

EXHIBIT “A-1”

Winnie-Stowell Hospital District

Balance Sheet

As of August 31, 2020

09/16/20

Accrual Basis

	<u>Aug 31, 20</u>
ASSETS	
Current Assets	
Checking/Savings	
100 Prosperity Bank -Checking	23,271.40
102 Prosperity Bank - CD#0447	109,295.59
104 Allegiance Bank - CD#9053	2,816,822.43
105 TexStar	690,122.41
107 InterBank ICS (Restricted)	
107.01b GIB 0228 DACA	250,000.00
107.01c GIB Collateral Funds	10,972,729.31
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Total 107 InterBank ICS (Restricted)	11,222,729.31
108 Allegiance Bank NH Combined	3,824,440.99
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Total Checking/Savings	18,686,682.13
Other Current Assets	
110 Sales Tax Receivable	116,206.43
114 Accounts Receivable NH	25,111,997.27
117 NH - QIPP Prog Receivable	3,977,615.47
118 Prepaid Expense	257,105.00
119 Prepaid IGT	12,369,353.01
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Total Other Current Assets	41,832,277.18
Total Current Assets	60,518,959.31
Fixed Assets	
120 Equipment	140,654.96
125 Accumulated Depreciation	-113,810.64
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Total Fixed Assets	26,844.32
TOTAL ASSETS	<u>60,545,803.63</u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
190 NH Payables Combined	3,272,145.65
201 NHP Accounts Payable	2,640,874.46
210.16 Loan Payable #16 QIPP 3	5,067,701.53
210.17a Loan Payable 17a QIPP 4	6,042,712.83
210.17a Loan Payable 17b QIPP 4	6,042,712.83
210.50 Allegiance Bk Ln 4 QIPP3	2,000,000.00
225 FUTA Tax Payable	112.00
230 SUTA Tax Payable	251.31
235 Payroll Liabilities	2,820.74
240 Accounts Payable NH	19,342,663.01
250 Stimulus Funds Flow-Through	403,818.89
Direct Deposit Liabilities	-3,353.56
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Total Other Current Liabilities	44,812,459.69
Total Current Liabilities	44,812,459.69
Total Liabilities	44,812,459.69

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09/16/20

Accrual Basis

Winnie-Stowell Hospital District

Balance Sheet

As of August 31, 2020

	<u>Aug 31, 20</u>
Equity	
300 Net Assets, Capital, net of	59,503.44
310 Net Assets-Unrestricted	4,755,312.01
Opening Balance Equity	3,353.56
Retained Earnings	9,697,766.09
Net Income	1,217,408.84
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Total Equity	15,733,343.94
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TOTAL LIABILITIES & EQUITY	60,545,803.63
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Winnie-Stowell Hospital District
Profit & Loss Budget vs. Actual
As of August 31, 2020

Accrual Basis

	Jan - Aug 20	Budget	\$ Over Budget	% of Budget
Income				
400 Sales Tax Revenue	459,418.39	500,000.00	-40,581.61	91.9%
405 Investment Income	37,673.09	46,000.00	-8,326.91	81.9%
409 Tobacco Settlement	13,221.78	9,800.00	3,421.78	134.9%
415 Nursing Home - QIPP Program	18,355,610.72	34,690,788.07	-16,335,177.35	52.9%
Total Income	18,865,923.98	35,246,588.07	-16,380,664.09	53.5%
Expense				
500 Admin-Administrative Salary	41,333.33	63,000.00	-21,666.67	65.6%
504 Admin-Administrators PR Tax	3,330.00	4,800.00	-1,470.00	69.4%
505 Admin-Board Bonds	50.00	250.00	-200.00	20.0%
515 Admin-Bank Service Charges	50.20	360.00	-309.80	13.9%
521 Professional Fees - Acctng	13,625.00	25,000.00	-11,375.00	54.5%
522 Professional Fees-Auditing	23,450.00	25,000.00	-1,550.00	93.8%
523 Professional Fees - Legal	8,000.00	25,000.00	-17,000.00	32.0%
550 Admin-D&O / Liability Ins.	9,601.04	9,331.00	270.04	102.9%
560 Admin-Cont Ed, Travel	200.00	5,000.00	-4,800.00	4.0%
561 Admin-Cont Ed-Medical Pers.	1,050.99	5,000.00	-3,949.01	21.0%
562 Admin-Travel&Mileage Reimb.	0.00	1,500.00	-1,500.00	0.0%
569 Admin-Meals	0.00	1,000.00	-1,000.00	0.0%
570 Admin-District/County Prom	0.00	2,500.00	-2,500.00	0.0%
571 Admin-Office Supp. & Exp.	4,263.50	6,800.00	-2,536.50	62.7%
572 Admin-Web Site	485.00	1,500.00	-1,015.00	32.3%
573 Admin-Copier Lease/Contract	1,939.85	2,500.00	-560.15	77.6%
575 Admin-Cell Phone Reimburse	1,200.00	1,800.00	-600.00	66.7%
576 Admin-Telephone/Internet	1,824.18	3,000.00	-1,175.82	60.8%
590 Admin-Election Cost	0.00	5,000.00	-5,000.00	0.0%
591 Admin-Notices & Fees	1,566.69	5,000.00	-3,433.31	31.3%
592 Admin Office Rent	7,500.00	7,080.00	420.00	105.9%
593 Admin-Utilities	757.90	1,800.00	-1,042.10	42.1%
594 Admin-Casualty & Windstorm	2,060.10	2,060.00	0.10	100.0%
597 Admin-Flood Insurance	1,282.00	1,282.00	0.00	100.0%
598 Admin-Building Maintenance	1,075.00			
600 East Chambers ISD Partnersh	120,000.00	180,000.00	-60,000.00	66.7%
601 IC-Pmt to Hosp (Indigent)	196,669.36	196,669.36	0.00	100.0%
602 IC-WCH 1115 Waiver Prog	108,394.04	102,657.38	5,736.66	105.6%
603a IC-Pharmaceutical Costs	55,848.34	110,000.00	-54,151.66	50.8%
604a IC-Non Hosp Cost-Other	518.78	5,000.00	-4,481.22	10.4%
604b IC-Non Hosp Costs UTMB	109,151.07	250,000.00	-140,848.93	43.7%
605 IC-Office Supplies/Postage	129.16	1,200.00	-1,070.84	10.8%
607 IC-Non Hosp Costs-WSEMS	0.00	1,000.00	-1,000.00	0.0%
611 IC-Indigent Care Dir Salary	30,286.87	45,611.15	-15,324.28	66.4%
612 IC-Payroll Taxes -Ind Care	2,440.40	3,500.00	-1,059.60	69.7%
615 IC-Software	8,872.00	13,308.00	-4,436.00	66.7%
616 IC-Travel	1,161.15	550.00	611.15	211.1%
617 IC -Youth Counseling	4,165.00	5,000.00	-835.00	83.3%
629 - Property Acquisition	131,232.65	150,000.00	-18,767.35	87.5%
630 NH Program-Mgt Fees	4,343,520.88	8,752,055.52	-4,408,534.64	49.6%
631 NH Program-IGT	9,668,568.88	17,590,711.32	-7,922,142.44	55.0%
632 NH Program-Telehealth Fees	102,688.36	154,500.82	-51,812.46	66.5%
633 NH Program-Acctg Fees	0.00	35,000.00	-35,000.00	0.0%
634 NH Program-Legal Fees	161,596.54	190,000.00	-28,403.46	85.1%
635 NH Program-LTC Fees	1,056,000.00	1,692,000.00	-636,000.00	62.4%
637 NH Program-Interest Expense	1,422,626.88	2,109,782.67	-687,155.79	67.4%
638 NH Program-Bank Fees & Misc	0.00	300.00	-300.00	0.0%
639 NH Program-Appraisal	0.00	2,500.00	-2,500.00	0.0%
640 Nursing Home Oper. Expenses	0.00	2,500.00	-2,500.00	0.0%
641 NH-Not On My Watch	0.00	110,000.00	-110,000.00	0.0%
653 Service Fee	0.00	100.00	-100.00	0.0%
Total Expense	17,648,515.14	31,909,509.22	-14,260,994.08	55.3%
Net Income	1,217,408.84	3,337,078.85	-2,119,670.01	36.5%

EXHIBIT “A-2”

WSHD Treasurer's Report and Supporting Documents

Reporting Date: **Wednesday, September 16, 2020**

Pending Expenses		For	Amount	Funds Summary	Totals
Brookshire Brothers	Indigent Care		\$655.14	Prosperity Operating	\$127,828.24
Wilcox Pharmacy	Indigent Care		\$434.51	Interbank (Restricted)	(\$7,179,334.94)
UTMB at Galveston	Indigent Care		\$9,304.11	Interbank (Unrestricted)	\$4,059,557.32
UTMB Faculty Group	Indigent Care		\$1,557.80	Prosperity CD	\$109,209.59
Indigent Healthcare Solutions	IC Inv #70500		\$1,109.00	TexStar	\$690,122.41
American Education Services	S Stern-Student Loan		\$150.14	Allgeiance Bank LOC (Available)	\$816,822.43
Penelope (Polly) Butler	Youth Counseling			Net Cash Position (less Interbank)	\$5,803,539.99
Grace Nichols	Youth Counseling		\$255.00	Pending Expenses	(\$33,003.36)
Nicki Holtzman	Youth Counseling			Ending Balance	\$5,770,536.63
Benckenstein & Oxford	Inv #49851		\$15,325.00	Last Month	
Hubert Oxford	1/2 Legal Retainer		\$500.00	Prosperity Operating	\$86,141.13
Josh Heinz	1/2 Legal Retainer		\$500.00	Interbank-restricted	\$5,846,692.39
David Sticker	Inv #22233		\$1,531.25	Interbank-unrestricted (Adjusted)	\$3,789,523.54
Technology Solutions of Texas	Inv #1478		\$75.00	Prosperity CD	\$108,816.91
Felipe Ojedia-Yard Service	Inv #10004		\$300.00	TexStar	\$690,026.00
Graciela Chavez-Office Cleaning	Inv #8018586/8587		\$200.00	Allgeiance Bank LOC (Available)	\$816,822.43
The Seabreeze Beacon	Inv #4656		\$360.00	Net Cash Position (less Interbank)	\$5,491,330.01
The HomeTown Press	Inv # 2659		\$600.00	Pending Expenses	\$54,625.30
Anthony Stramecki	Re-imburement (Raul)		\$146.41	Ending Balance	\$5,436,704.71
Total Pending Expenses			\$33,003.36		

Interbank Account Reconciliation

GIB Balance 9/15	\$11,238,892.25	To be Received	Total Due
IGT 6, QIPP Year 3, 2nd Half-Component 1 Payments			
Component 1-March	\$1,151,865.71		
Component 1-April	\$1,190,548.59		
Component 1-May	\$1,339,152.47		
Component 1-June	\$1,288,641.30		
Component 1-July	\$1,183,365.75		
Component 1-August	\$0.00		
Total Component 1, IGT 6	\$6,153,573.82		
Loan 16 Set Aside			
Loan 16 Payment-March	(\$1,056,040.56)		
Loan 16 Payment-April	(\$1,110,941.80)		
Loan 16 Payment-May	(\$1,280,763.33)		
Loan 16 Payment-June	(\$1,244,601.56)		
Loan 16 Payment-July	(\$1,183,365.75)		
Loan 16 Payment-August	\$0.00		
Total Loan 16 Set Aside	(\$5,875,713.00)		
Component 2			
Component 2-June due to MGRs.	(\$120,114.87)		
Component 2-July due to MGRs.	(\$100,445.84)		
Component 2-Aug due to MGRs.			
Total Component 2 due to MGRs.	(\$220,560.71)		
Component 3			
Component 3-June due to MGRs.	(\$224,931.51)		
Component 3-July due to MGRs.	(\$207,240.28)		
Component 3-Aug. due to MGRs.			
Total Component 3 due to MGRs	(\$432,171.79)		
IGT Excess Payments-IGT 5			
Due to MGRs.	(\$22,019.87)		
Adjustment Payments			
QIPP Y1 Adj. 3 due to MGRs.	(\$5,482.11)		
QIPP Y2 Adj. 2 due to MGRs.	(\$44,851.76)		
Total Adj. Pays. due to MGRs	(\$50,333.87)		
Non-QIPP Funds due to NHs	(\$16,560.00)		
Interest Reserves			
Reserve Ln 16	(\$70,947.82)		
Reserve Ln 17a	(\$169,195.96)		
Reserve Ln 17b	(\$338,391.92)		
Total Reserves	(\$578,535.70)		
Restricted	(\$7,179,334.94)		

Unrestricted	\$4,059,557.32		
Total Funds	\$11,238,892.25	\$0.00	\$0.00

Cash Availability Report-August 2020 to January 2021

Date	Transaction	Notes	Actual
September 2020			
September 15, 2020	Cash Available	DOES NOT INCLUDE PROSPERITY CD & TEXSTAR	\$5,004,207.99
July 15, 2020	Hospital Assistance	Pending	(\$167,000.00)
September 16, 2020	Not on My Watch	Covid-19 Prevention Program with HMG	(\$109,875.00)
September 16, 2020	LTC Payment	September LTC Payment	(\$150,000.00)
September 30, 2020	Component 2 Funds	August Component 2 Funds Received	\$193,530.00
September 30, 2020	QIPP Year 3, Component 2	Component 2 Payment to MGRs	\$220,560.71
September 30, 2020	Operating Expenses	Recurring monthly (Monthly Avg. per Budget)	(\$33,003.36)
September 30, 2020	Component 3 Funds Received	August Component 3 Payment	\$418,633.68
September 30, 2020	Comp 3 Payment	August Component 3 Funds	(\$209,316.84)
September 30, 2020	Component 1 Payment	August Component 1 Payment	\$1,199,089.26
September 30, 2020	Payment of Line of Credit	Following the payment of the balance of Loan 16, the balance of Component 1 funds are to be used to repay LOC.	(\$1,199,089.26)
September 30, 2020	Increase in Cash Available to Line of Credit	Following the payment of the balance of Loan 16, the	\$1,199,089.26
CA September 30, 2020			\$6,366,826.44

October 2020			
October 1, 2020	Interest-Loan 16 (10/10)	Loan 16 Final Interest Payment	(\$70,947.82)
October 1, 2020	Allegiance Interest	Final month of Interest for IGT	\$1,179.00
October 1, 2020	LTC Payment	October	(\$150,000.00)
October 15, 2020	Sales Tax Revenue Estimate	Recurring monthly (Monthly Avg. per Budget)	\$41,666.67
October 1, 2020	Component 2 Funds	September Component 2 Funds Received	\$193,530.00
October 31, 2020	QIPP Year 3, Component 2	Component 2 Payment to MGRs	\$220,560.71
October 31, 2020	Operating Expenses	Recurring monthly (Monthly Avg. per Budget)	(\$71,016.50)
October 31, 2020	Component 1 Payment	September Component 1 Payment	\$1,862,993.91
October 31, 2020	Principle Payment-Loan 17a	Payment 5/10 for Loan 17a	(\$1,862,993.91)
October 31, 2020	QIPP Year 3, Qtr. 4 Component 3, 4, and Lapsing Fund	Based on QIPP Year 3, QTR 2 Component 3,4 and	\$999,207.54
CA October 31, 2020			\$7,531,006.03

November 2020			
November 1, 2020	Payment to East Chambers	Recurring monthly	(\$15,000.00)
November 15, 2020	Sales Tax Revenue Estimate	Recurring monthly (Monthly Avg. per Budget)	\$41,666.67
November 30, 2020	LTC Payment	December	\$0.00
November 30, 2020	Interest-Loan 17a (6/10)	Recurring through 9/30/2020	(\$84,597.98)
November 30, 2020	Component 2 Funds	October Component 2 Funds Received	\$193,530.00
November 30, 2020	QIPP Year 3, Component 2	Component 2 Payment to MGRs	\$220,560.71
November 30, 2020	Operating Expenses	Recurring monthly (Monthly Avg. per Budget)	(\$71,016.50)
November 30, 2020	Component 1 Payment	October Component 1 Payment	\$1,893,738.55
November 30, 2020	Principle Payment-Loan 17a	Payment 6/10 for Loan 17a	(\$1,893,738.55)
CA November 30, 2020			\$7,816,148.93

December 2020			
December 1, 2020	QIPP Year 4, IGT 2 Line of Credit Payment	Use \$6,000,000 of LOC	(\$6,000,000.00)
December 1, 2020	Interest Set Aside-Loan 18	One time payment for Interest 12/1/2020-9/31/2021)	(\$84,597.98)
December 1, 2020	Payment to East Chambers	Recurring monthly	(\$15,000.00)
December 15, 2020	Sales Tax Revenue Estimate	Recurring monthly (Monthly Avg. per Budget)	\$41,666.67
December 31, 2020	LTC Payment	January	\$0.00
December 31, 2020	Interest-Loan 17a (7/10)	Recurring through 9/30/2020	(\$84,597.98)
December 31, 2020	QIPP Year 4, Component 2	Estimate based on IGT	\$105,000.00
December 31, 2020	Operating Expenses	Recurring monthly (Monthly Avg. per Budget)	(\$71,016.50)
December 31, 2020	Component 1 Payment	November Component 1 Payment	\$1,842,479.88
December 31, 2020	Principle Payment-Loan 17a	Payment 7/10 for Loan 17a	(\$1,842,479.88)
CA December 31, 2020			\$1,707,603.14

January 2021			
January 1, 2021	Payment to East Chambers	Recurring monthly	(\$15,000.00)
January 7, 2021	Allegiance Bank	Interest Payment	(\$6,700.00)
January 15, 2021	Sales Tax Revenue Estimate	Recurring monthly (Monthly Avg. per Budget)	\$41,666.67
January 31, 2021	LTC Payment	November, December, January	(\$450,000.00)
January 31, 2021	Interest-Loan 17a (8/10) and Interest-17b (6/10)	Recurring through 9/30/2020	(\$422,989.90)
January 31, 2021	QIPP Year 3, Component 2	Estimate based on IGT	\$73,511.10

January 31, 2021	Operating Expenses	Recurring monthly (Monthly Avg. per Budget)	<i>(\$71,016.50)</i>
January 31, 2021	Component 1 Payment	December Component 1 Payment	\$2,056,326.98
January 31, 2021	Principle Payment-Loan 17a (8/10)	Payment 8/10 for Loan 17a	<i>(\$443,500.49)</i>
January 31, 2021	Principle Payment-Loan 17b (7/8)	Payment 7/8 for Loan 17b	<i>(\$1,612,826.49)</i>
January 31, 2021	QIPP Year 4, Qtr. 1 Component 3, 4, and Lapsing Fund	Based on 75% (90% is \$3,232,181.69)	\$2,693,484.74
January 31, 2021	Principle Payment-Loan 17b-Reserve	Reserve for Loan 17a & b	<i>(\$363,249.34)</i>
CA January 2021	DOES NOT INCLUDE PROSPERITY CD & TEXSTAR		\$3,187,309.91

