oliver.
MOTION CARRIED.**

2. Financial Statements:

- a. Receive and approve unaudited financial statements for the months and fiscal year-to-date periods ended October 31, 2023 - January 31, 2024. *(ACTION)*

**Motion by Ms. Oliver and seconded by Mr. Guerrero.
MOTION CARRIED.**

3. Investment Report:

- a. Receive Quarterly Investment Report for fiscal quarter-ended December 31, 2023. *(INFORMATION)*

Investment Report update by David McElwain from Meeder.

B. Foreign Trade Zone:

1. Discuss and consider a request from Cimbar Resources Inc. ("CR") for a Letter of Support/Non-Objection relating to CR's intent to establish a mineral processing-related Foreign Trade Zone at 322 Manning Road, Corpus Christi, Texas, and, if applicable, discuss and consider a possible Payment In Lieu of Taxes Agreement between CR and the Hospital District, and related matters, and authorize Administrator to execute related documents. *(ACTION)*

**Cimbar presentation by, Mr. David Henrick, present and Diana Converse and Suzanne Smith via Zoom.
Motion by Ms. Oliver and seconded by Mr. Guerrero.
MOTION CARRIED.**

**BOARD OF MANAGERS
REGULAR MEETING
MINUTES
FEBRUARY 27, 2024**

C. CHRISTUS Spohn Board of Directors:

1. Discuss and consider an appointment to CHRISTUS Spohn Health System Corporation's Board of Directors for three-year term commencing January 1, 2024 and ending December 31, 2026; appointment pursuant to CHRISTUS Spohn Health System Membership Agreement, Article IV, Section 4.01(b). **(ACTION)**

**Motion by Dr. Reddy to appoint Dr. Hinojosa as
Commissoners Court recommendation for Christus
Spohn Board and contingent of conflict of disclosure
of Christus Spohn. Seconded by Ms. Flores.
MOTION CARRIED.**

Mariana Garza signed off via Zoom @ 1:50 p.m.

D. FEMA COVID-19 Pandemic Cost Recovery and Management Cost Recovery:

1. Receive final update and notice of payment receipt on the matter of Arbitration Agreement between the Federal Emergency Management Agency ("FEMA"), Texas Division of Emergency Management, and Nueces County Hospital District relating to Hospital District's arbitration request before the United States Civilian Board of Contract Appeals ("CBCA") in the matter identified as CBCA 7792-FEMA, In the Matter of Nueces County Hospital District. **(INFORMATION)**

E. Administrator's Actions:

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

a. Recovery of management costs incurred in the administration of Hospital District's Project FEMA-4485-DR-TX under the FEMA Public Assistance Program, Category Z; Category Z management costs refer to the administrative costs incurred in the preparation of a FEMA application for all projects submitted under one disaster; and authorize the Administrator to undertake related actions and execute related documents. **(ACTION)**

b. Execution of Letter Agreements with Frost Bank dated January 23, 2024 and February 22, 2024 extending current depository and related agreements through April 30, 2024. **(ACTION)**

**BOARD OF MANAGERS
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MINUTES
FEBRUARY 27, 2024**

Motion by Ms. Oliver on both Items E. 1. a&b and seconded by Mr. Granado. MOTION CARRIED.

8. ADMINISTRATOR'S BRIEFING:

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

1. Board of Managers: Tuesday, March 26, 2024, 12:00 PM in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-A, Corpus Christi, Texas 78401. (*INFORMATION*)

9. **CLOSED MEETING** - Public Notice is hereby given that the Board of Managers may 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. *To the extent there has been a past practice of distinguishing items for public deliberation and those for executive session, the public is advised that the Board is departing from that practice and reserves the right to discuss any listed agenda items in a closed meeting when authorized by law to do so.* When the Board goes 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. The Board specifically expects to go into a closed session(s) on the matters listed below pursuant to the Act, §551.071.

A. Consult with attorneys on matters relating to service on the Board of Managers.

B. Consult with attorneys on matters relating to the Agreement between Nueces County, Nueces Center for Mental Health and Intellectual Disabilities ("NCMHID"), and the Nueces County Hospital District relating to certain mental health-related programs provided by or through the NCMHID relating to diversion of persons from jails or other detention facilities.

**BOARD OF MANAGERS
REGULAR MEETING
MINUTES
FEBRUARY 27, 2024**

C. Consult with attorneys on matters relating to the Letter Agreement with CHRISTUS Spohn Health System Corporation relating to Hospital District's support of CHRISTUS Spohn's Emergency Medicine Residency Program, and related matters.

D. Consult with attorneys on matters relating to provisions of the CHRISTUS Spohn Health System Corporation Membership Agreement, Escrow Agreement, and Memorandum of Understanding Related to Termination of the Membership Agreement, and related matters.

E. Consult with attorneys on matters related to the Health Services Agreement Nueces County Correctional Facilities between Nueces County, Nueces County Hospital District, and Armor Correctional Healthcare Services, and related matters.

Mr. Valls, Chairman called for a recess at 2:15 p.m.

**Mr. Valls, Chairman called meeting back at recess at 2:26 p.m.
and then called for Close Session at 2:27 p.m.**

10. **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, Chairman called for Open Session at 3:40 p.m.

A. Discuss and consider final action, decision, or vote on matters considered in Closed Meeting. (***ACTION AS NEEDED***)

No Action taken.

11. **ADJOURN**

**Motion to adjourned by Mr. Valls, Chairman
at 3:40 p.m.**

**BOARD OF MANAGERS
REGULAR MEETING
MINUTES
FEBRUARY 27, 2024**

PRESIDING OFFICERS:

John E. Valls, MBA, Chairman

ATTEST:

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

Nueces County Hospital District
 County Health Care Department Expenditures
 Cash Disbursements Relating to
 Fiscal Year 2024

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Fiscal 2024 YTD	Budget 2024	Balance
County Healthcare Services															
Health Dept - County	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,313,000.00	2,313,000.00
Emergency Medical Services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	650,000.00	650,000.00
NC MHID - Fund Matching	0.00	0.00	242,280.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	242,280.00	969,129.00	726,849.00
NC MHID - Jail Programs	0.00	155,787.27	255,506.92	226,879.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	638,173.32	3,018,000.00	2,379,826.68
NC Juvenile Center	33,326.89	33,164.73	2,316.03	54,808.55	73,063.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	196,680.18	474,000.00	277,319.82
Nueces County Jail Services	392,790.58	167,653.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	560,443.84	4,795,649.00	4,235,205.16
Cenikor	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60,000.00	60,000.00
Council on Alcohol & Drug Abuse	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50,000.00	50,000.00
Diabetes Program - County	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50,000.00	50,000.00
HALO-Flight Funding	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,000.00	15,000.00
County Public Health Grants	0.00	0.00	80,000.00	0.00	50,000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	130,000.00	220,000.00	90,000.00
Totals	426,117.47	356,605.26	580,102.95	281,687.68	123,063.98	0.00	1,767,577.34	12,614,778.00	10,847,200.66						

**Nueces County Hospital District
Imputed Claims Experience for Calendar Year 2024
As if Adjudicated January 1, 2024 through February 29, 2024**

Service	Claims	Billed	Contract Amt.	Co Insurance	Net
ER	620	3,159,973	479,531	21,749	457,782
ASU	68	1,596,077	177,039	6,078	170,961
Clinic	45	151,224	98,508	5,717	92,791
Obs	13	369,374	86,083	10,210	75,873
OP	3,074	7,831,767	2,031,499	185,933	1,845,566
Subtotal	3,820	13,108,415	2,872,660	229,687	2,642,973
IP	87	6,133,556	342,532	13,053	329,479
SNF					-
RX	19,900	8,076,980	3,075,873	94,022	2,981,851
Physician	4,941	3,178,479	676,458	35,049	641,409
Total	28,748	30,497,430	6,967,523	371,811	6,595,712

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 2024

Member Revenue % 27.0%

	October	November	December	January	February	March	April	May	June	July	August	September	Totals
<u>Membership Revenue Deposits</u>													
Week 1	2,066,861.61	2,162,309.02	3,013,205.01	2,078,550.74	1,969,908.53	2,786,145.01							14,076,979.92
Week 2	2,355,764.99	2,184,573.81	2,547,176.48	2,010,663.38	1,882,743.04	1,683,180.97							12,664,102.67
Week 3	2,814,490.24	2,693,689.25	3,344,880.84	2,491,554.21	2,740,056.15	1,650,015.23							15,734,685.92
Week 4	2,090,457.65	2,225,718.83	2,600,723.45	2,340,245.49	2,282,140.68								11,539,286.10
Week 5				2,197,719.23									2,197,719.23
Subtotal	9,327,574.49	9,266,290.91	11,505,985.78	11,118,733.05	8,874,848.40	6,119,341.21	0.00	0.00	0.00	0.00	0.00	0.00	56,212,773.84



Argent Institutional Trust
5901 Peachtree Dunwoody Ste C495
Atlanta, GA 30328

ACCOUNT STATEMENT

ACCOUNT NUMBER: [REDACTED]
FEBRUARY 01, 2024 TO FEBRUARY 29, 2024

received
03/12/24

5

NUECES COUNTY HOSPITAL DISTRICT
ATTN: JONNY HIPPI
555 N CARANCAHUA ST STE 950
CORPUS CHRISTI TX 78401-0835
1-135-3




ACCOUNT NAME: CHRISTUS SPOHN HEALTH SYSTEM
CORP / NUECES COUNTY HOSPITAL
DISTRICT
ACCOUNT NUMBER: 14097001617
ADMINISTRATIVE
OFFICER: ALICE WOLAN
312-405-5393
AWOLAN
@ARGENTFINANCIAL.COM
INVESTMENT
OFFICER: DIRECTED

YOU, FIRST.

Thank you for your business. If you have questions about your account statement, please contact your Administrative Officer listed in the shaded box at the top of this statement.

IMPORTANT NOTICE

Argent Institutional Trust-formerly TMI- has changed accounting platforms. Be advised your account number **3721 has changed to **1617.

ACCOUNT NUMBER: ██████████
 FEBRUARY 01, 2024 TO FEBRUARY 29, 2024

ACCOUNT ACTIVITY SUMMARY

	THIS PERIOD	YEAR TO DATE
BEGINNING MARKET VALUE	3,091,381.31	3,078,960.12
DEPOSITS	0.00	12,421.19
INCOME	12,390.42	12,390.42
ENDING MARKET VALUE	3,103,771.73	3,103,771.73

PORTFOLIO HOLDINGS

QUANTITY	DESCRIPTION	MARKET VALUE	COST BASIS
CASH AND EQUIVALENTS			
3,103,771.730	09248U536 BLACKROCK LIQUIDITY FUNDS TREASURY TRUST FUND	3,103,771.73	3,103,771.73
TOTAL	CASH AND EQUIVALENTS	3,103,771.73	3,103,771.73
GRAND TOTAL ASSETS		3,103,771.73	3,103,771.73

TRANSACTION DETAIL

DATE	DESCRIPTION	CASH	COST	GAIN / LOSS
02/01/24	BEGINNING BALANCE	0.00	3,091,381.31	
02/05/24	09248U536 DIVIDEND ON BLACKROCK LIQUIDITY FUNDS TREASURY TRUST FUND PAYABLE 02/01/2024 EFFECTIVE 02/01/2024	12,390.42		
	09248U536 NET DEPOSIT BLACKROCK LIQUIDITY FUNDS TREASURY TRUST FUND	12,390.42-	12,390.42	
02/29/24	ENDING BALANCE	0.00	3,103,771.73	0.00

DISCLOSURE

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ACCOUNT NUMBER: [REDACTED]
FEBRUARY 01, 2024 TO FEBRUARY 29, 2024

DISCLOSURE

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Tax Disclosure - <https://argentfinancial.com/annual-tax-disclosures/>
Privacy Policy - <https://argentfinancial.com/privacy-policies/>



Nueces County Hospital District
 Nueces LPPF Activity
 Fiscal Year 2024

	October	November	December	January	February	March	April	May	June	July	August	September	Totals
Beginning Balan	9,159,392.52	59,837,708.79	4,107,084.13	2,950,115.82	7,722,267.37	20,949,674.71	20,949,674.71	20,949,674.71	20,949,674.71	20,949,674.71	20,949,674.71	20,949,674.71	9,159,392.52
<u>Deposits</u>													
Christus Spohn	18,995,774.04				9,497,887.02								28,493,661.06
CCMC	12,800,598.04				6,400,299.02								19,200,897.06
CC Rehab	565,066.44			282,533.22									847,599.66
Driscoll	16,880,549.67												16,880,549.67
PAM Specialty		657,147.96		328,573.98									985,721.94
PAM Rehab		727,492.32		363,746.16									1,091,238.48
S. TX Surgical	1,374,215.28				687,107.64								2,061,322.92
Subtotal	50,616,203.47	1,384,640.28	0.00	974,853.36	16,585,293.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	69,560,990.79
Interest	62,112.80	151,385.24	16,479.29	26,306.62	26,649.60								282,933.55
Transfers In				4,979,044.15									4,979,044.15
Total Deposits	50,678,316.27	1,536,025.52	16,479.29	5,980,204.13	16,611,943.28	0.00	74,822,968.49						
<u>Inter-Governmental Transfers</u>													
UC					(3,384,535.94)								(3,384,535.94)
DSRIP													0.00
CHIRP		(56,727,511.51)											(56,727,511.51)
TIPPS													0.00
DSH													0.00
HARP			(1,173,447.60)	(927,939.46)									(2,101,387.06)
GME		(539,138.67)		(280,113.12)									(819,251.79)
Total IGT's	0.00	(57,266,650.18)	(1,173,447.60)	(1,208,052.58)	(3,384,535.94)	0.00	(63,032,686.30)						
Transfers Out													0.00
Bank Fees													0.00
Ending Balance	59,837,708.79	4,107,084.13	2,950,115.82	7,722,267.37	20,949,674.71	20,949,674.71	20,949,674.71	20,949,674.71	20,949,674.71	20,949,674.71	20,949,674.71	20,949,674.71	20,949,674.71

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	GME	HARP	TOTALS	
Christus Spohn - Corpus Christi	393,023,597	560,417,560	266,619,703	55,407,073	139,785,626	93,294,116	3,876,301	2,340,745	9,451,557	1,524,216,279	46%
Christus Spohn Rural (Alice/Beeville/Kleberg)	48,398,858	211,397,908	0	14,881,126	0	17,542,279	0	0	516,989	292,737,160	9%
Corpus Christi Medical Center	121,850,134	159,267,883	0	47,953,129	0	139,211,571	0	2,108,756	5,388,418	475,779,892	14%
Driscoll Childrens Hospital	314,822,705	24,239,617	0	0	0	550,191,606	479,717	4,875,735	27,353,074	921,962,455	28%
Detar Hospital	24,949,804	47,723,156	0	15,297,365	0	0	0	0	0	87,970,325	3%
North Bay General Hospital	0	0	0	503,238	0	0	0	0	0	503,238	0%
South Texas Surgical Hospital	0	0	0	902,639	0	0	0	0	0	902,639	0%
Corpus Christi Rehab Hospital	0	0	0	296,670	0	0	0	0	0	296,670	0%
PAM Specialty Hospital	0	0	0	1,330	0	0	0	0	0	1,330	0%
PAM Rehab Hospital	0	0	0	1,061,105	0	0	0	0	0	1,061,105	0%
Nueces County Health Dept	21,809,410	0	0	0	0	0	0	0	0	21,809,410	1%
TOTALS	924,854,508	1,003,046,125	266,619,703	136,303,674	139,785,626	800,239,573	4,356,019	9,325,236	42,710,039	3,327,240,502	100%

