



# COASTAL HEALTH & WELLNESS

## GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

### AGENDA

Thursday, April 28, 2022 – 12:30 PM

**CONSENT AGENDA:** ALL ITEMS MARKED WITH A SINGLE ASTERICK (\*) ARE PART OF THE CONSENT AGENDA AND REQUIRE NO DELIBERATION BY THE GOVERNING BOARD. ANY BOARD MEMBER MAY REMOVE AN ITEM FROM THIS AGENDA TO BE CONSIDERED SEPARATELY.

### *PROCEED TO BOTTOM OF THIS DOCUMENT FOR APPEARANCE & EXECUTIVE SESSION GUIDELINES*

In accordance with the provisions of the Americans with Disabilities Act (ADA), persons in need of a special accommodation in order to participate in this proceeding should, within two (2) days prior to the proceeding, request necessary accommodations by contacting CHW’s Executive Assistants at 409-949-3406, or via email at [trollins@gchd.org](mailto:trollins@gchd.org) or [ahernandez@gchd.org](mailto:ahernandez@gchd.org)

ANY MEMBERS NEEDING TO BE REACHED DURING THE MEETING MAY BE CONTACTED AT 409-938-2288

### REGULARLY SCHEDULED MEETING

#### Meeting Called to Order Pledge of Allegiance

- Item #1 ..... Comments from the Public
- \*Item #2**ACTION**..... Agenda
- \*Item #3**ACTION**..... Excused Absence(s)
- \*Item #4**ACTION**..... Consider for Approval Minutes from March 31, 2022 Governing Board Meeting
- \*Item #5**ACTION**..... Consider for Approval Minutes from April 14, 2021 Governing Board QA Meeting
- \*Item #6**ACTION**..... Consider for Approval Quarterly Investment Report Submitted by Marlene Garcia
- \*Item #7**ACTION**..... Consider for Approval Quarterly Access to Care Report for the Period Ending March 31, 2022 Submitted by Pisa Ring
- \*Item #8**ACTION**..... Consider for Approval Quarterly Patient Satisfaction Survey Results for the Period Ending March 31, 2022 Submitted by Pisa Ring
- Item #9..... Coastal Health & Wellness Updates
  - a) Update on COVID-19 Submitted by Executive Director
  - b) Operational Updates Submitted by Chief Operating Officer
  - c) Dental Updates Submitted by Dental Director
- Item #10**ACTION**..... Consider for Approval March 2022 Financial Report Submitted by Marlene Garcia
- Item #11**ACTION**..... Consider for Approval Quarterly Visit and Collection Report Including a Breakdown by Payor Source for Recent New Patients Submitted by Marlene Garcia
- Item #12**ACTION**..... Consider for Approval the Purchase of a New Payroll Software Submitted by Trish Bailey

- Item #13**ACTION**.....Consider for Approval 2021 Bad Debt Write-off and Adjustment Report Submitted by Jonathan Jordan
- Item #14**ACTION**.....Consider for Approval Quarterly Compliance Report for the Period Ending March 31, 2022 Submitted by Ami Cotharn
- Item #15**ACTION**.....Consider for Approval the 2022-2023 Risk Management Training Plan Submitted by Ami Cotharn
- Item #16**ACTION**.....Consider for Approval Coastal Health & Wellness No-Show Policy Submitted by Ami Cotharn
- Item #17**ACTION**.....Consider for Approval Governing Board Member Sharon Hall, PhD, to Serve on the QA Committee
- Item #18**ACTION**.....Consider for Approval Governing Board Member Victoria Dougharty to Serve on the Finance Committee
- Item #19**ACTION**.....Consider for Approval Governing Board Member Elizabeth Williams to Serve on the Appointing Committee
- Item #20**ACTION**.....Consider for Approval Governing Board Member Elizabeth Williams to Serve as the Secretary/Treasurer
- Item #21**ACTION**.....Consider for Approval Governing Board Member Elizabeth Williams to Serve on the Executive Committee
- Item #22.....Presentation on Strategic Health Plan Presented by Shelby Evans
- Item #23.....Comments from Board Members

**Adjournment**

*Next Regular Scheduled Meeting: May 26, 2022*

**Appearances before the Coastal Health & Wellness Governing Board**

The Coastal Health & Wellness Governing Board meetings are conducted under the provisions of the Texas Open Meetings Act, and members of the public that wish to address the Board about an item presented on the agenda shall be offered three minutes to do so. The Board cordially requests that individuals desiring to make a such a statement notify the Board of their intention by writing their name on the sign-in sheet located at the Boardroom’s main entrance.

A citizen desiring to make comment to the Board regarding an item not listed on the agenda shall submit a written request to the Executive Director by noon on the Thursday immediately preceding the Thursday of the Board meeting. A statement of the nature of the matter to be considered shall accompany the request. The Executive Director shall include the requested appearance on the agenda, and the person shall be heard if he or she appears.

**Executive Sessions**

When listed, an Executive Session may be held by the Governing Board in accordance with the Texas Open Meetings Act. An Executive Session is authorized under the Open Meetings Act pursuant to one or more the following exceptions: Tex. Gov’t Code §§ 551.071 (consultation with attorney), 551.072 (deliberation regarding real property), 551.073 (deliberation regarding a prospective gift or donation), 551.074 (personnel matters), 551.0745 (personnel matters affecting Coastal Health & Wellness advisory body), 551.076 (deliberation regarding security devices or security audits), and/or 551.087 (deliberations regarding economic development negotiations). The Presiding Officer of the Governing Board shall announce the basis for the Executive Session prior to recessing into Executive Session. The Governing Board may only enter into Executive Session if such action is specifically noted on the posted agenda.



# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board  
April 2022  
Item#3  
Excused Absence(s)**



# **COASTAL HEALTH & WELLNESS**

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#4**

**Consider for Approval Minutes from  
March 31, 2022 Governing Board Meeting**

**Coastal Health & Wellness  
Governing Board  
March 31, 2022**

**Board Members:**

Samantha Robinson  
Dr. Southerland  
Virginia Valentino (zoom)  
Flecia Charles  
Kevin Avery  
Elizabeth Williams  
Victoria Dougharty  
Rev. Walter Jones  
Sharon Hall  
Cynthia Darby  
Dr. Thompson

**Staff:**

Dr. Keiser, Executive director  
Ami Cotham, Chief Operations Officer  
Ann O’Connell, Contracted Support  
Dr. Lindskog, Dental Director  
Chantelle Smith  
Regina Brown  
Marlene Garcia, Clinic Financial Officer  
Trish Bailey  
Martha Vallin  
Jonathan Jordan

Pisa Ring  
Kristina Garcia  
Kenna Pruitt  
Tiffany Carlson  
Shelby Evans (zoom)  
Ashley Tompkins  
Tikeshia Thompson-Rollins  
Anthony Hernandez

**Excused Absence:** Miroslava Bustamante

**Unexcused Absence:** Dorothy Goodman

**Items#1 Comments from the Public**

There were no comments from the public.

**Items#2-5 Consent Agenda**

A motion was made by Dr. Southerland to approve the consent agenda items two through five and pull item six out for discussion. Flecia Charles seconded the motion, and the Board unanimously approved the consent agenda.

**Item#6 Informational Report**

Notification of Board Resignation: Samantha Robinson, Board Chair, would like to thank Virginia Valentino for her dedicated service to Coastal Health & Wellness Governing Board and the citizens of Galveston County from 2006-2022.

Resolution Recognizing Ann O’Connell, MS, MSN, RN, Chief Operations Officer: Samantha Robinson, Board Chair, would like to thank Ann O’Connell for her dedicated service to Coastal Health & Wellness Governing Board and the citizens of Galveston County.

**Item#7 Executive Director will Report on Coastal Health & Wellness/COVID-19 Updates Submitted by Dr. Keiser**

Dr. Keiser, Executive Director, updated the Board on COVID-19.

Dr. Lindskog, Dental Director, updated the Board on dental services in the Coastal Health & Wellness Clinic:

- The dental clinic continues to follow CDC’s Interim Infection Prevention and Control Recommendations for Healthcare Personnel which has a section dedicated to Dental Facilities. We are wearing N95 respirators for all patient interactions.

- We experienced a staffing shortage in March due dental assistants scheduled leave and unplanned FMLA. We have a new dental assistant starting on April 14<sup>th</sup>. We currently have two dental assistant vacancies but have extended a contingent offer to a dental assistant.
- There are not any updates regarding the partnership with the College of the Mainland Dental Hygiene Program. They are still searching for a new program director.
- Our health center is participating in the NNOHA Oral Health Workforce Learning Collaborative. This virtual collaborative focuses on developing a recruitment and retention plan for the oral health workforce. We have completed three learning sessions with participants from HR and the Dental Clinic. In our most recent session, we gained ideas for improving our job posting as well as our website and social media to aid in recruitment and retention. We look forward to working with the Communications team on implementing these ideas.
- During March, we recognized the dental assistants for Dental Assistant Appreciation Week and the dentists for National Dentist Day. Thank you to the Communications Team for creating a fun reel video of the dentists.
- We are still working on our wait list. As reported previously, we have “new” acute appointments available to address immediate needs so that no one in pain is waiting.
- Dr. Bishai and Dr. Linskog will be attending the TACHC Clinical Conference along with other staff at the end of April. There is a session dedicated to tele dentistry, and we are looking forward to learning how we can implement that at our health center.
- We have committed to attending several outreach events in the community.
  - May 20 – Carver Park Gym – Steffin John – Dental Hygienist and Shonta’ Hill – Dental Assistant Supervisor
  - June 11 - with Moore Memorial Library in Texas City - Mini-Health Fair – Jamie Trinh – Dental Hygienist
  - October 21 – City of Texas City Senior Program at Nessler Park (dental presentation and handout for Seniors – Dr. Linskog)

**Item#8 Consider for Approval February 2022 Financial Report Submitted by Marlene Garcia**

Marlene Garcia, Chief Financial Officer, presented February 2022 Financial Report. A motion to accept the financial report as presented was made by Rev. Walter Jones. Cynthia Darby seconded the motion and the Board unanimously approved.

**Item#9 Consider for Approval Sliding Fee Policy Submitted by Marlene**

Marlene Garcia, Chief Financial Officer, asked the Board to consider for approval sliding fee policy. Marlene informed the Board the only change on the fee schedule is the eligibility from six months to one year. A motion to accept the sliding fee policy as presented was made by Victoria Dougharty. Dr. Southerland seconded the motion and the Board unanimously approved.

**Item#10 Consider for Approval 2022/2023 Sliding Fee Scale Submitted by Marlene Garcia**

Marlene Garcia, Chief Financial Officer, asked the Board to consider for approval 2022/2023 sliding fee scale. Marlene informed the Board that the sliding fee scale did increase from last year and the numbers presented are the numbers the state provide for Texas. A motion to accept the 2022/2023 sliding fee scale as presented was made by Dr. Southerland. Sharon Hall seconded the motion and the Board unanimously approved.

**Item#11 Consider for Approval Coastal Health & Wellness After Hours Policy Submitted by Ami Cotharn**

Ami Cotharn, Chief Operating Officer, asked the Board to consider for approval the Coastal Health & Wellness after hours policy. Ami informed there were no changes to the policy. A motion to accept the after hours policy as presented was made by Flecia Charles. Rev. Walter Jones seconded the motion and the Board unanimously approved.

**Item#12 Consider for Approval Inline Recruitment Services for Clinical Staffing Submitted by Chantelle Smith**

Chantelle Smith, Chief People Officer, asked the Board to defer approval of the inline recruitment services until a later date. A motion to defer inline recruitment services was made by Kevin Avery. Cynthia Darby seconded the motion and the Board unanimously approved.

**Item#13 Update on Employee Satisfaction Survey Presented by Chantelle Smith**

Chantelle Smith, Chief People Officer, updated the Board on the employee satisfaction survey. Chantelle informed the Board we were originally looking at using Bamboo HR for the employee satisfaction survey however after speaking with a Bamboo HR representative and expressing the strong concerns from the Board, this would be an added cost of \$832 per month. Ami Cotharn made contacted with a representative from TACHC and we will be using a TACHC tool to initiate our employee survey response. Ami and Chantelle will work with Annie with TACHC and share with the Board for their input before sending out.

**Item#14 Update on the Strategic Health Plan Presented by Shelby Evans**

Shelby Evans, Public Health Policy Specialist updated the Board on the strategic health plan. Shelby informed the Board we will have a draft available for the Board at the April meeting.

**Item#15 Discussion Regarding Governing Board Committees**

Samantha Robinson, Board Chair, informed the Board of the four subcommittees and the secretary/treasurer positions that will need to be filled and has requested adding these positions to the April Board agenda as an action item. The following Board members expressed interest in the below subcommittees.

- Finance Committee-Meets once a month via conference call (Victoria Dougharty)
- QA Committee-Meets quarterly -January, April, July, and October (Sharon Hall)
- Governing Board Appointing Committee (Elizabeth Williams)
- Executive Committee-Special meetings
- Secretary/Treasurer

**Item #16 Comments from Board Members**

No comments

The meeting was adjourned at 1:56p.m.