Outstanding Short Term Revenue Note-Loan 16					
Loan 16/IGT 6-Principle	\$5,067,701.53			\$4,692,347.25	
Interest	16.80%	\$709,478.20			
Fund Received	12/1/2019				
	Date	Balance	Interest	Principal Rcvd.	Payment
1	1/2/2020	\$5,067,701.53	\$70,947.82	\$0.00	\$70,947.82
2	1/31/2020	\$5,067,701.53	\$70,947.82	\$0.00	\$70,947.82
3	2/28/2020	\$5,067,701.53	\$70,947.82	\$0.00	\$70,947.82
4	3/31/2020	\$5,067,701.53	\$70,947.82	\$0.00	\$70,947.82
5 - (March 2020, Comp. 1)	4/30/2020	\$5,067,701.53	\$70,947.82	\$1,056,040.56	\$1,126,988.38
6 - (April 2020, Comp. 1)	5/31/2020	\$5,067,701.53	\$70,947.82	\$1,110,941.80	\$1,181,889.62
7 - (May 2020, Comp. 1)	6/30/2020	\$5,067,701.53	\$70,947.82	\$1,280,763.33	\$1,351,711.15
8 - (June 2020, Comp. 1)	7/31/2020	\$5,067,701.53	\$70,947.82	\$1,244,601.56	\$1,315,549.38
Reserve	7/31/2020	\$5,067,701.53	\$0.00	\$0.00	\$0.00
9 - (July 2020, Comp. 1)	8/31/2020	\$5,067,701.53	\$70,947.82	\$375,354.28	\$446,302.10
10-(Aug. 2020, Comp. 1)	9/30/2020	\$5,067,701.53	\$70,947.82	\$0.00	\$70,947.82
Amount Paid	9/30/2020	\$0.00	\$709,478.20	\$5,067,701.53	\$5,777,179.73
Amount Due: September 30, 2020			\$709,478.20	\$5,067,701.53	\$5,777,179.73
Amount Remaining				\$0.00	\$0.00

Outstanding Short Term Revenue Note-Loan 17a					
Loan 17a-Principle	\$6,042,712.83		Reserve	\$422,989.90	
Interest	16.80%	\$845,979.80			
Fund Received	6/1/2020				
	Date	Balance	Interest	Principal Rcvd.	Payment
1	6/30/2020	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
2	7/31/2020	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
3	8/31/2020	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
4	9/30/2020	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
5-(Sept. 2020, Comp. 1)	10/31/2020	\$6,042,712.83	\$84,597.98	\$1,862,993.91	\$1,947,591.89
6-(Oct. 2020, Comp. 1)	11/30/2020	\$6,042,712.83	\$84,597.98	\$1,893,738.55	\$1,978,336.53
7-(Nov. 2020, Comp. 1)	12/31/2020	\$6,042,712.83	\$84,597.98	\$1,842,479.88	\$1,927,077.86
8-(Dec. 2020, Comp. 1)	1/31/2021	\$6,042,712.83	\$84,597.98	\$443,500.49	\$528,098.47
Reserve		\$6,042,712.83	\$0.00	\$0.00	\$0.00
9 (Jan. 2021, Comp. 1)	2/28/2021	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
10 (Feb. 2021, Comp. 1)	3/31/2021	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
Amount Paid	3/31/2021	\$0.00	\$845,979.80	\$6,042,712.83	\$6,888,692.63
Amount Due: March 31, 2021			\$845,979.80	\$6,042,712.83	\$6,888,692.63
Amount Remaining				(\$0.00)	(\$0.00)

Outstanding Short Term Revenue Note-Loan 17b					
Loan 17b-Principle	\$6,042,712.83		Reserve	\$422,989.90	
Interest	16.80%	\$676,783.84			
Fund Received	8/1/2020			\$845,979.80	
	Date	Balance	Interest	Principal Rcvd.	Payment
1	8/31/2020	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
2	9/30/2020	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
3	10/31/2020	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
4	11/30/2020	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
5	12/31/2020	\$6,042,712.83	\$84,597.98	\$0.00	\$84,597.98
6 (Dec. 2020, Comp. 1)	1/31/2021	\$6,042,712.83	\$84,597.98	\$1,612,826.49	\$1,697,424.47
Reserve	1/31/2021	\$6,042,712.83		\$363,249.34	\$363,249.34
7 (Jan. 2021, Comp. 1)	2/28/2021	\$6,042,712.83	\$84,597.98	\$2,049,810.68	\$2,134,408.66
8-(Feb. 2021, Comp. 1)	3/31/2021	\$6,042,712.83	\$84,597.98	\$2,016,826.32	\$2,101,424.30
Amount Paid	3/31/2021	\$0.00	\$676,783.84	\$6,042,712.83	\$6,719,496.67
Amount Due: March 31, 2021			\$676,783.84	\$6,042,712.83	\$6,719,496.67
Amount Remaining				\$0.00	\$0.00

Allegiance Bank Line of Credit

Principle (IGT 6)	\$2,816,822.43	Principle Balance Owed	\$1,199,089.26		
Interest	3.25%	LOC Funds Available	\$1,617,733.17		
	Date	Balance	Interest	Principal Rcvd.	Payment
1	1/7/2020	Interest Payment	\$8,166.66	\$0.00	\$8,166.66
2	2/7/2020	Interest Payment	\$6,027.78	\$0.00	\$6,027.78
3	3/7/2020	Interest Payment	\$5,638.89	\$0.00	\$5,638.89
4	4/7/2020	Interest Payment	\$6,027.78	\$0.00	\$6,027.78
5 - (March 2020, Comp. 1)	5/7/2020	Interest Payment	\$5,833.33	\$0.00	\$5,833.33
6 - (April 2020, Comp. 1)	6/7/2020	Interest Payment	\$6,027.78	\$0.00	\$6,027.78
7 - (June 2020, Comp. 1)	7/16/2020	Principle Payment	\$5,883.32	\$0.00	\$5,883.32
8 - (July 2020, Comp. 1)	8/7/2020	Principle Payment	\$3,616.68	\$800,910.74	\$804,527.42
9 - (Aug. 2020, Comp. 1)	9/7/2020	Principle Payment	\$3,616.66	\$1,199,089.26	\$1,202,705.92
Balance Due	9/30/2020	Principle Payment	\$1,179.79	\$0.00	\$1,179.79
Amount Paid	9/30/2020	\$0.00	\$50,838.88	\$2,000,000.00	\$2,050,838.88

District's Investments

	Amount	Percentage	From	To	Interest
*CD at Allegiance Bank C.D. #9503	\$2,816,822.43	1.40%	8/1/2020	8/31/2020	Paid Quarterly
CD at Prosperity (Qtr.) C.D. #0447	\$109,295.50	0.40%	8/1/2020	8/31/2020	Paid \$478.68 August 27, 2020
Texstar C.D. #1110	\$690,122.41	0.20%	8/1/2020	8/31/2020	Paid \$96.41 August 2020

TO THE BEST OF MY KNOWLEDGE, THESE FIGURES IN THE WSDH TREASURER'S REPORT AND SUPPORTING DOCUMENTS CORRECT AND IN COMPLIANCE WITH THE DISTRICT'S INVESTMENT POLICY.

Edward Murrell,
President

Robert "Bobby" Way
Treasurer/Investment Officer

Date

Date

Italics are Estimated amounts

09/15/20
Accrual Basis

Winnie-Stowell Hospital District
Check Listing by Bank Account
August 19 through September 16, 2020

Type	Date	Num	Name	Memo	Amount
100 Prosperity Bank -Checking					
Check	08/19/2020	3074	Brookshire Brothers	IC RXs Jul 2020	-2,440.12
Check	08/19/2020	3075	Wilcox Pharmacy	IC RXs Jul 2020	-957.56
Check	08/19/2020	3076	UTMB at Galveston	IC Batch Date 07....	-10,903.49
Check	08/19/2020	3077	UTMB Faculty Group Practice	IC Batch Date 07....	-3,965.65
Check	08/19/2020	3078	Indigent Healthcare Solutions,...	Inv #70342	-1,109.00
Check	08/19/2020	3079	American Education Services	92 5529 5461 S St...	-150.14
Check	08/19/2020	3080	Penelope S Butler, MS, LPC	IC Batch Date 07....	-340.00
Check	08/19/2020	3081	Grace Nichols, MEd, LPC	IC Batch Date 07....	-170.00
Check	08/19/2020	3082	Benckenstein & Oxford	Inv # 49835 (May ...	-30,700.00
Check	08/19/2020	3083	Hubert Oxford	1/2 Legal Retainer	-500.00
Check	08/19/2020	3084	Josh Heinz	1/2 Legal Retainer	-500.00
Check	08/19/2020	3085	David Sticker	Inv # 22206	-1,875.00
Check	08/19/2020	3086	Technology Solutions of Texa...	Inv #1471	-75.00
Check	08/19/2020	3087	Felipe Ojeda	Inv # 1003	-175.00
Check	08/19/2020	3088	Graciela Chavez	Inv # 8018584	-100.00
Check	08/19/2020	3089	Philadelphia Insurance Comp...	Inv # 2002164501 ...	-10.00
Check	08/19/2020	3090	Gulfway Lumber	Porch Supplies	-676.91
Check	08/26/2020		Prosperity Bank (CC)	ACH, Withdrawal, ...	-1,002.80
Liability Check	08/28/2020		QuickBooks Payroll Service	Created by Payroll...	-7,263.55
Paycheck	08/31/2020	DD1...	Norris, Sherrie	Direct Deposit	0.00
Paycheck	08/31/2020	DD1...	Ojeda, Patricia	Direct Deposit	0.00
Check	09/08/2020		Allegiance Bank		-3,616.66
Check	09/10/2020		ECISD		-15,000.00
Check	09/11/2020		Entergy		-44.09
Check	09/11/2020		IRS		-2,485.24
Check	09/15/2020		Trinity Bay Conservation District	13053-1010703000	-47.89
Total 100 Prosperity Bank -Checking					-84,108.10
107 InterBank ICS (Restricted)					
107.01b GIB 0228 DACA					
Check	08/19/2020			Transfer Withdraw...	-10,897.09
Check	08/21/2020			Transfer Withdraw...	-4,771.52
Check	08/25/2020			Transfer Withdraw...	-949,962.25
Check	08/26/2020			Transfer Withdraw...	-37,191.72
Check	08/27/2020			Transfer Withdraw...	-236,747.83
Check	08/28/2020		Salt Creek Capital LLC	Withdrawal	-84,597.98
Check	08/28/2020		Salt Creek Capital LLC	Withdrawal	-84,597.98
Check	08/28/2020		Salt Creek Capital LLC	Withdrawal	-70,947.82
Check	08/31/2020			Transfer Withdraw...	-443,389.41
Check	09/01/2020			Transfer Withdraw...	-16,560.00
Check	09/04/2020			ACH Payment ST...	-397.06
Total 107.01b GIB 0228 DACA					-1,940,060.66
Total 107 InterBank ICS (Restricted)					-1,940,060.66
TOTAL					-2,024,168.76

GL Totals

Winnie Stowel Hospital District Indigent Healthcare Services
 Batch Dates 08/09/20-08/09/20

Brookshire Bros. Phar. (Winnie)
 P.O. Box 2058
 Lufkin, TX 75904

Vendor #: 65460

GL #	Description	Amount
WSHD	Wshd	655.14
Expenditures		655.14
Reimb/Adjustments		
Grand Total		655.14

41 total invoices

GL Totals Detail

Invoice #	GL #	Date in	Amt Billed	Amt Paid
1000*65460*25	WSHD	08/22/2020	18.15	18.15
1000*65460*26	WSHD	08/22/2020	12.08	12.08
1000*65460*27	WSHD	08/22/2020	8.00	8.00
1019*65460*52	WSHD	08/13/2020	9.74	9.74
1019*65460*53	WSHD	08/13/2020	8.76	8.76
1019*65460*54	WSHD	08/13/2020	12.39	12.39
1019*65460*55	WSHD	08/13/2020	10.64	10.64
1019*65460*56	WSHD	08/13/2020	13.51	13.51
1044*65460*20	WSHD	08/10/2020	74.67	74.67
1044*65460*21	WSHD	08/13/2020	19.01	19.01
1044*65460*22	WSHD	08/10/2020	415.54	0.00
1049*65460*46	WSHD	08/07/2020	9.36	9.36
1049*65460*47	WSHD	08/07/2020	15.62	15.62
1049*65460*48	WSHD	08/10/2020	12.07	12.07
1081*65460*25	WSHD	08/19/2020	12.23	12.23
1081*65460*26	WSHD	08/20/2020	22.97	22.97
1091*65460*32	WSHD	08/03/2020	20.14	20.14
1091*65460*33	WSHD	08/03/2020	18.50	18.50
1091*65460*34	WSHD	08/03/2020	462.81	0.00
1108*65460*12	WSHD	08/19/2020	56.40	56.40
1108*65460*13	WSHD	08/19/2020	12.56	12.56
1108*65460*14	WSHD	08/19/2020	9.43	9.43
1128*65460*19	WSHD	08/05/2020	8.47	8.47
1128*65460*20	WSHD	08/04/2020	44.62	44.62
1128*65460*21	WSHD	08/05/2020	25.53	25.53
1134*65460*20	WSHD	08/02/2020	19.50	19.50
1134*65460*21	WSHD	08/02/2020	10.43	10.43
1134*65460*22	WSHD	08/02/2020	12.10	12.10
1140*65460*21	WSHD	08/25/2020	10.87	10.87
1140*65460*22	WSHD	08/25/2020	11.42	11.42
1146*65460*5	WSHD	08/14/2020	30.66	30.66
1179*65460*2	WSHD	08/04/2020	19.89	0.00
1179*65460*3	WSHD	08/04/2020	10.97	10.97
1179*65460*4	WSHD	08/04/2020	10.64	10.64

GL Totals

Winnie Stowel Hospital District Indigent Healthcare Services
Batch Dates 08/09/20-08/09/20

Brookshire Bros. Phar. (Winnie)
P.O. Box 2058
Lufkin, TX 75904

Vendor #: 65460

Invoice #	GL #	Date in	Amt Billed	Amt Paid
1179*65460*5	WSHD	08/04/2020	13.28	13.28
2458*65460*11	WSHD	08/04/2020	9.36	9.36
2458*65460*12	WSHD	08/20/2020	15.49	15.49
2458*65460*13	WSHD	08/04/2020	10.47	10.47
2815*65460*9	WSHD	08/03/2020	10.58	10.58
2815*65460*10	WSHD	08/03/2020	24.52	24.52
2815*65460*11	WSHD	08/03/2020	942.95	0.00
41 invoices, 41 line items			2,496.33	655.14
Grand Totals			2,496.33	655.14

41 total invoices
41 total line items

GL Totals

Winnie Stowel Hospital District Indigent Healthcare Services
 Batch Dates 08/15/20-08/15/20

Vendor #: 18651

Wilcox Pharmacy
 P. O. Box 1850
 Winnie, TX 77665

GL #	Description	Amount
WSHD	Wshd	434.51
Expenditures		434.51
Reimb/Adjustments		
Grand Total		434.51

47 total invoices

GL Totals Detail
Invoice #

GL #	Date in	Amt Billed	Amt Paid
1040*18651*45	08/07/2020	9.22	0.00
1086*18651*27	08/24/2020	71.94	0.00
1093*18651*26	08/01/2020	19.10	19.10
1093*18651*27	08/10/2020	9.92	9.92
1093*18651*28	08/24/2020	105.55	0.00
1095*18651*23	08/06/2020	11.61	0.00
1095*18651*24	08/31/2020	9.37	9.37
1095*18651*25	08/21/2020	8.92	8.92
1095*18651*26	08/03/2020	11.65	11.65
1115*18651*16	08/21/2020	9.65	0.00
1157*18651*17	08/04/2020	19.55	0.00
1157*18651*18	08/04/2020	14.35	14.35
1157*18651*19	08/28/2020	8.47	8.47
1157*18651*20	08/04/2020	8.47	8.47
1157*18651*21	08/28/2020	8.58	8.58
1157*18651*22	08/04/2020	8.58	8.58
1157*18651*23	08/28/2020	17.96	17.96
1157*18651*24	08/28/2020	11.48	11.48
1157*18651*25	08/04/2020	9.38	9.38
1158*18651*10	08/18/2020	17.53	17.53
1158*18651*11	08/24/2020	9.96	9.96
1160*18651*11	08/10/2020	11.47	11.47
1160*18651*12	08/10/2020	16.00	16.00
1160*18651*13	08/10/2020	15.29	15.29
1181*18651*22	08/25/2020	10.63	10.63
1181*18651*23	08/21/2020	8.99	8.99
1181*18651*24	08/17/2020	8.46	8.46
1181*18651*25	08/25/2020	9.79	9.79
1181*18651*26	08/10/2020	8.83	8.83
1181*18651*27	08/25/2020	8.98	8.98
1181*18651*28	08/10/2020	8.46	8.46
1181*18651*29	08/17/2020	13.75	13.75
1181*18651*30	08/17/2020	9.88	9.88
1181*18651*31	08/21/2020	13.51	13.51

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Issued 09/15/20

GL Totals
Winnie Stowel Hospital District Indigent Healthcare Services
Batch Dates 08/15/20-08/15/20

Wilcox Pharmacy
P. O. Box 1850
Winnie, TX 77665

Vendor #: 18651

Invoice #	GL #	Date in	Amt Billed	Amt Paid
1181*18651*32	WSHD	08/17/2020	9.10	9.10
1181*18651*33	WSHD	08/17/2020	11.90	11.90
1181*18651*34	WSHD	08/17/2020	8.37	8.37
1185*18651*6	WSHD	08/11/2020	8.98	8.98
1185*18651*7	WSHD	08/11/2020	8.49	8.49
1185*18651*8	WSHD	08/11/2020	11.91	11.91
2942*18651*7	WSHD	08/14/2020	150.16	0.00
3364*18651*8	WSHD	08/04/2020	9.29	9.29
3364*18651*9	WSHD	08/04/2020	9.10	9.10
3364*18651*10	WSHD	08/04/2020	11.60	11.60
3364*18651*11	WSHD	08/04/2020	9.47	9.47
3364*18651*12	WSHD	08/04/2020	9.81	9.81
3364*18651*13	WSHD	08/04/2020	8.73	8.73
47 invoices, 47 line items			812.19	434.51
Grand Totals			812.19	434.51

47 total invoices
47 total line items

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 Issued 09/14/20

GL Totals

Winnie Stowel Hospital District Indigent Healthcare Services
 Batch Dates 08/11/20-08/11/20

Utrmb At Galveston
 P. O. Box 660120 Dept 730
 Dallas, TX 75266

Vendor #: 63614

GL #	Description	Amount
WSHD	Wshd	9,304.11
	Expenditures	9,304.11
	Reimb/Adjustments	
	Grand Total	9,304.11