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

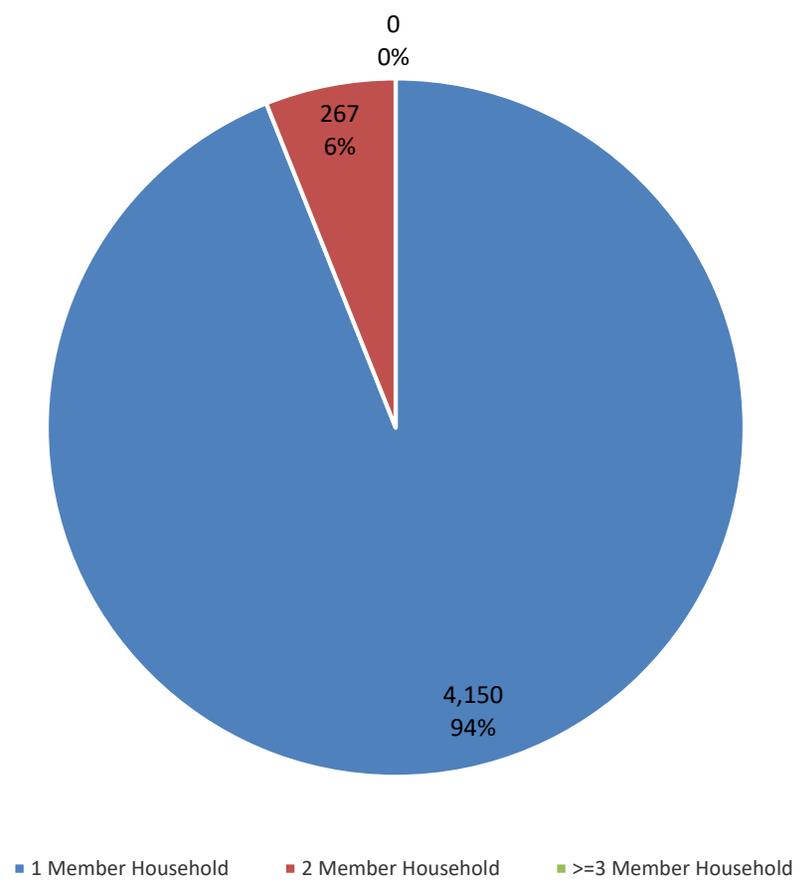
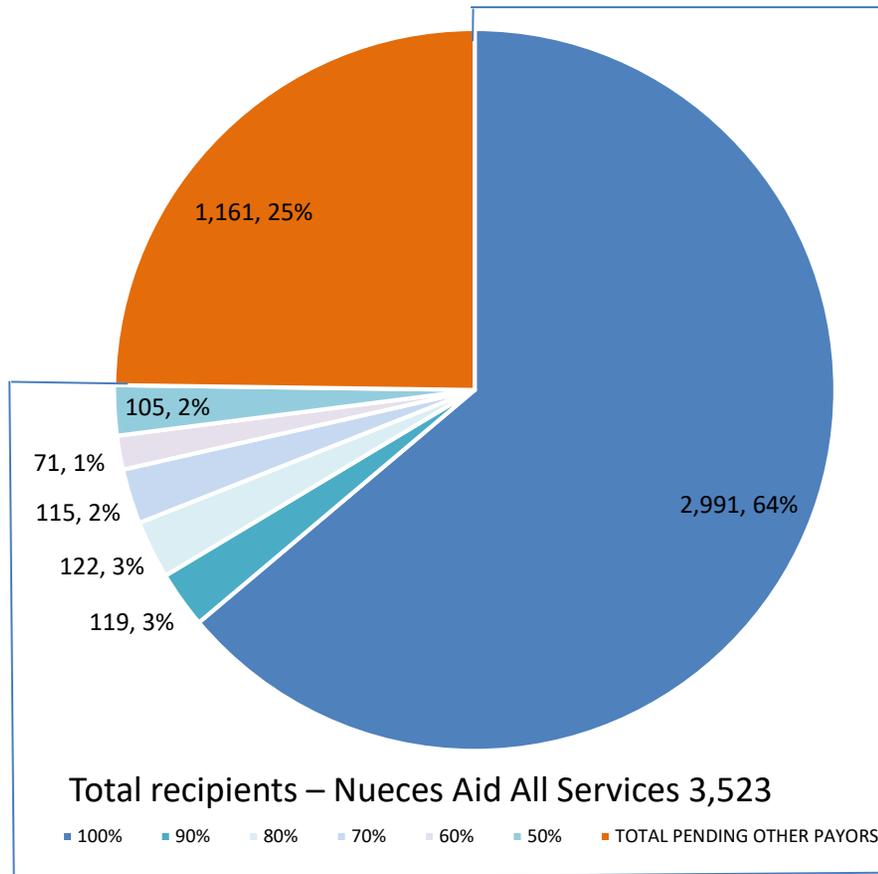
IGT Source	DSRIP	UC	DSH	UHRIP	NAIP	CHIRP	TIPPS	GME	HARP	TOTALS
Nueces County Hospital District	338,074,018	327,872,336	94,329,100	59,112,085	54,937,922	33,473,068	0	2,803,602	14,596,484	925,198,616
Nueces LPPF	27,902,997	62,172,758	7,478,253	0	0	270,632,296	1,855,623	819,252	2,101,387	372,962,565
TOTALS	365,977,014	390,045,093	101,807,354	59,112,085	54,937,922	304,105,364	1,855,623	3,622,854	16,697,871	1,298,161,180

January 2024

Nueces Aid Program Enrollment

Total Enrolled
4,684

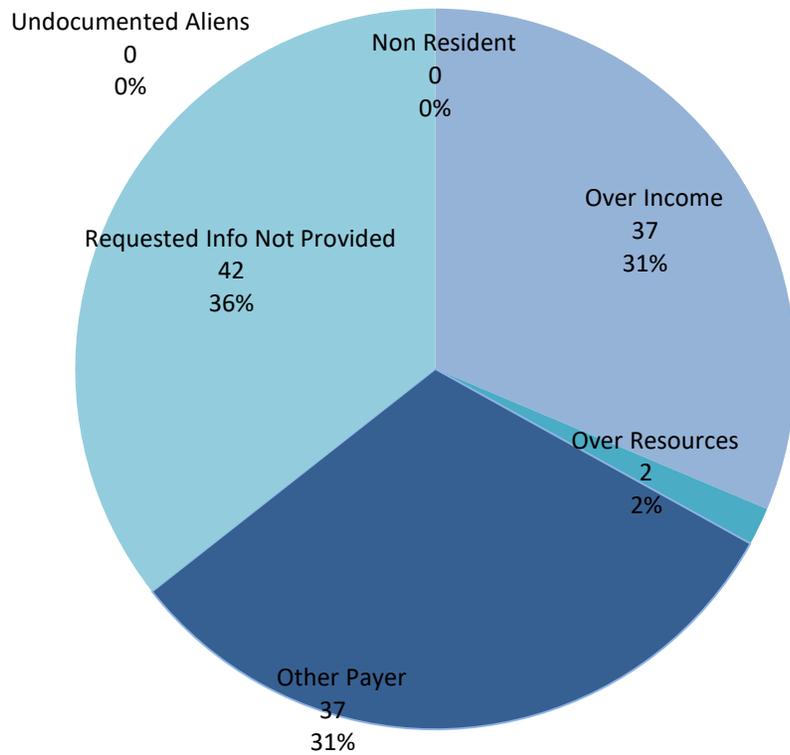
Total Households
4,417



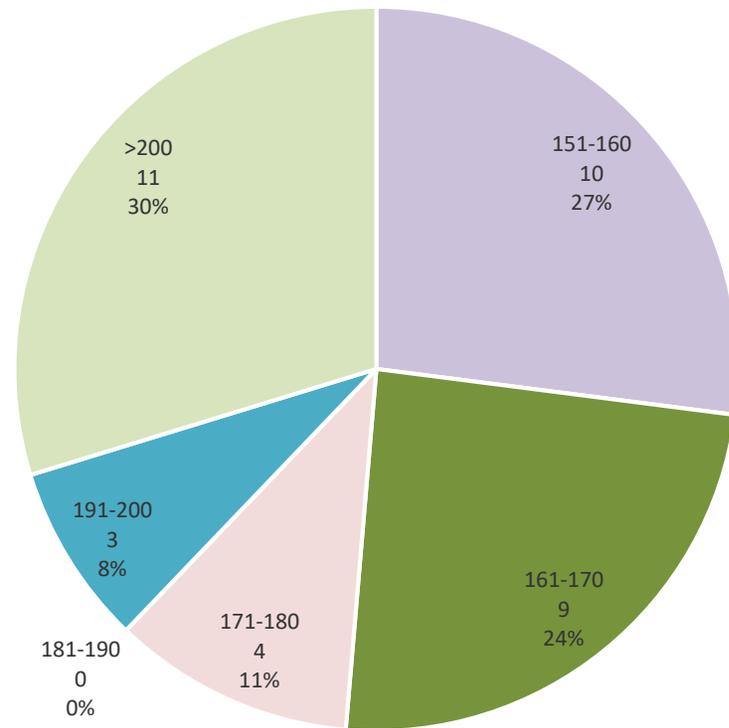
NUECES AID DENIALS

Calendar Year 2024
January

Denial Reasons



Comparison of Over Income Case to 2023 HHS Poverty Guidelines



**Nueces Aid Program
Application Processing Summary Calendar Year 2024**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YTD 2024	Comments
TOTAL APPLICATIONS	949												949	
- Approved	831												831	
%	87.6%												87.6%	Since FY 1999, the denial rate is based on all denied individuals in the household.
- Denied	118												118	
%	12.4%												12.4%	
APPROVALS BY PLAN TYPE														
NUECES AID - All Services														
100%	585												585	
%	70.4%												70.4%	
90%	20												20	
%	2.4%												2.4%	
80%	25												25	
%	3.0%												3.0%	
70%	21												21	The percentage of approvals by plan option is calculated by dividing the number for each plan option by the total number of approved applications.
%	2.5%												2.5%	
60%	11												11	
%	1.3%												1.3%	
50%	17												17	
%	2.0%												2.0%	
TOTAL	679												679	
%	81.7%												81.7%	
HOUSEHOLDS BY SIZE - APPROVED														
1 Member Household	716												716	The percentage for each size household is calculated by dividing the number of households in the category by the total number of approved households.
%	92.5%												92.5%	
2 Member Household	58												58	
%	7.5%												7.5%	
3 or > Member Household	0												0	Households pending other payors are not included.
%	0.0%												0.0%	
TOTAL HOUSEHOLDS APPROVED	774												774	

**Nueces Aid Program
Application Processing Summary Calendar Year 2024**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YTD 2024	Comments
NCHD DENIALS - Reasons for Denials														
Non Resident	0												0	The percentage for each denial reason is calculated by dividing the number of individuals for each reason by the total number of individuals denied.
%	0.0%												0.0%	
Over Income	37												37	
%	31.4%												31.4%	
Over Resources	2												2	
%	1.7%												1.7%	
Other Payer	37												37	
%	31.4%												31.4%	
Requested Info Not Provided	42												42	
%	35.6%												35.6%	
Undocumented Aliens	0												0	Note: UA code eff 08/01/01
%	0.0%												0.0%	
TOTAL DENIALS	118												118	
HOUSEHOLDS BY SIZE - DENIED														
1 Member Household	100												100	The denial percentage for each size household is calculated by dividing the number for each household size by the total number of denied households.
%	91.7%												91.7%	
2 Member Household	9												9	
%	8.3%												8.3%	
3 or > Member Household	0												0	Households pending other payors are not included.
%	0.0%												0.0%	
TOTAL HOUSEHOLDS DENIED	109												109	
PENDING APPLICATIONS														
Pending documentation	79												79	The YTD number for incomplete applications is the average of the monthly incomplete applications.
TANF	26												26	
SSI-SSID	65												65	
Other Payor	61												61	

**NCHD
Eligibility History**

	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	CY Total	Avg		
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	-6%	
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	-1%	
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	-5%	
% 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	-9%	
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	-4%	
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	-8%	
% 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	-14%	
Pend	1,268	1,243	1,218	1,141	1,187	1,106	1,043	968	861	899	923	945	12,802	1,067	-18%	
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	-15%	
% of PY	95%	96%	96%	93%	101%	93%	83%	73%	65%	70%	75%	79%	85%	85%		
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	-11%	
Pend	932	921	922	964	981	1,014	1,052	1,028	1,039	1,060	1,070	1,076	12,059	1,005	-6%	
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	-10%	
% of PY	76%	74%	73%	76%	74%	84%	95%	110%	126%	114%	107%	103%	90%	90%		
2022																
NCHD	3,781	3,711	3,738	3,755	3,805	3,869	3,910	3,945	4,042	3,987	3,884	3,785	46,212	3,851	0%	
Pend	1,093	1,061	1,110	1,113	1,144	1,150	1,147	1,183	1,191	1,191	1,181	1,171	13,735	1,145	14%	
Total	4,874	4,772	4,848	4,868	4,949	5,019	5,057	5,128	5,233	5,178	5,065	4,956	59,947	4,996	3%	
% of PY	103%	104%	108%	109%	106%	103%	101%	100%	101%	101%	101%	100%	103%	103%		
2023																
NCHD	3,767	3,186	3,727	3,611	3,614	3,599	3,565	3,548	3,566	3,598	3,613	3,545	42,939	3,578	-7%	
Pend	1,145	1,677	1,148	1,157	1,173	1,161	1,177	1,181	1,183	1,185	1,186	1,166	14,539	1,212	6%	
Total	4,912	4,863	4,875	4,768	4,787	4,760	4,742	4,729	4,749	4,783	4,799	4,711	57,478	4,790	-4%	
% of PY	101%	102%	101%	98%	97%	95%	94%	92%	91%	92%	95%	95%	96%	96%		
2024																
NCHD	3,523	3,573											7,096	3,548	-1%	
Pend	1,161	1,185											2,346	1,173	-3%	
Total	4,684	4,758	-	-	-	-	-	-	-	-	-	-	9,442	4,721	-1%	
% of PY	95%	98%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	16%	99%		



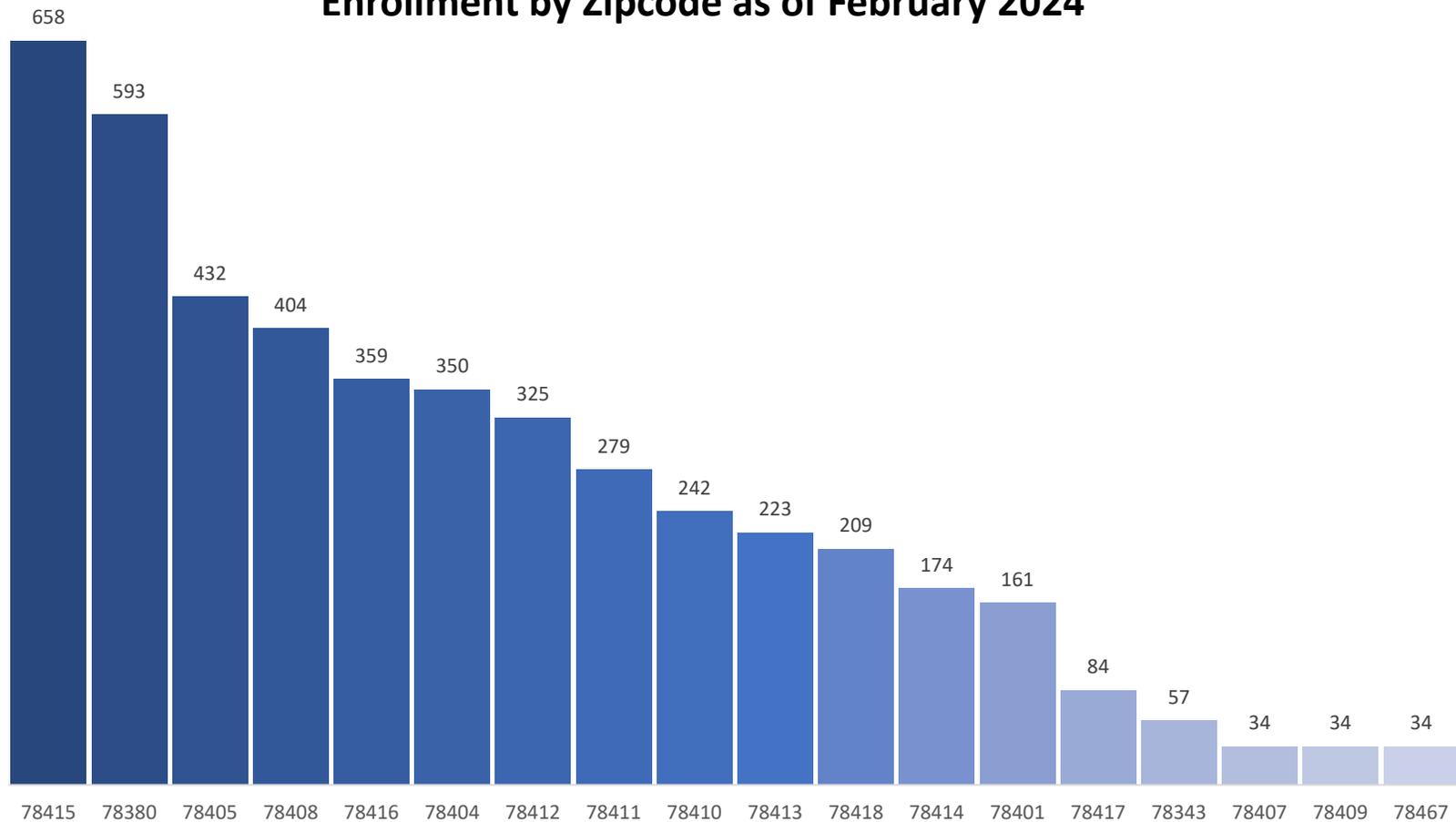
**Annual Comparative Enrollment Report
Calendar Year 2024**