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Vice Chair

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Date



# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#5**

**Consider for Approval Minutes from  
April 14, 2021 Governing Board QA Meeting**



**Coastal Health & Wellness Governing Board**  
**Quality Assurance Committee Meeting**  
**April 14, 2022**

**BOARD QA COMMITTEE MEMBERS:**

Samantha Robinson, BSN – Chair  
 Kevin Avery- Consumer Member

**EMPLOYEES PRESENT:**

Philip Keiser, MD (Executive Director), Ami Cotharn (Chief Operations Officer), Hanna Lindskog, DDS (Dental Director), Regina Brown (Human Resources Director), Tiffany Carlson (Nursing Director), Pisa, Ring (Patient Services Manager), Tyler Tipton (Public Health Emergency Preparedness Manager) and Tikeshia Thompson Rollins (Executive Assistant III)

*(Minutes recorded by Tikeshia Thompson-Rollins)*

<b>ITEM</b>	<b>ACTION</b>
<b>Patient Access / Satisfaction Reports</b> Quarterly Access to Care Report  Quarterly Patient Satisfaction Report	<u><b>Quarterly Access to Care Report</b></u> <ul style="list-style-type: none"> <li>• Quarterly Access to Care Report was reviewed. Ami informed the committee the 1<sup>st</sup> quarter cumulative of 27% isn't accurate and we would like to tie in the utilization so that we can identify and redefined the percentages of no shows.                             <ul style="list-style-type: none"> <li>➤ The plan is to get with Nextgen to see how much this will cost and bring back to the Board.</li> </ul> </li> <li>• Dr. Lindskog suggested adding the number of scheduled slots or reflect the true number of slots to the report.</li> <li>• Samantha suggested keeping the goal at 90% for utilization and looking at this quarterly.</li> <li>• The high call waits time feature for patients to leave a message and get a call back will be available in a couple of weeks.</li> </ul> <u><b>Quarterly Patient Satisfaction Report</b></u> <ul style="list-style-type: none"> <li>• Come up with a script for all staff as a reminder to encourage patients to complete the patient satisfaction survey.</li> </ul>
<b>Clinical Measures</b> Quarterly Report on UDS Medical Measures in Comparison to Goals	<u><b>Medical Quality Review Measures</b></u> <ul style="list-style-type: none"> <li>• UDS measures were reviewed and will be brought back to the Committee July 2022</li> </ul>
<b>Quality Assurance/Risk/Management/ Emergency Management Reports</b> a) Quarterly Risk Management Report b) Dental Quarterly Summary c) Quarterly Emergency Management Report	<u><b>Quarterly Risk Management Report</b></u> <ul style="list-style-type: none"> <li>• Deferred until the July Meeting</li> </ul> <u><b>Dental Quarterly Summary</b></u> <ul style="list-style-type: none"> <li>• Dr. Lindskog will continue to bring the pediatric patient distribution report quarterly to the committee.</li> <li>• Dr. Lindskog and Kristina Garcia the Community Outreach Program Manager are working together to provide toothbrushes in the back-to-school backpacks for children.</li> </ul> <u><b>Quarterly Emergency Management Report</b></u> <ul style="list-style-type: none"> <li>• Tyler reviewed the 4<sup>th</sup> quarter Emergency Management Report and gave an update on trainings and plans that occurred during the quarter.</li> </ul>
<b>Plans and Policies</b>	<ul style="list-style-type: none"> <li>• No plans or policies reviewed.</li> </ul>
<b>Open Discussion</b> a) <b>Demo on Population Health Platform</b>	<ul style="list-style-type: none"> <li>• Ami presented the demo on population Health Platform.</li> </ul>

Next Meeting: July 14, 2022

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# **COASTAL HEALTH & WELLNESS**

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#6**

**Consider for Approval Quarterly Investment Report  
Submitted by Marlene Garcia**

**Coastal Health & Wellness  
Investment Report  
For the period ending March 31, 2022**

Coastal Health & Wellness	Money Market Account		
	Jan	Feb	Mar
Beginning Balance	6,701,486	6,858,447	7,158,051
Deposits	679,700	717,800	449,000
Withdrawals	(525,000)	(420,250)	50,000
Interest Earned	2,261	2,053	2,315
Ending Balance	\$6,858,447	\$7,158,051	\$7,659,365
Current Annual Yield	0.40%	0.40%	0.40%
Previous Quarter Yield (10/2021 - 12/2021)	0.40%	0.40%	0.40%

Tex Pool Investments		
Jan	Feb	Mar
26,456.68	26,457.51	26,458.82
-	-	-
-	-	-
0.83	1.31	3.46
\$26,457.51	\$26,458.82	\$26,462.28
0.04%	0.06%	0.15%
0.04%	0.04%	0.04%

Summary	Interest Earned	Avg Balance	Yield
October 1, 2021 to December 31, 2021	6,714	6,683,321	0.06%
January 1, 2022 to March 31, 2022	6,635	6,746,910	0.06%
April 1, 2022 to June 30, 2022	-	-	
July 1, 2022 to September 30, 2022	-	-	
YTD Totals	\$13,349	\$6,715,116	0.12%

Coastal Health & Wellness	Q1	Q2	Q3	Q4	YTD Comparison
Interest Yield Year to Year Comparison	Oct 1-Dec 31	Jan 1-Mar 31	Apr 1-June 30	Jul 1-Sept 30	Total as of 3/31
FY2019	0.43%	0.47%	0.47%	0.46%	<b>0.90%</b>
FY2020	0.40%	0.36%	0.21%	0.20%	<b>0.76%</b>
FY2021	0.19%	0.14%	0.05%	0.05%	<b>0.33%</b>
<b>FY2022 (Current year)</b>	0.06%	0.06%			<b>0.12%</b>

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# **COASTAL HEALTH & WELLNESS**

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#7**

**Consider for Approval Quarterly**

**Access to Care Report for the Period Ending March 31, 2022**

**Submitted by Pisa Ring**

Coastal Health & Wellness – Access to Care Report  
1<sup>st</sup> Quarter 2022 (January, February, and March)

No Show Cumulative Goal = 18%

- 1<sup>st</sup> Quarter Cumulative = 27%

Cancellation Goal = 25%

- 1<sup>st</sup> Quarter = 10%

Texas City	# Scheduled Appts	% No Shows	Cancellation %
Medical	3942	26%	4%
Dental	1716	26%	22%
Dental Hygienist	382	30%	20%
Counseling	292	47%	23%
Galveston	# Scheduled Appts	% No Shows	Cancellation %
Medical	1224	28%	2%
Dental	514	26%	15%
Dental Hygienist	106	26%	13%
Counseling	127	34%	14%

No Show = Patient does not attend scheduled appointment OR patient cancel less than 24 hours prior to appointment (# No Show/#Scheduled)  
Cancel = Any appointment canceled prior to 24 hours of appointment (#canceled/#scheduled)

**Call Center Queues (Main x2234 & Dental; option 4)**

Queue	Call Volume	Abandonment Rate (abandoned/volume)	Abandonment Rate Goal	Average Speed to Answer	Average Speed Goal
Dental (Option 4)	3732	6%	5%	1:00	1:00
Main (x2234)	19,010	7%	5%	1:07	1:00



# **COASTAL HEALTH & WELLNESS**

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#8**

**Consider for Approval Quarterly**

**Patient Satisfaction Survey Results for the Period Ending March 31, 2022**

**Submitted by Pisa Ring**

# Coastal Health & Wellness

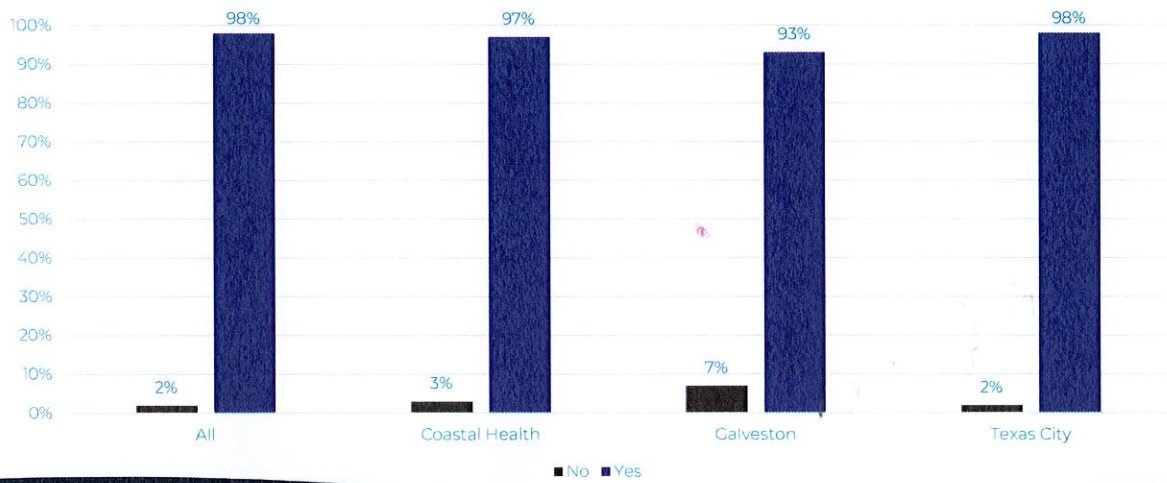
## Patient Satisfaction Comparison Report

### Q1 2022



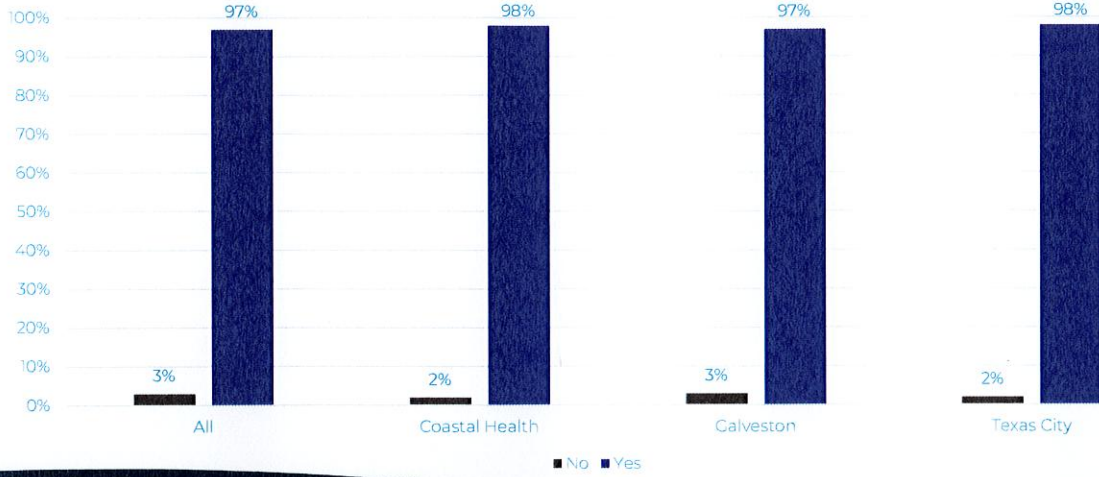
1

Are the current hours of operations for this clinic convenient for you?



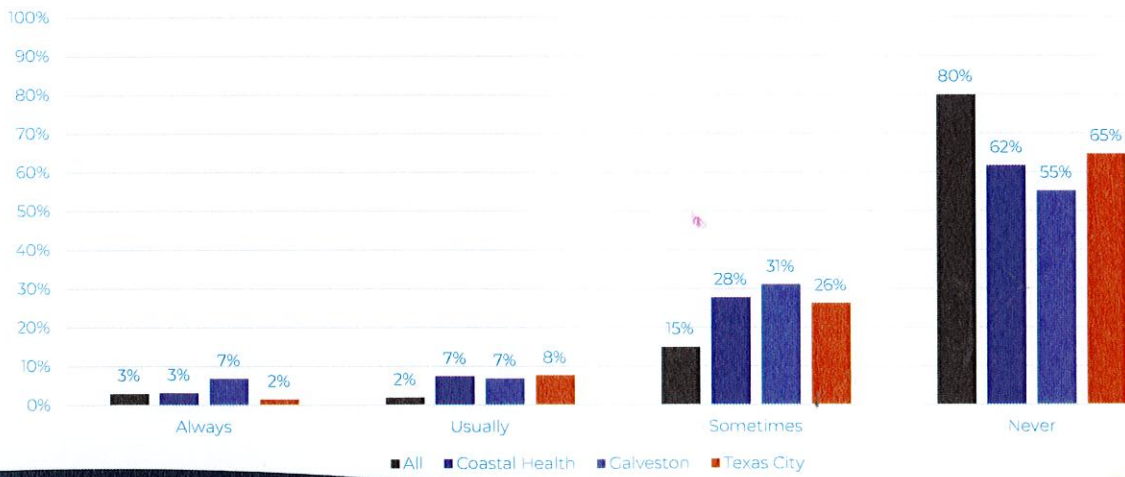
2

Is the current location of this clinic convenient for you?