14 total invoices

GL Totals Detail

Invoice #	GL #	Date in	Amt Billed	Amt Paid
1040*63614*24	WSHD	07/13/2020	523.00	130.75
1093*63614*11	WSHD	07/08/2020	391.00	97.75
1093*63614*12	WSHD	07/06/2020	684.00	171.00
1128*63614*9	WSHD	06/26/2020	591.00	0.00
1146*63614*2	WSHD	07/06/2020	15,382.55	0.00
1146*63614*3	WSHD	07/06/2020	3,136.00	0.00
1155*63614*1	WSHD	06/19/2020	15,289.19	0.00
1155*63614*2	WSHD	06/26/2020	18,043.61	4,510.90
1155*63614*3	WSHD	06/22/2020	10,678.82	2,669.71
1155*63614*4	WSHD	07/15/2020	5,891.00	1,472.75
1158*63614*1	WSHD	06/30/2020	99.00	24.75
1177*63614*5	WSHD	07/06/2020	499.00	0.00
1181*63614*3	WSHD	07/22/2020	583.00	145.75
1185*63614*1	WSHD	07/07/2020	323.00	80.75
14 invoices, 14 line items		***	72,114.17	9,304.11
Grand Totals			72,114.17	9,304.11

14 total invoices
 14 total line items

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GL Totals

Winnie Stowel Hospital District Indigent Healthcare Services
 Batch Dates 08/11/20-08/11/20

Utmf Faculty Grp Practice
 Po Box 650859 Dep 710
 Dallas, TX 75265

Vendor #: 63615
 NPI: 1942241146

GL #	Description	Amount
WSHD	Wshd	1,557.80
	Expenditures	1,557.80
	Reimb/Adjustments	
	Grand Total	1,557.80

19 total invoices

GL Totals Detail
Invoice #

GL #	Date in	Amt Billed	Amt Paid
1040*63615*24	07/13/2020	23.00	8.02
1040*63615*25	07/13/2020	183.00	39.92
1093*63615*12	07/08/2020	270.00	56.08
1093*63615*13	07/03/2020	30.00	10.26
1093*63615*14	07/03/2020	273.00	65.29
1108*63615*1	07/28/2020	273.00	65.29
1115*63615*5	07/10/2020	24.00	0.00
1128*63615*10	06/29/2020	23.00	0.00
1146*63615*3	07/06/2020	1,378.00	0.00
1146*63615*3	07/06/2020	1,225.00	0.00
1146*63615*3	07/06/2020	898.00	0.00
1146*63615*4	07/06/2020	800.00	0.00
1146*63615*5	07/06/2020	420.00	0.00
1155*63615*7	06/26/2020	960.00	632.43
1155*63615*8	07/15/2020	603.00	140.82
1155*63615*9	06/26/2020	812.00	227.36
1155*63615*9	06/26/2020	45.00	16.04
1158*63615*2	06/30/2020	273.00	65.29
1177*63615*6	06/30/2020	183.00	0.00
1181*63615*4	06/29/2020	183.00	39.92
1181*63615*5	07/22/2020	415.00	95.54
1185*63615*1	07/07/2020	415.00	95.54
19 invoices, 22 line items	***	9,709.00	1,557.80

Grand Totals

9,709.00 **1,557.80**

19 total invoices
 22 total line items

Indigent Healthcare Solutions, Ltd.
2040 North Loop, 336 West, Suite 304
Conroe, TX 77304

Invoice # 70500

Phone # (800) 834-0560

Date: 9/1/2020

Fax # (936) 756-6741

WINNIE STOWELL HOSPITAL DISTRICT
P O BOX 1997
WINNIE, TX 77665

Terms: Net receipt of invoice

Professional services for the month of October 2020

1,109.00

Total

\$1,109.00

PLEASE REMIT PAYMENT TO
INDIGENT HEALTHCARE SOLUTIONS, LTD
ATTN: KELLEY ASTOLOS
3011 ARMORY DRIVE, SUITE 190
NASHVILLE, TN 37204

THANK YOU FOR YOUR BUSINESS!!!

IHS

Loan Sequence	Date Disbursed	Loan Program	Current Owner	Repayment Term
*1001	11/29/2006	UNCNS	CIT EDUCATION LOAN T	240

Would you rather receive this statement electronically?

Sign in to Account Access at aesSuccess.org and update your Account Profile preferences if you would prefer that we send you an email reminder instead of a paper statement.

Total paid since your last statement	\$150.14
Interest Satisfied	\$28.84
Principal Satisfied	\$121.30
Late Fees Paid	\$0.00

As of today, you've paid on your loans	\$17,266.11
Total Interest Satisfied	\$5,045.40
Total Principal Satisfied	\$12,213.21
Total Late Fees Paid	\$7.50

The Total Principal Satisfied includes any payment that satisfies principal (not just payments made by you) and may include consolidation payments, refunds, cancellation payments, returned disbursements, etc.

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GL Totals

Winnie Stowel Hospital District Indigent Healthcare Services
 Batch Dates 08/09/20-08/09/20

Grace Nichols
 4347 Phelan Blvd Suite 104
 Beaumont, TX 77707

Vendor #: 63291

GL #	Description	Amount
WSHD	Wshd	255.00
	Expenditures	255.00
	Reimb/Adjustments	
	Grand Total	255.00

1 total invoices

GL Totals Detail

Invoice #	GL #	Date in	Amt Billed	Amt Paid
YC13*63291*8	WSHD	08/05/2020	85.00	85.00
YC13*63291*8	WSHD	08/06/2020	85.00	85.00
YC13*63291*8	WSHD	08/21/2020	85.00	85.00
1 invoices, 3 line items	***		255.00	255.00
Grand Totals			255.00	255.00

1 total invoices
 3 total line items

BENCKENSTEIN & OXFORD, L.L.P.

ATTORNEYS AT LAW
BBVA COMPASS BANK BUILDING
3535 CALDER AVENUE, SUITE 300

Hubert Oxford, IV

BEAUMONT, TEXAS 77706
TELEPHONE:(409) 833-9182
FAX: (409) 833-8819

hoxfordiv@benoxford.com

September 15, 2020

Mr. Edward Murrell
President
Winnie Stowell Hospital District
520 Broadway
Winnie, Texas 77665

Re: Winnie Stowell Hospital District; Billable Invoice for June 2020 Time Entries
less Retainer; Our File No. 87250.

Dear President Murrell,

Attached, please find Benckenstein & Oxford's monthly time entry invoice for June 2020. This invoice is for \$16,325.00 and the amount due is \$15,325.00 after reducing the invoice by \$1,000.00 for the monthly retainer already paid.

Will you please review and let me know if there are any questions? If not, we would appreciate your payment of this invoice in the amount of \$15,325.00 representing the balance owed for June 2020.

With best wishes, I am

Sincerely,

BENCKENSTEIN & OXFORD, L.L.P.

By: 

Hubert Oxford, IV

Enclosure

Benckenstein & Oxford, L.L.P.

3535 Calder Avenue, Suite 300
Beaumont, TX 77706

September 15, 2020

INVOICE #: 49851 **HOIV**
Billed through: June 30, 2020
Client/Matter #: WSHD 87250

Winnie-Stowell Hospital District
P.O. Box 1997
Winnie, TX 77665

RE: Winnie-Stowell Hospital District

PROFESSIONAL SERVICES RENDERED

05/29/20	HOIV	Worked with staff and LTC Group to reconcile Interbank Account and update the Cash Availability Report for August through January 2021.	4.60 hrs
06/01/20	HOIV	Researched HB 3834 Cyber Security training and exchanged four (4) e-mails with staff regarding the same.	0.80 hrs
06/01/20	HOIV	Exchanged three (3) e-mails with Lender's counsel confirming the funding of Loan 17a.	0.20 hrs
06/01/20	HOIV	Exchanged three (3) e-mails with staff and Hospital regarding funding deadline for DY9 UC IGT.	0.20 hrs
06/01/20	HOIV	Prepared draft Minutes of May 20, 2020 Regular Meeting and submitted to the Board for review.	3.40 hrs
06/01/20	HOIV	Exchanged seven (7) e-mails with staff and youth counselor regarding a client's needs and youth counselor's plan of action for future services.	0.60 hrs
06/01/20	HOIV	Read, reviewed, and responded to three e-mails with Hospital staff regarding UHRIP PGY4 Advance IGT Confirmation Request - Jefferson SDA.	0.20 hrs
06/01/20	HOIV	Exchanged six (6) e-mails with staff and Indigent Healthcare Solutions inquiring about Indigent Healthcare Solutions' formula for Medicaid rates as utilized by the District.	0.80 hrs
06/02/20	HOIV	Exchanged four (4) e-mails with Salt Creek Capital regarding December 2020 IGT and the the District's anticipates funding.	0.50 hrs
06/02/20	HOIV	Conference call with Nancy Gaudet regarding Irlen's program and then exchanged six (6) e-mails with staff and Ms. Gaudet after the call to exchange information and to respond to questions by staff.	0.90 hrs
06/02/20	HOIV	Prepared extensive e-mail to youth counselors inquiring as to their status and suggested a plan of action to accommodate their schedules; and responded to three (3) e-mails regarding the same.	0.80 hrs
06/03/20	HOIV	Exchanged three (3) e-mails with staff and J.S. Edwards & Sherlock regarding Alarm Certificate.	0.20 hrs
06/03/20	HOIV	Exchanged three (3) e-mails with HMG staff to receive a final Not on My	0.20 hrs

Watch payment amount for the District.

06/04/20	HOIV	Received notice Section 74.051 Notice Letter for Park Manor by lawyers representing Mark Imm and conveyed notice letter to HMG to confirm the District was going to be indemnified.	0.60 hrs
06/04/20	HOIV	Received notice of needed filing for Special Purpose District Public Information Database; reviewed last year's submission; and prepared a draft filing for the current year to be reviewed by staff and CPA.	1.20 hrs
06/05/20	HOIV	Conference call with Comptroller's office to inquire on the need to prepare a spreadsheet to file a Debt report; drafted e-mail to CPA and staff to convey the findings; gathered information in order to respond to the Annual Debt Report to be submitted to the State.	1.60 hrs
06/05/20	HOIV	Made revisions to cash flow model to assist CPA prior to upcoming June 9, 2020 Meeting to prepare Debt Report and to discuss cash flow.	1.40 hrs
06/05/20	HOIV	Read, and reviewed letter received by Plaintiff's counsel in Mark Imm's potential suit and forwarded to HMG for handling.	0.40 hrs
06/08/20	HOIV	Read and reviewed e-mail and Powerpoint regarding PGY4 UHRIP Preprint Commercial and Medicare Data Collection; and exchanged four (4) e-mails with Hospital staff regarding their participation.	0.80 hrs
06/08/20	HOIV	Exchanged four (4) e-mails with staff and potential youth counselor in order to secure alternative counselors.	0.40 hrs
06/08/20	HOIV	Received e-mail from Allegiance Bank to notify District of rate change; and exchanged nine (9) e-mails with bank staff to receive an explanation of the interest rate reduction for the CD and line of credit.	1.40 hrs
06/08/20	HOIV	Exchanged four (4) e-mails with Hospital staff to discuss the need for an IGT Partner so that Hospital can participate in UHRIP.	0.70 hrs
06/08/20	HOIV	Read and reviewed spreadsheets submitted by HMG for Not on My Watch program payment amounts; revised spreadsheet for the Board to review; and verified information in response e-mails to HMG.	0.70 hrs
06/08/20	HOIV	Began preparing cash flow sheet in anticipation of meeting with the District's CPA; and exchanged four (4) e-mails with staff regarding the balances in various accounts.	3.20 hrs
06/09/20	HOIV	Met with District CPA to discuss Debt Report and cash flow for the District; and submitted e-mail to CPA following the meeting with various spreadsheets requested by CPA.	2.50 hrs
06/09/20	HOIV	Reviewed correspondence from Hospital staff regarding PGY4 UHRIP IGT request; researched UHRIP; and exchanged four (4) e-mails with staff from Hospital to get questions answered in order to report to the Board.	1.80 hrs
06/09/20	HOIV	Continued to work on cash flow analysis and exchanged four (4) e-mails with Salt Creek Capital's attorney to confirm proposed payment schedule for Loan 17a, Loan 17b, and Loan 18 were correct.	4.20 hrs
06/10/20	HOIV	Finalized election documents and submitted to staff to post at the office.	1.60 hrs

Client-	WSHD 87250	Invoice # 49851	PAGE	3
06/11/20	HOIV	Two conference calls with Wilcox Pharmacy regarding agreement and scheduled meeting at 2:00 p.m.; and prepared e-mail and to Wilcox and Board regarding pharmacy numbers for 2017-2020.	1.80 hrs	
06/11/20	HOIV	Continued work on draft Cash Flow Models, Budget and Budget Amendments, and IGT 7 Model spreadsheet; and prepared e-mail to CPA, LTC Group, and Finance Committee to convey first draft of each document.	4.00 hrs	
06/11/20	HOIV	Participated in meeting with staff of Wilcox pharmacy to go over Pharmacy Service Agreement; and then made revisions to the agreement per the understandings at the meeting.	2.60 hrs	
06/15/20	HOIV	Worked with Anthony Stramecki to review cash flow sheet and updated model per the discussion and e-mail with from LTC.	2.50 hrs	
06/16/20	HOIV	Conference call with Director Stramecki regarding changes need to Cash Availability Report; made the changes; and submitted to Board.	1.60 hrs	
06/16/20	HOIV	Researched Chapter 13 of the Texas Water Code and Public Utility Commission rules regarding transfer of CCNs.	2.30 hrs	
06/16/20	HOIV	Worked with CPA to finalize budget amendments and spreadsheet to present budget amendments.	1.30 hrs	
06/17/20	HOIV	Prepared for and attended regular monthly meeting.	3.00 hrs	
06/17/20	HOIV	Worked with LTC Group and staff to reconcile Component 1 payments and subsequent waterfall payments for prior year's IGTs in order to reserve funds in the District's Interbank account.	1.70 hrs	
06/17/20	HOIV	Worked with staff to prepare Board Binders and to finalize treasurer's report after reserving funds in Interbank Bank account.	2.40 hrs	
06/17/20	HOIV	Exchanged three (3) e-mails with insurer for HMG to confirm coverage as an additional insured in the Mark Imm matter.	0.30 hrs	
06/17/20	HOIV	Received and reviewed Affiliation Agreement and payment amounts for DY9 Round 1 July 2020 and DY9 Round 1 July 2020 for the DISRIP Program.	0.80 hrs	
06/18/20	HOIV	Prepared e-mail to Hospital to convey the Board's decision relating to retroactive coverage and pharmacy benefits.	0.40 hrs	
06/18/20	HOIV	Worked on updated Treasurer's Report following the June 17, 2020 Regular Meeting and submitted to the Board and staff along with an explanation of the changes made pursuant the instruction given during the meeting.	1.10 hrs	
06/18/20	HOIV	Worked with staff, Finance Committee Members, and Hospital personnel by making multiple phone calls and exchanging several e-mails in order arrange for a mutually agreeable time to hold a Finance Committee meeting.	1.20 hrs	
06/24/20	HOIV	Read and reviewed ten (10) e-mails between staff, LTC Group, and auditors requesting information for various nursing homes.	0.40 hrs	
06/24/20	HOIV	Conference call with Director Espinosa's daughter regarding resignation and conveyed letter from daughter to Board members.	0.20 hrs	

06/24/20	HOIV	Read and reviewed response to Lone Star Legal Aid's Public Information request regarding the indigent care program.	0.60 hrs
06/29/20	HOIV	Reviewed youth counseling agreement and made it generic to fit qualified youth counselors and Irlen's counselor.	1.20 hrs
		Total fees for this matter	\$16,325.00

BILLING SUMMARY:

Oxford, IV Hubert	65.30 hrs @	\$250.00 /hr	\$16,325.00
TOTAL FEES			\$16,325.00
TOTAL CHARGES FOR THIS INVOICE			\$16,325.00
RETAINER			\$1,000.00 CR
TOTAL BALANCE NOW DUE			\$15,325.00

Federal ID# 74-1646478

Invoice Terms: Net 10 Days Upon Receipt
Please Reference Invoice Number on Your Check

BENCKENSTEIN & OXFORD, L.L.P.

ATTORNEYS AT LAW

BBVA COMPASS BANK BUILDING

3535 CALDER AVENUE, SUITE 300

Hubert Oxford, IV

BEAUMONT, TEXAS 77706

hoxfordiv@benoxford.co

m

TELEPHONE:(409) 833-9182

FAX: (409) 833-8819

September 11, 2020

Mr. Edward Murrell
President
Winnie Stowell Hospital District
825 State Hwy 124
Winnie Texas 77665

Re: Invoice and Draft Minutes for the Regular Meeting on August 19, 2020; Our File No. 87250.

Dear President Murrell,

Attached, please find the draft minutes for the Regular Meeting on August 19, 2020. After you have had a chance to review these minutes, please let me know if there are any changes that need to be made.

Also, please allow this letter to serve as a *partial invoice* for \$1,000.00 representing the retainer for work performed in August 2020. We would request that you put this invoice in line for payment at the August 19, 2020 Regular Meeting and we will give the District credit for the \$1,000.00 payment when we submit the hourly invoice for August 2020.

If you concur, please draft a check in the amount of \$500.00 checks payable to Josh Heinz and a second check for \$500.00 to Hubert Oxford, IV.

With best wishes, I am

Sincerely,

BENCKENSTEIN & OXFORD, L.L.P.

Hubert Oxford, IV

David Sticker & Co. P.C.
Certified Public Accountant
2180 Eastex Freeway
Beaumont, TX 77703
(409) 899-3000

PAID
SEP 11 2020

Invoice
submitted to:
Winnie Stowell Hospital District
PO Box 1997
Winnie, TX 77665

09/10/2020

Invoice # 22233

Professional Services

	<u>Amount</u>
09/10/20	1,531.25
8-13-20 Review QBooks and assist on accounting. Configure Dropbox to new computer. Review accounts. 5.50 Hrs.	
8-18-20 Review Bank, enter adjustments and run preliminary reports. 2.75 Hrs.	
8-19-20 Review reports, board packet, prepare for and attend meeting. 4.00 Hrs.	
Total 12.75 Hrs. @ \$125.00 = \$1,531.25	
For professional services rendered	<u>\$1,531.25</u>
Balance due	<u><u>\$1,531.25</u></u>

Invoices Due Upon Receipt

Technology Solutions of Texas,
L.L.C.

Invoice 1478

TECHNOLOGY
SOLUTIONS-TX

5725 Frost St
Beaumont, TX 77706
4095545953
ronnie@techsol-tx.com
<http://www.techsol-tx.com>

RECEIVED
SEP - 7 2020

BILL TO
Sherrie Norris
Winnie Stowell Hospital District
538 Broadway
Winnie, TX 77665
United States

DATE
09/15/2020

PLEASE PAY
\$75.00

DUE DATE
09/15/2020

DATE	DESCRIPTION	QTY	RATE	AMOUNT
	IT Services:MSP-Dsk MSP Support per Desktop	3	25.00	75.00

TOTAL DUE

\$75.00

THANK YOU.