Month	Enrollment		Increase/(Decrease)	
	2024	2023	%	Enrollees
Jan	4,684	4,912	-4.64%	-228
Feb	4,758	4,863	-2.16%	-105
Mar				
Apr				
May				
Jun				
Jul				
Aug				
Sep				
Oct				
Nov				
Dec				



Nueces County Hospital District

Enrollment by Zipcode as of February 2024

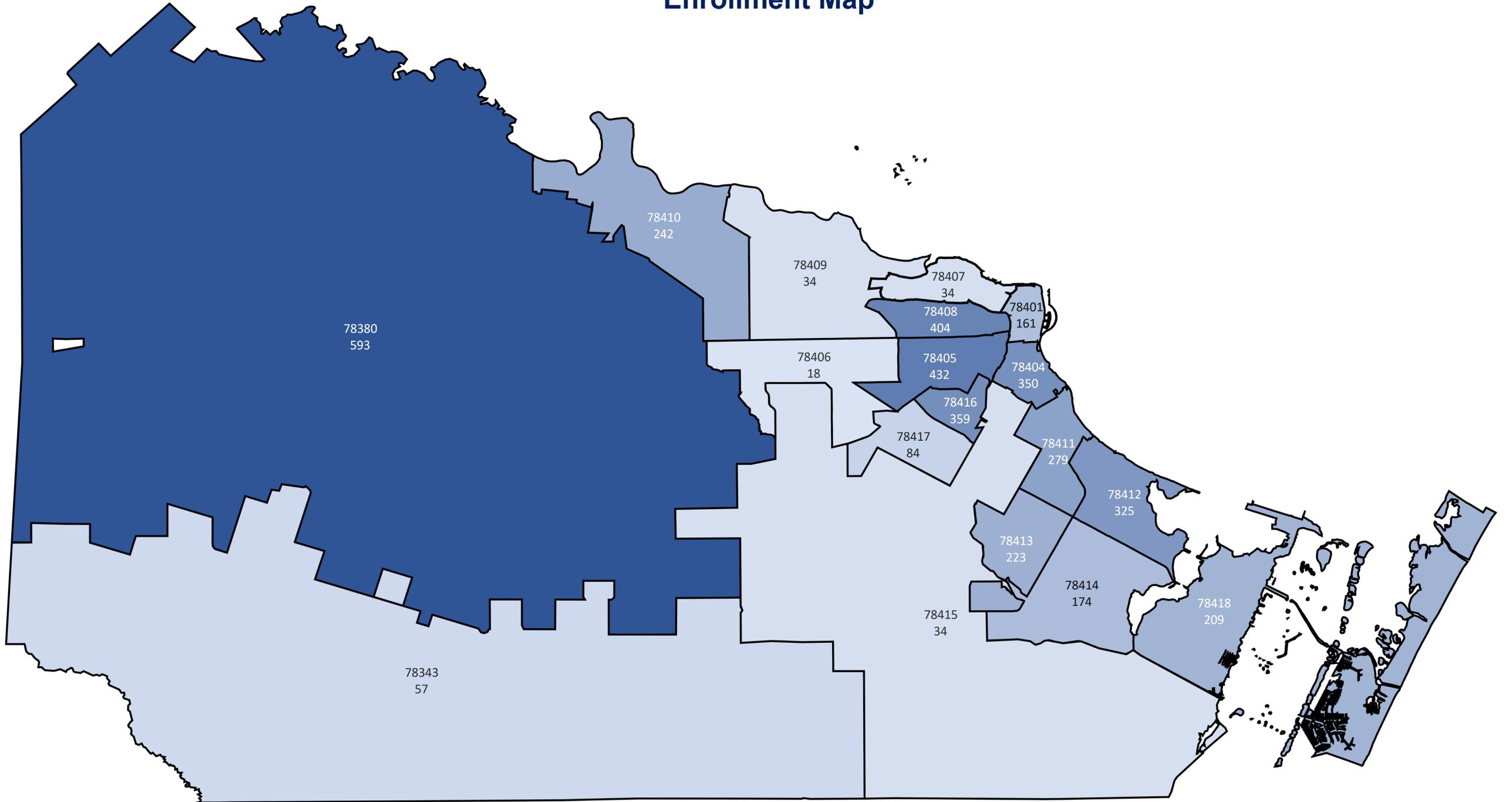


**Nueces County Hospital District
Enrollment by Zip Code
As of 2/29/2024**

Zip Code	Description	Members	% to Total
78415	CC:FM 665 to CR 61 to County Line to Weber & Crosstown	593	12%
78380	Robstown	432	9%
78405	CC:19th to Port Ave to Agnes, includes HPG	404	8%
78408	CC:Hwy 358 to Lipan Between I-37 & Agnes	359	8%
78416	CC:Hwy 358 to Old Brownsville to Tarlton to Weber, includes Molina	350	7%
78404	CC:Six Points	325	7%
78412	CC:Airline to Hwy 358 to Ennis Joslin to Ocean Drive	279	6%
78411	CC:Ocean Drive to So Staples to Hwy 358 to Weber to Kostoryz	242	5%
78410	CC:Annville and Calallen	223	5%
78413	CC:Weber to Holly rd to So Staples to Oso Pkwy	209	4%
78418	CC:Flour Bluff	174	4%
78414	CC:So Staples to Holly Rd to Cayo Del Oso to Oso Creek	161	3%
78401	CC:Downtown and Cargo Docks	84	2%
78417	CC:Old Brownsville to Ayers to Saratoga	57	1%
78343	Bishop + FM 665 to CR 107 W to CR 57E	34	1%
78407	CC: I-37 Up River Rd to South Port Ave to Joe Fulton Corridor	34	1%
78409	CC:Hwy 44 to Up River Rd to Rand Morgan E to Hwy 358	34	1%
78467	CC: Leopard St Between S. Staples and Sam Rankin	25	1%
	Subtotal	4,019	84%
	Total	4,758	



Nueces County Hospital District Enrollment Map



eligible entities to promote rural health care services outreach by improving and expanding the delivery of health care services to include new and enhanced services in rural areas, through community engagement and evidence-based or innovative, evidence-informed models. HRSA currently collects information about Care Coordination Program grants using an OMB-approved set of performance measures and seeks to revise that approved collection. The proposed changes to the information collection are a result of award recipient feedback and information gathered from the previously approved Care Coordination Program measures.

Need and Proposed Use of the Information: This program needs measures that will enable HRSA to provide aggregate program data required by Congress under the Government Performance and Results Act of 1993. These measures cover the principal topic areas of interest to HRSA, including: (1) access to care, (2) population demographics and social determinants of health, (3) care coordination and network infrastructure, (4) sustainability, (5) leadership and workforce, (6) electronic health record, (7) telehealth, (8) utilization, and (9) clinical measures/improved outcomes. All measures will evaluate HRSA’s progress toward achieving its goals.

The proposed changes include additional components under “Access to Care” and “Population Demographic” sections that seek information about

target population, counties served, direct services, and social determinants of health such as transportation barriers, housing, and food insecurity. Questions about Health Information Technology and Telehealth have been modified to reflect an updated telehealth definition and to improve understanding of how these important technologies are affecting HRSA award recipients. Sections previously titled “Care Coordination” and “Quality Improvement” were consolidated into one section titled “Care Coordination and Network Infrastructure” to improve clarity and ease of reporting for respondents. Part of the previous “Care Coordination” section was revised to include a section titled “Utilization” to improve clarity of instructions for related measures. Previously titled “Staffing” section was revised to “Leadership and Workforce Composition” to improve measure clarity and reduce overall burden for respondents by consolidating measures from previously separate “Staffing,” “Quality Improvement,” and “Care Coordination” sections. Revised National Quality Forum and Centers for Medicare & Medicaid Services measures were also included to allow uniform collection efforts throughout the Federal Office of Rural Health Policy.

The total number of measures has increased from 40 to 48 measures since the previous information collection request. Of the 48 measures, 11 measures are designated as “optional” or “complete as applicable.” The

measures within Section 6: “Electronic Health Record” are noted as optional to grantees. In Section 9: “Clinical Measures/Improved Health Outcomes,” grantees are only required to respond to Clinical Measure 1: Care Coordination. Grantees can choose to provide data for Clinical Measures 2–10 if applicable to their projects. The total number of responses has remained at 10 since the previous information collection request. The new Care Coordination Program grant cycle maintained the same number of award recipients and number of respondents.

Likely Respondents: The respondents would be recipients of the Rural Health Care Coordination Program grants.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Total responses	Average burden per response (in hours)	Total burden hours
Rural Health Care Coordination Program Performance Improvement Measures	10	1	10	3.5	35
Total	10	1	10	3.5	35

HRSA specifically requests comments on: (1) the necessity and utility of the proposed information collection for the proper performance of the agency’s functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information

technology to minimize the information collection burden.

Maria G. Button,
Director, Executive Secretariat.
 [FR Doc. 2024–00818 Filed 1–16–24; 8:45 am]
BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Annual Update of the HHS Poverty Guidelines

AGENCY: Department of Health and Human Services.

ACTION: Notice.

SUMMARY: This notice provides an update of the Department of Health and Human Services (HHS) poverty guidelines to account for last calendar46

year's increase in prices as measured by the Consumer Price Index.

DATES: *Applicable Date:* January 11, 2024 unless an office administering a program using the guidelines specifies a different applicable date for that particular program.

ADDRESSES: Office of the Assistant Secretary for Planning and Evaluation, Room 404E, Humphrey Building, Department of Health and Human Services, Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT: For information about how the guidelines are used or how income is defined in a particular program, contact the Federal, State, or local office that is responsible for that program. For information about poverty figures for immigration forms, the Hill-Burton Uncompensated Services Program, and the number of people in poverty, use the specific telephone numbers and addresses given below.

For general questions about the poverty guidelines themselves, contact Kendall Swenson, Office of the Assistant Secretary for Planning and Evaluation, Room 404E.3, Humphrey Building, Department of Health and Human Services, Washington, DC 20201—telephone: (202) 695-2107—or visit <http://aspe.hhs.gov/poverty/>.

For general questions about the poverty guidelines themselves, visit <http://aspe.hhs.gov/poverty/>.

For information about the percentage multiple of the poverty guidelines to be used on immigration forms such as USCIS Form I-864, Affidavit of Support, contact U.S. Citizenship and Immigration Services at 1-800-375-5283. You also may visit <https://www.uscis.gov/i-864>.

For information about the Hill-Burton Uncompensated Services Program (free or reduced-fee health care services at certain hospitals and other facilities for persons meeting eligibility criteria involving the poverty guidelines), visit <https://www.hrsa.gov/get-health-care/affordable/hill-burton/index.html>.

For information about the number of people in poverty, visit the Poverty section of the Census Bureau's website at <https://www.census.gov/topics/income-poverty/poverty.html> or contact the Census Bureau's Customer Service Center at 1-800-923-8282 (toll-free) or visit <https://ask.census.gov> for further information.

SUPPLEMENTARY INFORMATION:

Background

Section 673(2) of the Omnibus Budget Reconciliation Act (OBRA) of 1981 (42 U.S.C. 9902(2)) requires the Secretary of the Department of Health and Human

Services to update the poverty guidelines at least annually, adjusting them on the basis of the Consumer Price Index for All Urban Consumers (CPI-U). The poverty guidelines are used as an eligibility criterion by Medicaid and a number of other Federal programs. The *poverty guidelines* issued here are a simplified version of the *poverty thresholds* that the Census Bureau uses to prepare its estimates of the number of individuals and families in poverty.

As required by law, this update is accomplished by increasing the latest published Census Bureau poverty thresholds by the relevant percentage change in the Consumer Price Index for All Urban Consumers (CPI-U). The guidelines in this 2024 notice reflect the 4.1 percent price increase between calendar years 2022 and 2023. After this inflation adjustment, the guidelines are rounded and adjusted to standardize the differences between family sizes. In rare circumstances, the rounding and standardizing adjustments in the formula result in small decreases in the poverty guidelines for some household sizes even when the inflation factor is not negative. In cases where the year-to-year change in inflation is not negative and the rounding and standardizing adjustments in the formula result in reductions to the guidelines from the previous year for some household sizes, the guidelines for the affected household sizes are fixed at the prior year's guidelines. As in prior years, these 2024 guidelines are roughly equal to the poverty thresholds for calendar year 2023 which the Census Bureau expects to publish in final form in September 2024.

The poverty guidelines continue to be derived from the Census Bureau's current official poverty thresholds; they are not derived from the Census Bureau's Supplemental Poverty Measure (SPM).

The following guideline figures represent annual income.

2024 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA

Persons in family/ household	Poverty guideline
1	\$15,060
2	20,440
3	25,820
4	31,200
5	36,580
6	41,960
7	47,340
8	52,720

For families/households with more than 8 persons, add \$5,380 for each additional person.

2024 POVERTY GUIDELINES FOR ALASKA

Persons in family/ household	Poverty guideline
1	\$18,810
2	25,540
3	32,270
4	39,000
5	45,730
6	52,460
7	59,190
8	65,920

For families/households with more than 8 persons, add \$6,730 for each additional person.

2024 POVERTY GUIDELINES FOR HAWAII

Persons in family/ household	Poverty guideline
1	\$17,310
2	23,500
3	29,690
4	35,880
5	42,070
6	48,260
7	54,450
8	60,640

For families/households with more than 8 persons, add \$6,190 for each additional person.

Separate poverty guideline figures for Alaska and Hawaii reflect Office of Economic Opportunity administrative practice beginning in the 1966-1970 period. (Note that the Census Bureau poverty thresholds—the version of the poverty measure used for statistical purposes—have never had separate figures for Alaska and Hawaii.) The poverty guidelines are not defined for Puerto Rico or other outlying jurisdictions. In cases in which a Federal program using the poverty guidelines serves any of those jurisdictions, the Federal office that administers the program is generally responsible for deciding whether to use the contiguous-states-and-DC guidelines for those jurisdictions or to follow some other procedure.

Due to confusing legislative language dating back to 1972, the poverty guidelines sometimes have been mistakenly referred to as the "OMB" (Office of Management and Budget) poverty guidelines or poverty line. In fact, OMB has never issued the guidelines; the guidelines are issued each year by the Department of Health and Human Services. The poverty

guidelines may be formally referenced as “the poverty guidelines updated periodically in the **Federal Register** by the U.S. Department of Health and Human Services under the authority of 42 U.S.C. 9902(2).”

Some federal programs use a percentage multiple of the guidelines (for example, 125 percent or 185 percent of the guidelines), as noted in relevant authorizing legislation or program regulations. Non-Federal organizations that use the poverty guidelines under their own authority in non-federally-funded activities also may choose to use a percentage multiple of the guidelines.

The poverty guidelines do not make a distinction between farm and non-farm families, or between aged and non-aged units. (Only the Census Bureau poverty thresholds have separate figures for aged and non-aged one-person and two-person units.)

This notice does not provide definitions of such terms as “income” or “family” as there is considerable variation of these terms among programs that use the poverty guidelines. The legislation or regulations governing each program define these terms and determine how the program applies the poverty guidelines. In cases where legislation or regulations do not establish these definitions, the entity that administers or funds the program is responsible to define such terms as “income” and “family.” Therefore, questions such as net or gross income, counted or excluded income, or household size should be directed to the entity that administers or funds the program.

Dated: January 11, 2024.

Xavier Becerra,

Secretary, Department of Health and Human Services.

[FR Doc. 2024–00796 Filed 1–16–24; 8:45 am]

BILLING CODE 4150–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Interagency Coordinating Committee on the Validation of Alternative Methods Communities of Practice Webinar on Implementing Computational Approaches for Regulatory Safety Assessments; Notice of Public Webinar; Registration Information

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The Interagency Coordinating Committee on the Validation of Alternative Methods (ICCVAM) announces the public webinar “Implementing Computational Approaches for Regulatory Safety Assessments.” The webinar is organized on behalf of ICCVAM by the National Toxicology Program Interagency Center for the Evaluation of Alternative Toxicological Methods (NICEATM). Interested persons may participate via the web meeting platform. Time will be allotted for questions from the audience. Information about the webinar and registration are available at <https://ntp.niehs.nih.gov/go/commprac-2024>.

DATES:

Webinar: January 29, 2024, 10 a.m. to approximately 12 noon EST.

Registration for Webinar: January 10, 2024, until 12:00 noon EST January 29, 2024. Registration to view the webinar is required.

ADDRESSES: Webinar web page: <https://ntp.niehs.nih.gov/go/commprac-2024>.

FOR FURTHER INFORMATION CONTACT: Dr. Helena Hogberg, Staff Scientist, NICEATM, email: helena.hogberg-durdock@nih.gov, telephone: (984) 287–3150.