3

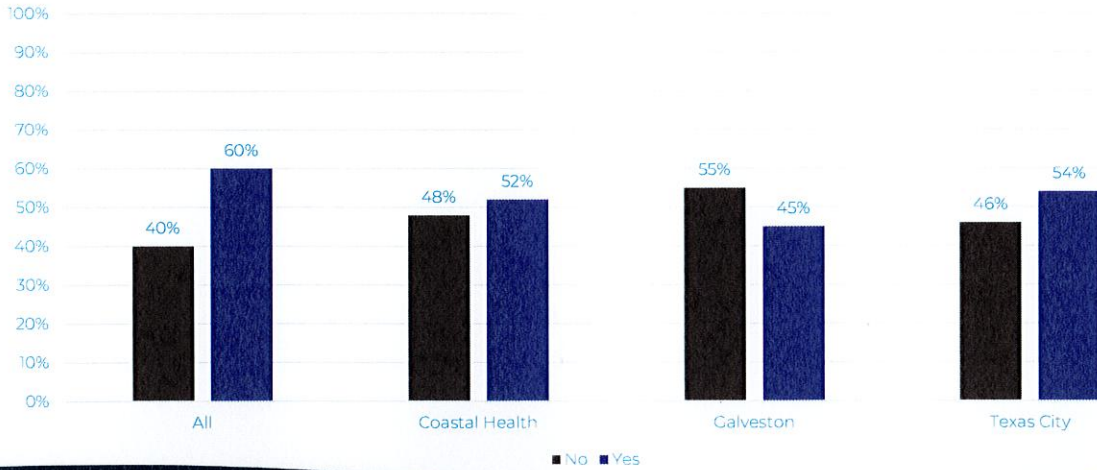
Past 6 months, have copays/fees caused you financial hardship or prevented you from seeking care?



4

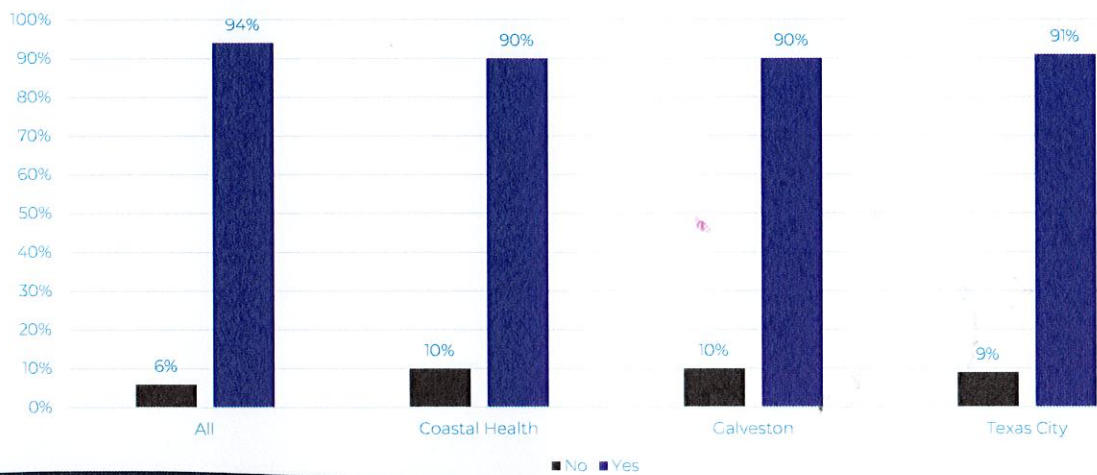


### Where you given information by this clinic on what it means to be part of a patient-centered medical home?



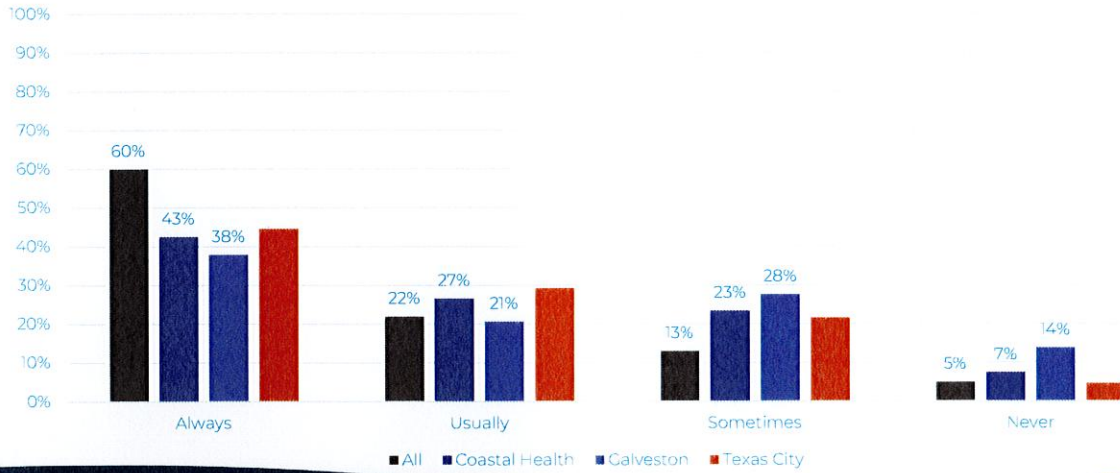
5

### Were you able to see the provider of your choice at your last visit?



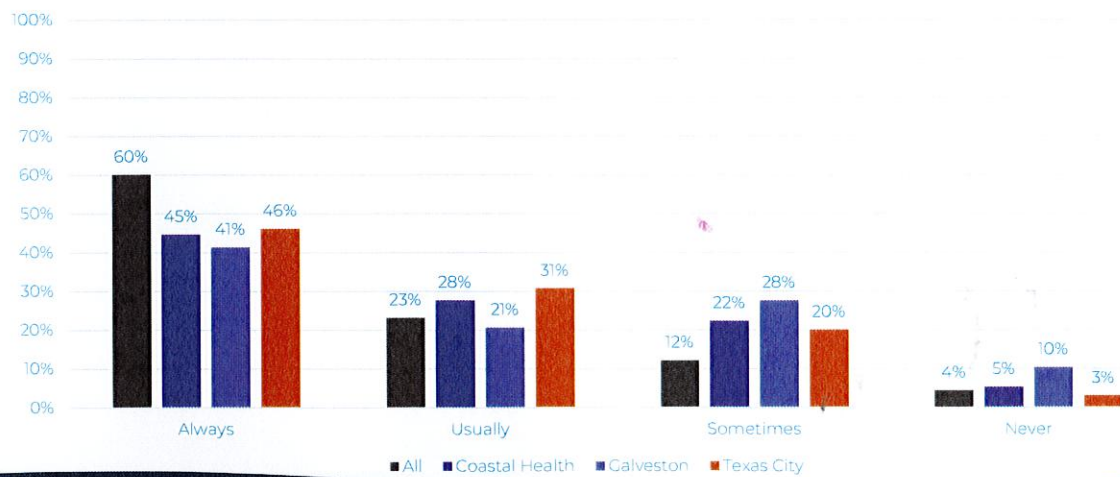
6

In last 6 months, when you called to get an appointment for care you needed right away, how often did you get an appointment as soon as you needed?



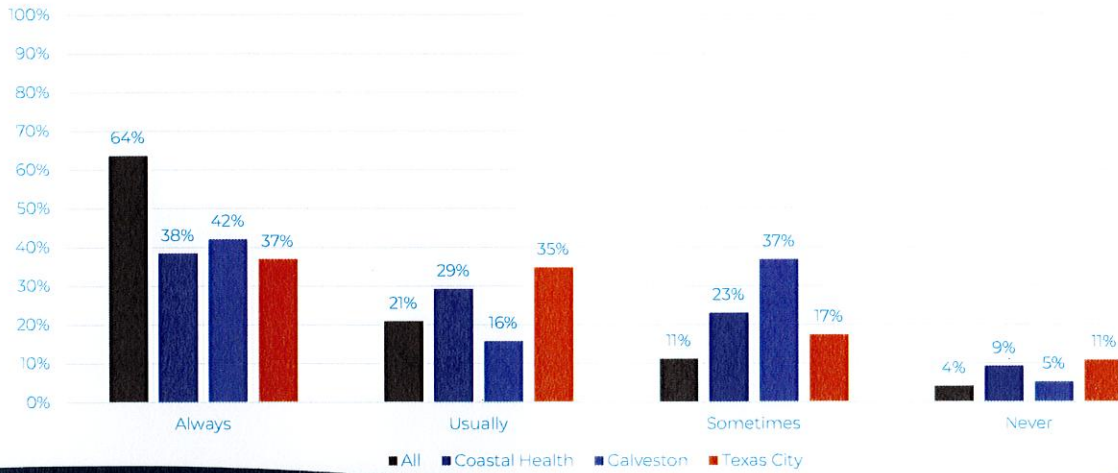
7

In last 6 months, when you called to get an appointment for a check-up or routine care, how often did you get an appointment as soon as you needed?



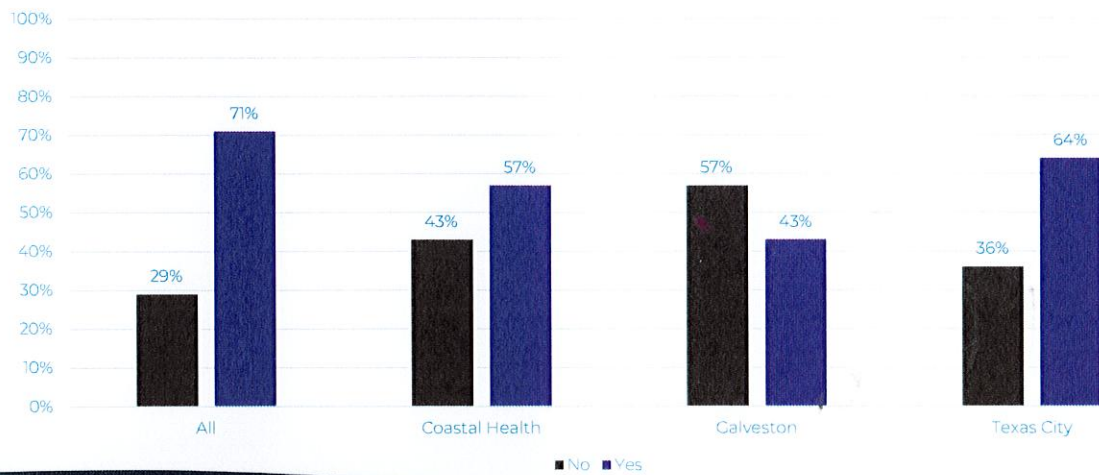
8

In last 6 months, when you called during regular hours how often did you get an answer to your question the same day?



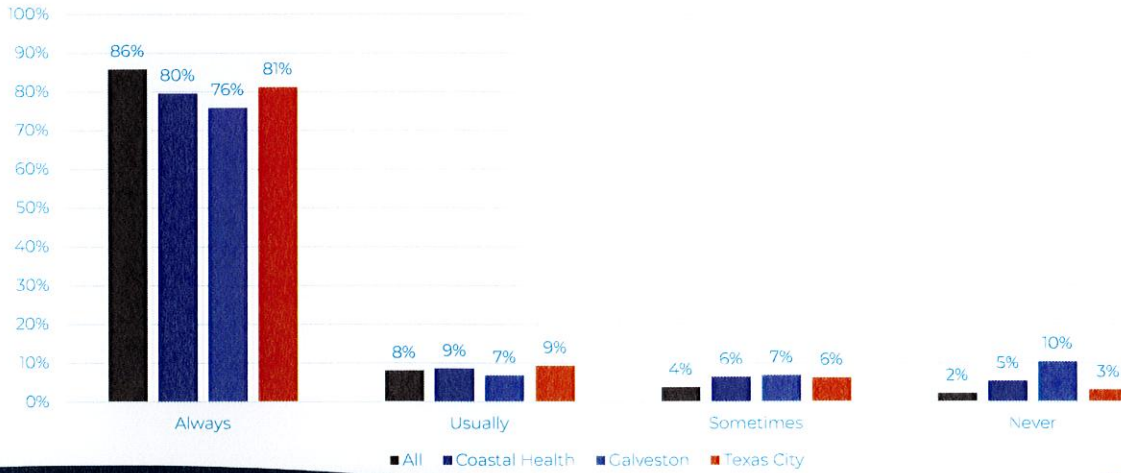
9

In last 6 months, did this clinic give you information about what to do if you need care during evenings, weekends or holidays?



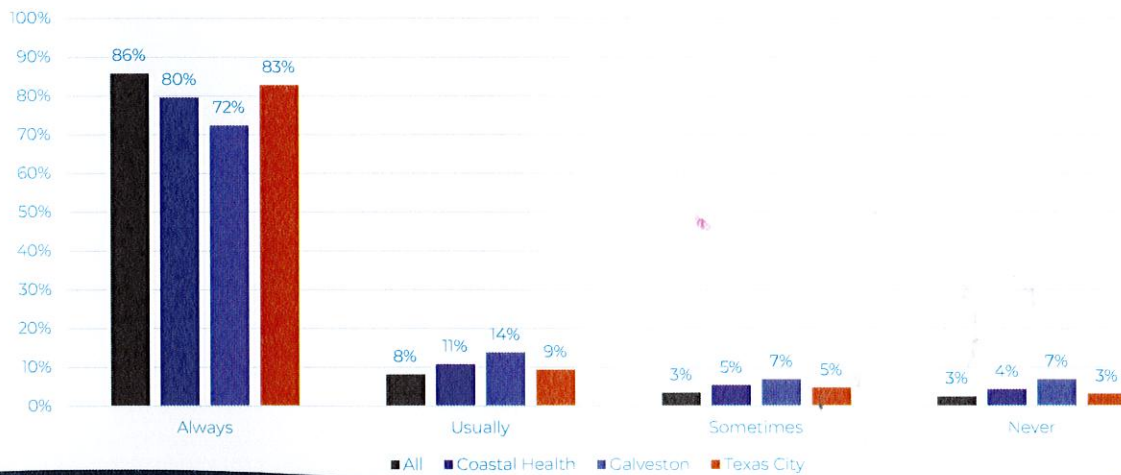
10

In last 6 months, how often did this provider listen carefully to your needs?