Yard Service Invoice

Felipe Ojeda

Invoice# 10004

DATE September 1, 2020

558 W.LeBlanc Rd
Winnie, TX 77665
Phone: (409) 466-7105

Property Location:
Winnie-Stowell Hospital District
520 Broadway
Winnie, TX 77665

Description	AMOUNT
Yard Maintenance completed 08/15/20	\$ 125.00
Yard Maintenance completed 08/29/20	\$ 125.00
Trash Service	\$ 50.00
TOTAL	\$ 300.00

If you have any questions concerning this quotation, Contact Felipe Ojeda, (409) 466-7105

I LOOK FORWARD TO PROVIDING YARD SERVICES FOR YOUR BUSINESS!

DATE 8-18-2020 No. 08018586

CUSTOMER'S ORDER NO.						
NAME <u>Graciela Chavez</u>						
ADDRESS <u>220 8TH ST</u>						
CITY, STATE, ZIP <u>Winnie TX 76665</u>						
SOLD BY	CASH	C.O.D	CHARGE	ONACCT.	MOSE RETD	PAID OUT
			/			

QUAN.	DESCRIPTION	PRICE	AMOUNT
1	office		
2	cleaning	\$100	
3			
4	agos 4	2020	
5			
6	agos 18	2020	
7			
8			
9	Total	100	
10			
11			
12			

RECEIVED BY

KEEP THIS SLIP FOR REFERENCE

RECEIVED

SEP 15 2020

DATE 9-15-2020 NO. 08018587

CUSTOMER'S ORDER NO.						
NAME Graciela Chavez						
ADDRESS 220 8TH ST						
CITY, STATE, ZIP Winnie Tx 77605						
SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	NO. SER. RETD.	PAID OUT
			✓			
QUAN.	DESCRIPTION	PRICE	AMOUNT			
1	office					
2						
3	Cleaning	\$ 100				
4	September 1 - 2020					
5						
6	September 15 - 2020					
7						
8	Total	100				
9						
10						
11						
12						
RECEIVED BY						

KEEP THIS SLIP FOR REFERENCE

The Seabreeze Beacon
PO BOX 814
WINNIE, TX 77665 US
(409)296-2102
seabreezebeacon@gmail.com



RECEIVED
SEP - 2 2020

BILL TO
Sherrie Norris
Winnie-Stowell Hospital District
PO BOX 1997
Winnie, TX 77665

INVOICE # 4656
DATE 08/31/2020
DUE DATE 09/15/2020
TERMS Net 15

ACTIVITY	QTY	RATE	AMOUNT
Display Ad Display Ad Fall Sports Preview 1/4 Page 8/25	1	360.00	360.00

BALANCE DUE **\$360.00**

The Hometown Press

P.O.Box 801
Winnie, TX 77665

Invoice

Date	Invoice #
9/1/2020	2659

Bill To
Winnie Stowell Hospital District Sherrie Norris P.O.Box 1997 Winnie, Texas 77665

RECEIVED

SEP - 4 2020

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
1	Ad in the 2020 Fall Sports Preview(Full page color)	600.00	600.00
Total			\$600.00

Crown Awards - Invoice/Receipt

1 message

CROWN AWARDS <CUSTOMERSERVICE@crownawards.com>
To: ANTHONY STRAMECKI <Sherrie@wshd-tx.com>

Thu, Sep 10, 2020 at 12:44 PM



INVOICE
9 Skyline Dr, Hawthorne, NY 10532 800-765-2003
www.CrownAwards.com

Account #	Invoice Date	Order #	Invoice #	PO #
60232572	08/14/20	10278927	34633226	WEB-10278927

Billing Information

ANTHONY STRAMECKI
7867 FM1663
WHINNIE, TX 77665

Shipping Information

ANTHONY STRAMECKI
7867 FM1663
Winnie, TX 77665

Quantity	Item #	Description	Unit Price	Subtotal
1	PLCLWD810	8X10 CLASSIC WOOD PLAQUE	34.99	34.99
1	ETU7YGD	7 YEARS OF SERVICE	0.00	0.00
1	NOGIFTBAG	No Gift Packaging	0.00	0.00
1	ENGBLKMT79X-L	ENG-BLACK METAL 7"X9"-LOGO	0.00	0.00
87	EXENGCP	EXTRA CHARACTER CHARGE	0.28	24.36
1	FRTTRP	SHIPPING & HANDLING-TROPHIES	17.32	17.32

AMERICAN EXPRESS	*****1006	81.46	11/2024	Invoice Subtotal	59.35
				Shipping Charge	17.32
				Sales Tax	4.79
				Total	81.46
				Total Payments	81.46
				Balance Due	\$0.00

WSHD Reimbursement Request

Anthony Stramecki

Date	Description	Amount
09/10/20	Crown Awards Receipt - Raul Plaque	\$81.46
09/15/20	Gift Card (\$60.00)	\$64.95
Total	<u>\$146.41</u>	

Anthony Stramecki,
Vice-President of the Board

Crown Awards - Invoice/Receipt

1 message

CROWN AWARDS <CUSTOMERSERVICE@crownawards.com>
To: ANTHONY STRAMECKI <Sherrie@wshd-tx.com>

Thu, Sep 10, 2020 at 12:44 PM



INVOICE
9 Skyline Dr, Hawthorne, NY 10532 800-765-2003
www.CrownAwards.com

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87	EXENGCP	EXTRA CHARACTER CHARGE	0.28	24.36
1	FRTRP	SHIPPING & HANDLING-TROPHIES	17.32	17.32

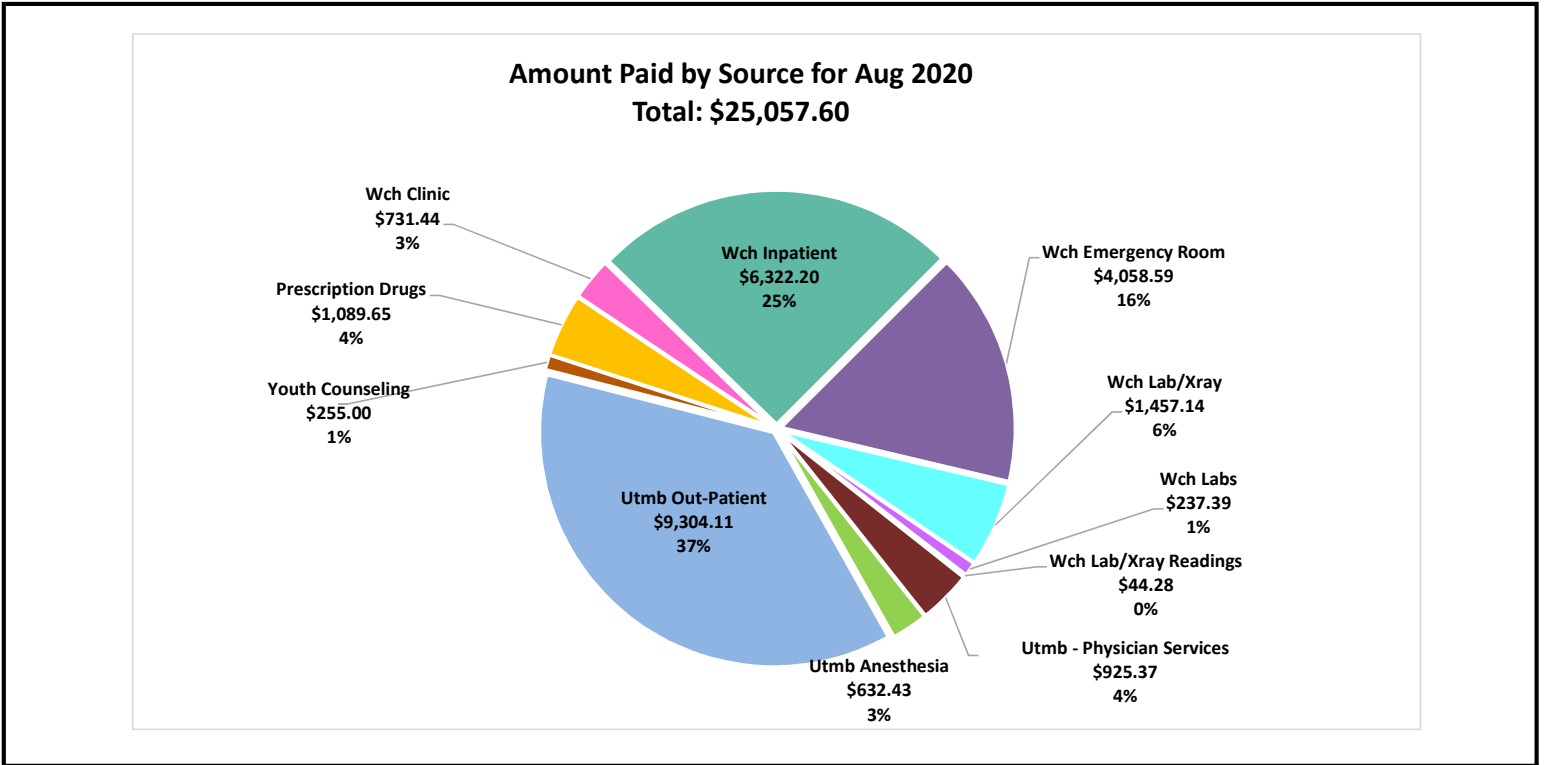
AMERICAN EXPRESS	*****1006	81.46	11/2024	Invoice Subtotal	59.35
				Shipping Charge	17.32
				Sales Tax	4.79
				Total	81.46
				Total Payments	81.46
				Balance Due	\$0.00

EXHIBIT “B”

WSHD Indigent Care Director Report
Aug 2020 SOURCE CODE REPORT

Source Totals for Batch Dates 08/01/2020 through 08/30/2020 for All Vendors

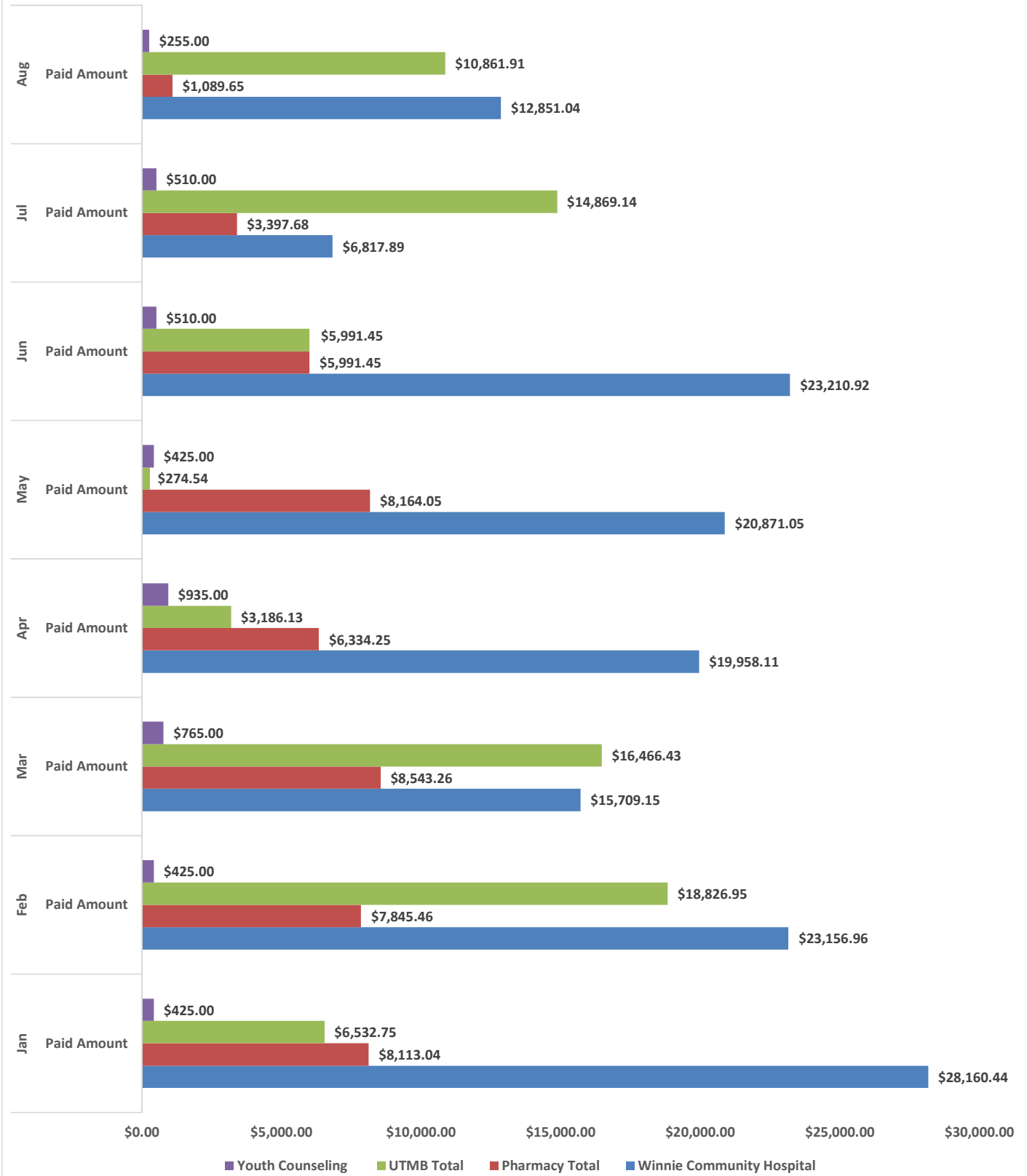
Source	Description	Amount Billed		Amount Paid		% of Total
Column1	Column2	Column3	Column4	Column5	Column6	Column7
02	Prescription Drugs	\$3,308.52		\$1,089.65		4.35%
21	Wch Clinic	\$1,784.00		\$731.44		2.92%
23	Wch Inpatient	\$15,420.00		\$6,322.20		25.23%
24	Wch Emergency Room	\$9,899.00		\$4,058.59		16.20%
25	Wch Lab/Xray	\$3,554.00		\$1,457.14		5.82%
27	Wch Labs	\$579.00		\$237.39		0.95%
44	Wch Lab/Xray Readings	\$108.00		\$44.28		0.18%
31	Utmb - Physician Services	\$7,505.00		\$925.37		3.69%
31-1	Utmb Anesthesia	\$1,760.00		\$632.43		2.52%
31-2	Utmb-Crna Anesthesia	\$420.00		\$0.00		0.00%
34	Utmb Out-Patient	\$72,138.17		\$9,304.11		37.13%
39	Youth Counseling	\$255.00		\$255.00		1.02%
Expenditures/Reimbursements/Adjustments		\$116,730.69		\$25,057.60		0%
Grand Total		\$116,730.69		\$25,057.60		100%



Indigent Care Director Report

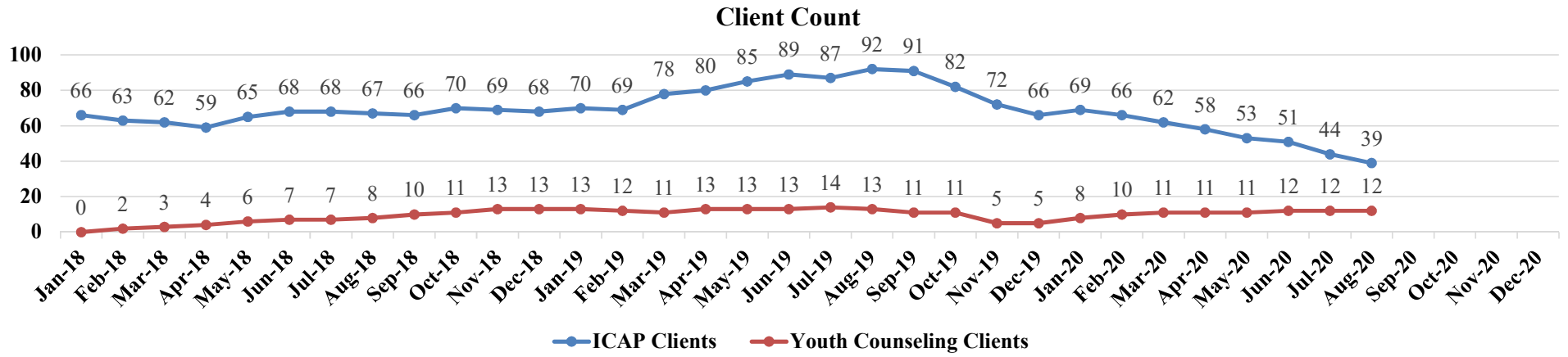
Winnie Stowell Hospital District Indigent Healthcare Services

2020 YTD Paid



Indigent Care Director Report

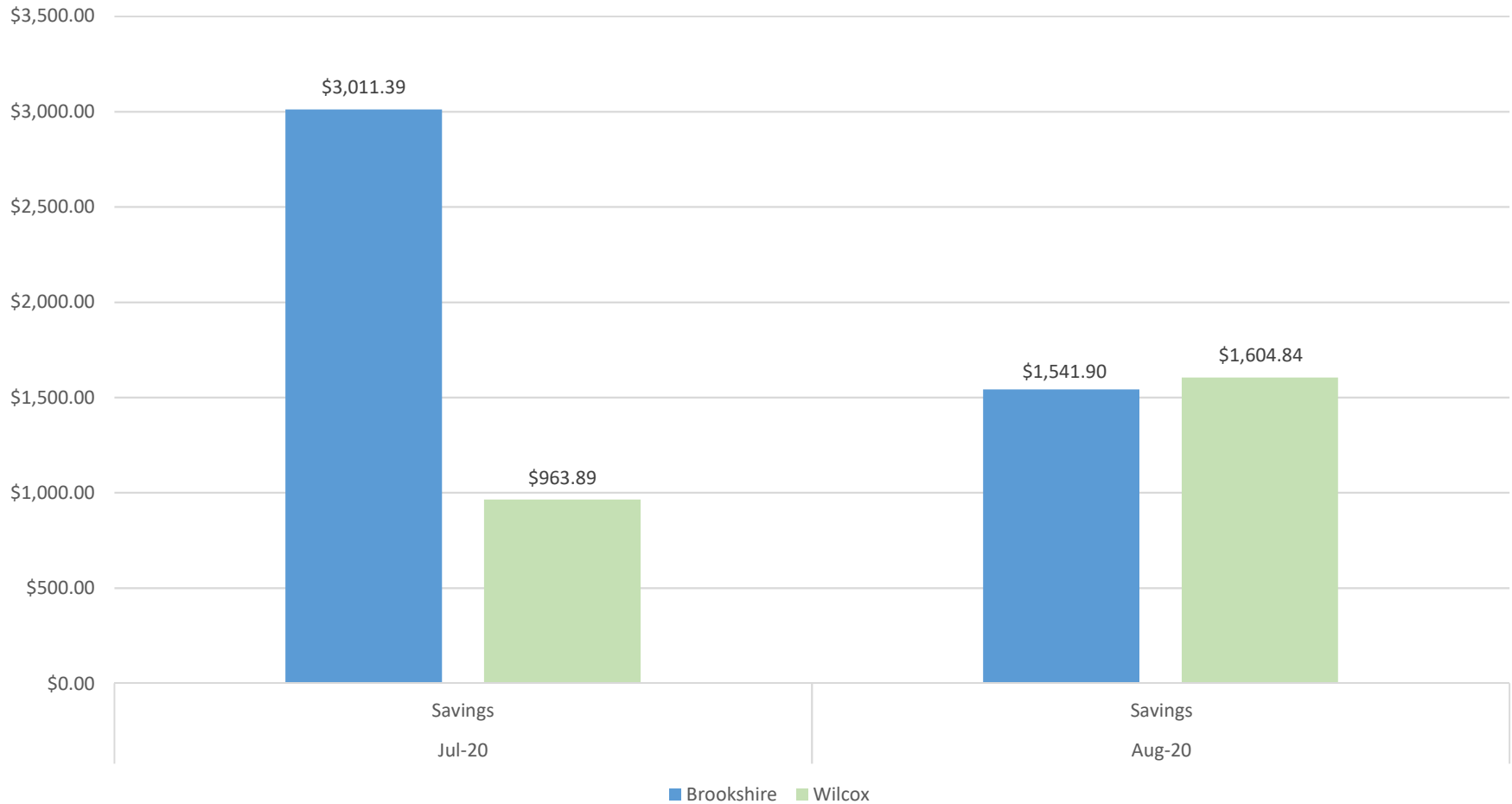
Winnie Stowell Hospital District Indigent Healthcare Services