SUPPLEMENTARY INFORMATION:

Background: ICCVAM promotes the development and validation of toxicity testing methods that protect human health and the environment while replacing, reducing, or refining animal use. ICCVAM also provides guidance to test method developers and facilitates collaborations that promote the development of new test methods. To address these goals, ICCVAM will hold a Communities of Practice webinar on “Implementing Computational Approaches for Regulatory Safety Assessments.”

Computational toxicology methods can be useful for generating bioactivity predictions for chemicals for which limited toxicity data are available. They can also help users understand and interpret large, diverse bioactivity data sets, or predict how a chemical might behave in the body. However, users with limited experience with such methods may find it difficult to use them or interpret their outputs, or even understand how the methods could be applied in a specific context.

This webinar will discuss how to establish confidence in computational approaches for regulatory applications. Ongoing activities and key insights will be described in three presentations by speakers from the U.S. government and the private sector focusing on applications of tools such as structure-based models to predict chemical

bioactivity and pharmacokinetic models to support understanding of chemical metabolism and disposition. The preliminary agenda and additional information about presentations will be posted at <https://ntp.niehs.nih.gov/go/commprac-2024> as they become available.

Webinar and Registration: This webinar is open to the public with time scheduled for questions by participants following each presentation. Registration for the webinar is required. Registration will open on or before January 10, 2024, and remain open through 12 noon EST on January 29, 2024. Registration is available at <https://ntp.niehs.nih.gov/go/commprac-2024>. Interested individuals are encouraged to visit this web page to stay abreast of the most current webinar information. Registrants will receive instructions on how to access and participate in the webinar in the email confirming their registration. TTY users should contact the Federal TTY Relay Service at 800–877–8339. Requests should be made at least five business days in advance of the event.

Background Information on ICCVAM and NICEATM: ICCVAM is an interagency committee composed of representatives from 17 Federal regulatory and research agencies that require, use, generate, or disseminate toxicological and safety testing information. ICCVAM conducts technical evaluations of new, revised, and alternative safety testing methods and integrated testing strategies with regulatory applicability. ICCVAM also promotes the scientific validation and regulatory acceptance of testing methods that more accurately assess the safety and hazards of chemicals and products and replace, reduce, or refine animal use.

The ICCVAM Authorization Act of 2000 (42 U.S.C. 285l–3) establishes ICCVAM as a permanent interagency committee of the National Institute of Environmental Health Sciences and provides the authority for ICCVAM involvement in activities relevant to the development of alternative test methods. Additional information about ICCVAM can be found at <https://ntp.niehs.nih.gov/go/iccvam>.

NICEATM administers ICCVAM, provides support for ICCVAM-related activities, and conducts and publishes analyses and evaluations of data from new, revised, and alternative testing approaches. NICEATM and ICCVAM work collaboratively to evaluate new and improved testing approaches applicable to the needs of U.S. Federal agencies. NICEATM and ICCVAM welcome the public nomination of new



NUECES COUNTY HOSPITAL DISTRICT

INDIGENT HEALTHCARE HANDBOOK

March 1, 2024

NUECES COUNTY HOSPITAL DISTRICT

INDIGENT HEALTHCARE PROGRAM HANDBOOK

Revised: January 1, 2002

Revised: September, 2002

Revised: January 1, 2006

Updated: January, 2007

Updated: March 2008

Updated: February 2009

Updated March 2010

Updated March 2011

Updated March 2012

Updated March 2, 2013

Updated March 1, 2014

Updated March 1, 2015

Updated March 1, 2016

Updated March 1, 2017

Updated March 1, 2018

Updated March 1, 2019

Updated March 1, 2020

Updated March 1, 2021

Updated March 1, 2022

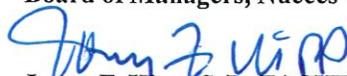
Updated March 1, 2023

Updated March 1, 2024

**NUECES COUNTY HOSPITAL DISTRICT
INDIGENT HEALTHCARE PROGRAM
POLICY AND PROCEDURE**

Date of Origin: January 1, 1999
Date of Revision: March 1, 2024
Date of Review: March 1, 2024

Authorized and Approved by:
Board of Managers, Nueces County Hospital District


Jonny F. Hipp, ScD, FACHE
Administrator/Board Secretary

Title: NUECES AID PROGRAM ELIGIBILITY GUIDELINES

Policy: NA002

I. POLICY

The Nueces County Hospital District is responsible for ensuring the provision of medically necessary healthcare services, in accordance with the state statute and as approved by the Board of Managers, to the needy and eligible residents of Nueces County. The District meets this responsibility through the administration of the Nueces Aid Program.

The Board of Managers for the Nueces County Hospital District has an ethical and statutory obligation to establish and maintain objective guidelines for use in determining an individual's eligibility for healthcare assistance through the Nueces Aid Program. To fulfill this obligation the Board of Managers will evaluate the eligibility guidelines annually and make recommendations for revision when indicated.

The Nueces County Hospital District will use the eligibility guidelines and related policies to complete an objective eligibility evaluation of all individuals applying for healthcare assistance. Three specific areas will be considered during the evaluation of the applicant's eligibility for healthcare assistance. The three areas are: residency in Nueces County, household resources and household size and income.

II. PURPOSE

The purpose of this policy is to establish written policies and guidelines which clearly and objectively state the means used to determine an applicant's eligibility for financial assistance through the Nueces Aid Program.

III. RESPONSIBILITY

The Quality Management Committee through the authority delegated by the Nueces County Hospital District Board of Managers, will provide direction and leadership in establishing and maintaining the guidelines used for determining eligibility for the Nueces Aid Program.

Nueces County Hospital District Board of Managers will consult with CHRISTUS Spohn Health System during review of the eligibility policy and guidelines recommended by the Quality Management Committee and either approve or disapprove the proposed guidelines.

IV. PROCEDURE

A. Qualifications for Financial Assistance

In accordance with the state statute, to receive healthcare assistance from the Nueces County Hospital District, an applicant must:

1. Provide evidence of residency in Nueces County;
2. Meet the household size and income guidelines; and
3. Meet the household resource guidelines;

Or

4. Be a Nueces County resident confined to a correctional facility operated by Nueces County and not the responsibility of another governmental service or agency.

B. Residency Policy and Guidelines

The Residency Policy and Guidelines are defined in **Attachment 1** to this policy.

C. Household Resource Policy and Guidelines

The Household Resource Policy and Guidelines are defined in **Attachment 2** to this policy.

D. Household Composition Policy and Guidelines

The Household Composition Policy and Guidelines are defined in **Attachment 3** to this policy.

E. Household Income Policy and Guidelines

The Household Income Policy and Guidelines are defined in **Attachment 4** to this policy.

I. HOUSEHOLD RESOURCE GUIDELINES

A. Definitions

For the purposes of the NCHD Indigent Healthcare Handbook:

1. **Resources** are defined as assets or possessions, both liquid and non-liquid. Examples include cash, bank accounts, stocks, bonds, certificates of deposit, vehicles, boats, campers, buildings, land and mineral rights.
2. **Fair Market Value** is defined as the amount a resource would bring if sold on the current local market.
3. **Equity** is defined as the amount of money that would be available to the owner after the sale of a resource. The amount is determined by subtracting from the fair market value any money owed on the item and the costs normally associated with the sale and transfer of the item.
4. **Accessible resources** are defined as resources legally available to the household.
5. **Inaccessible resources** are defined as resources not legally available to the household.
6. **Personal possessions** are defined as furniture, appliances, jewelry, clothing, livestock, farm equipment and other items if the household uses them to meet personal needs essential for daily living.
7. **Countable resource** is defined as the equity value of any resource that is not specifically exempt.

B. Resource Limit

A household is not eligible for the Nueces Aid Program if the total countable household resources exceeds **\$5,257.12** on or after the first interview date or the process date for cases processed without an interview.

This amount will be subject to the percent (%) increase in the Federal Poverty Guidelines as calculated to prior year and adjusted annually thereafter on the first day of the month following publication in the Federal Register.

If a payment or benefit counts as income for a particular month, do not count it as a resource in the same month. If you prorate a payment as income over several months, do not count any portion of the payment as a resource during that time.

If the client combines this money with countable funds, such as a bank account, exempt the prorated amounts for the time you prorate it.

C. Types of Resources

Household resources are either countable or exempt. Listed below are resource types used to determine household eligibility. Each resource is designated as counted or exempt:

1. 401K Plan

Exempt

2. Alien Sponsor's Resources

Count for three years after the alien's entry into the United States, the resources of the alien's sponsor and sponsor's spouse if the sponsor and spouse are living together determine the sponsor's countable resources by applying the policies contained in this section; subtract **\$2,628.56** and consider the remainder as resources available to the household.

The subtracted amount will be subject to the percent (%) increase in the Federal Poverty Guidelines as calculated to prior year and adjusted annually thereafter on the first day of the month following publication in the federal register.

3. Burial Plots

Exempt all burial plots as a countable resource.

4. Homestead

Exempt a household's homestead. A homestead is the household's usual residence and surrounding property that is not separated by property owned by others. Surrounding property that is separated by public rights of way such as roads is considered as part of the homestead.

Exempt a homestead temporarily unoccupied because of employment, training or future employment, illness casualty, or natural disaster if the household intends to return.

Do not exempt as a homestead any real property outside of Nueces County.

Households that do not currently own a home but own or are purchasing a lot on which they intend to build or are building a permanent home, receive an exemption for the lot and if partially completed, for the home.

Count money remaining from the sale of a home

5. Inaccessible Resources

Exempt inaccessible resources. Examples are irrevocable trust funds, property in probate, security deposits on rental property and utilities.

6. Income-Producing Property (except real property)

Exempt income producing property if it is essential to a household member's

employment or self-employment and annually produces income consistent with its fair market value, even if used only on a seasonal basis. Such property will continue to be exempt during temporary periods of unemployment if the client expects to return to work. Property essential to self-employment is not exempt if earnings result from an illegal activity.

7. Individual Retirement Accounts

Count Individual Retirement Accounts (IRA) as resources. If there is a penalty for early withdrawal, deduct the penalty and count the remaining amount.

8. Insurance Settlements

Count insurance settlements as resources. Deduct any amount earmarked and spent for the household's bills, for burial, medical or damaged/lost possessions. Count the remaining amount after deductions.

9. Jointly Owned Property

Exempt if the property is jointly owned by the household and other owners and the household proves that the property cannot be sold or divided without the other owners' consent and the other owners will not sell or divide the property.

10. Keogh Plans

Count Keogh Plans. If there is a penalty for early withdrawal, deduct the penalty amount and count the remainder. **Exempt** the Keogh Plan if there is a contractual withdrawal agreement with other people who are not household members and who share the same fund. This type of Keogh Plan is considered an inaccessible resource.

11. Lawsuit Settlement

Count lawsuit settlements, minus any amount earmarked and spent for the household's bills for burial, legal, medical or damaged/lost possessions.

12. Life Insurance

Exempt

13. Liquid Resources

Count liquid resources if readily negotiable. Examples; cash, checking, or saving accounts, saving certificates, stocks and bonds.

14. Lump-Sum Payments

Count. Countable as unearned income in the month received if the person receives or expects to receive it more than once a year. Lump-sum payments are exempt if only received once a year or less, unless specifically listed as income, and should

only be counted as resources. Exception: Contributions, gifts and prizes should be counted as unearned income in the month received, regardless of frequency of receipt.

Countable lump-sum payments include but are not limited to, retroactive lump-sum Retirement, Survivors and Disability Insurance (RSDI), public assistance, retirement benefits, lump-sum insurance settlements, lump-sum payments on child support, and other payments and refunds of security deposits on rental property or utilities. Exception: Federal tax refunds are permanently exempt as income and are excluded from resources for 12 months after receipt.

15. Personal Possessions

Exempt personal possessions. If personal possessions are sold, count the money received from the sale as a liquid resource.

16. Prepaid Burial Insurance

Exempt one of these policies per household member. Also exempt one prepaid funeral plan or prepaid funeral agreement for each household member.

17. Real property

Count equity value of real property unless otherwise exempt. Real property is land and any improvements on it.

18. Resources of Disqualified Persons

Exempt the resources of disqualified persons, such as, resources of an AFDC or SSI recipient. **Exempt** all resources of a person who receives QMB, MQMB, SLMB, QI-1, or QI-2.

19. Retirement Accounts

Exempt Retirement accounts are those in which an employee and/or his employer contributes money intended to provide for retirement.

The amount in the retirement account is exempt until the money is withdrawn. If the money is withdrawn as a monthly check, count it as income. If the money is withdrawn as a lump sum, count it as a resource.

20. Trust Funds

Exempt

21. Vested Retirement Accounts

Exempt Vested retirement accounts are those to which an employee makes contributions for a specified period of time as defined by the employer. The money is not matched by the employer until that defined period of time ends. The money in this account is exempt.

22. Vehicles

Exempt one vehicle per household when it is used by the household for transportation regardless of value. **Exempt** all licensed vehicles if they are used more than 50% of the time for income-producing purposes or if they produce annual income consistent with their fair market value (even if only used on a seasonal basis). **Exempt** all vehicles with a fair market value of less than or equal to **\$8,148.54**, regardless of the number of vehicles owned by the household. The fair market value in excess of **\$8,148.54** of vehicles is counted as part of the household's available resources, except for the exemptions listed above.

The fair market exemption amount will be subject to the percent (%) increase in the Federal Poverty Guidelines as calculated to prior year and adjusted annually thereafter on the first day of the month following publication in the federal register.

The following are suggestions for determining the fair market value of a vehicle:

- Use the average trade-in or wholesale value listed in the National Automobile Dealers Association (NADA) Used Car Guide - current within the last six (6) months. Use the loan value of the vehicle only if other sources are unavailable.
- If the household thinks that the listed value is incorrect because of the vehicle's condition (body damage or inoperable), allow the household to provide verification from a reliable source (bank loan officer or licensed car dealer).
- Do not increase the value because of low mileage, optional equipment, or special equipment for handicapped.
- Request that the household prove the value of antique, custom-made, or classic vehicles if an accurate appraisal cannot be made by staff.
- Accept the household's estimated value of vehicles no longer listed in the NADA guide unless the value is questionable and would affect eligibility. In this case, have the household provide an appraisal from a licensed car dealer or some other evidence of the value such as a tax assessment or newspaper ad showing the sale price of similar vehicles.
- For new vehicles not yet listed in the NADA guide, ask the household to provide an estimate of the wholesale or trade-in value from a new car dealer or a bank loan officer.

D. Verification of Resources

Prior to approval for healthcare assistance, questionable resources will be verified.

E. Documentation of Resources

The Eligibility Worksheet will be used to verify and document household resources.

F. Property Transfer Guidelines

Households are ineligible if within the previous three months they have transferred a countable resource for less than its fair market value to qualify for healthcare assistance. This penalty applies only if the value of the transferred resource plus the household's other countable resources will affect eligibility. If spouses are separated, transfer of separate property by one spouse does not affect the eligibility of the other spouse. Households which have transferred resources within the previous three months for less than the fair market value in order to qualify for the Nueces Aid Program will be subject to the following delays in assistance:

\$ 0.01	to	\$ 438.08	Delay of 1 Month
\$ 438.09	to	\$1,750.62	Delay of 3 Months
\$1,750.63	to	\$5,257.10	Delay of 6 Months
\$5,257.11	to	\$8,761.85	Delay of 9 Months
\$8,761.86		and above	Delay of 12 Months

The transferred resources in the table above will be subject to the percent (%) increase in the Federal Poverty Guidelines as calculated to prior year and adjusted annually thereafter on the first day of the month following publication in the Federal Register.

**NUECES COUNTY HOSPITAL DISTRICT
INDIGENT HEALTH CARE PROGRAM ELIGIBILITY
INCOME GUIDELINES FOR FINANCIAL ASSISTANCE**
Approved Scale
Effective March 1, 2024

		2024 HHS POVERTY GUIDELINES									NCHD pays	
		15,060	20,440	25,820	31,200	36,580	41,960	47,340	52,720	58,100		63,480
		SIZE OF HOUSEHOLD										
		1	2	3	4	5	6	7	8	9	1*	
MONTHLY GROSS FAMILY INCOME	0	0	0	0	0	0	0	0	0	0	Add	100%
	to	to	to	to	to	to	to	to	to	to	449	
	1255	1703	2152	2600	3048	3497	3945	4393	4842			
	1256	1704	2153	2601	3049	3498	3946	4394	4843	Add	90%	
	to	to	to	to	to	to	to	to	to	to		493
	1381	1874	2367	2860	3353	3846	4340	4833	5326			
1382	1875	2368	2861	3354	3847	4341	4834	5327	Add	80%		
to	to	to	to	to	to	to	to	to	to		538	
1506	2044	2582	3120	3658	4196	4734	5272	5810				
1507	2045	2583	3121	3659	4197	4735	5273	5811	Add	70%		
to	to	to	to	to	to	to	to	to	to		583	
1632	2214	2797	3380	3963	4546	5129	5711	6294				
1633	2215	2798	3381	3964	4547	5130	5712	6295	Add	60%		
to	to	to	to	to	to	to	to	to	to		619	
1732	2351	2969	3588	4207	4825	5444	6063	6682				
1733	2352	2970	3589	4208	4826	5445	6064	6683	Add	50%		
to	to	to	to	to	to	to	to	to	to		673	
1883	2555	3228	3900	4573	5245	5918	6590	7263				

GROSS FAMILY INCOME (monthly)

*Add the amounts shown in last column for each additional family member of household if size of household exceeds 9 members.