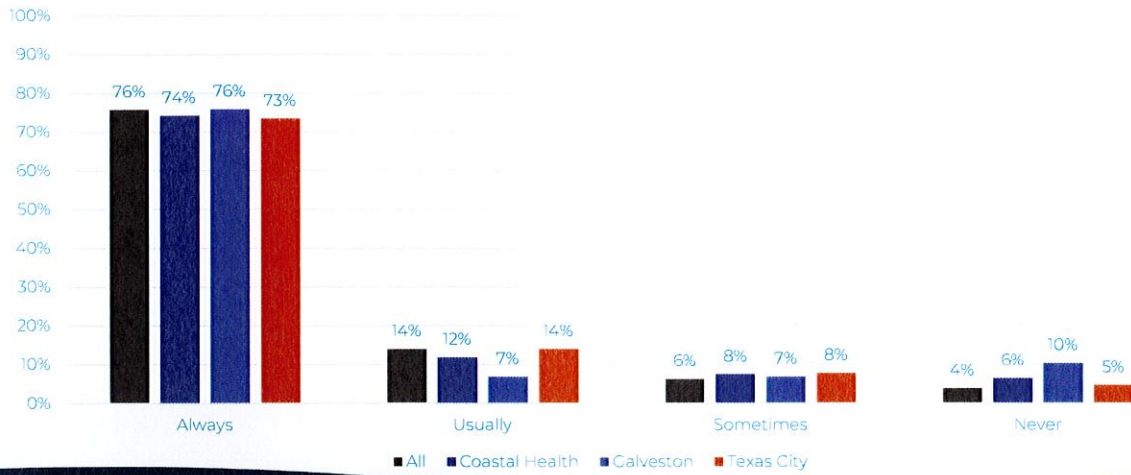
11

In last 6 months, how often did this provider communicate with you in a way that was easy to understand?



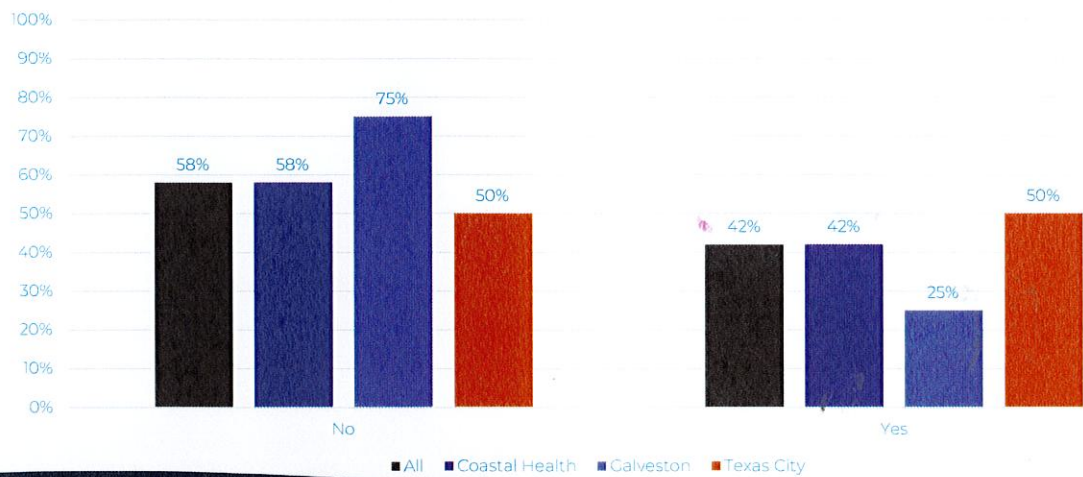
12

In last 6 months, how often were you satisfied with the amount of time you spent at this provider's office for your appointment?



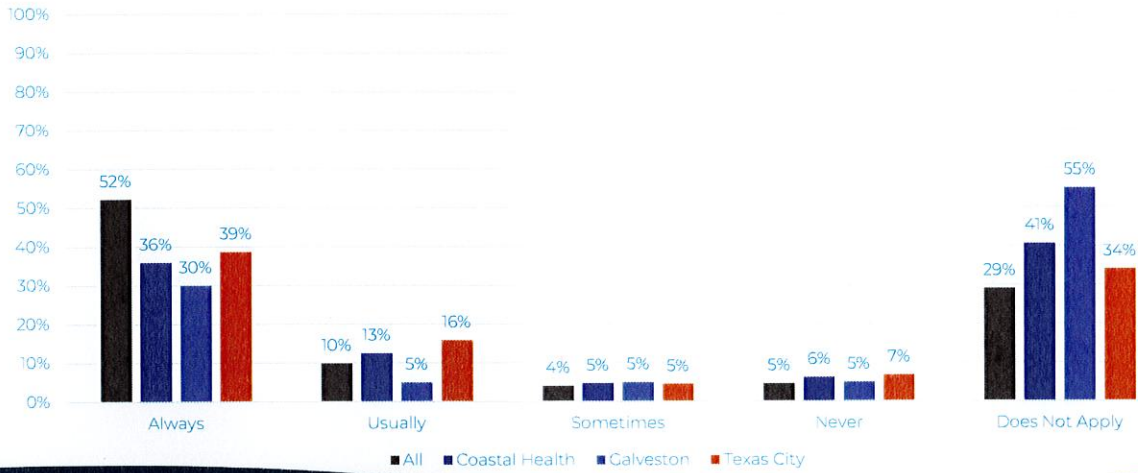
13

In last 6 months, did you see a specialist for a particular health problem?



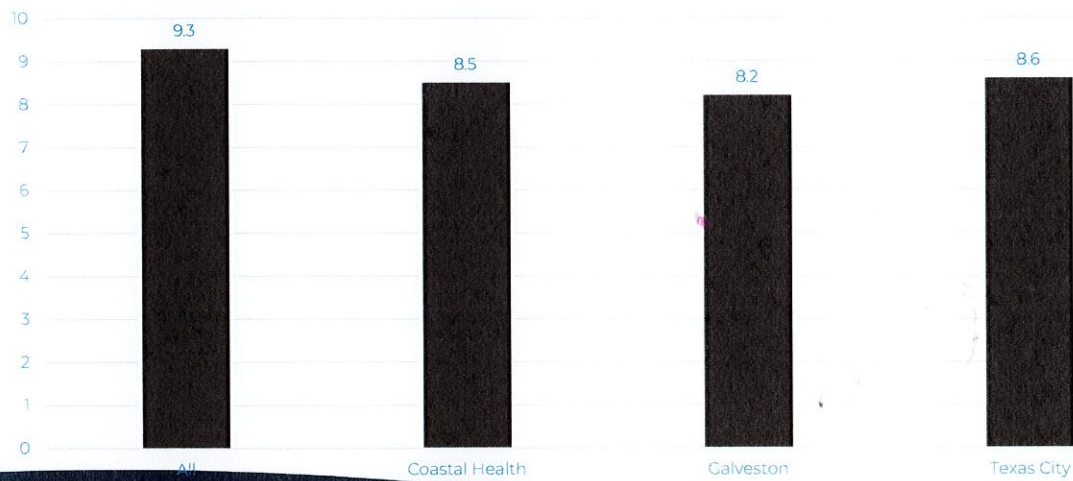
14

In last 6 months, how often did this provider seem informed and up-to-date about the care you received from specialists?



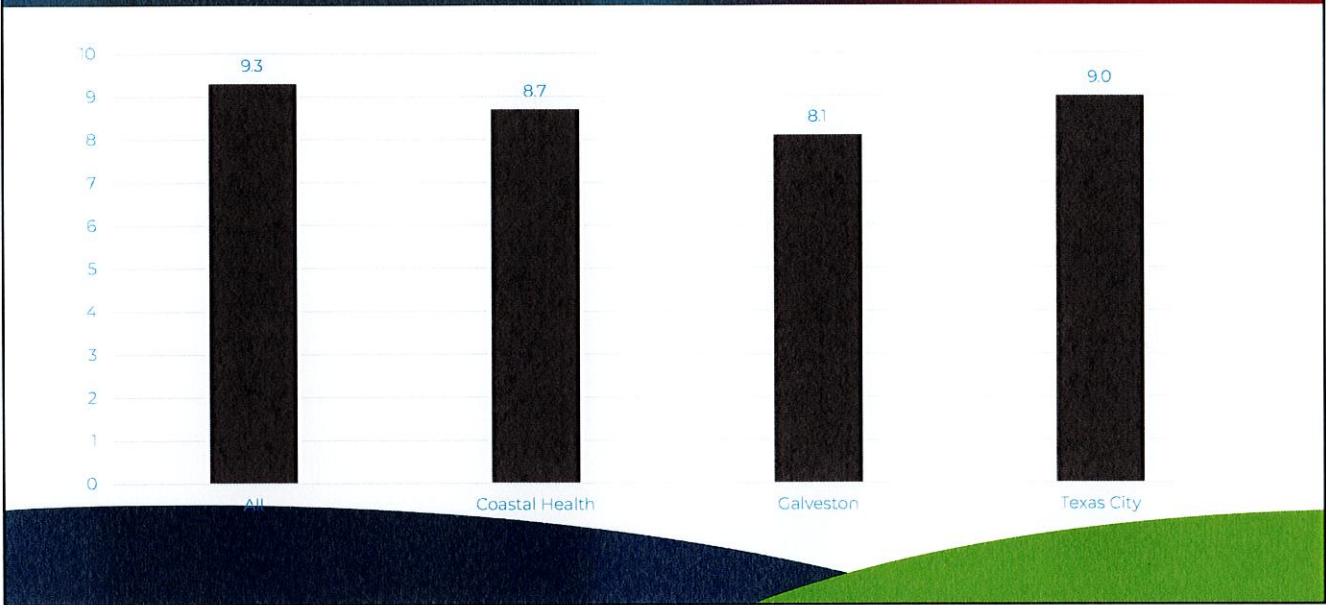
15

On a scale of 0-10, how would you rate the front office staff at this provider's office?



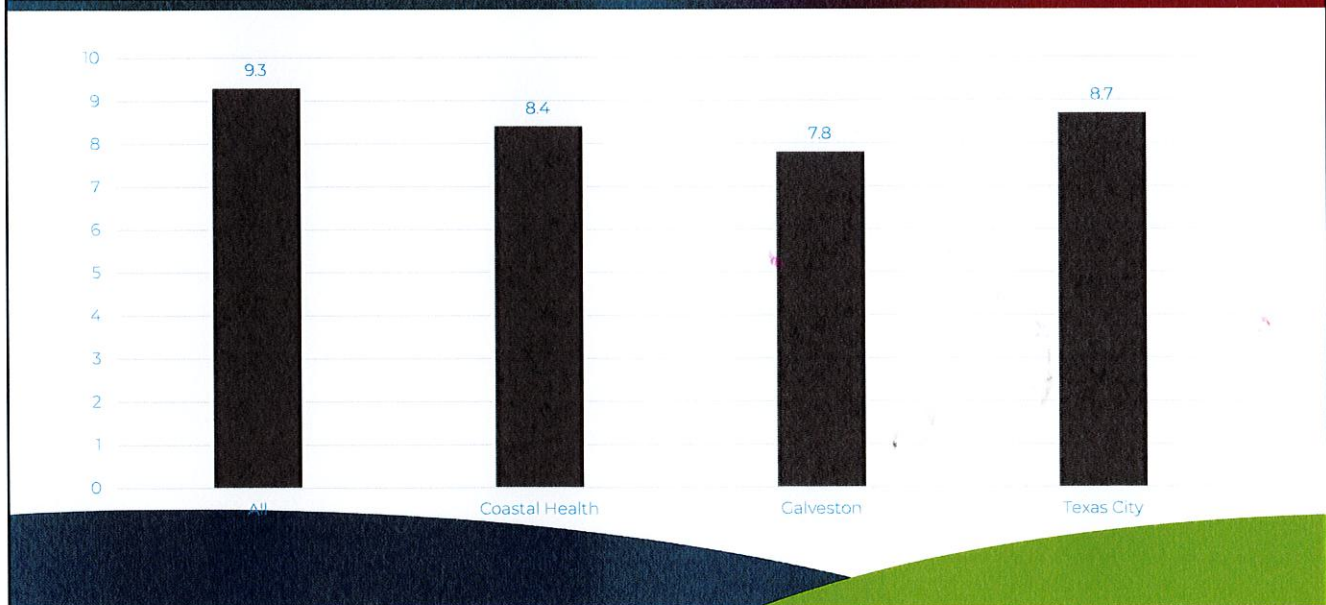
16

On a scale of 0-10, how would you rate the clinical support staff at this provider's office?