PHARMACY SAVINGS

PHARMACY SAVINGS

Jul Savings: \$3,975.23 | Aug Savings: \$3,146.74



Winnie-Stowell Hospital District			
Executive Summary of Nursing Home Monthly Site Visits			
August 2020			
Facility	Operator		Comments
Park Manor of Quail Valley	HMG		Census: 69. The facility had their annual survey in January 2020, all tags have been cleared. There were two reportable incidents since the last visit, the facility is working to clear the incidents. The facility has had a total of 69 staff and residents test positive for COVID-19, as of now there are no positive cases at the facility. The facility has isolated the dialysis patients to their own area since they are immunocompromised.
Garrison Nursing and Rehab	Caring		Census: NA. The facility had two surveys due to COVID-19 self-reports, there were no deficiencies cited from either survey. The facility has had 48 staff and residents test positive for COVID-19, there are no active cases at the facility. The facility is exploring the idea of starting the phase one visitation policy, there are some logistical concerns that still need to be worked out to make sure no one coming into the facility can transmit any viruses.
Golden Villa	Caring		Census: 78. The facility had a COVID-19 survey at the end of July due to a staff member testing positive, the facility was not cited. There were no reportable incidents since the last visit. The staff member that tested positive for COVID-19 is the only person at the facility to test positive. The facility has three I-Pads for residents to be able to facetime their families.
Marshall Manor Nursing and Rehab	Caring		Census: 93. The facility is currently in their survey window. The facility has had five infection control surveys, the facility has not been cited in any of the surveys. There were no reportable incidents since the last visit. The facility has had 110 staff and residents test positive for COVID-19, as of now there is one staff member who is positive. The facility has been doing their best to keep staff morale up by providing incentives to staff who work overtime.
Marshall Manor West	Caring		Census: 51. The facility had an infection control survey in July 2020, there were no deficiencies cited. There were no reportable incidents since the last visit. At this time there are no active COVID-19 cases at the facility. The facility is now able to accept new admissions, those residents are quarantined to an isolation wing for 14 days.

EXHIBIT “C”

EXHIBIT ‘D’

2019

Census	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Average	Texas Average
ER Visits	240	183	202	206	198	215	226	202	185	105	127	185	190	
Conversion to Inpatient/observation	20	15	10	10	9	10	9	17	4	0	1	9	10	
<i>Percentage</i>	8%	8%	5%	5%	5%	5%	4%	8%	2%	0%	1%	5%	5%	
Transferred out	16	12	15	11	11	12	10	10	10	0	2	6	10	
<i>Percentage</i>	7%	7%	7%	5%	6%	6%	4%	5%	5%	0%	2%	3%	5%	
ER shifts covered by doctors	55%	61%	63%	78%	92%	77%	74%	76%	100%	100%	93%	74%	79%	
Number Inpatient days	52	76	50	70	59	41	103	102	70	0	1	73	58	
Number Hospice days	0	14	10	14	32	20	17	16	0	0	2	19	12	
Number Swingbed days	6	5	14	18	34	10	54	29	4	0	0	19	16	
Number Observation days	27	12	20	10	21	20	30	43	13	0	0	21	18	
Total All Inpt. Days	85	107	94	112	146	91	204	190	87	0	3	132	104	
Average All Inpt. days per day	2.74	3.82	3.03	3.73	4.71	3.03	6.58	6.13	2.90	0.00	0.10	4.26	3.42	1.63
CTs	52	35	45	57	46	63	74	79	25	0	5	26	42	
Xrays	257	266	244	239	250	218	294	314	149	0	19	192	204	
Ultrasounds	18	33	28	28	28	23	45	43	18	0	0	16	23	
Encounters - Adult Clinic	673	643	618	635	616	525	557	617	469	483	494	585	576	
Encounters - Pediatric Clinic	334	346	320	341	287	217	235	250	236	154	250	423	283	
Behavioral Health patients	74	76	73	75	75	69	63	60	56	0	19	44	57	
Physical Therapy	8	3	4	6	5	7	9	7	8	0	2	2	5	

2020

Census	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Average	Texas Average
ER Visits	187	178	193	147	162	166	141	169					168	
Conversion to Inpatient/observation	9	14	17	14	10	7	6	17					12	
<i>Percentage</i>	5%	8%	9%	10%	6%	4%	4%	10%					7%	
Transferred out	8	14	7	13	16	11	11	8					11	
<i>Percentage</i>	4%	8%	4%	9%	10%	7%	8%	5%					7%	
ER shifts covered by doctors	80%	82%	87%	72%	57%	67%	61%	55%					70%	
Number Inpatient days	83	95	69	64	75	74	60	119					80	
Number Hospice days	1	17	27	7	1	0	0	4					7	
Number Swingbed days	2	7	16	20	99	57	53	43					37	
Number Observation days	36	47	21	5	8	11	5	28					20	
Total All Inpt. Days	122	166	133	96	183	142	118	194					144	
Average Inpatient days per day	3.94	5.72	4.29	3.20	5.90	4.73	3.81	6.26					4.73	1.63
CTs	56	71	59	39	56	48	46	57					54	
Xrays	270	268	185	160	200	169	151	194					200	
Ultrasounds	20	20	14	8	5	1	3	2					9	
Encounters - Adult Clinic	638	598	592	349	360	453	384	388					470	
Encounters - Pediatric Clinic	274	306	221	69	95	169	178	233					193	
Behavioral Health patients	45	44	39	0	0	0	0	0					16	
Physical Therapy	0	1	2	0	1	0	0	0					1	

Additional Items:

- *Continuing to follow through with protocol set by Chambers County.
- *Doing best we can to keep patients safe and confident while they receive care from our providers
- *Continuing to provide Adult and Pediatric clinic services

EXHIBIT ‘E’

Winnie-Stowell Hospital District

Executive Summary of Nursing Home Monthly Site Visits

August 2020

Facility	Operator		Comments
Park Manor of Quail Valley	HMG		Census: 69. The facility had their annual survey in January 2020, all tags have been cleared. There were two reportable incidents since the last visit, the facility is working to clear the incidents. The facility has had a total of 69 staff and residents test positive for COVID-19, as of now there are no positive cases at the facility. The facility has isolated the dialysis patients to their own area since they are immunocompromised.
Garrison Nursing and Rehab	Caring		Census: NA. The facility had two surveys due to COVID-19 self-reports, there were no deficiencies cited from either survey. The facility has had 48 staff and residents test positive for COVID-19, there are no active cases at the facility. The facility is exploring the idea of starting the phase one visitation policy, there are some logistical concerns that still need to be worked out to make sure no one coming into the facility can transmit any viruses.
Golden Villa	Caring		Census: 78. The facility had a COVID-19 survey at the end of July due to a staff member testing positive, the facility was not cited. There were no reportable incidents since the last visit. The staff member that tested positive for COVID-19 is the only person at the facility to test positive. The facility has three I-Pads for residents to be able to facetime their families.
Marshall Manor Nursing and Rehab	Caring		Census: 93. The facility is currently in their survey window. The facility has had five infection control surveys, the facility has not been cited in any of the surveys. There were no reportable incidents since the last visit. The facility has had 110 staff and residents test positive for COVID-19, as of now there is one staff member who is positive. The facility has been doing their best to keep staff morale up by providing incentives to staff who work overtime.
Marshall Manor West	Caring		Census: 51. The facility had an infection control survey in July 2020, there were no deficiencies cited. There were no reportable incidents since the last visit. At this time there are no active COVID-19 cases at the facility. The facility is now able to accept new admissions, those residents are quarantined to an isolation wing for 14 days.

Rose Haven Retreat	Caring		Current Census: 49. The facility is currently in their survey window. The facility had an infection control survey in July 2020, there were no deficiencies cited. At this time the facility does not have any COVID-19 cases. The facility has a dedicated staff to take care of any COVID-19 patients, the facility is offering extra incentives to the staff that care for COVID-19 patients.
---------------------------	--------	--	--

July 2020

Facility	Operator		Comments
Park Manor of Cyfair	HMG		Census: 65. The facility is currently in their survey window. There were six reportable incidents since that last visit, all were for a fall with injury, the facility was not cited. The facility has had 45 residents and 24 staff test positive for COVID_19 during the pandemic. Residents are confined to their rooms for the time being, they are hoping to allow residents to get out of their rooms once a step-down unit is created.
Park Manor of Cypress Station	HMG		Census: 65. The facility will be in their survey window in July 2020. There were two reportable incidents since the last visit, one has not been investigated, the other was not cited. The facility is not taking any new residents at this time to try and insulate the facility. The facility has had 40 staff and residents test positive for COVID_19. The facility has been utilizing their outdoor gazebo as a way to get the residents some fresh air.
Park Manor of Humble	HMG		Census: 66. The facility is currently in their survey window. There were no reportable incidents since the last visit. The facility has developed two different COVID_19 care units in the facility. The facility has been fortunate that most of their residents have been asymptomatic and they are able to manage what symptoms that do arise.
Park Manor of Westchase	HMG		Census: 83. Facility had their annual survey in February 2020. The facility had an infection control survey in May 2020, they received one deficiency. The administrator at the facility has tested positive for COVID_19, they have an interim in the facility for the time being. The facility is using facetime and skype to allow residents to talk to their loved ones. The facility has received positive support from the local community, the residents are very appreciative.

<p>Spring Branch Transitional Care</p>	<p>Caring</p>		<p>Census: 176. The facility is currently in their survey window. The facility has had 58 residents and staff test positive for COVID_19. Almost all of the residents and staff were asymptomatic, and they have had success with residents recovering. The facility has a designated COVID_19 wing at the facility to treat those residents. The facility is working with the City of Houston to conduct weekly tests, this is an effort to bring the number of cases under control.</p>
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Administrator: Kara Musgraves
DON: Susan Joy
Infection Preventionist: Samantha Goodale

FACILITY INFORMATION

Park Manor of Quail Valley is a 125 -bed facility with a current over all star rating of 4. Given census on the date of this call was 69: Private Pay- 3, HMO- 10, Medicare- 15, Medicaid- 33, and Hospice -6.

Due to the current COVID-19 restrictions in place, the QIPP site visit was conducted via telephone. The DON, Infection Preventionist and Kara Musgraves -Administrator were on the call.

The DON reported they have implemented their emergency plan and are following all the state/federal/local mandates. Administrator reports there are 13,605 confirmed cases of COVID_19 with 198 deaths in Fort Bend County.

Anyone on dialysis or anyone who goes out to essential physician visits or hospital is quarantined in a private room for 14 days. Facility reported 1 COVID_19 positive resident on 3/30/2020 and then all residents and staff were tested. 2 additional staff tested positive for COVID_19 on 8/11/2020 neither were symptomatic and the last one will return next week. One additional resident tested positive on 8/10/2020 (bringing total to 69), with no current residents positive for COVID_19. Residents and staff are being tested weekly since June. Facility is doing their own testing.

DON reports they continue to use isolation area in hall 200. Administrator reports that the facility dialysis residents reside on the isolation hall and anyone coming from the hospital is quarantined on the isolation hall for 14 days. All other residents coming and going for essential services are looked at on an individual basis.

Qv-Administrator reported they are following CMS/CDC/state infection control guidelines for COVID-19. Housekeeping continues to clean facility daily as per guidelines, every 1 hour cleaning the high touch areas with disinfectant (document on log). Facility is performing and documenting the screening of their employees every shift and if step outside for break, screened again. All required in-servicing of staff is being done on-going and as mandated. State exited for the weekly for infection control monitoring on 7/7/2020 with only one tag.

All PPE is locked up in secure location. DON reports adequate supply of PPE (always have at least 1 week supply on hand and some items 2-3wks supply), inventory is done every day. Regular orders from vendor continue coming in and corporate office providing from their stock as needed. DON reports the facility is receiving PPE from SEA-TRAC.

No visitors are permitted in building. Essential staff, including hospice nurses, only if during end of life, are permitted in the building and only after screened and use of hand sanitizer and given a mask, gown, gloves and face shield. Staff and resident temperatures taken and recorded once per shift and as indicated. If temperature 100.4 or above they are not permitted entrance into the facility.

The facility provided a "COVID Free" lunch to staff. Facility is passing out tokens when staff do something good and can purchase items (scrubs, gift cards, Luis Vaton purse, etc.) with them. Staff are encouraged, no longer required, to only working at their facility. Corporate office is also contracted with a staffing agency, if needed.

Administrator reported the residents are coping well, adjusted better now that it has gone on so long. The activity director is still providing activities one on one, coloring in room, fun snacks, etc. and music through intercom. No current plans for outdoor activities. Facility has I-pads available to residents for Facetime with families. Admissions and marketing team call families regularly and have emails from families if needed.

SURVEY INFORMATION

Park Manor of Quail Valley had their full book survey in January of 2020. Park Manor of Quail Valley received minimal health and fire/safety code violations and all were cleared.

REPORTABLE INCIDENTS

In **March/April/May 2020- The facility reports** 2 self-reports, 1 in March unsubstantiated and 1 in April with 1 infection control F-tag.

CLINICAL TRENDING

Incidents/Falls:

In **March/April/May 2020**, Park Manor of Quail Valley had 46 total falls, of which 2 resulted in injury, 5 received skin tears and 3 had bruises.

Infection Control:

Facility reports 42 total infections in **March/April/May 2020**– 11 UTI's; 16 Resp (7 URIs); 4 wound infections; and 11 Other infections.

Weight loss:

Weight loss information for **March/April/May 2020** includes 2 residents with less than 5% loss, 3 with 5-10% loss and 0 with > 10% loss in 30 days.

Pressure Ulcers:

In **March/April/May 2020**, there were 12 residents with 15 pressure ulcer sites – 3 acquired in house.

Restraints:

In **March/April/May 2020**, the facility had 0 residents with restraints.

Staffing:

Facility has openings for (4) LVNs & (4) CNAs for 6a-2p & 2p-10p and (2) LVNs & 2 CNAs for 10p-6a; (1) housekeeper for 2p-10p.

Quarter Quality Indicators (Casper)				
Indicator	Facility	State	National	Comments/PIPs
New Psychoactive Med Use (S)	0%	2.1 %	2%	
Fall w/Major Injury (L)	0%	3.5%	3.4%	
UTI (L)	0%	4.7%	7.1%	
High risk with pressure ulcers (L)	5.9%	8.6%	8.6%	
Loss of Bowel/Bladder Control(L)	96.3%	51%	47.6%	MDS is researching
Catheter(L)	2.4%	1.8%	2%	
Physical restraint(L)	0%	0.1%	0.2%	
Increased ADL Assistance(L)	29.7%	18.1%	16.8%	Therapy is reviewing

Excessive Weight Loss(L)	0%	5.7%	7.4%	
Depressive symptoms(L)	0%	4.7%	7.1%	
Antipsychotic medication (L)	3.9%	11.9%	14%	

QIPP SCORECARD:

Component 1- Quarter 3, 2020

Indicator	QAPI Mtg Date	PIP's Implemented (Name specific PIP's)
QAPI Meeting	3-17-2020, 4-16-2020, 5-20-2020	

Component 2 – Quarter 3, 2020

Indicator	Benchmark Met Y/N	Comments
Did NF maintain 4 additional hours of RN staffing coverage per day, beyond the CMS mandate?	Y	NA
Did NF maintain 8 additional hours of RN staffing coverage per day, beyond the CMS mandate?	N	NA
Does the NF have a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes?	Y	NA
Was Workforce Development data submitted q month to QIPP during the quarter?	Y	NA

QIPP Component 3 – CMS Long-Stay Quality Metrics – Quarter 3, 2020

Indicator	National Benchmark	Baseline Target	Results	Met Y/N	Comments
Percent of high-risk Long-Stay residents with pressure ulcers; including unstageable	7.35%	7.47%	5.9%	Y	
% of residents who received an anti-psychotic medication	14.56%	7.29%	3.9%	y	
% of residents whose ability to move independently has worsened	17.72%	17.87%	12.1%	y	

QIPP Component 4 – CMS Long-Stay Quality Metrics Quarter 3, 2020

Indicator	National Benchmark	Facility Baseline	Facility Results QRT 2	Comments
% of residents with UTIs	2.80%	1.10%	0%	Met
% of residents whose pneumococcal vaccine is up to date.	93.67%	93.67%	%	Information not provided
Facility has an infection control program that includes antibiotic stewardship. The program includes policies and training as well as monitoring, documenting and providing staff feedback.				<p>Infection Control Policy is reviewed as mandated and needed.</p> <p>Antibiotic Stewardship Program is reviewed and is in place with all components per administrator’s statement.</p> <p>ADON is Infection Preventionist</p>

Administrator: Josh Havins
DON: Teresa Westmoreland

FACILITY INFORMATION

Garrison Nursing and Rehabilitation is a 93 bed SNF in a rural area. Census was not provided. The facility currently has an overall star rating of 3 and a star rating in Quality Measures of 4.

Due to the current COVID-19 restrictions in place, the QIPP site visit was conducted via telephone. The Administrator was on the call.

The Administrator reported they have implemented their emergency plan and are following all the state/federal/local mandates. Administrator reports there are 1145 confirmed cases of COVID_19 in Nacogdoches County. Administrator reports facility is COVID_19 free as of 7/22/2020, after having 31 positive residents and 17 positive staff. The administrator reports the facility had 7 residents hospitalized, and 10 of the 31 were all symptomatic and an additional 4 resident deaths related to COVID_19. Of the additional 4 staff, 2 were symptomatic and 2 asymptomatic. All staff have returned to work. The administrator reports the facility is now accepting admissions. New admissions to be quarantined in private room for 14 days. The administrator reports the state came back for 2 additional surveys and no deficiencies were cited.