Revised 02/10/2024

**NUECES COUNTY HOSPITAL DISTRICT
INDIGENT HEALTH CARE PROGRAM ELIGIBILITY
INCOME GUIDELINES FOR FINANCIAL ASSISTANCE**
Approved Scale
Effective March 1, 2024

	2024 HHS POVERTY GUIDELINES										NCHD pays
	15,060	20,440	25,820	31,200	36,580	41,960	47,340	52,720	58,100	63,480	
	SIZE OF HOUSEHOLD										
	1	2	3	4	5	6	7	8	9	1*	
MONTHLY GROSS FAMILY INCOME	0	0	0	0	0	0	0	0	0	Add	100%
	to	to	to	to	to	to	to	to	to	449	
	1255	1703	2152	2600	3048	3497	3945	4393	4842		
	1256	1704	2153	2601	3049	3498	3946	4394	4843	Add	90%
	to	to	to	to	to	to	to	to	to	493	
	1381	1874	2367	2860	3353	3846	4340	4833	5326		
1382	1875	2368	2861	3354	3847	4341	4834	5327	Add	80%	
to	to	to	to	to	to	to	to	to	538		
1506	2044	2582	3120	3658	4196	4734	5272	5810			
1507	2045	2583	3121	3659	4197	4735	5273	5811	Add	70%	
to	to	to	to	to	to	to	to	to	583		
1632	2214	2797	3380	3963	4546	5129	5711	6294			
1633	2215	2798	3381	3964	4547	5130	5712	6295	Add	60%	
to	to	to	to	to	to	to	to	to	619		
1732	2351	2969	3588	4207	4825	5444	6063	6682			
1733	2352	2970	3589	4208	4826	5445	6064	6683	Add	50%	
to	to	to	to	to	to	to	to	to	673		
1883	2555	3228	3900	4573	5245	5918	6590	7263			

GROSS FAMILY INCOME (monthly)

*Add the amounts shown in last column for each additional family member of household if size of household exceeds 9 members.

Revised 02/10/2024

**Nueces County Hospital District
Combined Balance Sheet - All Fund Types & Account Groups
As of 02/29/2024
(In Whole Numbers)**

	General Fund	Special Revenue Fund	Trust Fund	General Fixed Assets	General Long Term Debt	TOTAL
Assets						
Cash & Cash Equivalents	70,561,666 *	15,698,465	47,888	0	0	86,308,019
Investments	17,741,666	42,066,943	0	0	0	59,808,609
Accrued Interest	0	202,364	198	0	0	202,563
Taxes Receivable, Net of Allowance	7,277,828	0	0	0	0	7,277,828
Other Receivables	0	0	0	0	0	0
Due from Other Funds	17,541	0	0	0	0	17,541
Prepaid Expenditures	74,179	0	0	0	0	74,179
Restricted Cash & Cash Equivalents - LPPF	20,949,675	0	0	0	0	20,949,675
Fixed Assets	0	0	0	14,170,694	0	14,170,694
Amt to be Provided for Retirement of LT Debt	0	0	0	0	105,708	105,708
Total Assets	<u>116,622,555</u>	<u>57,967,772</u>	<u>48,086</u>	<u>14,170,694</u>	<u>105,708</u>	<u>188,914,816</u>
Liabilities						
Accounts Payable	6,061,237	0	0	0	0	6,061,237
Accrued Payroll & Related Liabilities	279,715	0	0	0	0	279,715
Intergovernmental Transfer Obligations	20,949,675	0	0	0	0	20,949,675
Due to Other Funds	0	7,833	9,708	0	0	17,541
Deferred Revenue	7,277,828	0	0	0	0	7,277,828
Long Term Paid Time Off	0	0	0	0	105,708	105,708
Total Liabilities	<u>34,568,455</u>	<u>7,833</u>	<u>9,708</u>	<u>0</u>	<u>105,708</u>	<u>34,691,704</u>
Fund Equity						
Fund Balance	72,747,304	0	38,378	14,170,694	0	86,956,376
Committed to:						
Intergovernmental Transfers	9,306,796	0	0	0	0	9,306,796
Indigent Care	0	57,957,747	0	0	0	57,957,747
Assigned to County Health Care	0	2,193	0	0	0	2,193
Total Fund Equity	<u>82,054,100</u>	<u>57,959,940</u>	<u>38,378</u>	<u>14,170,694</u>	<u>0</u>	<u>154,223,112</u>
Total Liabilities & Fund Equity	<u>116,622,555</u>	<u>57,967,772</u>	<u>48,086</u>	<u>14,170,694</u>	<u>105,708</u>	<u>188,914,816</u>

* General Fund Cash & Equivalents balance includes \$9,306,796 in committed funds.

Nueces County Hospital District
 Statement of Revenues and Expenditures - All Governmental and Trust Funds
 General Fund
 From 2/1/2024 Through 2/29/2024
 (In Whole Numbers)

	Current Period Actual	Current Year Actual
Revenues		
Taxes	9,061,760	36,481,144
Penalties & Interest - Taxes	49,434	116,076
Spohn Corporate Member Revenue	8,874,848	50,093,433
Investment Income	352,573	1,606,756
Other Income	25	506,295
Total Revenues	18,338,640	88,803,704
Current Expenditures		
Intergovernmental Transfers	15,040,580	52,920,208
County Healthcare Funding	1,064,581	4,809,674
Salaries	133,633	739,315
Benefits	59,873	318,819
Legal & Professional Fees	110,896	430,606
Purchased Services	115,010	619,725
Supplies & Materials	735	6,472
Rent & Leases	11,624	57,888
Repairs & Maintenance	96	544
Utilities	3,361	17,828
Insurance	2,074	10,368
Administrative & General	6,689	33,076
Total Current Expenditures	16,549,151	59,964,523
Excess of Revenues Over Expenditures Before Sources/Uses	1,789,489	28,839,182
Excess of Revenues Over Expenditures After Sources & Uses	1,789,489	28,839,182
Fund Balance, Beginning of Year		53,214,918
FUND BALANCE, END OF YEAR		82,054,100

Nueces County Hospital District
Statement of Revenues and Expenditures - All Governmental and Trust Funds
Special Revenue Fund
From 2/1/2024 Through 2/29/2024
(In Whole Numbers)

UNAUDITED

	Current Period Actual	Current Year Actual
Revenues		
Investment Income	179,769	857,265
Total Revenues	179,769	857,265
Current Expenditures		
Legal & Professional Fees	0	4,531
Total Current Expenditures	0	4,531
Excess of Revenues Over Expenditures Before Sources/Uses	179,769	852,734
Excess of Revenues Over Expenditures After Sources & Uses	179,769	852,734
Fund Balance, Beginning of Year		57,107,206
FUND BALANCE, END OF YEAR		57,959,940

Nueces County Hospital District
Statement of Revenues and Expenditures - All Governmental and Trust Funds
Trust Fund
From 2/1/2024 Through 2/29/2024
(In Whole Numbers)

UNAUDITED

	Current Period Actual	Current Year Actual
Revenues		
Investment Income	198	1,038
Total Revenues	198	1,038
Current Expenditures		
Benefits	594	6,971
Administrative & General	20	107
Total Current Expenditures	614	7,078
Excess of Revenues Over Expenditures Before Sources/Uses	(416)	(6,040)
Excess of Revenues Over Expenditures After Sources & Uses	(416)	(6,040)
Fund Balance, Beginning of Year		44,418
FUND BALANCE, END OF YEAR		38,378

Nueces County Hospital District
Statement of Revenues and Expenditures - Actual v. Budget
General Fund
From 2/1/2024 Through 2/29/2024
(In Whole Numbers)

UNAUDITED

	Current Period Actual	Current Period Budget	Current Period Budget Variance	Current Year Actual	YTD Budget	YTD Budget Variance
Revenues						
Taxes	9,061,760	8,670,288	391,472	36,481,144	35,698,042	783,102
Penalties & Interest - Taxes	49,434	25,220	24,214	116,076	155,173	(39,097)
Spohn Corporate Member Revenue	8,874,848	9,562,500	(687,652)	50,093,433	47,812,500	2,280,933
Investment Income	352,573	82,747	269,826	1,606,756	355,748	1,251,008
Other Income	25	0	25	506,295	0	506,295
Total Revenues	<u>18,338,640</u>	<u>18,340,755</u>	<u>(2,115)</u>	<u>88,803,704</u>	<u>84,021,463</u>	<u>4,782,241</u>
Current Expenditures						
Intergovernmental Transfers	15,040,580	630,310	(14,410,270)	52,920,208	35,308,763	(17,611,445)
County Healthcare Funding	1,064,581	1,031,649	(32,932)	4,809,674	5,393,250	583,576
Salaries	133,633	229,427	95,794	739,315	822,821	83,506
Benefits	59,873	70,653	10,780	318,819	338,688	19,869
Legal & Professional Fees	110,896	97,416	(13,480)	430,606	487,088	56,482
Purchased Services	115,010	126,584	11,574	619,725	712,571	92,846
Supplies & Materials	735	1,916	1,181	6,472	9,592	3,120
Rent & Leases	11,624	12,667	1,043	57,888	63,339	5,451
Repairs & Maintenance	96	834	738	544	4,170	3,626
Utilities	3,361	4,833	1,472	17,828	24,173	6,345
Insurance	2,074	2,824	750	10,368	14,132	3,764
Administrative & General	6,689	38,226	31,537	33,076	191,146	158,070
Capital Outlay	0	2,000,000	2,000,000	0	4,224,000	4,224,000
Extraordinary	0	417	417	0	2,085	2,085
Total Current Expenditures	<u>16,549,151</u>	<u>4,247,756</u>	<u>(12,301,395)</u>	<u>59,964,523</u>	<u>47,595,818</u>	<u>(12,368,705)</u>
Excess of Revenues Over Expenditures Before Sources/Uses	<u>1,789,489</u>	<u>14,092,999</u>	<u>(12,303,510)</u>	<u>28,839,182</u>	<u>36,425,645</u>	<u>(7,586,463)</u>
Excess of Revenues Over Expenditures After Sources & Uses	<u>1,789,489</u>	<u>14,092,999</u>	<u>(12,303,510)</u>	<u>28,839,182</u>	<u>36,425,645</u>	<u>(7,586,463)</u>
Fund Balance, Beginning of Year				53,214,918	0	53,214,918
FUND BALANCE, END OF YEAR				<u>82,054,100</u>	<u>36,425,645</u>	<u>45,628,455</u>

Nueces County Hospital District
Statement of Revenues and Expenditures - Actual v. Budget
Tobacco Settlement Fund
From 2/1/2024 Through 2/29/2024
(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	9	0	9	49	0	49
Total Revenues	9	0	9	49	0	49
Excess of Revenues Over Expenditures Before Sources/Uses	9	0	9	49	0	49
Excess of Revenues Over Expenditures After Sources & Uses	9	0	9	49	0	49
Fund Balance, Beginning of Year				2,144	0	2,144
FUND BALANCE, END OF YEAR				2,193	0	2,193

Nueces County Hospital District
Statement of Revenues and Expenditures - Actual v. Budget
Indigent Care Fund
From 2/1/2024 Through 2/29/2024
(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	179,760	72,763	106,997	857,217	362,907	494,310
Total Revenues	<u>179,760</u>	<u>72,763</u>	<u>106,997</u>	<u>857,217</u>	<u>362,907</u>	<u>494,310</u>
Current Expenditures						
Legal & Professional Fees	0	0	0	4,531	0	(4,531)
Total Current Expenditures	<u>0</u>	<u>0</u>	<u>0</u>	<u>4,531</u>	<u>0</u>	<u>(4,531)</u>
Excess of Revenues Over Expenditures Before Sources/Uses	<u>179,760</u>	<u>72,763</u>	<u>106,997</u>	<u>852,686</u>	<u>362,907</u>	<u>489,779</u>
Excess of Revenues Over Expenditures After Sources & Uses	<u>179,760</u>	<u>72,763</u>	<u>106,997</u>	<u>852,686</u>	<u>362,907</u>	<u>489,779</u>
Fund Balance, Beginning of Year				57,105,061	0	57,105,061
FUND BALANCE, END OF YEAR				<u><u>57,957,747</u></u>	<u><u>362,907</u></u>	<u><u>57,594,840</u></u>



CONNIE SCOTT
NUECES COUNTY JUDGE

January 3, 2024

Nueces County Hospital District
ATTN: Mr. Jonny Hipp
555 N. Carancahua St., Ste. 950
Corpus Christi, Texas 78401

Re: Nueces nominee for appointment to Christus Spohn Health System Board of
Trustees, Place 1

Dear Mr. Hipp:

Dr. Yvonne Hinojosa was nominated for appointment to the Christus Spohn Board of Trustees at the Nueces County Commissioners Court meeting on December 13, 2023.

Enclosed please find a copy of the letter sent to Dr. Hinojosa notifying her of her nomination.

We look forward to continuing to work with you and your board members.

Respectfully,

A handwritten signature in blue ink that reads "Connie Scott".

Connie Scott
Nueces County Judge

CS.tcc

Enc.



CONNIE SCOTT
NUECES COUNTY JUDGE

January 3, 2024

Dr. Yvonne Hinojosa
8029 St. Laurent Dr.
Corpus Christi, Texas 78414

Dear Dr. Hinojosa:

On Wednesday, December 13, 2023, the Nueces County Commissioners Court approved your nomination to the Christus Spohn Health System Board of Trustees, Place 1, which would be for a three-year term that will expire December 31, 2026.

Your nomination has been forwarded to the Nueces County Hospital District for further consideration.

Thank you for your interest in serving Nueces County. You will be notified about your appointment upon approval by the Hospital District Board of Managers.

Best wishes,

A handwritten signature in blue ink that reads "Connie Scott".