17

On a scale 0-10, how likely are you to recommend this provider's office to a friend or family member?



18

# Thank you!



**Britt Kushner**  
**Billing and Data Analyst**  
**[bkushner@tachc.org](mailto:bkushner@tachc.org)**

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# COASTAL HEALTH & WELLNESS

## GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board  
April 2022  
Item#9  
Coastal Health & Wellness Updates**

[Coastal Health & Wellness April 2022 Coastal Wave \(govdelivery.com\)](https://govdelivery.com)

- a) Update on COVID-19 Submitted by Executive Director**
- b) Operational Updates Submitted by Chief Operating Officer**
- c) Dental Updates Submitted by Dental Director**



## CHW joins pilot programs to improve care

Coastal Health & Wellness (CHW) is happy to collaborate with the Texas Association of Community Health Centers in two pilot programs addressing value based care and social determinants of health.

The Value Based Care model aims to improve quality of care by creating incentives for CHW providers to deliver high-quality rather than volume-driven care. This not only improves health outcomes and performance measures, but also reduces overall costs to deliver care to patients.

It is increasingly recognized that to improve population health, health equity needs to become a priority in the health sector, and measures to reduce disparities must be integrated into health programs and services. The Social Determinants of Health pilot program will allow CHW to recognize and include factors such as income, social support, early childhood development, education, employment, housing, and gender into caring for our patients as a whole.

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## Dentists attend Ninth District Dental Society event

Members of the Coastal Health & Wellness dental team on April 5 attended the Ninth District Dental Society meeting.

Pictured left to right are: Shady Bishai, DDS; Unsil Keiser, DDS; Texas Dental Association President Dr. Debrah Worsham; Dental Director Hanna Lindskog, DDS; and Janet H. Southerland, DDS and vice chair of the CHW Governing Board.



## CHW welcomes new family nurse practitioner

Help us welcome Lisa Cashiola, MSN, FNP-BC! She recently joined our Coastal Health & Wellness medical team as a family nurse practitioner.

Lisa's specialty is family practice and comes to us with five years experience as an advanced care nurse practitioner, 21 years as a registered nurse, previously in urgent care, family practice, healthy women's care, transplant and critical care.



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## Welcome our new Governing Board members!



We're happy to introduce the newest members of our Coastal Health & Wellness Governing Board - Cynthia Darby, Sharon Hall, PhD and Rev. Walter Jones!

All three began serving on the board in March. Welcome, and we're happy to have you join!

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## Uncontrolled high blood pressure may lead to health risks

You may think high blood pressure is something that happens later in life, but it can occur at any age. High blood pressure - also known as hypertension - is a major risk factor for heart disease and may lead to other serious health problems including kidney disease, stroke and dementia.

Taking small steps like eating healthy, getting regular physical activity, reducing stress and aiming for a healthy weight can help manage blood pressure. It's also important to work with your healthcare team. Get your blood pressure checked at least once a year and talk to your healthcare provider about what your numbers mean.

Learn more about [high blood pressure](#).

## **Second booster available to immunocompromised, ages 50 plus**

Certain immunocompromised individuals and adults ages 50 and older who received an initial booster dose at least four months ago are eligible to receive another mRNA (Pfizer-BioNTech or Moderna) booster dose to increase their protection against severe disease from COVID-19.

In addition, adults who received a primary and booster dose of Johnson & Johnson's COVID-19 vaccine at least four months ago may now receive a second booster dose of an mRNA COVID-19 vaccine.

It's important to remain up to date on COVID-19 vaccinations. You're up to date if you've received all recommended vaccines, including booster doses, when eligible.

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**TOGETHER**  
for Mental Health

**#Together4MH**

**May is Mental Health Awareness Month**

Mental health is an incredibly important part of overall health. We're strongest when we join Together for Mental Health.

Did you know more than 51 million adults in the U.S. face the reality of managing a mental illness every day? Taking on challenges of mental health conditions, health coverage and erasing the stigma around mental illness requires all of us to work together.

Learn more about mental health and Mental Health Awareness Month.

## We want to hear from you, CHW patients!

Coastal Health & Wellness launched a new patient satisfaction survey, and we want to hear from you!

The survey takes about 5-7 minutes to complete and all participation is voluntary and anonymous.

When you take a few minutes to tell us more about your experience, it helps us continue to improve our patient care, and your experience, at our CHW Texas City and Galveston clinics.

You can complete the survey onsite or following your visit. You'll also notice patient satisfaction survey posters throughout the clinic with a QR code you can scan with your smartphone.

## Stay in touch with Patient Portal

Have you heard about our new patient portal? It's an easy way to get in touch with your Coastal Health & Wellness team.

- Request and view appointments
- Send a message to your medical provider and CHW team
- View a summary of your health record and lab results
- Request prescription refills
- Pay statements

Call us at 409.938.2234 to learn more!

[Click here to learn more about CHW services.](#)

[Click here to learn more about becoming a patient.](#)

[Click here to meet our CHW providers.](#)

[Back to Agenda](#)



# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#10**

**Consider for Approval March 2022 Financial Report**

**Submitted by Marlene Garcia**

# COASTAL HEALTH & WELLNESS

Governing Board



## FINANCIAL SUMMARY

For the Period Ending

*March 31, 2022*

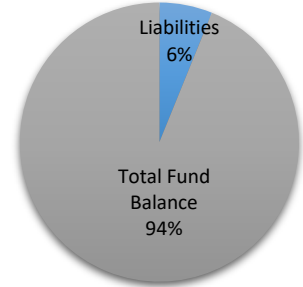
**April 28, 2022**

GCHD Board Room | 9850-A Emmett F. Lowry Expy. | Texas City, TX 77591

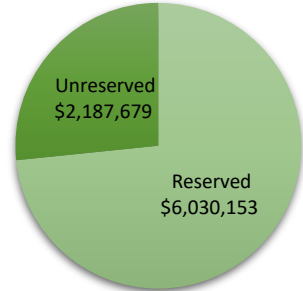
**CHW - BALANCE SHEET** as of March 31, 2022

	Current Month Mar-22	Prior Month Feb-22	Increase (Decrease)
<b>ASSETS</b>			
Cash & Cash Equivalents	\$7,331,380	\$7,350,341	(\$18,961)
Accounts Receivable	2,345,803	2,209,606	136,197
Allowance For Bad Debt	(1,171,288)	(1,133,624)	(37,664)
Pre-Paid Expenses	164,919	119,364	45,555
Due To / From	84,482	71,712	12,769
<b>Total Assets</b>	<b>\$8,755,295</b>	<b>\$8,617,400</b>	<b>\$137,895</b>
<b>LIABILITIES</b>			
Accounts Payable	\$169,445	\$109,088	\$60,356
Accrued Salaries	343,377	295,755	47,622
Deferred Revenues	24,642	25,992	(1,351)
<b>Total Liabilities</b>	<b>\$537,463</b>	<b>\$430,836</b>	<b>\$106,627</b>
<b>FUND BALANCE</b>			
Fund Balance	\$7,940,595	\$7,940,595	0
Current Change	277,237	245,969	31,268
<b>Total Fund Balance</b>	<b>\$8,217,832</b>	<b>\$8,186,564</b>	<b>\$31,268</b>
<b>TOTAL LIABILITIES &amp; FUND BALANCE</b>	<b>\$8,755,295</b>	<b>\$8,617,400</b>	<b>\$137,895</b>

Current Period Assets



Total Fund Balance

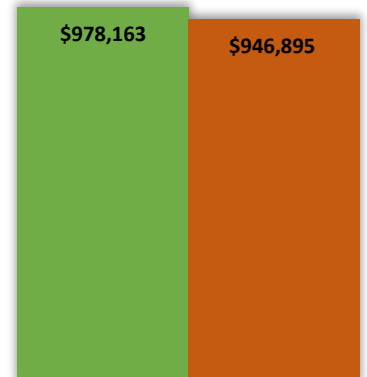


**CHW - REVENUE & EXPENSES** as of March 31, 2022

	Actual Mar-22	Budgeted Mar-22	MTD Budget Variance	YTD Budget Variance
<b>REVENUE</b>				
County Revenue	\$311,222	\$311,222	\$0	\$0
DSRIP Revenue	0	65,833	(65,833)	249,085
HHS Grant Revenue	412,482	269,783	142,699	1,422,519
Patient Revenue	238,709	241,682	(2,974)	(164,535)
Other Revenue	15,750	8,851	6,899	1,574
<b>Total Revenue</b>	<b>\$978,163</b>	<b>\$897,372</b>	<b>\$80,791</b>	<b>\$1,508,643</b>
<b>EXPENSES</b>				
Personnel	\$624,705	\$615,556	(\$9,149)	\$64,832
Contractual	65,752	57,257	(8,494)	(85,820)
IGT Reimbursement	0	21,666	21,666	(73,374)
Supplies	92,710	80,159	(12,551)	156,674
Travel	4,584	2,778	(1,806)	9,485
Bad Debt Expense	37,664	24,674	(12,991)	(123,428)
Other	121,481	95,283	(26,198)	(201,938)
<b>Total Expenses</b>	<b>\$946,895</b>	<b>\$897,372</b>	<b>(\$49,523)</b>	<b>(\$253,570)</b>
<b>CHANGE IN NET ASSETS</b>	<b>\$31,268</b>	<b>\$0</b>	<b>\$31,268</b>	<b>\$1,255,073</b>