Administrator reports they still have an isolation area in hall 400 and it is set up and there is a team of staff dedicated (all volunteered) caring for the positive COVID_19 residents (nurses working 12 hour shifts). If needed, would be able to use staff with sister facilities. One resident on dialysis is screened and given an N-95 mask before leaving and then screened again on return.

Administrator reported they are following CMS/CDC/state infection control guidelines for COVID-19. Housekeeping is cleaning facility daily as per guidelines, multiple times per day cleaning the high touch areas with disinfectant every hour.

PPE supply is good. Regular supplier continues to fill orders. All PPE is locked up in Administrator's office. Administrator reports the facility received PPE from SEA-TRAC and the local Nacogdoches county team. Inventory of what is on hand/in stock, updated daily to ensure PAR level. All staff are wearing surgical masks over an N-95 mask. Residents all have a surgical mask to wear during direct care or if they come out of their room.

No visitors are permitted in building. Essential staff, including lab, x-ray, wound care physicians and hospice nurses, every 2 weeks and during end of life, are permitted in the building and only after screened and use of hand sanitizer and N-95 and surgical masks (provided by visitor or facility). If hospice resident is in the active dying stage, only 2 family members could come in after they are screened, provided hand sanitizer and full PPE and would be escorted directly to and from the resident room with door closed. Staff temperature and screening and resident full set of vitals are

taken and recorded once per shift and as indicated. If temperature 99 or above they are not permitted entrance into the facility.

The Administrator reports meeting with staff daily for updates. Morale in building is good and even better now that COVID_19 free. Have drawings for gift cards. Administrator reports he has developed an employee council to help with moral. Staff are limited to only working at facility. Facility is performing and documenting the screening of their employees and all required in-servicing of staff is being done on-going.

Administrator reported the residents are coping best as can be expected. Activity director providing hallway bingo, room to room visits (hand massages, word search). Also, residents go out on patio, (all while socially distancing) whenever it is not too hot. Canopy set up for COVID_19 positive residents to go outside. Management staff are assigned a set of families to call and provide update on resident Monday, Wednesday and Friday. Also set up Facetime visits for residents using available Facebook portal. The facility received 3 I-Pads through the grant program. Also still assisting family and resident with window visits. The administrator reports the facility is looking into the phase one visitation policy. The weekly testing of staff is the biggest challenge and they are waiting for more guidance on this and the plexi-glass booth.

QIPP SCORECARD:

Based on QIPP Scorecard for quarter March/April/May, Garrison Nursing and Rehabilitation:

- Component 1 - Met
- Component 2 - Met Metrics 1, 2, 3 and 4
- Component 3 - Met Metrics 1, 2 and 3
- Component 4 - Met Metrics 1, 2 and 3

SURVEY INFORMATION

Facility had 2 additional surveys for COVID_19 self-reports and passed with no deficiencies cited.

REPORTABLE INCIDENTS

Information not provided

CLINICAL TRENDING

Incidents/Falls:

Information was not provided

Infection Control:

Information was not provided

Weight loss:



Information was not provided

Pressure Ulcers:

Information was not provided

Restraints:

Information was not provided

Staffing:

Facility is fully staffed and also utilize telehealth with RNs and PAs each month.

Administrator: Mandy Smith
DON: Brandy Pulliam

FACILITY INFORMATION

Golden Villa is a 111-bed facility with a current overall star rating of 2 and a Quality Measures star rating of 4. The census on the date of this call was 78 in house and 3 in hospital and no other breakdown provided.

Due to the current COVID-19 restrictions in place, the QIPP site visit was conducted via telephone. The Administrator was on the call.

Administrator reports there are 185 confirmed cases of COVID_19 in Cass County. The Administrator reported they have implemented their emergency plan and are following all the state/federal/local mandates. One other staff member tested positive on 7/28/2020, no symptoms and returned to work 8/10/2020. No other staff or residents have exhibited symptoms and residents who have gone to hospital for unrelated issues have all tested negative.

New admissions or anyone who goes out to essential physician visits or hospital are quarantined in a room on the "unknown" hall for 14 days to ensure they do not have any s/s of COVID_19. Treat dialysis residents the same as any other, if they come back as "known" status they can go back to their room. If "unknown" status, go to "unknown" hall for 14 days.

DON reported they are following CMS/CDC/state infection control guidelines for COVID-19. Housekeeping is cleaning facility daily as per guidelines, multiple times per day cleaning the high touch areas with disinfectant and every 2 hours documenting each time it is performed.

All PPE is locked up in secure location. Administrator reports the facility receives PPE from regular vendor, corporate and limited supply from RAC. Inventory of what is on hand/in stock, updated weekly. Staff are wearing surgical masks and residents wear cloth or surgical masks. Facility now has at least a 2 week supply of all PPE.

No visitors are permitted in building. Essential staff, including hospice nurses, only if during end of life, are permitted in the building and only after screened and use of hand sanitizer and wearing an N-95 mask. If hospice resident is in the active dying stage, only 1 family member at a time could come in at end of hall after they are screened, provided hand sanitizer and full PPE and would be escorted directly to and from the resident room (moved to private room) with door shut. Staff are screened upon entry and if they leave they are screened again. Resident temperatures taken and recorded once per shift and as indicated. If temperature 99.5 or above essential visitor are not permitted entrance into the facility.

Administrator has identified a team of staff willing to care for COVID_19 residents. Corporate plan for emergency staffing is to utilize sister facility staff and also have a team that will be tested negative for COVID_19. Staff are required to only working at facility. The Administrator reports the facility has drawings for gift cards and last week had a barbecue for all staff. Facility is performing and documenting the screening of their employees and all required in-servicing of staff is being done on-going.

Administrator reported the residents are coping as best as possible. The Administrator reports activities department is keeping residents busy with room to room activities and hallway bingo. Residents can go outside to gazebo area maintaining social distancing in groups of less than 10 including staff. Sanitize hands before and after going outside. Also take them one at a time for walks. Residents eating in their room. Some of the weight loss residents and feeders are sitting in dining area, at least 6ft apart, no more than 10 at a time including staff to ensure they are eating. Someone is also going around to each room to remind/cue residents to eat. Facility received 3 additional I-pads for Facetime and assisting residents with regular phone calls to family. Some families are coming for window visits. Facility is also posting updates on Facebook. Currently the facility does not have the resources to test their staff weekly so they are not able to implement or request visitation at this time.

QIPP SCORECARD:

Based on QIPP Scorecard for quarter March/April/May, Golden Villa:

- Component 1 - Met
- Component 2 - Met Metrics 1, 2, 3 and 4
- Component 3 - Met Metrics 1, 2 and 3
- Component 4 - Met Metrics 1, 2 and 3

SURVEY INFORMATION

The facility had another infection control survey on 7/31/2020 after self-report of positive staff member and no deficiencies cited.

REPORTABLE INCIDENTS

Facility information not provided

CLINICAL TRENDING

Incidents/Falls:

Facility information not provided

Infection Control:

Facility information not provided



Golden Villa

1104 South William Street, Atlanta TX 75551

August 13, 2020

Weight loss:

Facility information not provided

Pressure Ulcers:

Facility information not provided

Restraints:

Facility information not provided

Staffing:

Facility is fully staffed at this time.

Administrator: Linda Benson
DON: Tameika Sanders, RN

FACILITY INFORMATION

Marshall Manor Nursing and Rehab is a 169-bed facility with a current over all star rating of 2 and a Quality Measures rating of 5. The census on the date of this call was 93.

Due to the current COVID-19 restrictions in place, the QIPP site visit was conducted via telephone. The Administrator was on the call.

The Administrator reported they have implemented their emergency plan and are following all the state/federal/local mandates. Administrator reports there are 562 confirmed cases of COVID_19 in Harrison County. The Administrator reports since last call they have had a total of 71 residents and 39 staff positive for COVID_19. A total of 3 residents passed away in the building and 3 passed away in the hospital. All of the positive staff have returned to work and the building was COVID free for 18 days until the NP reported her positive case. Facility has an NP that works in their building who just tested positive for COVID_19 on 8/4/2020, asymptomatic. The NP had contact with 3 of the facility's residents so they were placed on quarantine hall and were tested on 8/9/2020 and still waiting for the results. Administrator reports they have identified an area upstairs on D-wing for "unknown" residents and it is set up and ready and there is a team of staff designated and ready should they be needed. If needed, would be able to use staff with sister facilities. New admissions to be tested before they are admitted and quarantined on the "unknown" hall for 14 days.

Administrator reported they are following CMS/CDC/state infection control guidelines for COVID-19. Housekeeping is cleaning facility daily as per guidelines, multiple times per day cleaning the high touch areas with disinfectant 2x per day with cake wipes (create their own with bleach).

PPE supply is good, at least a 2 week supply. Regular supplier continue to fill orders. All PPE is locked up in Administrator's office. Administrator reports the facility receives PPE from RAC-G every week. Inventory of what is on hand/in stock, updated weekly to ensure PAR level. All staff are wearing surgical masks. Residents all have a cloth or surgical mask to wear during direct care or if they come out of their room. Staff on "unknown" hall are wearing N-95 masks.

No visitors are permitted in building. If temperature 100.1 or above they are not permitted entrance into the facility. Essential staff, including lab, x-ray, life safety, (all tested with facility and are negative) medical director (tested negative) and 1 hospice nurse (who tested negative & has not been in a COVID_19 positive building), every week and during end of life, are permitted in the building and only after screened and use of hand sanitizer and mask. If hospice resident is in the active dying stage, only 2 family members could come in after they are screened, provided hand sanitizer and mask and would be escorted directly to and from the resident room with door closed. One resident had family (nurse) come to visit as they were very upset and after visit resident placed

on hospice. Staff temperature and screening prior to their shift and before they leave and resident full set of vitals are taken and recorded once per shift and as indicated.

The Administrator reports meeting with staff regularly for updates. Morale in building is good but has fluctuated. Providing lunches at times, planning a pot luck and everyone excited. Gift cards still being provided, especially if they work extra. Staff (and residents) are given treats (sno-cones, coke floats, cookies, etc.) three times a day, providing some meals. Staff are limited to only working at facility except for one CNA who also works at the hospital (no COVID_19 pts). Facility is performing and documenting the screening of their employees and all required in-servicing of staff is being done on-going.

Administrator reported the residents are coping best as can be expected. Activity director providing room to room visits with different activities, including in room gardening. Facility has started Bingo over the loud speaker, taking turns for each hallway. Some residents go outside with a staff member, all 6 ft. apart and therapy is also walking some residents outside. Management staff are assigned a set of families to call and provide update on resident every Friday. Facility received 3 I-pads from grant program. Also post on Facebook and assist with Facetime visits for residents. Also assisting family and resident with window visits.

QIPP SCORECARD:

Based on QIPP Scorecard for quarter March/April/May, Marshall Manor and Nursing Rehab Center:

- Component 1 - Met
- Component 2 - Met Metrics 1, 2, 3 and 4
- Component 3 - Met Metrics 1, 2, and 3
- Component 4 - Met Metrics 1, 2 and 3

SURVEY INFORMATION

Marshall Manor Nursing and Rehab Center survey window opened up in May. The Administrator reports she has had a total of 5 infection control surveys with no deficiencies.

REPORTABLE INCIDENTS

Information not provided

CLINICAL TRENDING

Incidents/Falls:

Facility information not given

Infection Control:

Facility information not given

Weight loss:

Facility information not given

Pressure Ulcers:

Facility information not given

Restraints:

Facility information not given

Staffing:

Facility is currently fully staffed.

Administrator: Ken Kale
DON: Lakeisha Owens

FACILITY INFORMATION

Marshall Manor West is a 115-bed facility with a current over all star rating of 4 and a Quality Measures rating of 3. The census on the date of this call was 51, breakdown not provided.

Due to the current COVID-19 restrictions in place, the QIPP site visit was conducted via telephone. The Administrator was on the call.

The Administrator reported they have implemented their emergency plan and are following all the state/federal/local mandates. Administrator reports there are 562 confirmed cases of COVID_19 in Harrison County. Administrator reports the facility has been COVID_19 free 4 weeks as of tomorrow, 8/14/2020 and had no additional cases after last call. The Administrator reports 2 additional resident deaths since the last call although they were no longer positive at the time. Administrator reports they still have an isolation area in the secure unit is set up with a dedicated team of staff working the unit. Anyone on dialysis or anyone who goes out to essential physician visits are screened and given a mask before they leave and then screened again on return and quarantined in a private room. The Administrator reports the facility is now accepting new admissions and they are in the "unknown" unit for 14 days with dedicated staff for the unit.

Administrator reported they are following CMS/CDC/state infection control guidelines for COVID-19. Housekeeping is cleaning facility daily as per guidelines, multiple times per day cleaning the high touch areas with disinfectant every hour. Nursing staff use disinfectant wipes every time they go in a room or walk down the hall.

All PPE is locked up in secure location. Regular orders are now coming in. Administrator reports the facility received PPE from RAC-G once per week. Inventory of what is on hand/in stock, updated weekly to ensure PAR level. Residents have a surgical masks to wear during direct care or when they are out of their room. 100% of staff are wearing N-95 masks (all fit tested).

No visitors are permitted in building. Essential staff, including lab, x-ray, physicians, NPs (doing testing on COVID unit) and hospice nurses (for crisis management only) during end of life, are permitted in the building and only after screened and use of hand sanitizer and full PPE or N-95 only (provided by visitor). If hospice resident is in the active dying stage, only 1 family members could come in after they are screened, provided hand sanitizer, standard PPE for negative residents and full PPE if on COVID_19 unit and would be escorted directly to and from the resident room with door closed. Staff temperature and screening done prior to shift and every 4 hours and resident full set of vitals are taken and recorded once per shift and as indicated. If temperature 100 or above they are not permitted entrance into the facility. If temp is over 98.6, they are asked to re-do temperature within 5 minutes.

The Administrator reports meeting with staff at least weekly one on one (no group meetings). Provided over the speaker games for staff and residents. Staff participated in a cookout recently. Staff are limited to only working at the facility. Facility is performing and documenting the screening of their employees and all required in-servicing of staff is being done on-going.

Administrator reported the residents are coping fairly well. Activity director providing hallway bingo, room to room visits from a very well stocked cart. Some residents take advantage of controlled opportunities to sit outside (maintaining social distancing based on marks 6 ft apart). Management staff are assigned a set of families to call and provide update on residents weekly and also assisting family and resident with window visits. The facility received 3 I-Pads through a grant program to assist with the FaceTime visits as well as games for the residents to enjoy. Administrator reports they are currently working on a policy for phase one visitation.

QIPP SCORECARD:

Based on QIPP Scorecard for quarter March/April/May, Marshall Manor West:

- Component 1 - Met
- Component 2 - Met Metrics 1, 2, 3 and 4
- Component 3 - Met Metrics 1, 2 and 3
- Component 4 - Met Metrics 1, 2 and 3

SURVEY INFORMATION

Once facility reported they were COVID_19 free, the state came in for an infection control survey and no deficiencies cited.

REPORTABLE INCIDENTS

Information not provided.

CLINICAL TRENDING**Incidents/Falls:**

Facility information not given.

Infection Control:

Facility information not given.

Weight loss:

Facility information not given.



Marshall Manor West

207 West Merritt Street, Marshall, TX 75670

August 13, 2020

Pressure Ulcers:

Facility information not given.

Restraints:

Facility information not given.

Staffing:

Facility is fully staffed.

Administrator: Belinda Nash
DON: Iiesha Taylor

FACILITY INFORMATION

Rose Haven Retreat is a licensed 108- bed facility with an overall star rating of 1 and a rating of 2 stars in Quality Measures. Current census on the date of the call was 49 and no breakdown provided.

Due to the current COVID-19 restrictions in place, the QIPP site visit was conducted via telephone. The Administrator was on the call.

Administrator reports there are 185 confirmed cases of COVID_19 in Cass County. The Administrator reported they have implemented their emergency plan and are following all the state/federal/local mandates. Administrator reports they have identified an isolation area in hall one should it be needed and it is set up and ready to use. The Administrator reports no COVID_19 positive residents but reported 1 positive staff member since the last call and the building has been COVID_19 free for almost 3 months.

New admissions, anyone on dialysis or anyone who goes out to essential physician visits or hospital is quarantined on the "unknown" hallway for 14 days to ensure they do not have any s/s of COVID_19.

Administrator reported they are following CMS/CDC/state infection control guidelines for COVID-19. Housekeeping is cleaning facility daily as per guidelines per day and cleaning the high touch areas with disinfectant every 2 hours or as needed and documenting each time it is performed.

All PPE is locked up in secure location. Administrator reports the facility still receiving PPE from regular vendor. Inventory of what is on hand/in stock, updated weekly and have at least a 2 week supply. Staff are wearing surgical masks and residents wear cloth or surgical. If resident on the "unknown" hall, staff and resident wear an N-95 mask.

No visitors are permitted in building. Essential staff, including hospice nurses, only if during end of life, are permitted in the building and only after screened and use of hand sanitizer and wear mask. If hospice resident is in the active dying stage, only 2 family members could come in at end of hall after they are screened, provided hand sanitizer and mask (if on quarantine hall then full PPE) and would be escorted directly to and from the resident room (moved to private room) with door shut. Staff temperatures taken prior to their shift and resident full vitals taken and recorded once per shift and as indicated. If temperature 99.5 or above essential visitor are not permitted entrance into the facility.

Administrator reports there is a team identified for caring for COVID_19 residents. Staff are required to only working at facility. Facility is performing and documenting the screening of their employees

and all required in-servicing of staff is being done on-going. Administrator reports they are offering incentives for working extra, theme weeks, employee week, etc.

The Administrator reports activities department is keeping residents busy with room to room activities and hallway and bean bag toss in hallway. Ice cream & coffee socials, sno cones, individual movies in their room. Residents eating in their room except for feeders and they are in dining room 6ft apart. Rotated daily, and at resident request (weather permitting) the staff take one resident at a time and walk them around building. Administrator reported the residents are coping as best as possible. Facility received 3 I-pads for residents for Facetime and assisting residents with regular phone calls to family. Some families are coming for window visits. The Administrator reports the facility is looking into how to implement the phase one visitation but still concerned due to COVID_19 cases continue to increase.

QIPP SCORECARD:

Based on QIPP Scorecard for quarter March/April/May, Rose Haven Retreat:

- Component 1 - Met
- Component 2 - Met Metrics 1, 2, 3 and 4
- Component 3 - Met Metrics 1, 2 and 3
- Component 4 - Met Metrics 1, 2 and 3

SURVEY INFORMATION

The facility is currently in their survey window. The facility had infection control survey on 7/4/2020 after self-report of COVID_19 positive staff member and no deficiencies cited.

REPORTABLE INCIDENTS

Facility information no provided

CLINICAL TRENDING

Incidents/Falls:

Facility information not provided

Infection Control:

Facility information not provided

Weight loss:

Facility information not provided

Pressure Ulcers:

Facility information not provided



Rose Haven Retreat

200 Live Oak Drive, Atlanta TX 75551

August 13, 2020

Restrains:

Facility information not provided

Staffing:

Facility is fully staffed.