Connie Scott
Nueces County Judge

CS.tcc

cc: Mr. Jonny Hipp, Nueces County Hospital District

NUECES COUNTY HOSPITAL DISTRICT
Local Provider Participation Fund

3/5/2024

Data Yr	FACILITY	COUNTY	LOCATION	ZIP	Annual Net Pt Rev	6 Pct	Qtrly Payment	CNTY	FID	NAME
2021	CHRISTUS Spohn Hospital Corpus Christi Shoreline	NUECES	600 Elizabeth Street	78404	633,192,468.00	37,991,548.08	9,497,887.02	178	3550740	Becky Rios
2021	Driscoll Children's Hospital	NUECES	3533 South Alameda Street	78411-1721	375,123,326.00	22,507,399.56	5,626,849.89	178	3550737	Mr. Eric Hamon
2021	The Corpus Christi Medical Center - Bay Area	NUECES	7101 South Padre Island Drive	78412-4999	426,686,601.00	25,601,196.06	6,400,299.02	178	3556218	Jay Woodall
2021	South Texas Surgical Hospital	NUECES	6130 Parkway Drive	78413	45,807,176.00	2,748,430.56	687,107.64	178	3556461	Janet O'Donnell
2021	PAM Specialty Hospital of Corpus Christi North	NUECES	600 Elizabeth Street Third Floor	78404-2235	21,904,932.00	1,314,295.92	328,573.98	178	3556336	Mr. Hector Bernal
2021	PAM Rehabilitation Hospital of Corpus Christi	NUECES	345 S Water Street	78401	24,249,744.00	1,454,984.64	363,746.16	178	3556595	Hector Bernal
2021	Corpus Christi Rehabilitation Hospital	NUECES	5726 Esplanade Drive	78414	18,835,548.00	1,130,132.88	282,533.22	178	3556502	Michael Pierce
							<u>23,186,996.93</u>			

Data Yr	FACILITY	COUNTY	LOCATION	ZIP	Annual NPR	NPR 6 Pct	Qtrly Pmt	CNTY	FID	NAME
2022	CHRISTUS Spohn Hospital Corpus Christi Shoreline	NUECES	600 Elizabeth Street	78404	615,440,115.00	36,926,406.90	9,231,601.73	178	3550740	Becky Rios
2022	Driscoll Children's Hospital	NUECES	3533 South Alameda Street	78411-1721	448,296,854.00	26,897,811.24	6,724,452.81	178	3550737	Eric Hamon
2022	Corpus Christi Medical Center Bay Area	NUECES	7101 South Padre Island Drive	78412-4999	433,826,756.00	26,029,605.36	6,507,401.34	178	3556218	Jay Woodall
2022	South Texas Surgical Hospital	NUECES	6130 Parkway Drive	78413	44,983,654.00	2,699,019.24	674,754.81	178	3556461	Janet O'Donnell
2022	PAM Specialty Hospital of Corpus Christi North	NUECES	600 Elizabeth Street 3rd Floor	78404-2235	25,331,522.00	1,519,891.32	379,972.83	178	3556336	Hector Bernal
2022	PAM Rehabilitation Hospital of Corpus Christi	NUECES	345 South Water Street	78401	24,878,694.00	1,492,721.64	373,180.41	178	3556595	Hector Bernal
2022	Corpus Christi Rehabilitation Hospital	NUECES	5726 Esplanade Drive	78414	19,675,175.00	1,180,510.50	295,127.63	178	3556502	Michael Pierce

FACILITY	2021 Data	2022 Data	Incr / (Decr)	2021 Data	Revised 2024
	NPR 6 Pct	NPR 6 Pct	2022 vs 2021 Data	Qtrly Payment	4th Qtr Pmt
CHRISTUS Spohn Hospital Corpus Christi Shoreline	37,991,548.08	36,926,406.90	(1,065,141.18)	9,497,887.02	8,432,745.84
Driscoll Children's Hospital	22,507,399.56	26,897,811.24	4,390,411.68	5,626,849.89	10,017,261.57
Corpus Christi Medical Center Bay Area	25,601,196.06	26,029,605.36	428,409.30	6,400,299.02	6,828,708.32
South Texas Surgical Hospital	2,748,430.56	2,699,019.24	(49,411.32)	687,107.64	637,696.32
PAM Specialty Hospital of Corpus Christi North	1,314,295.92	1,519,891.32	205,595.40	328,573.98	534,169.38
PAM Rehabilitation Hospital of Corpus Christi	1,454,984.64	1,492,721.64	37,737.00	363,746.16	401,483.16
Corpus Christi Rehabilitation Hospital	1,130,132.88	1,180,510.50	50,377.62	282,533.22	332,910.84
					<u>27,184,975.43</u>
					3,997,978.50



March 7, 2024

Jonny Hipp
Administrator/Chief Executive Officer
Nueces County Hospital District
555 N Carancahua Street, Suite 950
Corpus Christi, TX 78401

FIPS Number: 355-UONZ4-00
UEI Number: XB15KAMUHK5

RE: FEMA Public Assistance Grant 4485 - Texas Covid-19 Pandemic

Assistance Listing Number (ALN) 97.036 – Public Assistance Grant Program
Federal Award Identification Number 4485DRTXP0000001
FEMA Project Number: 01231; Amendment: 0
DR 4485 Work Deadline: May 11, 2025
Project Title: 742188 – Management Costs
Scope of Work Date: N/A
Period of Performance: 03-25-2020 to 03-25-2028

Award Notification

A FEMA Public Assistance subgrant has been awarded by Texas Division of Emergency Management (TDEM).

Project #: 742188						
Version / Amendment	Federal Award Date	Total Subgrant Amount	Federal Cost Share Percentage	Federal Funds Obligated	Local Cost Share Percentage	Local Cost Share Amount
0	03-05-2024	\$33,747.80	100%	\$33,747.80	0%	\$0.00

This award is not for Research or Development as defined in 2 CFR 200.87



No indirect costs are available with this award. For disasters declared prior to August 1, 2017, Direct Administrative Costs are allowable as outlined in the project scope. Management costs are allowable under a separate award for disasters declared on or after August 1, 2017.¹¹

A copy of the approved scope of work can be viewed at the version tab in GMS for this project at [Grants.tdem.texas.gov](https://grants.tdem.texas.gov) and is also attached for your convenience. If your project contains 406 Mitigation Proposal, it will also be attached and available at the version tab.

Your project worksheet may or may not have environmental and historical considerations and conditions that must be met. A copy of the Record of the Environment Consideration (REC) can be viewed at the version tab in GMS for this project as well.

The terms and conditions remain in effect as outlined in the original Grant Terms and Conditions, and any subsequent State amendments.

It is important that the Subrecipient read, understand, and comply with the scope of work and all terms and conditions. It is also vital that this information be disseminated to Subrecipient's staff and contractors that are involved in work related to administrative support or administration of the subgrant.

If changes are needed to the scope of the subaward, period of performance or costs associated to the subaward, the Subrecipient should immediately contact TDEM. No change will be considered made to the subaward until the Subrecipient is notified in writing by TDEM.

Should you wish to appeal any determination related to this project you must do so within 60 days of receipt of the notice of the action. If you elect to appeal, please submit your appeal with any documentation supporting your position directly to TDEM via the Grants Management System at <https://grants.tdem.texas.gov> within the allotted time. Here is the Project Appeal Job Aid for your guide [Project Appeals Job Aid](#).

If you have any questions, please contact TDEM Recovery Coordinator, [Juan Alaniz](#), by phone at (956) 328-1252, or email at juan.alaniz@tdem.texas.gov or you may contact the TDEM Support Affiliate, [Tho Do](#), by phone at (254) 300-7023 or by email at tho.do@horne.com.

ATTACHMENTS: Scope of Work (FEMA Project Worksheet)
 Record of Environmental Considerations

SUMMARY OF HOSPITAL DISTRICT DISTRIBUTION RULE, 34 TAC 16.222

SUMMARY OF RULE:

Rule 16.222 provides administrative, transparency, oversight, and accountability provisions governing the Texas Opioid Abatement Fund Council's (O AFC) distribution of settlement funds and hospital districts' receipt of those funds. The rule implements part of Senate Bill (SB) 1827, 87th Legislature, Regular Session, requiring a portion of money received from statewide settlement agreements to be distributed to hospital districts.

The rule prioritizes the smallest rural hospital districts by distributing one-time floor payments up front. The rule then shifts distributions to the remaining medium, large, and urban hospital districts.

The rule defines allowable uses of hospital district settlement funds by linking them to O AFC's existing priorities and court orders and settlement agreements, as applicable. The rule allows O AFC to monitor hospital districts' use of funds.

The rule provides accountability by allowing O AFC to cancel distributions if hospital districts fail to use funds for allowable uses, as defined by the rule. The rule allows the O AFC to instruct the director to provide hospital districts with written notice of failure to comply and opportunities to respond to and cure the alleged failure to comply. The rule also allows O AFC to require hospital districts to refund money they received and enables O AFC to withhold future distribution payments from hospital districts failing to comply with the rules.

SECTION-BY-SECTION SUMMARY OF THE RULE:

Rule 16.222 governs O AFC's allocation and distribution of money received from statewide opioid settlement agreements to all hospital districts in Texas under Government Code, 403.508(a)(2), as enacted by Senate Bill 1827, 87th Legislature, R.S., 2021. This provision requires 15 percent of money received from statewide settlement agreements and allocated to the O AFC to be distributed to hospital districts.

Subsection (a) requires O AFC to make periodic distributions of money allocated to hospital districts.

Subsection (b) describes when money will be distributed to hospital districts by O AFC.

Subsection (c) provides that the total amount of each distribution of money to hospital districts will be determined by O AFC.

Subsection (d) explains how the initial distribution of money will be allocated to hospital districts—distributing to rural hospital districts first and distributing the remainder to medium, large and urban hospital districts.

Subsection (e) describes how subsequent distributions of money will be allocated to the medium, large, and urban hospital districts.

Subsection (f) lists the specific hospital districts that will receive money only from the initial distribution by O AFC and the amount of money each of the listed hospital districts will receive from the initial distribution. Under the formula, small rural hospital districts without a hospital will receive \$25,000 and rural hospital districts with a hospital will receive \$75,000.

• Figure 1 lists specific hospital districts that will receive a one-time, lump sum floor distribution.



Subsection (g) lists the specific hospital districts that will be distributed money during the subsequent distributions by O AFC and the percentage that will be used to calculate the distribution to each of the listed hospital districts. Under the formula, medium, large, and urban hospital districts will receive a pro rata share of remaining distributions based on their actual or estimated uncompensated care costs attributable to the opioid crisis.

• Figure 2 lists the periodic distribution to medium, large, and urban hospital districts.

Subsection (h) allows O AFC to round amounts of money allocated to individual hospital districts down to the nearest whole dollar. It also requires O AFC to retain any remaining money caused by rounding for future allocation to hospital districts.

Subsection (i) sets forth the requirements for hospital districts to receive a distribution of money from O AFC.

Subsection (j) requires money received by a hospital district to be used by the hospital district to remediate the opioid crisis, including providing assistance in one or more of the categories described in subsection (i)(1)(B):

- treatment and coordination of care;
- prevention and public safety;
- recovery support services; or
- workforce development and training; or
- if a court order or settlement agreement requires the money to be used for one or more specific purposes, for a permissible use provided by that court order or settlement agreement.

Subsection (k) allows O AFC to cancel a distribution of money to a hospital district and retain the money for future allocation to hospital districts if the hospital district does not satisfy the requirements to receive a distribution of money from O AFC under subsection (i).

SUMMARY OF HOSPITAL DISTRICT DISTRIBUTION RULE (CONTINUED)

Subsection (l) requires a hospital district that receives a distribution of money from OAFIC to submit periodic reports to the OAFIC's director to ensure compliance with the permitted uses of the money distributed. It also allows the OAFIC's director to determine the frequency, format and requirements of the reports.

Subsection (m) allows the OAFIC to monitor a hospital district that receives money under this section to ensure compliance with the permissible uses of the money distributed.

Subsection (n) allows the OAFIC to take action if it finds that a hospital district has failed to comply with the requirement to use funding to remediate the opioid crisis as provided by Subsection (j). This section allows the council to:

- instruct the OAFIC director to provide the hospital district with written notice of the failure to comply;
- provide the hospital district with an opportunity to respond;
- require the hospital district to cure the failure to comply to the satisfaction of the OAFIC;
- require the hospital district to refund all or a portion of the money the hospital district received under the rule; and
- exercise any other legal remedies available at law.

Subsection (o) requires money refunded under Subsection (n) to be retained by the OAFIC for future allocation to hospital districts under the rule.

Subsection (p) provides that, except as otherwise provided in this section, this section and Section 16.200 of this subchapter are the only provisions in this subchapter that apply to the allocation of money to hospital districts under Government Code, Section 403.508(a)(2).

FIGURE 1 – GROUP 1: ONE-TIME FLOOR DISTRIBUTION TO SMALL RURAL HOSPITAL DISTRICTS, 34 TAC §16.222(F)

HOSPITAL DISTRICT	DOLLAR AMOUNT
Anson Hospital District	\$75,000
Baylor County Hospital District	\$75,000
Big Bend Regional Hospital District (Presidio County)	\$75,000
Chillicothe Hospital District	\$25,000
Cothran County Hospital District	\$75,000
Farwell Hospital District	\$25,000
Follett Hospital District	\$25,000
Grapeland Hospital District	\$25,000
Hamlin Hospital District	\$25,000
Higgins-Lipscomb Hospital District	\$25,000
Knox County Hospital District	\$75,000
Moore County Hospital District (Sherman County)	\$75,000
Motley County Hospital District	\$25,000
Moulton Community Medical Clinic District	\$25,000
Muleshoe Area Hospital District (Parmer County)	\$75,000
Nixon Hospital District (Gonzales County)	\$25,000
Nixon Hospital District (Wilson County)	\$25,000
Olney-Hamilton Hospital District (Archer County)	\$75,000
Olney-Hamilton Hospital District (Young County)	\$75,000
Rockdale Hospital District	\$25,000
Stamford Hospital District (Haskell County)	\$75,000
Stonewall County Hospital District	\$75,000
Texhoma Memorial Hospital District	\$25,000
Trinity Memorial Hospital District	\$25,000
Yoakum Hospital District (DeWitt County)	\$75,000
Yoakum Hospital District (Gonzales County)	\$75,000

FIGURE 2 – GROUP 2: PERIODIC PRO RATA DISTRIBUTIONS TO MEDIUM, LARGE, AND URBAN HOSPITAL DISTRICTS, 34 TAC §16.222(G)

HOSPITAL DISTRICT	PERCENTAGE
Andrews County Hospital District	0.160436
Angleton-Danbury Hospital District	0.087401
Ballinger Memorial Hospital District	0.048834
Bellville Hospital District	0.030757
Bexar County Hospital District	8.831295
Big Bend Regional Hospital District (Brewster County)	0.086809
Booker Hospital District	0.041340
Bosque County Hospital District	0.109186
Burleson County Hospital District	0.061548
Caprock Hospital District	0.030328
Castro County Hospital District	0.057357
Chambers County Public Hospital District #1	0.050792
Childress County Hospital District	0.085801
Coleman County Hospital District	0.058634
Collingsworth County Hospital District	0.033171
Comanche County Consolidated Hospital District	0.098162
Concho County Hospital District	0.048098
Crane County Hospital District	0.127267
Crosby County Hospital District	0.041915
Culberson County Hospital District	0.106176
Dallam-Hartley Counties Hospital District (Dallam County)	0.082007
Dallam-Hartley Counties Hospital District (Hartley County)	0.057700
Dallas County Hospital District	19.311689
Darrouzett Hospital District	0.010292
Dawson County Hospital District	0.100566
Deaf Smith County Hospital District	0.132610
DeWitt Medical District	0.088160

SUMMARY OF HOSPITAL DISTRICT DISTRIBUTION RULE (CONTINUED)

FIGURE 2 – (CONTINUED)

HOSPITAL DISTRICT	PERCENTAGE		
Dimmit County Regional Hospital District	0.101862	Karnes County Hospital District	0.245865
Donley County Hospital District	0.012935	Kimble County Hospital District	0.057192
East Coke County Hospital District	0.017775	Lavaca Hospital District	0.038789
Eastland Memorial Hospital District	0.080398	Liberty County Hospital District #1	0.097548
Ector County Hospital District	1.389853	Lockney General Hospital District	0.030328
El Paso County Hospital District	4.086865	Lubbock County Hospital District	3.117222
Electra Hospital District	0.057164	Lynn County Hospital District	0.068226
Fairfield Hospital District (Freestone County)	0.075729	Marion County Hospital District	0.013217
Fairfield Hospital District (Navarro County)	0.182265	Martin County Hospital District	0.536509
Fisher County Hospital District	0.036581	Matagorda County Hospital District	0.242180
Foard County Hospital District	0.025084	Maverick County Hospital District	0.230514
Frio Hospital District	0.118072	McCamey County Hospital District	0.195824
Gainesville Hospital District	0.133475	McCulloch County Hospital District	0.096240
Garza County Health Care District	0.020118	Medina County Hospital District	0.137682
Gonzales Healthcare Systems	0.118063	Menard County Hospital District	0.039541
Graham Hospital District	0.068916	Midland County Hospital District	0.930275
Guadalupe Regional Medical Center	0.420866	Mitchell County Hospital District	0.449405
Hall County Hospital District	0.012862	Montgomery County Hospital District	0.799270
Hamilton Hospital District	0.083725	Moore County Hospital District (Hartley County)	0.058939
Hansford County Hospital District	0.066245	Moore County Hospital District (Moore County)	0.113487
Hardeman County Hospital District	0.043279	Muenster Hospital District	0.044014
Harris County Hospital District	24.079880	Muleshoe Area Hospital District (Bailey County)	0.042112
Haskell County Hospital District	0.040501	Nacogdoches County Hospital District	0.279208
Hemphill County Hospital District	0.216620	Nocona Hospital District	0.040821
Hopkins County Hospital District	0.313847	Nolan County Hospital District	0.095098
Houston County Hospital District	0.068250	North Runnels County Hospital District	0.048564
Hunt Memorial Hospital District	0.632366	North Wheeler County Hospital District	0.045530
Hutchinson County Hospital District	0.123171	Nueces County Hospital District	3.578256
Iraan General Hospital District	0.163113	Ochiltree County Hospital District	0.051051
Jack County Hospital District	0.084793	Palo Pinto County Hospital District	0.225589
Jackson County Hospital District	0.090823	Parker County Hospital District	0.525020
		Parmer County Hospital District	0.056361
		Rankin County Hospital District	0.329975
		Reagan Hospital District	0.240518
		Reeves County Hospital District	1.638256
		Refugio County Memorial Hospital District	0.072700
		Rice Hospital District	0.072287
		Sabine County Hospital District	0.046051
		San Augustine City-County Hospital District	0.040244
		Schleicher County Hospital District	0.103173
		Scurry County Hospital District	0.235290
		Seminole Hospital District	0.219679
		Shackelford County Hospital District	0.039956
		Somervell County Hospital District	0.126352
		South Limestone Hospital District	0.057054
		South Randall County Hospital District	0.023023
		South Wheeler County Hospital District	0.068073
		Stamford Hospital District (Jones County)	0.045020
		Starr County Hospital District	0.118579
		Stephens Memorial Hospital District	0.054833
		Stratford Hospital District	0.028007
		Sutton County Hospital District	0.040993
		Sweeney Hospital District	0.286515
		Swisher Memorial Hospital District	0.044587
		Tarrant County Hospital District	11.563455
		Teague Hospital District	0.013292
		Terry Memorial Hospital District	0.078520
		Titus County Hospital District	0.216698
		Travis County Hospital District	7.332843
		Tyler County Hospital District	0.071789
		Val Verde County Hospital District	0.367525
		Walker County Hospital District	0.330399
		West Coke County Hospital District	0.022889
		West Wharton County Hospital District	0.123683
		Wilbarger County Hospital District	0.104538
		Willacy County Hospital District	0.016233
		Wilson County Memorial Hospital District	0.084803
		Winkler County Hospital District	0.094278
		Winnie Stowell Hospital District	0.054735
		Wood County Central Hospital District	0.119451