Current Month Actuals

■ Revenue ■ Expenses

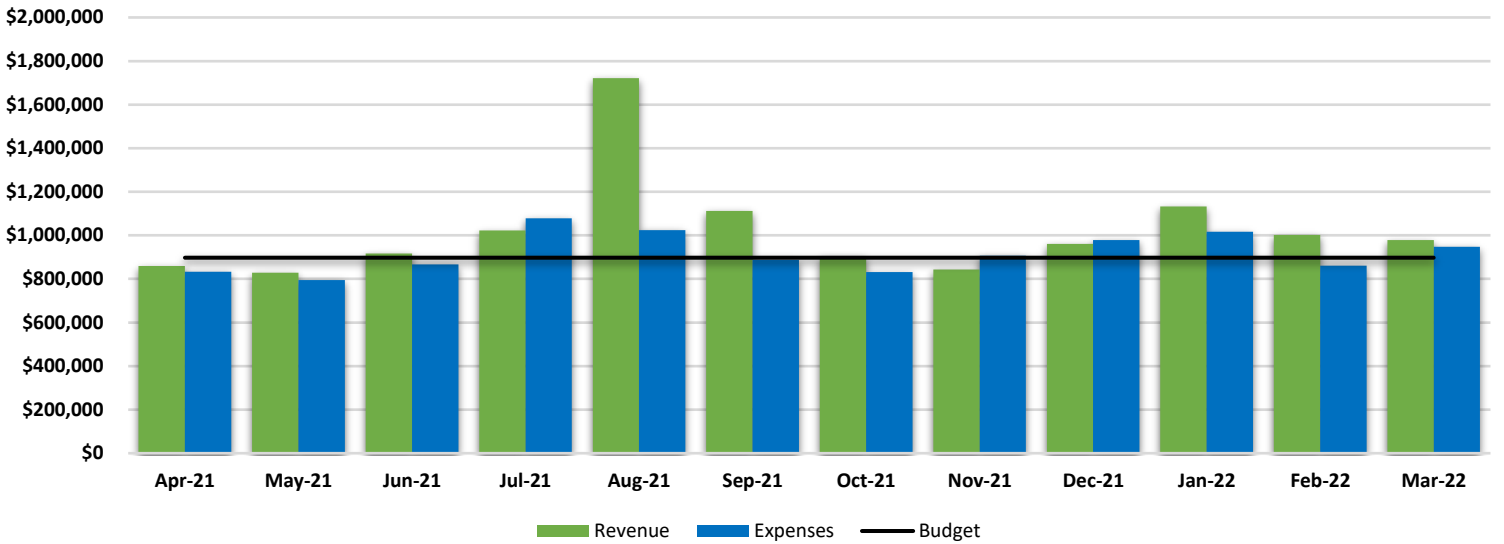


**HIGHLIGHTS**

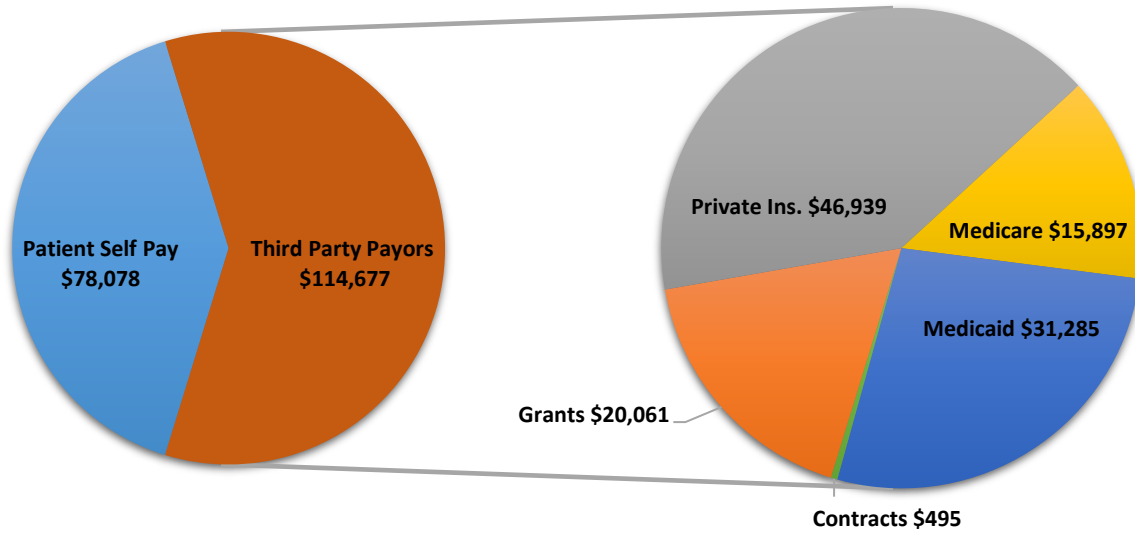
- MTD increase in fund balance of \$31,268.
- MTD revenues were \$80,791 higher than budgeted due to Covid-related grant funding, private insurance and patient fees. These were offset by lower than budgeted Interest Income, Medicare and Medicaid revenue.
- Pharmacy revenue for March is underbudget by \$29,046. This is due to lower utilization in pharmacy expenses therefore resulting in lower revenue.
- All payroll items for March are overbudget. Supplemental pay for YTD is overbudget by \$43,500 and part-time hourly YTD is overbudget \$55,616.
- Expenses overbudget include: operating supplies by \$10,136, office supplies by \$6,276, Professional Services (J2) by \$11,355, Travel for out of town, IT by \$10,689, and bad debt expenses by \$12,990. The misc expense of \$600 was for submitting TACHC dues late.
- Total Expenses for March 2022 is overbudget by \$49,523.



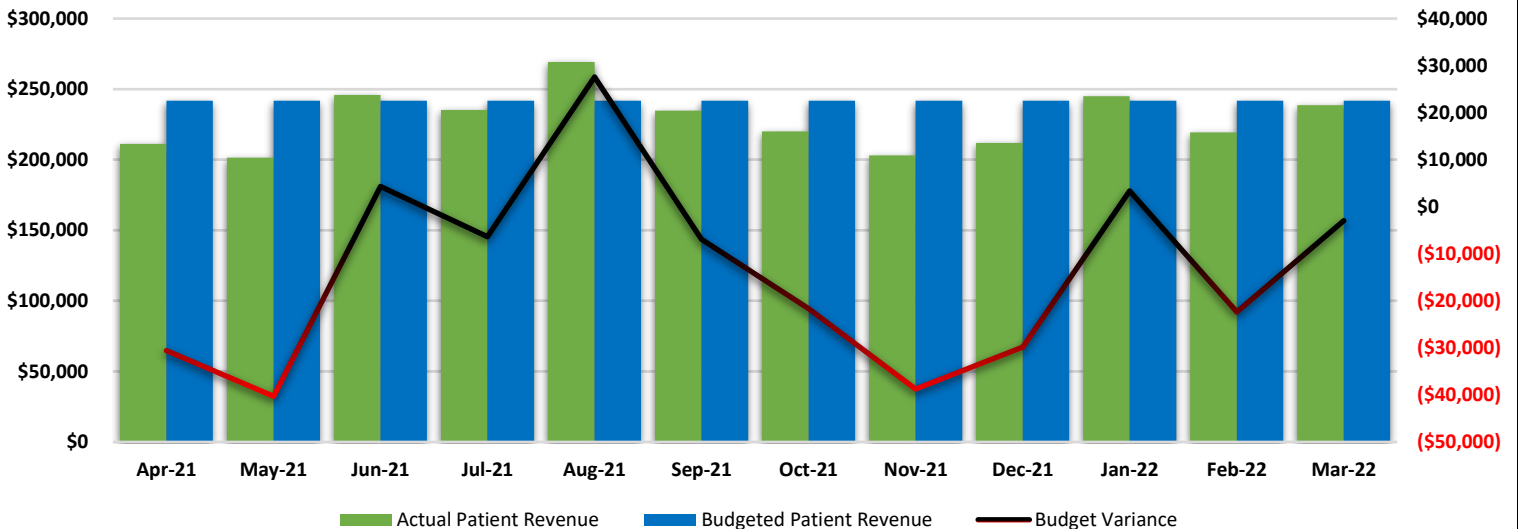
**Actual Revenue & Expenses in Comparison to Budget**

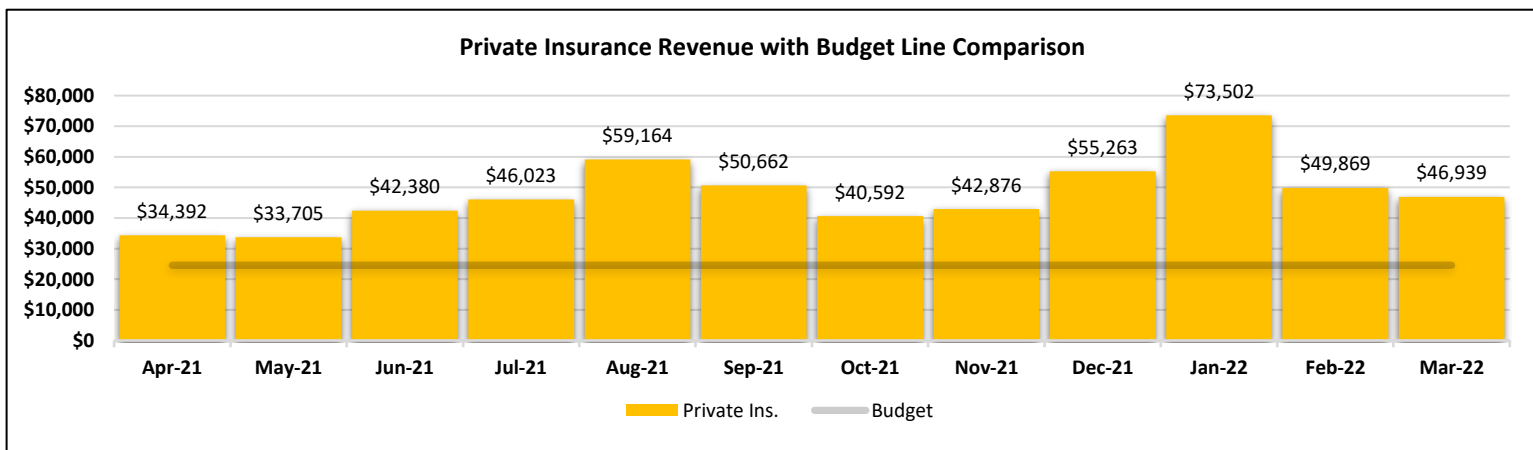
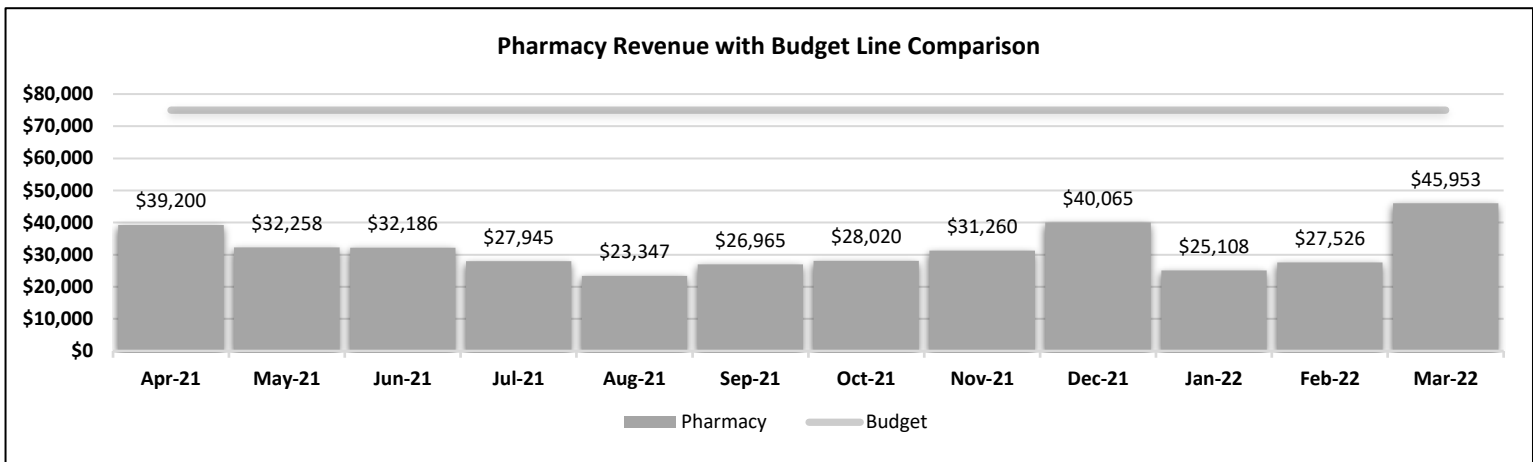
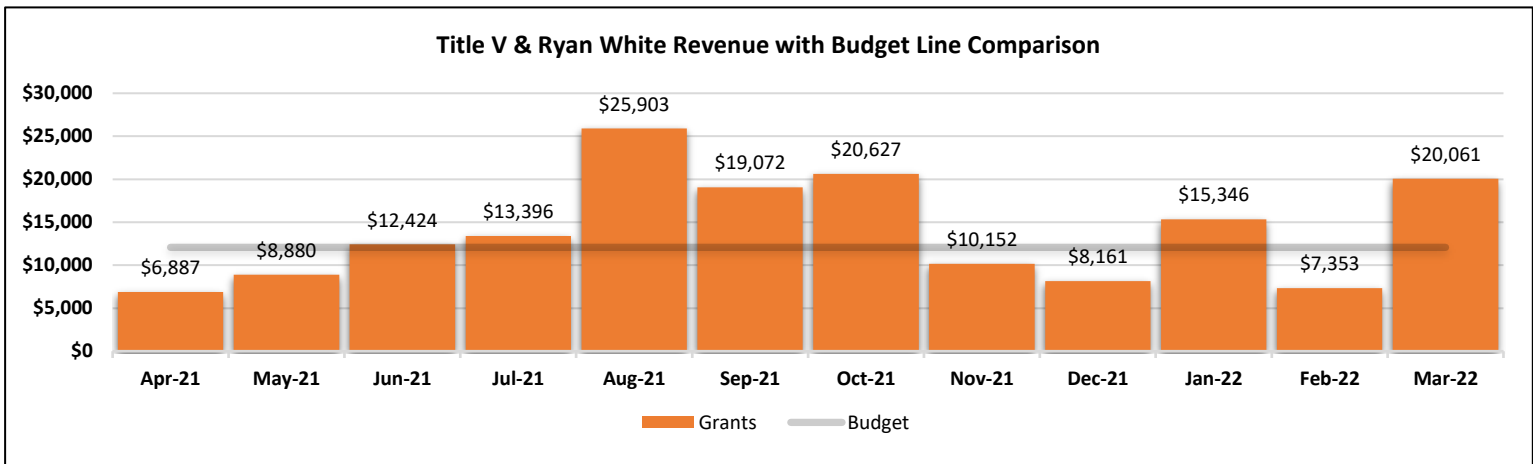
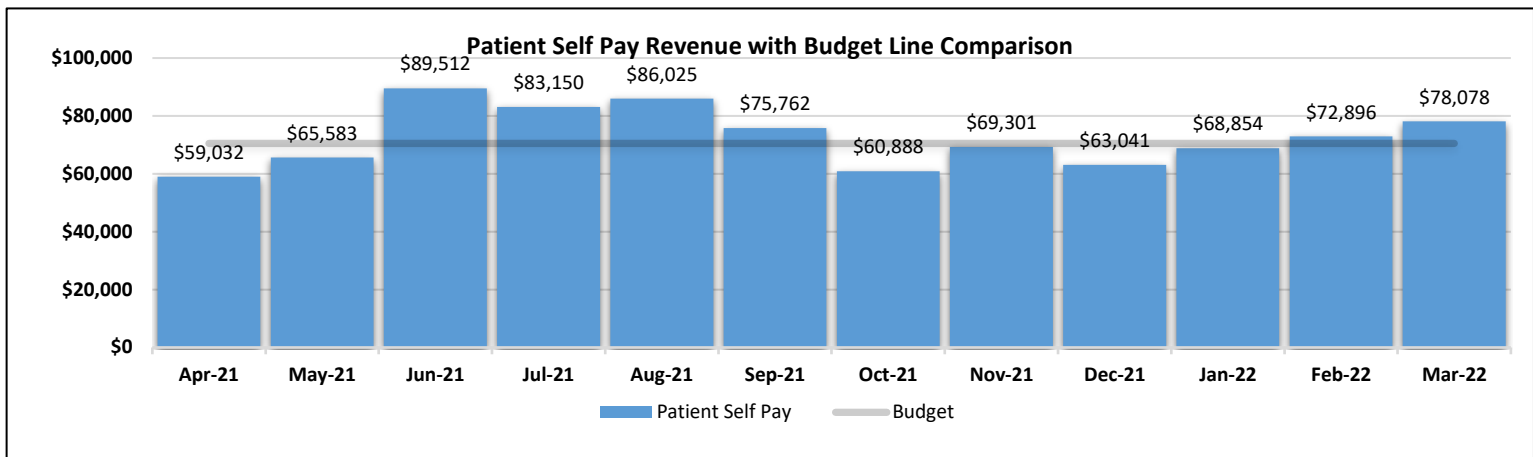


