I. Call to Order and Record of Attendance

II. Public Comments

III. General Business

A. Consent Agenda

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

   1. Approve minutes from the November 19, 2013 CCC Board of Directors meeting.

B. Regular Agenda

   1. Receive a presentation on CCC Health Information Technology status review and contracting structure/approach.

   2. Discuss and take appropriate action on agreements for CCC Health Information Technology Services.
3. Receive a Delivery System Reform Incentive Payment (DSRIP) Projects update.
5. Receive a report on the current number of Unique MAP Enrollees.

IV. Closed Session

V. Closing

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

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

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

Los servicios de interpretación consecutiva del español al inglés están disponibles para la comunicación de los ciudadanos o cuando se invita al público a hacer comentarios. Si necesita estos servicios, al llegar sírvase notificarle al personal de la recepción.
AGENDA Item III-A-1
(no backup)

Approve minutes from the November 19, 2013 CCC Board of Directors meeting.
Board of Directors Meeting

December 10, 2013

AGENDA Item III-B-1
(no backup)

Receive a presentation on CCC Health IT status review and contracting structure/approach.
Board of Directors Meeting

December 10, 2013

AGENDA Item III-B-2
(no backup)

Discuss and take appropriate action on agreements for CCC Health Information Technology Services.
Board of Directors Meeting

December 10, 2013

AGENDA Item III-B-3

Receive a Delivery System Reform Incentive Payment (DSRIP) Projects update.
December 10, 2013

Dear CCC Board Members

I write with good news: we received word that our community-based Gastroenterology and Pulmonology specialty projects have been approved by CMS. In anticipation of this announcement, we had started work on these projects, but now we’re assured that we can continue to move forward.

We did learn that CMS adjusted the DY2 & DY3 value for our Chronic Disease Management Project to 80% of our proposed value, or $1.98m less than we had submitted. We had appealed this decision when it was made in May, but that appeal was not successful. The total impact of the reduction won’t be clear until CMS offers its opinion on every project’s DY4 & DY5 valuation, but we do not feel that this valuation adjustment threatens the project’s ability to perform or the CCC’s financial health.

In addition, we are still waiting on federal review of our Patient Navigation project, which you may recall was submitted in lieu of our musculoskeletal project. We hope to hear about this early in 2014. As with the specialty projects, we have begun fulfilling the projects’ milestones in hopes that it will be approved.

Finally, we are drafting our 15th DSRIP project, the three-year CenteringPregnancy project, and will submit that project to the state on December 20th. We expect to learn of approval status in March 2014.

We’ll share more information as it becomes available.

Thanks,

Sarah Cook  
Medicaid Waiver Director  
Central Health  
1111 E. Cesar Chavez St.  
Austin, TX 78702  
512-978-8195 (o)  
617-835-8476 (c)  
www.centralhealth.net
Board of Directors Meeting

December 10, 2013

AGENDA Item III-B-4

Receive a presentation on CCC Financials for November 2013.
<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assets</strong></td>
<td></td>
</tr>
<tr>
<td>Cash &amp; cash equivalents</td>
<td>20,125,343</td>
</tr>
<tr>
<td>Total Assets</td>
<td>20,125,343</td>
</tr>
<tr>
<td><strong>Liabilities</strong></td>
<td></td>
</tr>
<tr>
<td>Accounts payable</td>
<td>3,176,251</td>
</tr>
<tr>
<td>Other liabilities</td>
<td>354,311</td>
</tr>
<tr>
<td>Total Liabilities</td>
<td>3,530,562</td>
</tr>
<tr>
<td><strong>Net Assets</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>16,594,781</td>
</tr>
<tr>
<td><strong>Liabilities and Net Assets</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>20,125,343</td>
</tr>
</tbody>
</table>
## Community Care Collaborative
### Statement of Revenues and Expenditures
**From 10/1/2013 Through 11/30/2013**
*(in whole numbers)*

<table>
<thead>
<tr>
<th>Sources of Funds</th>
<th>Actual - Fiscal Year (October 1 to November 30, 2013)</th>
<th>Budget - Fiscal Year Total</th>
<th>FYTD Actual % of Annual Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>DSRIP Revenue</td>
<td>-</td>
<td>49,152,105</td>
<td>0.00%</td>
</tr>
<tr>
<td>Seton Indigent Care Payment</td>
<td>15,000,000</td>
<td>60,000,000</td>
<td>25.00%</td>
</tr>
<tr>
<td>Central Health Indigent Care Payment</td>
<td>-</td>
<td>15,200,000</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total Sources of Funds</strong></td>
<td>15,000,000</td>
<td>124,352,105</td>
<td>12.06%</td>
</tr>
</tbody>
</table>

### Healthcare delivery costs
- **Primary Care**
  - Actual: 8,266,781
  - Budget: 50,231,419
  - FYTD Actual: 16.45%
- **Specialty Care**
  - Actual: 175,001
  - Budget: 1,388,277
  - FYTD Actual: 12.60%
- **Mental Health**
  - Actual: 71,500
  - Budget: 265,000
  - FYTD Actual: 26.98%
- **Dental Care**
  - Actual: 56,292
  - Budget: 596,711
  - FYTD Actual: 9.43%
- **Pharmacy**
  - Actual: 786,433
  - Budget: 5,571,670
  - FYTD Actual: 14.11%
- **Client Referral Services**
  - Actual: 120,732
  - Budget: 735,000
  - FYTD Actual: 16.42%
- **Claims Administration**
  - Actual: 583,333
  - Budget: 3,500,000
  - FYTD Actual: 16.66%
- **Service Expansion Funds**
  - Actual: -
  - Budget: 500,000
  - FYTD Actual: 0.00%
- **Other**
  - Actual: 4,436
  - Budget: -
  - FYTD Actual: 0.00%

**Total Healthcare delivery costs**
- Actual: 10,064,508
- Budget: 62,788,077
- FYTD Actual: 16.03%

### Other uses of funds
- **Permitted Investments - UT**
  - Actual: -
  - Budget: 35,000,000
  - FYTD Actual: 0.00%
- **DSRIP Project Costs**
  - Actual: 734,452
  - Budget: 21,587,531
  - FYTD Actual: 3.40%
- **Emergency reserve**
  - Actual: 833,333
  - Budget: 5,000,000
  - FYTD Actual: 16.67%

**Total Other uses of funds**
- Actual: 1,567,785
- Budget: 61,587,531
- FYTD Actual: 2.55%

**Total Uses of Funds**
- Actual: 11,632,293
- Budget: 124,375,608
- FYTD Actual: 9.35%

**Net change: Sources vs Uses**
- Actual: 3,367,707
- Budget: (23,503)
- FYTD Actual: n/a
Board of Directors Meeting

December 10, 2013

AGENDA Item III-B-5
(no backup)

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