EXHIBIT “F”

Improving The Lives of Children Through Healthcare Services

Report on Partnership Between the Winnie-Stowell Hospital District
and the East Chambers Independent School District
To Provide Healthcare Related Services For The 1,530 School-Aged
Children In The Winnie/Stowell Community



The Winnie Stowell Hospital District Partnership
continues to make the children of our community safer,
healthier, and more secure

Presented 2020-2021
By Scott Campbell
Superintendent, ECISD

ECISD BOARD POLICY

FFAE (LEGAL)

- ❧ The District may, if it identifies the need, design a model for the delivery of cooperative health-care programs for students and their families.
- ❧ All health-care programs should be designed to meet the following goals:
 - ❧ Reducing student absenteeism;
 - ❧ Increasing a student's ability to meet the student's academic potential; and
 - ❧ Stabilizing the physical well-being of a student.
 - ❧ Family and home support;
 - ❧ Health care, including immunizations;
 - ❧ Dental health care;
 - ❧ Health education; and
 - ❧ Preventive health strategies.

East Chambers ISD

Mission Statement

- ❧ The mission of East Chambers ISD is to ensure that all East Chambers students have access to a quality education that enables them to work toward their potential and to participate now and in the future in the social, economic, and educational opportunities in our community, state, nation, and world.
- ❧ This mission is grounded in the conviction that a general diffusion of knowledge is essential for the welfare of this community and for the preservation of the liberties and rights of its citizens. It is further grounded in the conviction that a successful school system is directly related to a strong, dedicated, and supportive family.

Winnie Stowell Hospital District Mission Statement

- ✧ The mission of the Winnie Stowell Hospital District is to balance the healthcare needs of the community and its needy inhabitants with fiscal responsibility.



- ❧ According the Oxford Dictionary, indigent is defined as being poor or needy.
- ❧ Over 900 (or 63%) of the students attending ECISD meet the definition as determined by children from families with incomes at or below 130% of the poverty level, roughly the \$20,000- \$40,000 range depending on the size of the family.
- ❧ This represents a decrease in numbers as the community continues to heal from Hurricane Harvey.

Function 33



Health Services

ECISD BOARD POLICY

FFD (LEGAL)

- ❧ A board may purchase insurance against bodily injury sustained by students while training for or engaging in interscholastic athletic competition or while engaging in school-sponsored activities. Such insurance shall be purchased from a reliable insurance company authorized to do business in Texas and shall be on forms approved by the commissioner of insurance. The amount shall be in keeping with the financial condition of the district and shall not exceed the amount that the board considers reasonably necessary to afford adequate medical treatment of students so injured.
- ❧ The cost of student insurance shall constitute a legitimate part of the total cost of operating a district.
- ❧ The failure of a board to purchase student insurance shall not be construed as placing any legal liability upon the district or its officers, agents, or employees, for any injury that may result. Education Code 38.024
- ❧ A district is not authorized to spend public funds on insurance to benefit persons to whom it owes no legal duty and shall not expend public funds for that purpose. Unauthorized insurance includes no-fault personal injury protection and uninsured motorist coverage. Tex. Const., Art. 3, Secs. 50-52; Atty. Gen. Op. H-602 (1975)

ECISD BOARD POLICY

FFAA (LOCAL)

- ❧ A student desiring to participate in the UIL athletic program shall undergo a physical examination in accordance with the required schedule established by the UIL and shall submit a statement from an authorized health-care provider indicating that the student has been examined and is physically able to participate in the athletic program. In years that a physical examination is not required, the student shall complete a medical appraisal form. A student may be required to have a physical examination based on answers to the appraisal form.
- ❧ The District may provide additional screening as District and community resources permit.
- ❧ Parents of students identified through any screening programs as needing treatment or further examination shall be advised of the need and referred to appropriate health agencies.
- ❧ A school nurse or administrator who discovers or becomes aware that a child enrolled in a District elementary school has lice shall provide written or electronic notice to parents within the time frames prescribed in law.

ECISD BOARD POLICY

FFAB (LEGAL)

- ❧ Each student shall be fully immunized against diphtheria, rubeola (measles), rubella, mumps, tetanus, and poliomyelitis.
- ❧ TDSHS requires students in kindergarten through twelfth grade to have the following additional vaccines, according to the immunization schedules set forth in department regulations: pertussis, hepatitis B, hepatitis A (for students attending schools in high incidence geographic areas as designated by the department), and varicella (chickenpox).
- ❧ TDSHS requires students in seventh through twelfth grade to have the meningococcal vaccine, according to the immunization schedules set forth in department regulations.

ECISD BOARD POLICY

FFAC (LEGAL)

- ❧ The school in which a minor student is enrolled may consent to medical, dental, psychological, and surgical treatment of that student, provided all of the following conditions are met:
 - ❧ The person having the power to consent as otherwise provided by law cannot be contacted.
 - ❧ Actual notice to the contrary has not been given by that person.
 - ❧ Written authorization to consent has been received from that person.

ECISD BOARD POLICY

FFAC (LOCAL)

- ❧ Procedures shall be established by the administration to ensure that proper attention is given to any student who becomes ill during the course of a school day.
- ❧ Emergency procedures shall be established by the administration to ensure proper attention for any student injured at school. Records shall be maintained on all accidents that require the attention of a medical doctor.
- ❧ Each year, students and parents shall complete and sign a form that provides emergency information and authorizes school officials to obtain emergency medical treatment, as provided by law.
- ❧ Except as provided below at ADMINISTRATION OF MEDICATION TO ATHLETES, the District shall not purchase nonprescription medication to administer to a student.
- ❧ No employee shall give any student prescription medication, non-prescription medication, herbal substances, anabolic steroids, or dietary supplements of any type, except as provided below.
- ❧ Employees authorized by the Superintendent or designee may administer to students:
 - Provided by Parent
 1. Prescription medication in accordance with legal requirements. [See FFAC(LEGAL)]
 2. Nonprescription medication, upon a parent's written request, when properly labeled and in the original container.
 3. Herbal substances or dietary supplements provided by the parent and only if required by the individualized education program or Section 504 plan of a student with disabilities.
- ❧ The District shall purchase nonprescription medication that may be used to prevent or treat illness or injury in the District's athletic program. Only a licensed athletic trainer or a physician licensed to practice medicine in the state of Texas may administer this medication and may do so only if:
 1. The student's parent has given prior written consent for medication to be administered; and
 2. The administration of a medication by an athletic trainer is in accordance with a standing order or procedures approved by a physician licensed to practice medicine in the state of Texas.
- ❧ Except as permitted by Education Code 38.016, an employee shall not:
 1. Recommend to a student or a parent that the student use a psychotropic drug;
 2. Suggest a particular diagnosis; or
 3. Exclude the student from a class or a school-related activity because of the parent's refusal to consent to psychiatric evaluation or examination or treatment of the student.

Accident Insurance by Winnie
Stowell Hospital District for
1530 Children



Incurred and Pending claims
for 2019-2020:

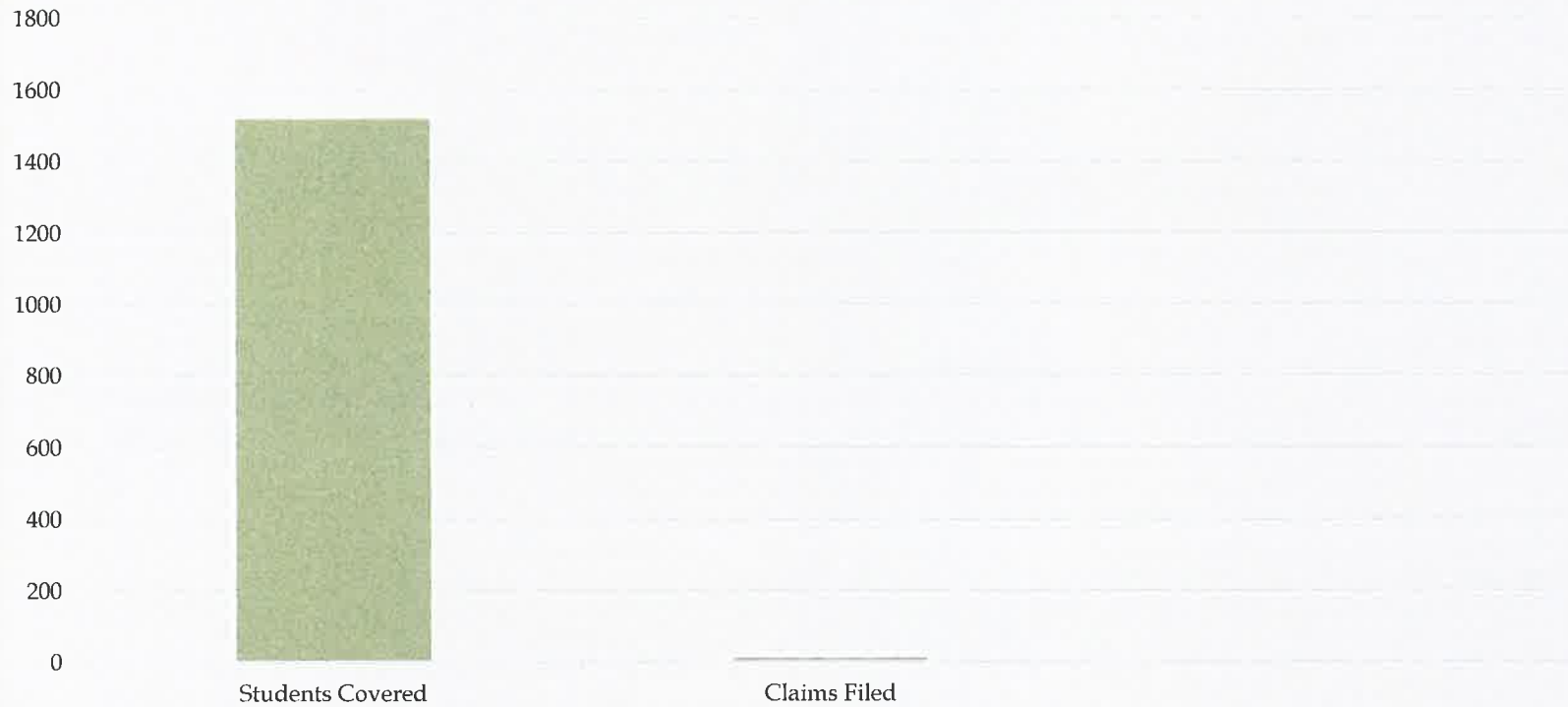
Approximately \$12,117.88

Claims paid in 2018-2019: \$35,380.30

Student Insurance



WSHD Provided Student Insurance 2020-2021



2020 / 2021



- ❧ Premier Plus Plan: \$48,500
- ❧ Catastrophic Coverage: \$2,744.64
- ❧ Total: \$51,244.64
- ❧ While participating in or attending any regularly scheduled and supervised activity of the School.

ECISD BOARD POLICY

FFA (LOCAL)

- ❧ Realizing that healthy students learn better, the District is committed to the promotion of wellness among its students
- ❧ The wellness policy was developed under the leadership of the school health advisory council (SHAC).
- ❧ Schools will promote nutrition education for all students.
- ❧ Schools will encourage and support good nutrition for all students.
- ❧ Schools will adopt and implement state standards for physical activity.
- ❧ Schools will provide opportunities for every student to develop the knowledge and skills for specific physical activities.
- ❧ Schools will provide sanitizers or hand-washing time prior to meal service to help control illness and promote healthy habits.
- ❧ Support for the health of all students will be demonstrated by hosting a variety of events that may include: health clinics, health screenings, assistance for enrolling eligible children in Medicaid and/or other available state assistance programs pertaining to children's health.
- ❧ The District will provide information and outreach for Women, Infants, and Children (WIC) to students and parents.
- ❧ Schools will create a total school environment that is conducive to being physically active.

ECISD BOARD POLICY

FFB (LEGAL)

- ❧ Recommended best practice-based programs in the areas specified below for implementation in public elementary, junior high, middle, and high schools within the general education setting.
 - ❧ Early mental health intervention;
 - ❧ Mental health promotion;
 - ❧ Building skills related to managing emotions, establishing and maintaining positive relationships, and responsible decision-making;
 - ❧ Substance abuse prevention and intervention;
 - ❧ Suicide prevention
 - ❧ Grief-informed and trauma-informed practices;
 - ❧ Positive behavior interventions and supports and positive youth development; and
 - ❧ Safe, supportive, and positive school climate.

ECISD BOARD POLICY

FFC (LEGAL)

- ❧ The District may establish a school-community guidance center designed to locate and assist children with problems that interfere with their education, including juvenile offenders and children with severe behavioral problems or character disorders.

ECISD BOARD POLICY

FFE (LEGAL)

- ☞ Suicide prevention
- ☞ Chemical addiction or dependency
- ☞ Sexual, physical, or emotional abuse

Other Health Related treatment provided by partial funding by Winnie Stowell Hospital District:

- ❧ Outside Licensed Professional Counseling
- ❧ Summer care and treatment
- ❧ Physical, Occupational, and Speech Therapy

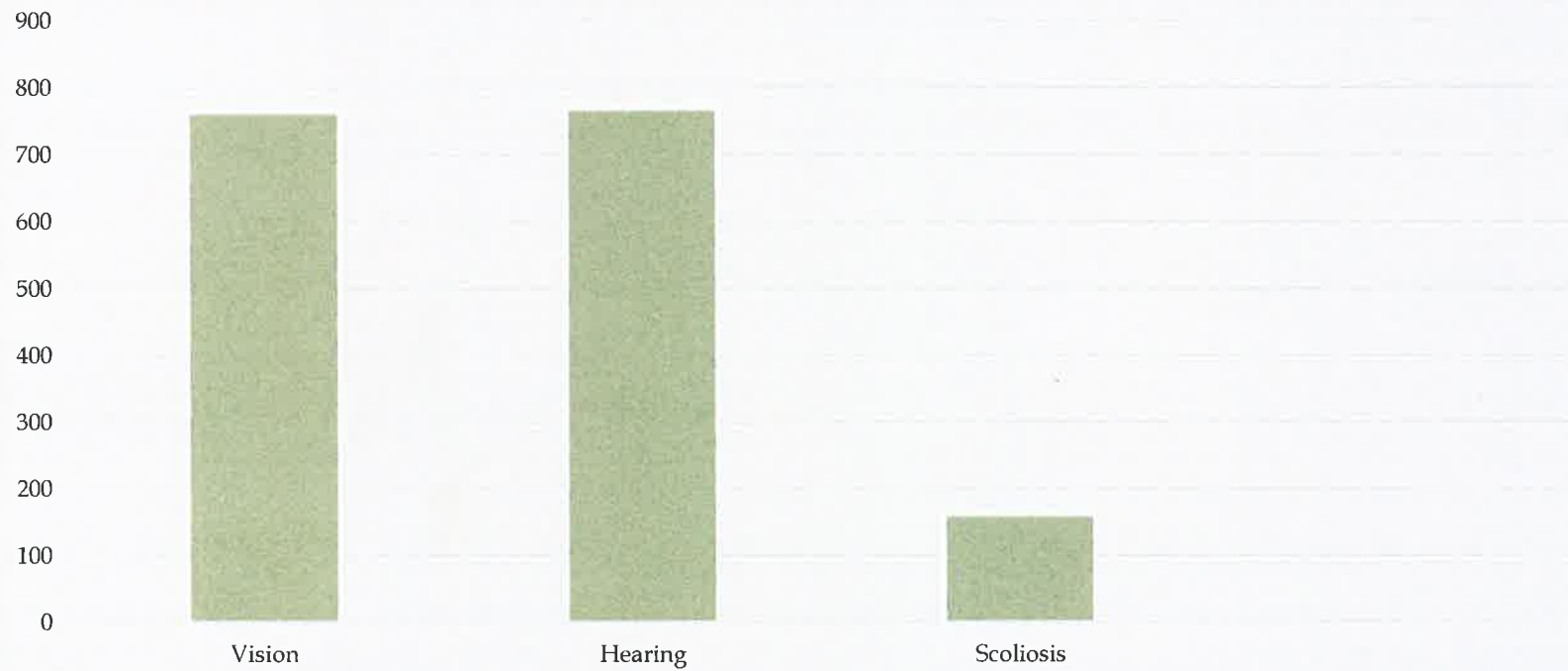
ECISD School Health Advisory Council

- ❧ The local school health advisory council (SHAC), on behalf of the District, shall review and consider evidence-based strategies and techniques and shall develop nutrition guidelines and wellness goals as required by law. In the development, implementation, and review of these guidelines and goals, the SHAC shall permit participation by parents, students, representatives of the District's food service provider, physical education teachers, school health professionals, members of the Board, school administrators, and members of the public.