**Current Period Patient Revenue with Third Party Payor Contributions Identified**

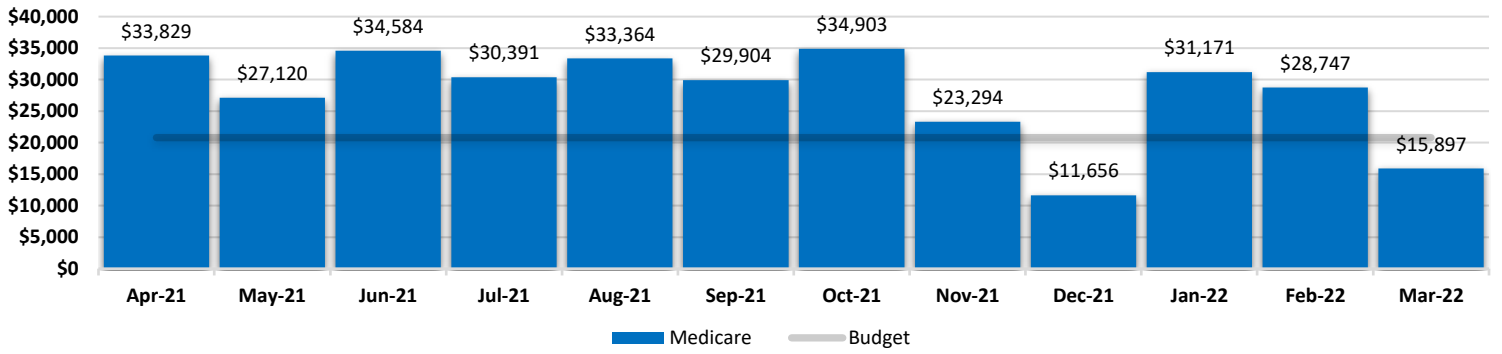


**Actual Patient Revenue Rec'd vs Budget with Variance**

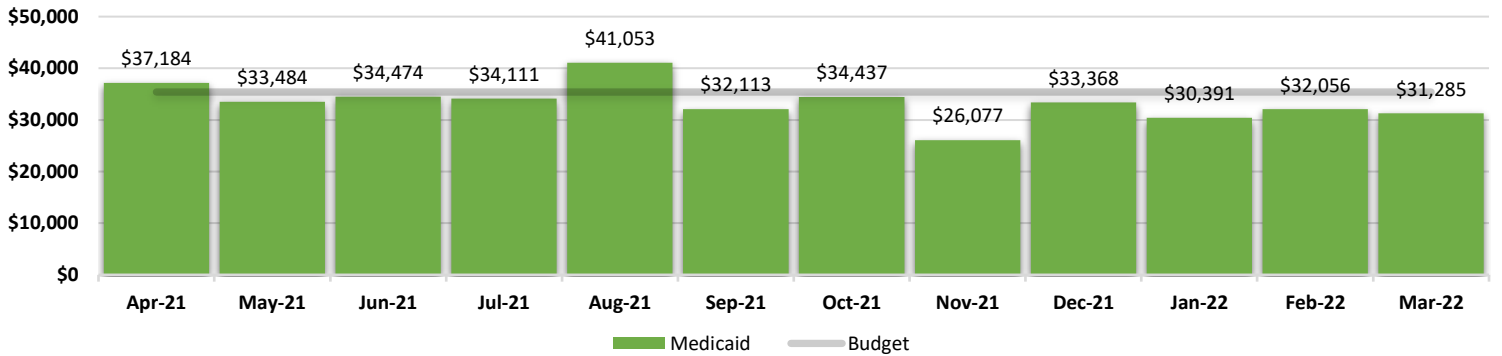




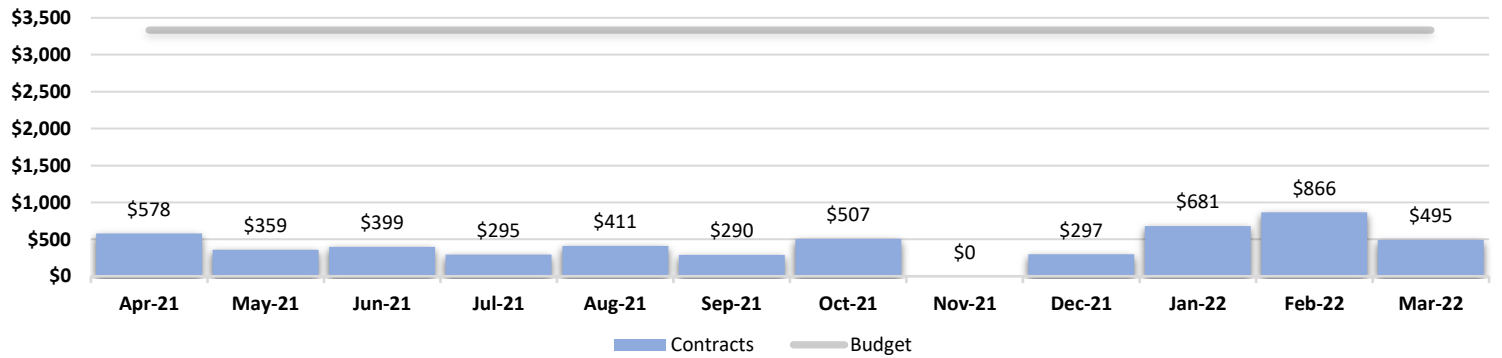
**Medicare Revenue with Budget Line Comparison**



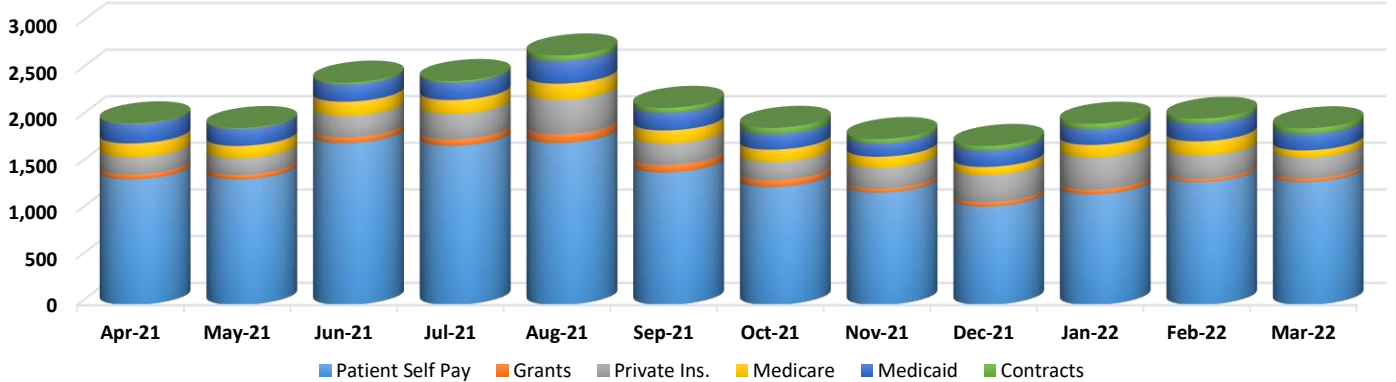
**Medicaid Revenue with Budget Line Comparison**



**Contract Revenue with Budget Line Comparison**



**Total Number of Patient Visits**



**Coastal Health & Wellness**  
**Statement of Revenue and Expenses for the Period ending March 31, 2022**

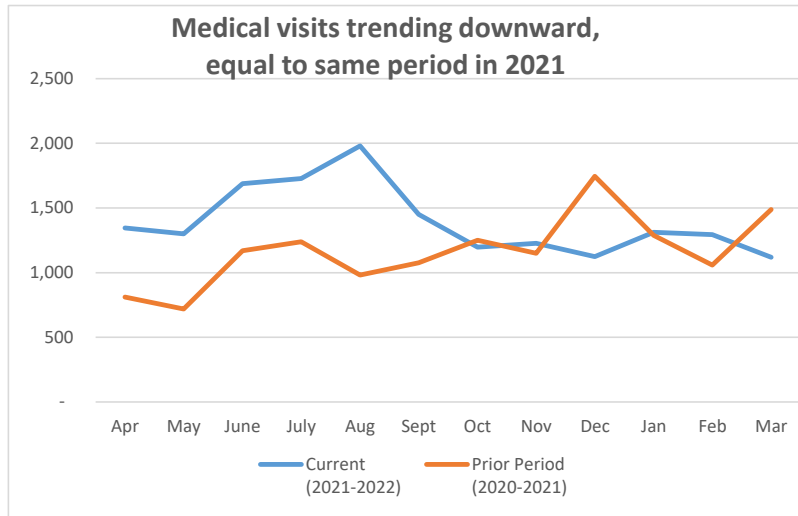
Cost Category	Account Description	Annual Budget	Period Ending 03/31/22	MTD Budget	MTD Budget Variance	YTD Actual	YTD Budget	YTD Budget Variance
<b>Grouping</b>	<b>Revenue</b>							
HHS	HHS Grant Revenue - HRSA	3,237,400	412,482	269,783	142,699	4,623,006	3,237,400	1,385,606
	Base Funding	3,237,400	258,325	269,783	(11,458)	3,323,652	3,237,400	86,252
	HHS QI 19	-	-	-	0	-	-	-
	COVID Supplemental	-	-	-	0	-	-	-
	COVID CARES	-	-	-	0	153,395	-	153,395
	COVID ECT	-	6,873	-	6,873	99,554	-	99,554
	HHS QI 20	-	-	-	0	8,425	-	8,425
	Hypertension (HTN)	-	-	-	0	1,589	-	1,589
	COVID ARP	-	147,284	-	147,284	1,036,392	-	1,036,392
HHS	HHS Grant Revenue - Other	-	-	-	0	36,913	-	36,913
Patient	Grant Revenue (Title V, Ryan White)	144,977	20,061	12,081	7,980	168,260	144,977	23,283
Patient	Patient Fees	845,950	78,078	70,496	7,583	872,124	845,950	26,174
Patient	Private Insurance	294,821	46,939	24,568	22,370	575,367	294,821	280,546
Patient	Pharmacy Revenue - 340b	900,000	45,953	75,000	(29,047)	379,833	900,000	(520,167)
Patient	Medicare	249,596	15,897	20,800	(4,902)	334,859	249,596	85,263
Patient	Medicaid	424,845	31,285	35,404	(4,119)	400,032	424,845	(24,813)
Other	Local Grants & Foundations	16,208	1,351	1,351	(0)	22,208	16,208	6,000
Other	Medical Record Revenue	15,000	630	1,250	(620)	7,823	15,000	(7,177)
Other	Medicaid Incentive Payments	-	8,348	-	8,348	42,526	-	42,526
County	County Revenue	3,734,667	311,222	311,222	0	3,734,667	3,734,667	-
DSRIP	DSRIP Revenue	790,000	-	65,833	(65,833)	1,039,085	790,000	249,085
Other	Miscellaneous Revenue	-	2,794	-	2,794	3,381	-	3,381
Other	Gain on Fixed Asset Disposals	-	-	-	0	656	-	656
Other	Interest Income	70,000	2,417	5,833	(3,416)	27,086	70,000	(42,914)
Patient	CHW Contract Revenue	40,000	495	3,333	(2,838)	5,179	40,000	(34,821)
Other	Local Funds / Other Revenue	5,000	210	417	(207)	4,102	5,000	(898)
	<b>Total Revenue</b>	<b>\$ 10,768,464</b>	<b>\$ 978,163</b>	<b>\$ 897,372</b>	<b>80,791</b>	<b>\$ 12,277,107</b>	<b>\$ 10,768,464</b>	<b>\$ 1,508,643</b>
	<b>Expenses</b>							
Personnel	Hourly Pay	5,832,411	515,200	486,034	(29,166)	5,833,471	5,832,411	(1,060)
Personnel	Supplemental/Merit Compensation	-	-	-	0	43,500	-	(43,500)
Personnel	Provider Incentives	67,000	250	5,583	5,333	8,750	67,000	58,250
Personnel	Overtime	42,000	3,504	3,500	(4)	31,046	42,000	10,954
Personnel	Part-Time Hourly Pay	202,460	24,319	16,872	(7,447)	258,076	202,460	(55,616)
Personnel	Comp Pay Premium	-	-	-	0	11	-	(11)
Personnel	FICA Expense	470,018	40,958	39,168	(1,790)	454,329	470,018	15,689
Personnel	Texas Unemployment Tax (SUTA)	12,759	(19,589)	1,063	20,652	20,925	12,759	(8,166)
Personnel	Life Insurance Expense	14,961	1,403	1,247	(156)	17,132	14,961	(2,171)
Personnel	Long Term Disability Coverage	13,989	1,116	1,166	50	13,167	13,989	822
Personnel	Employer Paid Health Insurance	494,769	28,963	41,231	12,268	351,915	494,769	142,854
Personnel	Worker's Comp Insurance	18,437	1,410	1,536	127	10,982	18,437	7,455
Personnel	Cobra Expense	-	(366)	-	366	1,657	-	(1,657)
Personnel	Employer Sponsered Healthcare	79,016	7,018	6,585	(433)	64,883	79,016	14,133
Personnel	Pension/Retirement	138,849	20,521	11,571	(8,950)	166,038	138,849	(27,189)
Contractual	Outside Lab Contract	146,448	16,404	12,204	(4,200)	199,139	146,448	(52,691)
Contractual	Outside X-Ray Contract	18,000	1,476	1,500	24	16,236	18,000	1,764
Contractual	Misc Contract Services	237,722	23,694	19,810	(3,884)	271,735	237,722	(34,013)
Personnel	Temporary Staffing	-	-	-	0	45,952	-	(45,952)
Contractual	CHW Billing Contract Services	72,000	5,513	6,000	487	75,530	72,000	(3,530)
IGT	IGT Reimbursement	259,989	-	21,666	21,666	333,363	259,989	(73,374)
Contractual	Janitorial Contract	168,780	16,395	14,065	(2,330)	184,489	168,780	(15,709)
Contractual	Pest Control	960	80	80	(0)	961	960	(1)
Contractual	Security	43,176	2,190	3,598	1,408	24,816	43,176	18,360
Supplies	Office Supplies	82,600	13,159	6,883	(6,276)	100,333	82,600	(17,733)
Supplies	Operating Supplies	228,132	29,147	19,011	(10,136)	335,384	228,132	(107,252)
Supplies	Outside Dental Supplies	40,200	5,343	3,350	(1,993)	50,340	40,200	(10,140)
Supplies	Pharmaceutical Supplies	600,000	41,605	50,000	8,395	286,241	600,000	313,759
Supplies	Janitorial Supplies	5,400	-	450	450	4,880	5,400	520
Supplies	Printing Supplies	5,580	34	465	431	2,648	5,580	2,932
Supplies	Uniform Supplies	-	-	-	0	-	-	-
Supplies	Controlled Assets (i.e. computers)	-	3,422	-	(3,422)	25,009	-	(25,009)