CIMBAR FTZ Overview

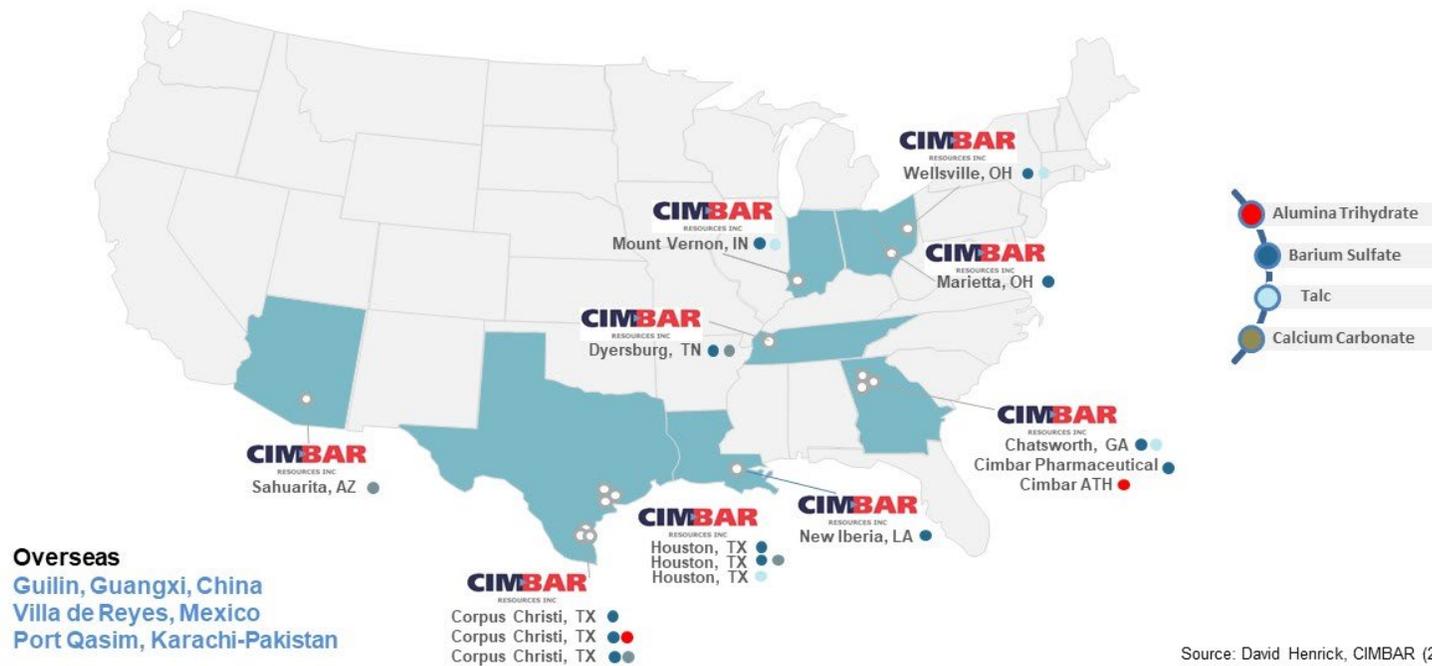


Presented by:

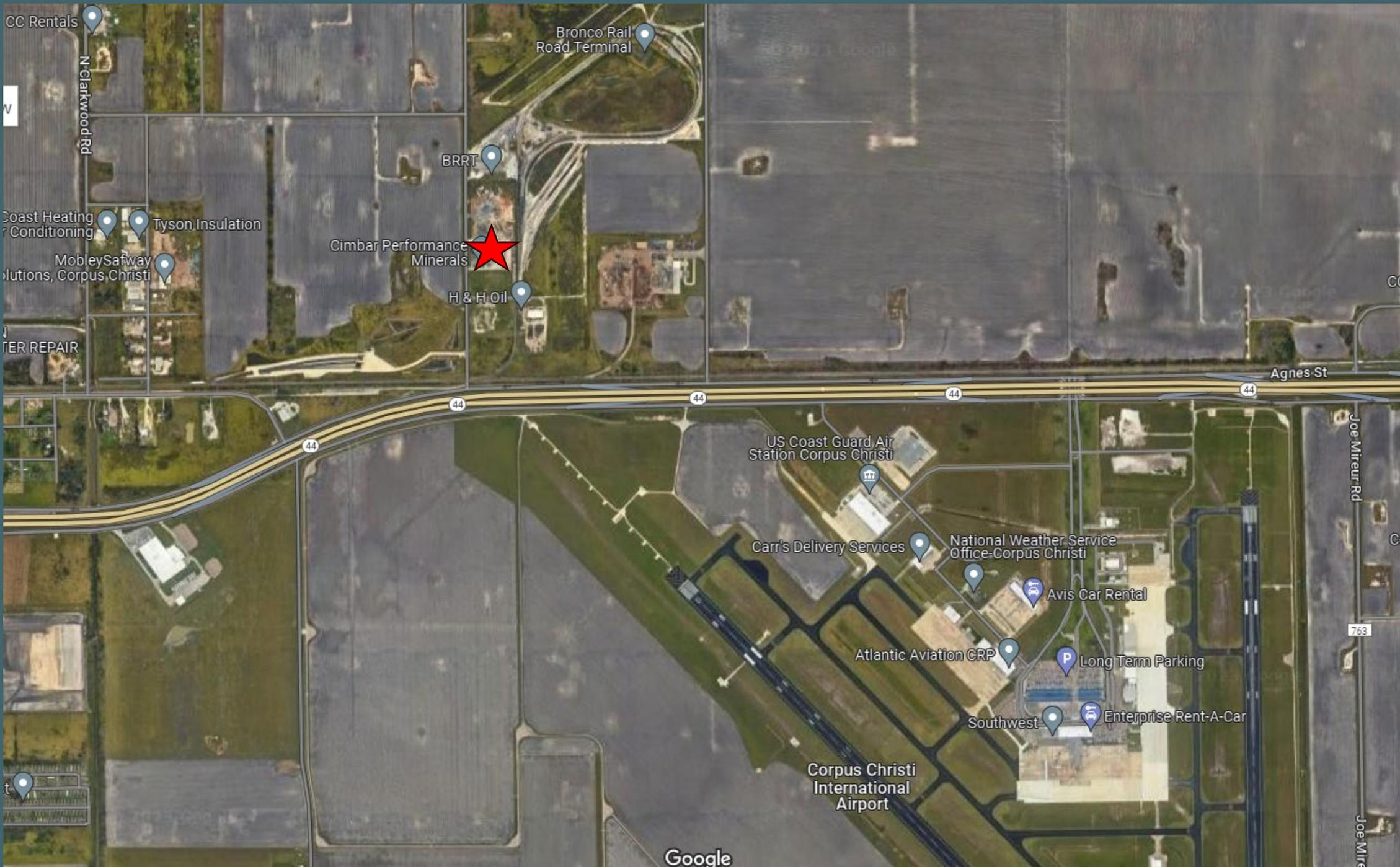
POCCA: Danielle Converse, FTZ Manager
CIMBAR: David Henrick, President

About CIMBAR

Cimbar is a leading supplier of barium sulfate. Established in 1914, Cimbar is globally recognized as a critical minerals supplier and produces industrial minerals at twelve production sites in the U.S. The Cimbar plant in Corpus Christi produces ground barite suitable for use in oil field applications.



Source: David Henrick, CIMBAR (2023)





Overview

- Sept. 2020: Acquired Baker Hughes Facility at 322 Manning Road
- Baker Hughes operated as FTZ subzone, but designation was terminated after acquisition
- Cimbar is reapplying for subzone status to access the available benefits under the FTZ program

Foreign-Trade Zones

Safeguarding American Jobs and Business

DANIELLE CONVERSE | FOREIGN TRADE ZONE MANAGER

Presented by



PORT CORPUS CHRISTI[®]

What is a Foreign-Trade Zone (FTZ)?

A Foreign-Trade Zone is a geographic area within the United States, in or near a U.S. Customs port of entry, where foreign & domestic merchandise is considered outside U.S. Customs territory.

Goods in FTZs remain in International Commerce.

Being outside Customs Territory is the legal position that provides FTZ benefits.

Normal tariff & Customs regulations apply *only* when goods enter U.S. commerce.



Key Players

Department of
Commerce
15 CFR 400



U.S. Foreign Trade
Zones Board
(FTZ Board)



Department of
Homeland Security
19 CFR 146



U.S. Customs & Border
Protection
(CBP)



Grantee
(Port of Corpus Christi)



FTZ Operators/ Users

Benefits of The Foreign Trade Zones Act

- **Exempts certain tangible personal property (inventory) from state and local ad valorem taxation.**

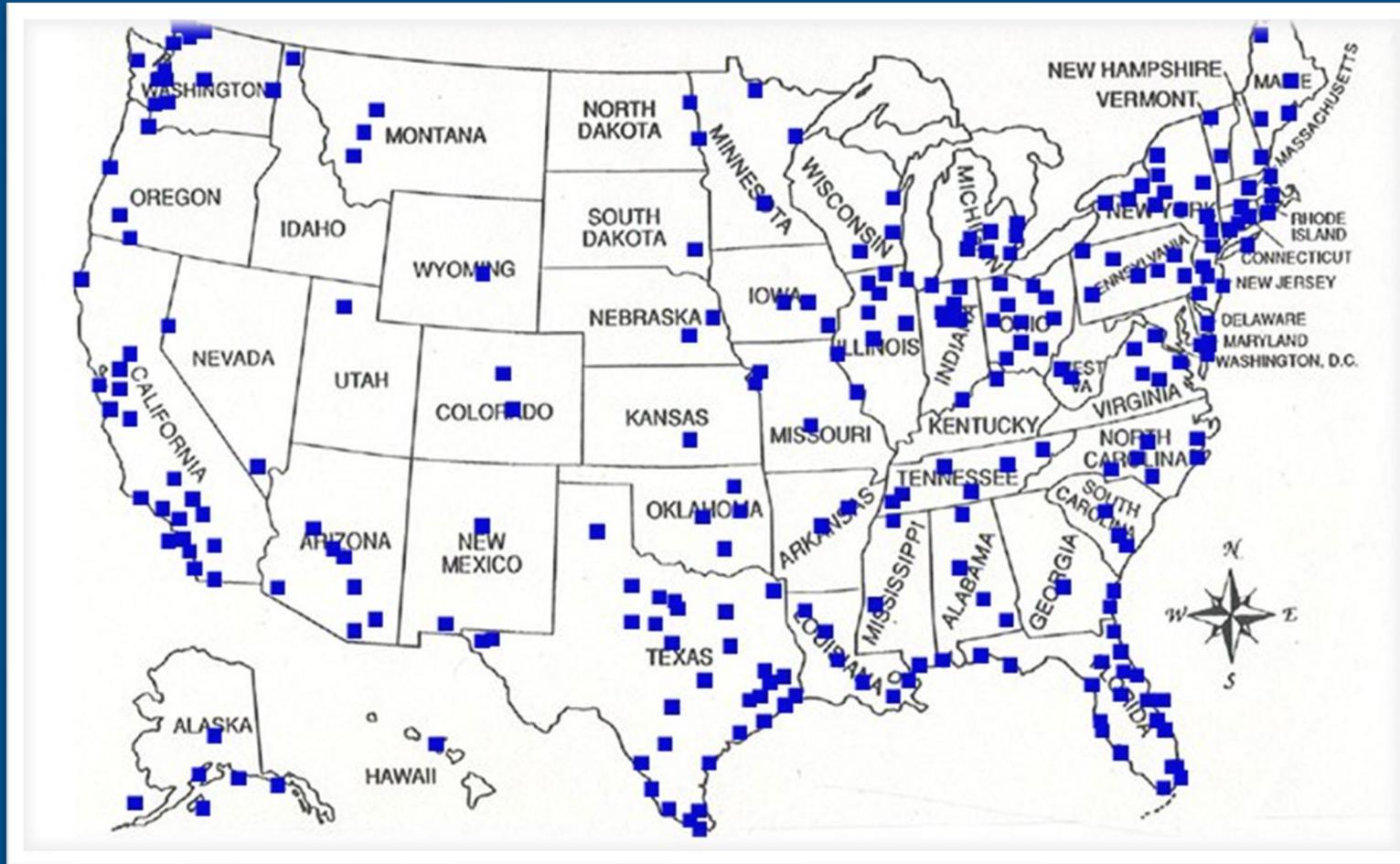
19 U.S.C. 81o(e) Tangible personal property imported from outside the United States and held in a zone for the purpose of storage, sale, exhibition, repackaging, assembly, distribution, sorting, grading, cleaning, mixing, display, manufacturing, or processing, and tangible personal property produced in the United States and held in a zone for exportation, either in its original form or as altered by any of the above processes, shall be exempt from State and local ad valorem taxation.

Benefits of the FTZ Act



Import duties & Federal excise tax are not paid until, and unless, the goods enter the commerce of the United States

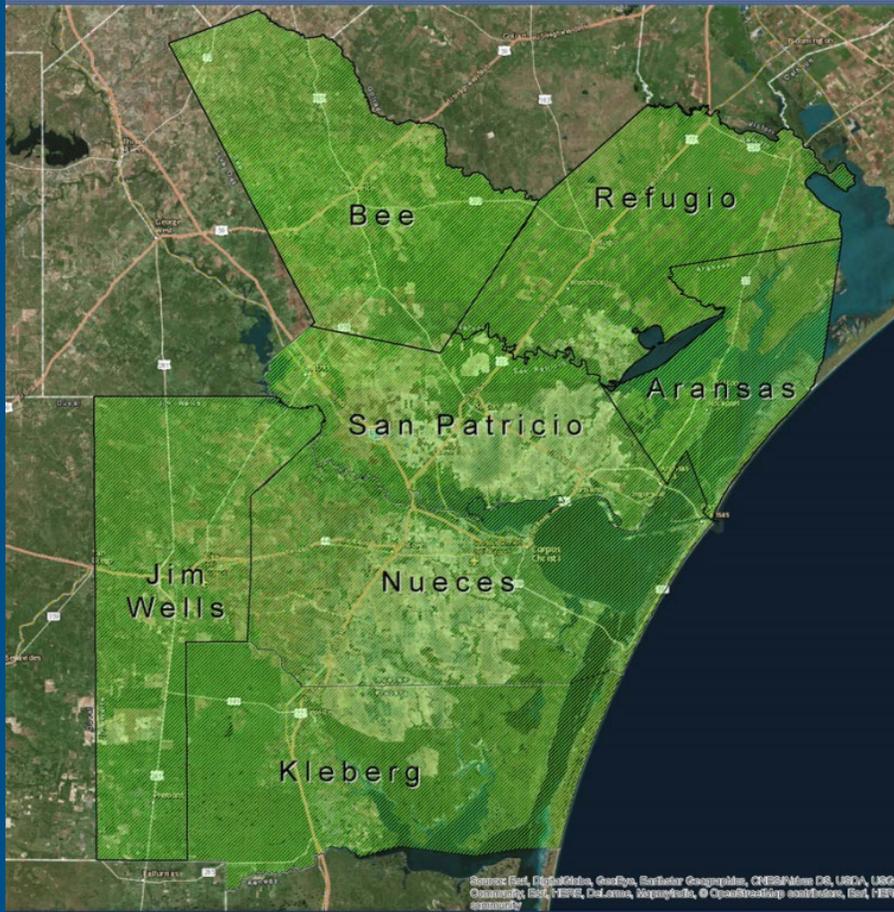
U.S. Foreign-Trade Zones



259 Approved/197 Active

Foreign-Trade Zone No. 122

Seven County Service Area



- **San Patricio County:**
 - Gulf Coast Growth Ventures (Polymers)
 - ArcelorMittal (Hot Briquetted Iron)
 - Cheniere Energy (Liquified Natural Gas)
 - Kiewit (Offshore Drilling Platforms)
- **Nueces County**
 - Citgo (Petroleum)
 - Valero (Petroleum)
 - Corpus Christi Polymers (Polymers)
 - MacroSource (Fertilizer)
 - Cimbar Resources (Barite)
 - Superior Weighting (Barite)
 - Halliburton (Barite)
 - Tex Isle Supply (Steel Tubular Goods)