Screenings

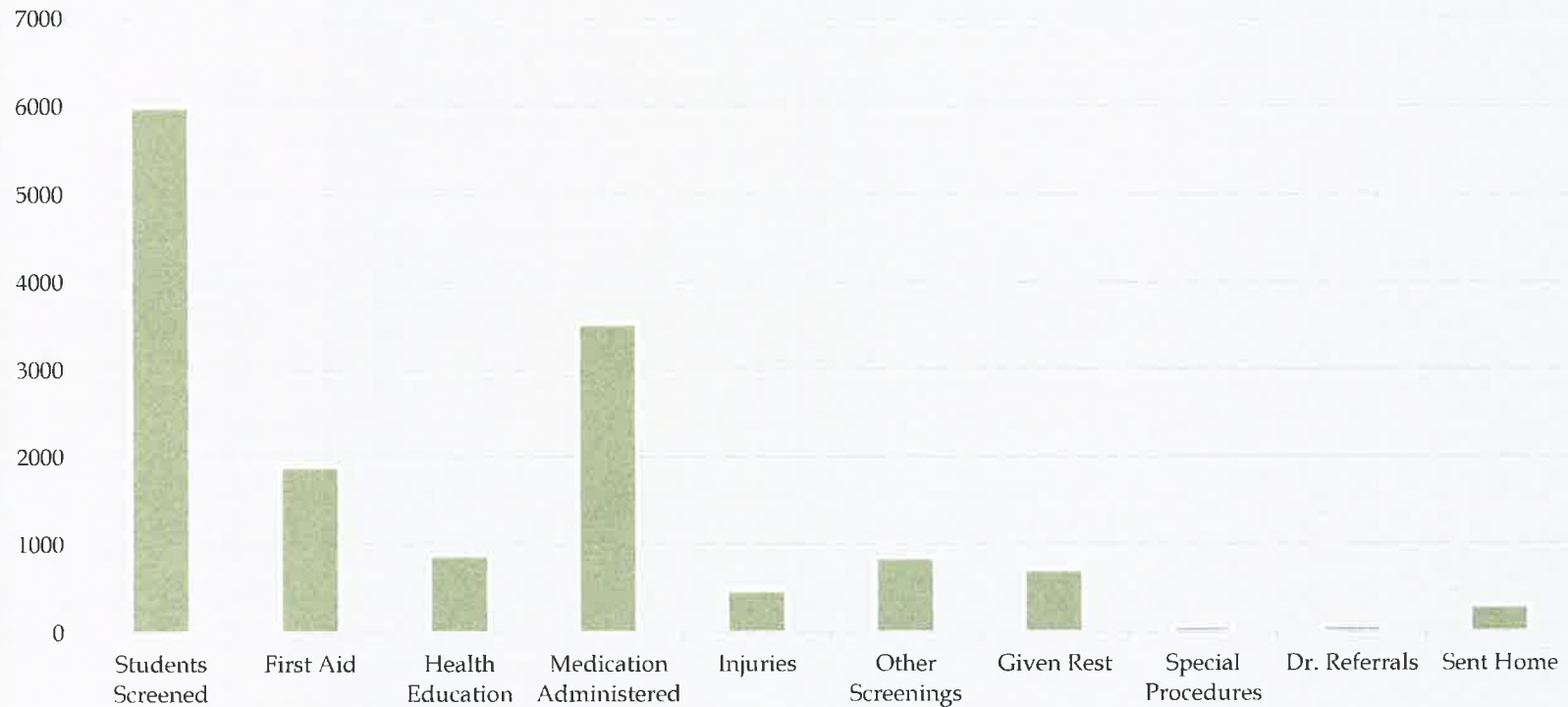


WSHD Provided Screening Services 2019-2020



Services Provided by Nurses Funded by WSHD

WSHD Provided Nurse Services 2019-2020

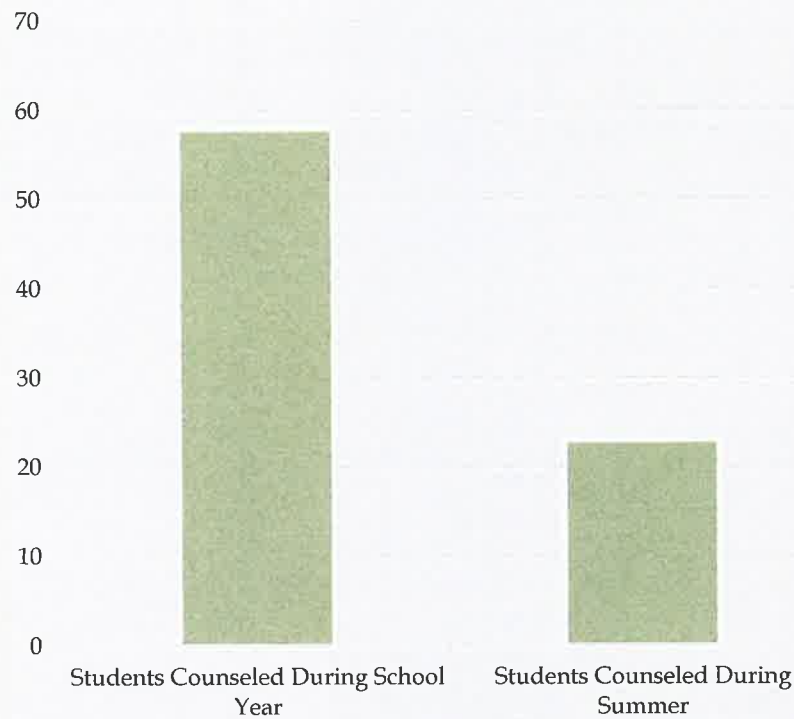


Counseling and Contracted Services

- ☞ Cliff Huebel, LPC is onsite two days a week. He provided services to 58 students during the 2019-2020 school year.
- ☞ We currently have 6 students Irlens identified. All were identified and evaluated through our office. We had an Irlens trained screener until 2 years ago and have contracted with a screener since. In October 2020, our Master Degreed Certified Educational Diagnostician will attend a formal training for Irlens evaluations to add to her evaluation tools.

School Year and Summer Counseling

WSHD Counseling 2019-2020



Therapy Services



WSHD Provided Therapy Services 2019-2020



Budget 2019-2020

Expenditures

Category	Revenue	Expenditure	Balance
Revenue	\$ -	\$ -	
Insurance	\$ 42,000.00	\$ 51,244.64	\$ (9,244.64)
Contracted Services	\$ 5,500.00	\$ 9,242.60	\$ (3,742.60)
Nurse Salary/Benefits (2)	\$ 115,000.00	\$ 118,613.04	\$ (3,613.04)
Nurse Supplies/Expenses	\$ 15,500.00	\$ 15,458.83	\$ 41.17
Flu Shots	\$ 2,000.00	\$ 60.00	\$ 1,940.00
Totals	\$ 180,000.00	\$ 194,619.11	\$ (14,619.11)

Budget 2020-2021



Category	Revenue	Expenditure	Balance
Revenue	\$ 180,000.00	\$ -	
Insurance	\$ -	\$ 52,000.00	\$ (52,000.00)
Therapy and Related			
Contracted Services	\$ -	\$ 397,684.00	\$ (397,684.00)
Nurse Salary/Benefits (2)	\$ -	\$ 127,935.00	\$ (127,935.00)
Nurse Supplies/Expenses	\$ -	\$ 26,100.00	\$ (26,100.00)
Flu Shots/Immunizations	\$ -	\$ 500.00	\$ (500.00)

Therapy and Related Services includes the following break down:

District Speech Therapist \$52,146

District Diagnostician \$73,317

Dyslexia \$68,710 and \$59,578

Cliff Huebel, Counseling Services \$46,867

Specialized Assessments (Psych Evals, including bilingual) \$49,105

Shorkey Education (PT, OT) \$31,875

Rachel Gaulding (Speech Evals) \$8,925

BISD (Deaf Services) \$5,281

Brenda Sullivan (Vision Services) \$1,880

Thank you WSHD



On behalf of the children and families of the Winnie and Stowell communities, we appreciate your continuation of this vital partnership agreement to provide services for the children of our community.

Because of the Winnie Stowell Hospital District's commitment to this partnership, the children in the Winnie Stowell community are safer, healthier, and more secure.

EXHIBIT “G”

Hubert Oxford IV

From: Karen Horn <khorn@ricelandhealthcare.com>
Sent: Friday, September 11, 2020 4:38 PM
To: Hubert Oxford IV; Sherrie Norris
Cc: mo@starcoimpex.com; Julie Haire
Subject: Fw: UC DY4 Withheld IGT Notification - Waiver 1 of 2
Attachments: Master Affiliation as of 9_11_20 for Publication.xlsx; DY4 UC Withheld Payment Calculation - FINAL.XLSX; DY4 UC Allocation Form.xlsx

It appears HHSC is playing catch up on the withheld Uncompensated Care payments. I just received the calculations for DY4.

The IGT amount is \$380.49 with a UC payment coming back to us of \$907.01.

Last day to IGT is 10/2/2020. Please let me know if the board approves this at this month's meeting and I will follow up with Sherrie on completing the allocation form.

Dates pertinent to this payment:

10/2/2020	Last day to submit your IGT into TexNet
10/5/2020	IGT Settlement Date
10/15/2020	UC Transferring Paid
10/30/2020	UC Non-Transferring Paid

Karen Horn
Financial Analyst
Riceland Medical Center
(formerly Winnie Community Hospital)
225-267-6966 Office
225-715-9840 Cell

From: HHSC RAD UC Payments <RAD_UC_Payments@hhsc.state.tx.us>
Sent: Friday, September 11, 2020 4:07 PM
To: 'aalexander@cuerohospital.org' <aalexander@cuerohospital.org>; 'AaronBujnowski@TexasHealth.org' <AaronBujnowski@TexasHealth.org>; 'adriana.vega@childrens.com' <adriana.vega@childrens.com>; Campbell,Adrienne C (HHSC/DSHS BSH) <Adrienne.Campbell@hhs.texas.gov>; 'ajones5@stlukeshealth.org' <ajones5@stlukeshealth.org>; Waddill,Alan (HHSC) <Alan.Waddill@hhs.texas.gov>; 'alex.russell@lpnt.net' <alex.russell@lpnt.net>; 'andy.davis@ascension.org' <andy.davis@ascension.org>; 'anewton@chambershealth.org' <anewton@chambershealth.org>; 'Ang.Pagano@HCAHealthcare.com' <Ang.Pagano@HCAHealthcare.com>; 'annie.roten@uthct.edu' <annie.roten@uthct.edu>; 'art.garza@hcahealthcare.com' <art.garza@hcahealthcare.com>; 'Audra_Kirby@quorumhealth.com' <Audra_Kirby@quorumhealth.com>; 'avpcmc@tisd.net' <avpcmc@tisd.net>; 'barnhart@primehealthcaer.com' <barnhart@primehealthcaer.com>; 'bbrewer@fallshospital.com' <bbrewer@fallshospital.com>; 'becks2@covhs.org' <becks2@covhs.org>; 'beckyspeight@cmclancaster.com' <beckyspeight@cmclancaster.com>; 'bfkalmus@mdanderson.org' <bfkalmus@mdanderson.org>; HHSC RAD UC Payments <RAD_UC_Payments@hhsc.state.tx.us>; 'bivory@primehealthcare.com' <bivory@primehealthcare.com>;

'blaise.bondi@longviewregionalcenter.com' <blaise.bondi@longviewregionalcenter.com>; 'broland@trhta.net' <broland@trhta.net>; 'bwhite@covhs.org' <bwhite@covhs.org>; 'carla.davila@mhshealth.com' <carla.davila@mhshealth.com>; 'carol.daulton@childrens.com' <carol.daulton@childrens.com>; 'cbelk@houstonmethodist.org' <cbelk@houstonmethodist.org>; 'ccormier@stlukeshealth.org' <ccormier@stlukeshealth.org>; 'celena.brim@lpnt.net' <celena.brim@lpnt.net>; Havel,Christy (DSHS) <Christy.Havel@dshs.texas.gov>; 'cindy.cightes@stdavids.com' <cindy.cightes@stdavids.com>; 'Clay.Taylor@covplv.org' <Clay.Taylor@covplv.org>; 'clewing@wardmemorial.com' <clewing@wardmemorial.com>; 'cmpollet@ascension.org' <cmpollet@ascension.org>; 'COChua-Faustino@houstonmethodist.org' <COChua-Faustino@houstonmethodist.org>; 'dave_medley@chs.net' <dave_medley@chs.net>; 'david.byrd@tenethealth.com' <david.byrd@tenethealth.com>; David Lee <david.lee@okmh.org>; 'debra.Miller@crosbytonclinichospital.com' <debra.Miller@crosbytonclinichospital.com>; 'dglassburn@primehealthcare.com' <dglassburn@primehealthcare.com>; 'dgoggin@st-joseph.org' <dgoggin@st-joseph.org>; 'diana.strupp@tenethealth.com' <diana.strupp@tenethealth.com>; 'Diane_Moore@QuorumHealth.com' <Diane_Moore@QuorumHealth.com>; 'dibarra@cranememorial.org' <dibarra@cranememorial.org>; 'DMcdowel@jpshealth.org' <DMcdowel@jpshealth.org>; 'dmiller@memorialhealth.org' <dmiller@memorialhealth.org>; 'donald.mcdaniel@parismc.com' <donald.mcdaniel@parismc.com>; 'Donna.Hagdorn@uth.tmc.edu' <Donna.Hagdorn@uth.tmc.edu>; 'drunyan@strategicbh.com' <drunyan@strategicbh.com>; 'dyeager@cranememorial.org' <dyeager@cranememorial.org>; 'Eladio.Montalvo@uhsinc.com' <Eladio.Montalvo@uhsinc.com>; 'elizabeth.pulliam@christushealth.org' <elizabeth.pulliam@christushealth.org>; 'Emma_Krabill@QuorumHealth.com' <Emma_Krabill@QuorumHealth.com>; 'eric.evans@tenethealth.com' <eric.evans@tenethealth.com>; 'eric.weatherford@huschblackwell.com' <eric.weatherford@huschblackwell.com>; 'eric.weatherford@huschblackwell.com' <eric.weatherford@huschblackwell.com>; 'etyrrell@houstonmethodist.org' <etyrrell@houstonmethodist.org>; 'gkirkland@ies.healthcare' <gkirkland@ies.healthcare>; 'glen.boles@christushealth.org' <glen.boles@christushealth.org>; 'godon.raitt@hhsc.state.tx.us' <godon.raitt@hhsc.state.tx.us>; 'gregp@cuerohospital.org' <gregp@cuerohospital.org>; 'harvey.torres@valleybaptist.net' <harvey.torres@valleybaptist.net>; 'Hchung@houstonmethodist.org' <Hchung@houstonmethodist.org>; 'hong.wade@sweenyhospital.org' <hong.wade@sweenyhospital.org>; 'jaceh@parkviewhsop.org' <jaceh@parkviewhsop.org>; 'jack_montois@brmccares.com' <jack_montois@brmccares.com>; 'jackie.stgermain@strategicbh.com' <jackie.stgermain@strategicbh.com>; 'james.cagle@strategicbh.com' <james.cagle@strategicbh.com>; 'james.dawson@dshs.state.tx.us' <james.dawson@dshs.state.tx.us>; 'jamie.marsh-wheeler@childrens.com' <jamie.marsh-wheeler@childrens.com>; 'Jason.Cole@BSWHealth.org' <Jason.Cole@BSWHealth.org>; 'jason.linscott@phrtexas.com' <jason.linscott@phrtexas.com>; 'jason.miller1@steward.org' <jason.miller1@steward.org>; 'jbeauchamp@stlukeshealth.org' <jbeauchamp@stlukeshealth.org>; 'jeff.sliwinski@hcahealthcare.com' <jeff.sliwinski@hcahealthcare.com>; 'jennifer.tidmore@tmfhc.org' <jennifer.tidmore@tmfhc.org>; 'jeremy.riney@samc.com' <jeremy.riney@samc.com>; 'jeremy_riney@chs.net' <jeremy_riney@chs.net>; 'jerry.lee@childrens.com' <jerry.lee@childrens.com>; Julie Haire <jhaire@ricelandhealthcare.com>; 'jhorton@rankincountyhospital.org' <jhorton@rankincountyhospital.org>; 'jhughson@gonzaleshealthcare.com' <jhughson@gonzaleshealthcare.com>; 'jiruegas@missionrmc.org' <jiruegas@missionrmc.org>; 'jlholly@ascension.org' <jlholly@ascension.org>; 'jlholly@seton.org' <jlholly@seton.org>; 'jlyle@fallshospital.com' <jlyle@fallshospital.com>; 'jmenefee@mchdtx.net' <jmenefee@mchdtx.net>; 'jmhatt@mdanderson.org' <jmhatt@mdanderson.org>; 'joe.hernandez@hcahealthcare.com' <joe.hernandez@hcahealthcare.com>; 'joseph.wooldridge@navarrohospital.com' <joseph.wooldridge@navarrohospital.com>; 'Joseph_Wooldridge@brmc-cares.com' <Joseph_Wooldridge@brmc-cares.com>; 'julie.oliver@stdavids.com' <julie.oliver@stdavids.com>; 'k.dawson@missionrmc.org' <k.dawson@missionrmc.org>; 'kathleen.sweeney@hcahealthcare.com' <kathleen.sweeney@hcahealthcare.com>; 'Kelly.Robinson@UTSouthwestern.edu' <Kelly.Robinson@UTSouthwestern.edu>; 'kenneth_russo@chs.net' <kenneth_russo@chs.net>; Karen Horn <khorn@ricelandhealthcare.com>; 'kim.kavasch@uthct.edu' <kim.kavasch@uthct.edu>; 'Kirk.Pogue@LPNT.net' <Kirk.Pogue@LPNT.net>; 'kmiller@memorialhealth.org' <kmiller@memorialhealth.org>; 'kparmer@igh-hospital.com' <kparmer@igh-hospital.com>; 'kzieren@stlukeshealth.org' <kzieren@stlukeshealth.org>

Cc: Brown,Adam (HHSC) <Adam.Brown04@hhsc.state.tx.us>; Jenkins,Brooke (HHSC)

<Brooke.Jenkins01@hhsc.state.tx.us>; Chang,Sylvia (HHSC) <Sylvia.Chang@hhsc.state.tx.us>; Wade,Tonika (HHSC)

<Tonika.Wade@hhsc.state.tx.us>; Okoniewski,Amanda (HHSC) <Amanda.Okoniewski01@hhs.texas.gov>; Cantu,Rene (HHSC) <Rene.Cantu@hhsc.state.tx.us>; Fine,Mance (HHSC) <Mance.Fine@hhsc.state.tx.us>; Anthony,Alan (HHSC) <Alan.Anthony@hhsc.state.tx.us>; Reed,Matt (HHSC) <Matt.Reed@hhsc.state.tx.us>; Marquez,Gabriella (HHSC) <Gabriella.Marquez01@hhsc.state.tx.us>

Subject: UC DY4 Withheld IGT Notification - Waiver 1 of 2

Providers, Government Entities, and Anchors:

Please read this entire message carefully and make note of the information provided below that failure by IGT entities and providers to submit the required forms may result in a delayed payment for the providers.

HHSC is providing notice to IGT for the DY4 Withheld UC Payment.

Dates pertinent to this payment:

10/2/2020	Last day to submit your IGT into TexNet
10/5/2020	IGT Settlement Date
10/15/2020	UC Transferring Paid
10/30/2020	UC Non-Transferring Paid

Attached to this email are the following documents:

- 2020 DY4 UC Withheld Calculation spreadsheet
- DY4 Withheld UC Allocation Form
- Master Affiliation Publication

Attached to this email is the DY 4 withheld UC payment calculation. Providers will find their payment amount in column N of the first "DY4 Withheld Calculation" tab and IGT amounts in column O. Please ensure you select the applicable UC bucket in TexNet when you enter your IGT. It is imperative that you send a screen shot/PDF copy of the confirmation/trace sheet from TexNet or an email with the trace number, location number, IGT amount and settlement date, if the TexNet is submitted over the phone, to RAD_UC_Payments@hhsc.state.tx.us Additionally, you must submit the IGT allocation form with the Trace Sheet. **Please submit the trace sheet and IGT allocation as two separate documents.** Please include two contacts and their phone numbers and email addresses, should HHSC have any questions regarding the TexNet received.

Payment amounts were calculated in accordance with the methodology recently adopted for paying the withheld payments in [1 TAC §355.8201](#). Payment amounts were then compared to

the final Uncompensated Cost of Care (UCC) calculated for each provider in the DY 4 UC reconciliation to ensure providers did not exceed their total eligible UCC.

HHSC has removed providers who are ineligible to receive a payment due to changes of ownership or the hospital closing. The remaining providers are eligible for a DY 4 withheld payment as long as the IGT required to fund that payment is received.

If you have questions regarding the UC payment process, please send an email to RAD_UC_Payments@hsc.state.tx.us.

If you have questions regarding the payment calculation file, please send an email to uctools@hsc.state.tx.us

**HHSC Provider Finance Department-Payments
(Formerly Rate Analysis)**

Texas Health and Human Services Commission
P.O. Box 149030, Mail Code H-400
Brown-Heatly Building
4900 N. Lamar Blvd.
Austin, TX 78714-9030



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