Foreign-Trade Zone 122 Impacts

2022 Annual Report to Congress

Create Jobs & Investments

\$20.9 B 

Merchandise received

Retain U.S. Manufacturing

8 

Active Production Operations

Retain U.S. Employment

> 5,700 

Full time direct employees

Attract U.S. & Foreign Investment

12 Companies

FTZ Board Policies Regarding Local Tax Impacts

- If a state (TX, KY, AZ, LA, P.R.) has one or more taxes for which collections will be affected by the proposed FTZ designation of the new site(s) there are several items that must be included with the application for FTZ designation to be considered:
 - From Grantee – correspondence that lists all affected parties (local tax authorities) with a statement of certification that this is a complete list of all parties that would be affected by this request.
 - Grantee certification letter must be signed by an official of the grantee organization
- Correspondence from each of the affected parties indicating their concurrence (or non-objection) regarding the proposed FTZ designation

CIMBAR Project

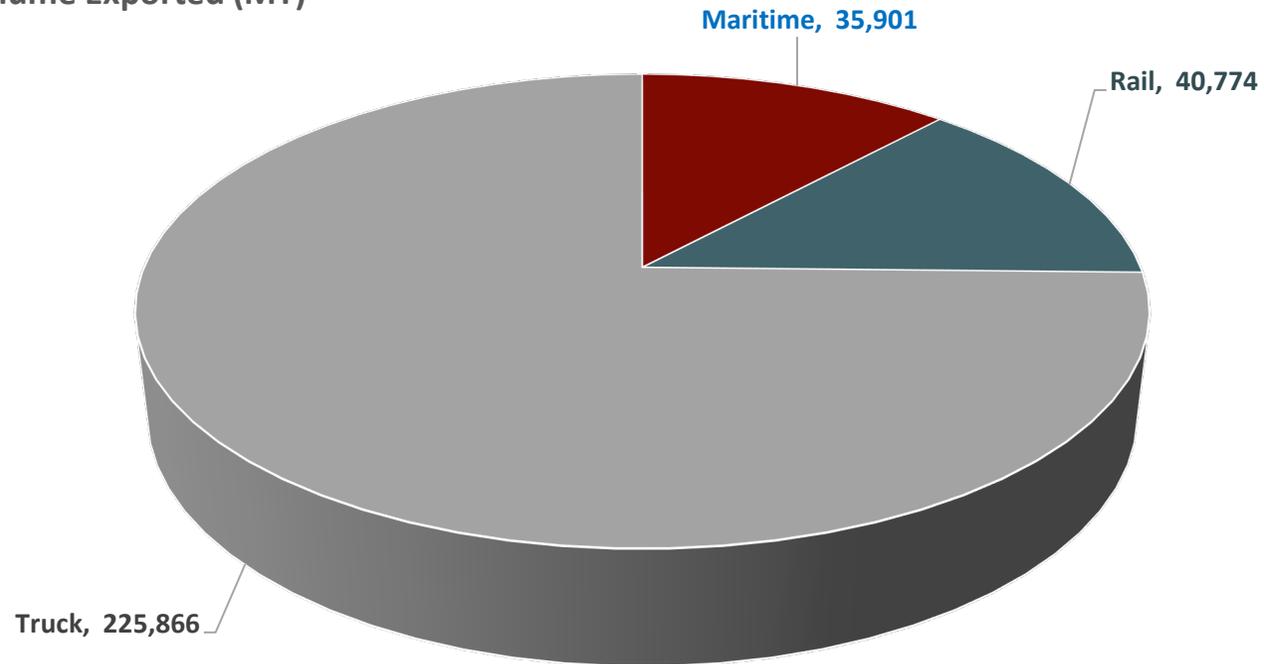
- Cimbar operates in a competitive industry facing pressures from imported finished goods primarily manufactured in Mexico
- Exports from Mexico have continued to rise, negatively impacting demand at Cimbar and overall production requirements
- Cimbar's ability to defer duty payment on imported raw materials, and manufacture goods under FTZ procedures to take advantage of the inverted tariff benefit afforded by the program assists Cimbar in maintain competitiveness and supports manufacturing in the U.S.
- The ability to leverage the federally available exemption from ad valorem tax on tangible personal property would further support Cimbar's competitiveness and future viability of Cimbar's operation at the site



Mexico Exports Spotlight

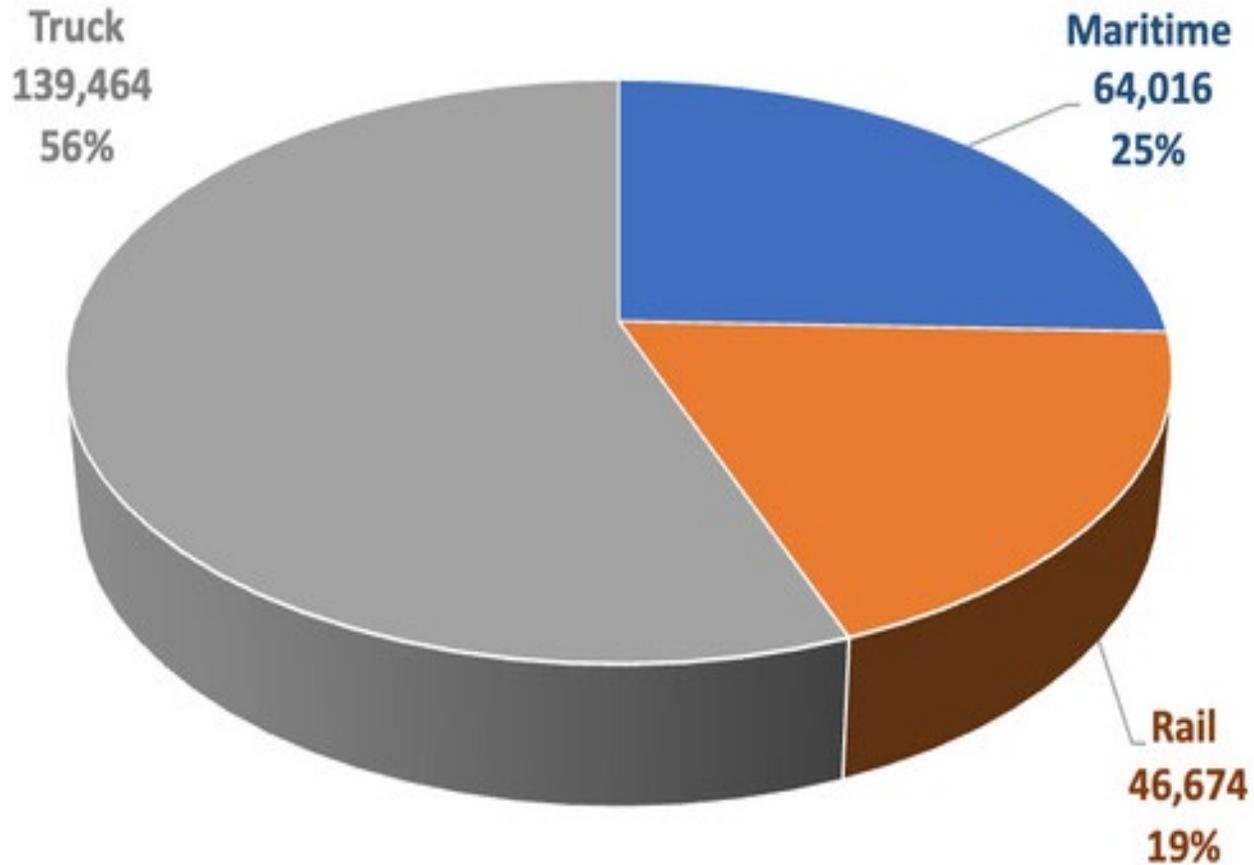
- **302,540 MT in 2022**
- 88% to USA
- Truck and Rail to South & West Texas
- Maritime to US GoM

Volume Exported (MT)



Source: Mexico Customs Data

Mexico Barytes Exports to US JAN-JUL 2023



Mexico's significance continues to grow
January to July YTD Exports 250,154 MT
On pace to set a new high of - 428,836 MT

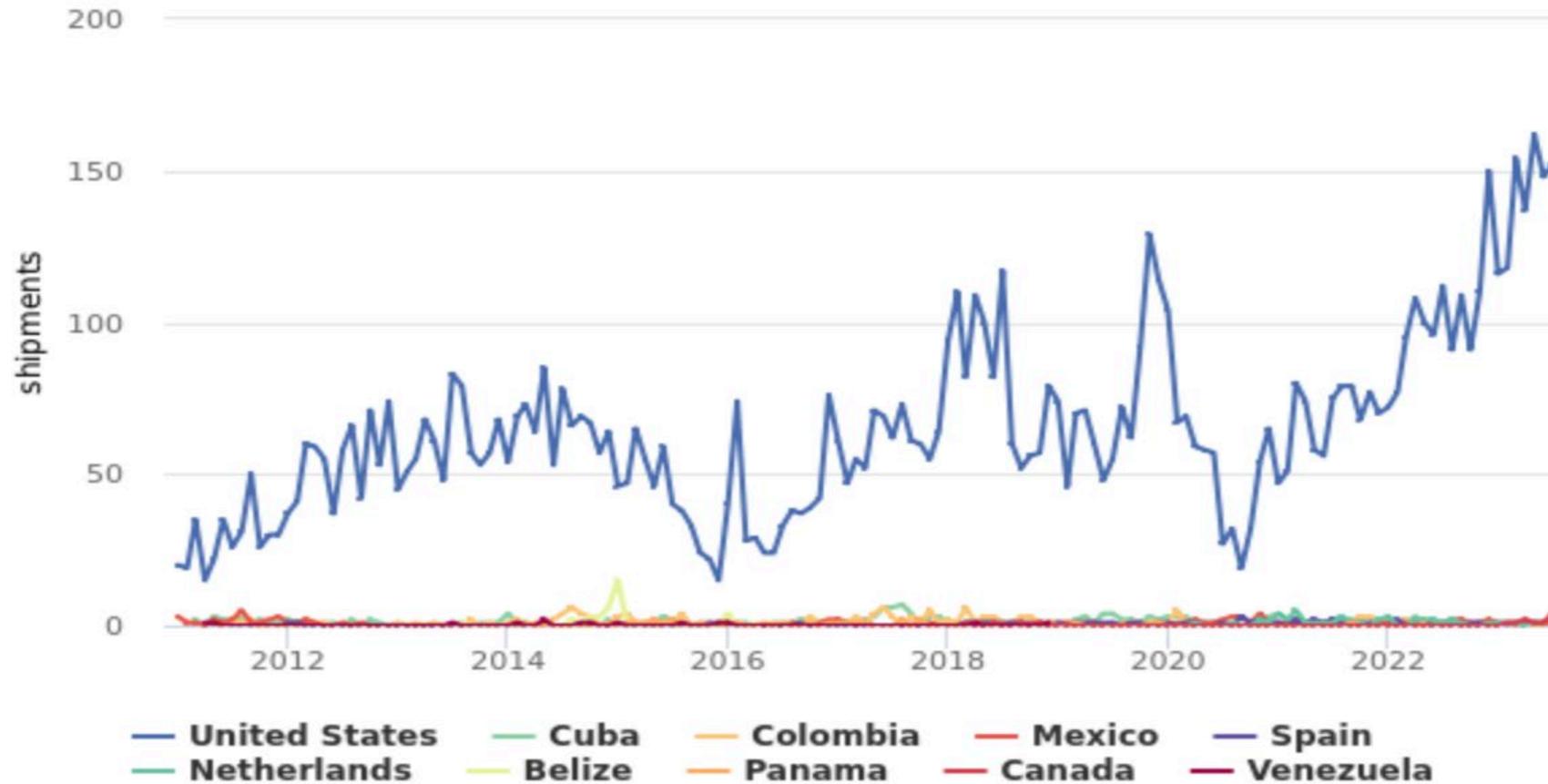
Up 126,296 MT YOY (40%)

Maritime	64,016
Rail Truck	46,674
Truck	139,464
TOTAL YTD	250,154
Annualized	428,836

Source: Mexican Customs

YOUR DASHBOARD – MEXICO EXPORT SHIPMENTS OF BARITE

Country of Origin by Shipments





Project Background

- Primary FTZ benefits available to Cimbar under the FTZ act are:
 - Duty deferral while goods are stored in the FTZ
 - Inverted tariff benefit on goods manufactured in the FTZ with approved production authority
 - Exemption from state and local ad valorem taxes from certain tangible personal property (i.e. inventory)



Project Background

- The exemption from state and local ad valorem taxes is permitted by the Foreign Trade Zones Act
- While the exemption is permitted under the ACT, for the limited states that continue to maintain an inventory tax, the FTZ Board requires a letter of concurrence or support from each of the impacted taxing authority in support of the project and acknowledging the exemption

Impact Report



IMPACT REPORT

CIMBAR

IDS Scenario w/o Inventory

Business Retention & Expansion
 Advanced Manufacturing

Nueces County Hospital District



NET BENEFITS		\$15,940
Present Value		\$12,232
BENEFITS		
Real Property Taxes		\$9,325
FF&E Property Taxes		\$6,615
Inventory Property Taxes		\$0
New Residential Property Taxes		\$0
Benefits Subtotal		\$15,940
COSTS		
None Estimated		\$0
Costs Subtotal		\$0

NET BENEFITS OVER 10 YEARS	
CITY	\$201,709
COUNTY	\$39,139
SCHOOL DISTRICT	\$173,010
OTHER	\$112,738

JOBS

26.3 Total
 12.0 Direct
 14.3 Spin-off

SALARIES

\$45,276 Avg
 \$59,500 Direct
 \$33,342 Spin-off

CAPITAL INVEST.

\$825,986
 FF&E

RESIDENTIAL DEV.

0 Homes
 0 Relocations

Request

Seeking “Letter of Concurrence” from taxing entities in support of FTZ application to receive designation as a Subzone by the U.S. Foreign-Trade Zones (FTZ) Board in FTZ # 122



Sample Concurrence Letter

Sample Letter of Concurrence

DATE

Ms. Danielle Converse
FTZ Manager
Port of Corpus Christi Authority
400 Harbor Drive
Corpus Christi, TX 78401

Dear Ms. Converse:

The purpose of this letter is to document the support of *(Taxing Entity)* for Cimbar Resources, Inc.'s application to establish and operate under Foreign Trade Zone designation under the auspices of the Port of Corpus Christi Authority, Grantee of Foreign-Trade Zone #122.

We believe the economic benefit this company brings to our area make it a valuable asset and will have a positive impact upon the local economy, local employment, and economic development in the region.

We understand that imported inventory and inventory held for export in the foreign-trade zone will be exempt from ad valorem tax.

(Taxing Entity) is fully supportive of the proposed FTZ designation for Cimbar Resources, Inc. and recommends expedited review and approval of the application.

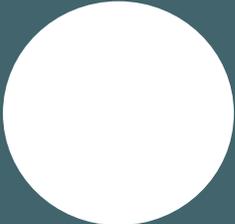
Sincerely,

Name
Title

cc: Nueces County Appraisal District



Questions?



Corporate/Agency Letterhead

DATE

Ms. Danielle Converse
FTZ Manager
Port of Corpus Christi Authority
400 Harbor Drive
Corpus Christi, TX 78401

Dear Ms. Converse:

The purpose of this letter is to document the support of Nueces County Hospital District for Cimbar Resources, Inc.'s application to establish and operate under Foreign Trade Zone designation under the auspices of the Port of Corpus Christi Authority, Grantee of Foreign-Trade Zone #122.

We believe the economic benefit this company brings to our area make it a valuable asset and will have a positive impact upon the local economy, local employment, and economic development in the region.

We understand that imported inventory and inventory held for export in the foreign-trade zone will be exempt from ad valorem tax.

Nueces County Hospital District is fully supportive of the proposed FTZ designation for Cimbar Resources, Inc. and recommends expedited review and approval of the application.

Sincerely,

Name
Title

cc: Nueces County Appraisal District