**Coastal Health & Wellness**  
**Statement of Revenue and Expenses for the Period ending March 31, 2022**

Cost Category	Account Description	Annual Budget	Period Ending 03/31/22	MTD Budget	MTD Budget Variance	YTD Actual	YTD Budget	YTD Budget Variance
Other	Postage	9,000	525	750	225	6,241	9,000	2,759
Other	Telecommunications	64,500	5,350	5,375	25	66,472	64,500	(1,972)
Other	Water	372	31	31	1	366	372	6
Other	Electricity	18,000	1,251	1,500	249	15,568	18,000	2,432
Travel	Travel, Local	3,200	128	267	139	1,033	3,200	2,167
Travel	Travel, Out Of Town	-	2,281	-	(2,281)	5,515	-	(5,515)
Travel	Training, Local	30,135	2,175	2,511	336	11,732	30,135	18,403
Travel	Training, Out Of Town	-	-	-	0	5,570	-	(5,570)
Other	Rentals	39,240	6,367	3,270	(3,097)	46,086	39,240	(6,846)
Other	Leases	517,464	43,327	43,122	(205)	518,506	517,464	(1,042)
Other	Maint/Repair, Equip.	81,844	7,862	6,820	(1,042)	93,530	81,844	(11,686)
Other	Maint/Repair, Bldg.	2,400	310	200	(110)	9,991	2,400	(7,591)
Other	Maint/Repair, IT Equipment	-	-	-	0	-	-	-
Other	Insurance, Auto/Truck	108	8	9	1	98	108	11
Other	Insurance, General Liability	11,808	865	984	119	10,816	11,808	992
Other	Insurance, Bldg. Contents	18,372	1,171	1,531	360	13,919	18,372	4,453
Other	Settlements	-	-	-	0	-	-	-
Other	IT Equipment	-	-	-	0	-	-	-
Other	Operating Equipment	-	-	-	0	106,885	-	(106,885)
Other	Building Improvements	-	-	-	0	-	-	-
Other	Newspaper Ads/Advertising	23,600	134	1,967	1,832	26,342	23,600	(2,742)
Other	Subscriptions, Books, Etc.	18,623	3,394	1,552	(1,842)	18,203	18,623	420
Other	Association Dues	34,710	3,000	2,893	(108)	25,647	34,710	9,063
Other	IT Software / Licenses	259,929	32,350	21,661	(10,689)	338,323	259,929	(78,394)
Other	Prof Fees/Licenses/Inspections	1,670	-	139	139	7,823	1,670	(6,153)
Other	Professional Services	22,800	13,255	1,900	(11,355)	15,695	22,800	7,105
Other	Med/Hazard Waste Disposal	5,400	410	450	40	4,837	5,400	563
Other	Transportation	6,000	393	500	107	4,455	6,000	1,545
Other	Board Meeting Operations	350	70	29	(41)	1,155	350	(805)
Other	Service Charge - Credit Cards	7,200	808	600	(208)	10,865	7,200	(3,665)
Other	Cashier Over/Short	-	-	-	0	(5)	-	5
Bad Debt	Bad Debt Expense	296,083	37,664	24,674	(12,991)	419,511	296,083	(123,428)
Other	Miscellaneous Expense	-	600	-	(600)	3,913	-	(3,913)
	<b>Total Expenses</b>	<b>\$ 10,768,464</b>	<b>\$ 946,895</b>	<b>\$ 897,372</b>	<b>(49,523)</b>	<b>\$ 11,022,034</b>	<b>\$ 10,768,464</b>	<b>\$ (253,570)</b>
	<b>Net Change in Fund Balance</b>	<b>\$ -</b>	<b>\$ 31,268</b>	<b>\$ -</b>	<b>31,268</b>	<b>\$ 1,255,073</b>	<b>\$ -</b>	<b>\$ 1,255,073</b>

**Medical Visits**

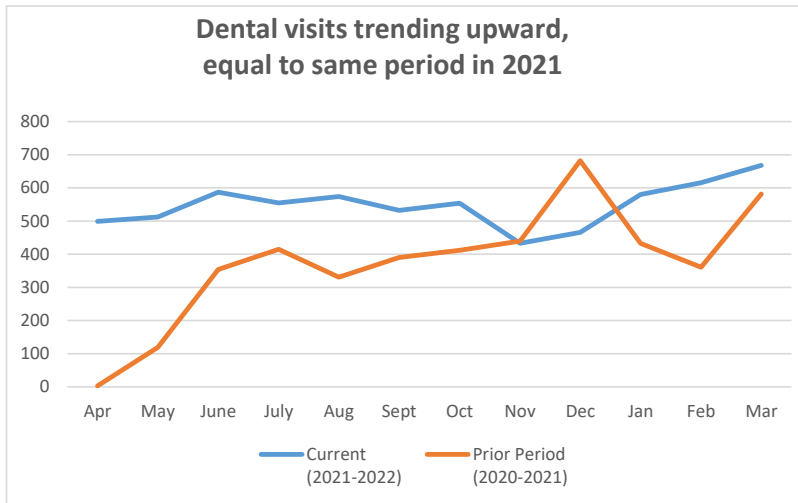
	<u>Current</u> <i>(2021-2022)</i>	<u>Prior Period</u> <i>(2020-2021)</i>
Apr	1,345	812
May	1,301	719
June	1,689	1,170
July	1,727	1,238
Aug	1,980	981
Sept	1,450	1,077
Oct	1,198	1,251
Nov	1,227	1,150
Dec	1,124	1,745
Jan	1,311	1,288
Feb	1,294	1,058
Mar	1,119	1,488
	<b>16,765</b>	<b>13,977</b>



Note -  
 Borillo out 1 week  
 Yaa out 1 day  
 Garza out 1 day  
 McDill out 1 day  
 Cashiola started 3/28/22  
 Morgan out -Maternity 2/28

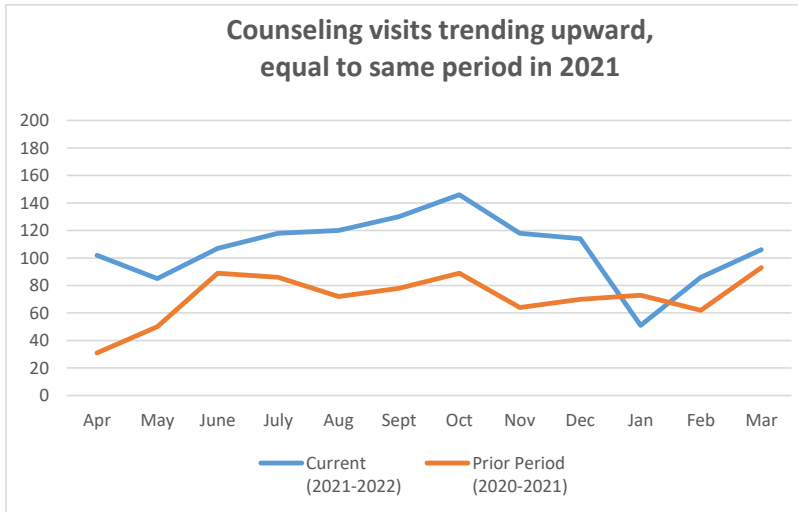
**Dental Visits**

	<u>Current</u> <i>(2021-2022)</i>	<u>Prior Period</u> <i>(2020-2021)</i>
Apr	499	3
May	512	119
June	587	354
July	555	415
Aug	574	331
Sept	532	390
Oct	554	412
Nov	433	440
Dec	466	682
Jan	580	433
Feb	616	361
Mar	668	582
	<b>6,576</b>	<b>4,522</b>



**Counseling Visits**

	<u>Current</u> <i>(2021-2022)</i>	<u>Prior Period</u> <i>(2020-2021)</i>
Apr	102	31
May	85	50
June	107	89
July	118	86
Aug	120	72
Sept	130	78
Oct	146	89
Nov	118	64
Dec	114	70
Jan	51	73
Feb	86	62
Mar	106	93
	<b>1283</b>	<b>857</b>



Note -  
 Jan. '22 thru Mar. '22  
 One Counselor

**Vists by Financial Class - Actual vs. Budget**  
**As of March 31, 2022 (Grant Year 4/1/2021 -3/31/2022)**

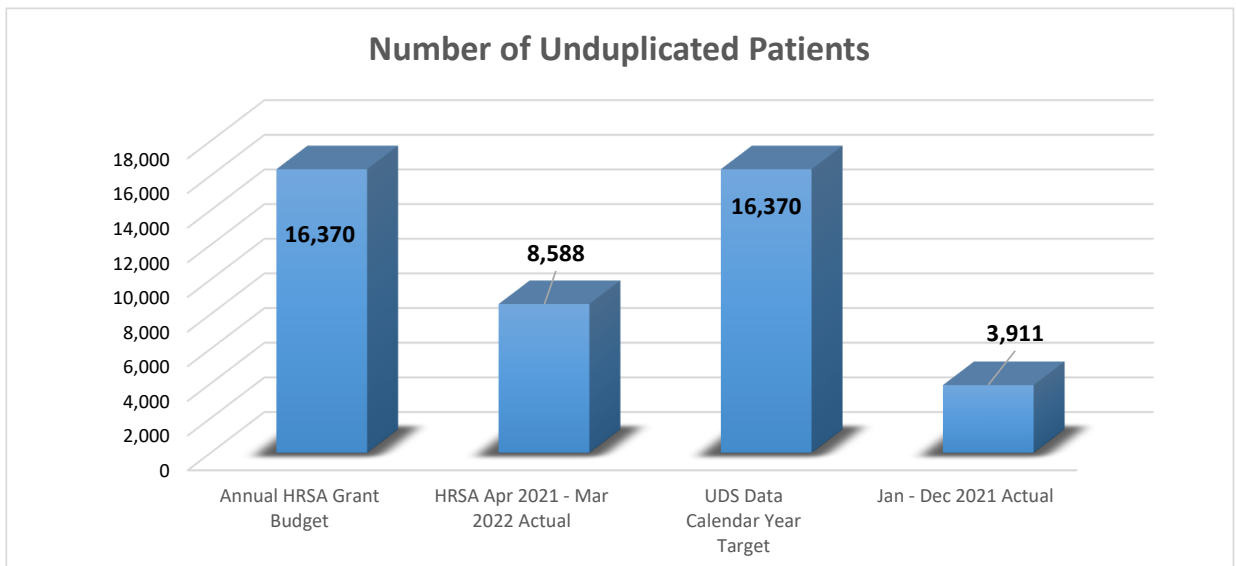
	Annual HRSA		Over/(Under)		YTD	Over/(Under)		% Over/ (Under)
	Grant Budget	MTD Actual	MTD Budget	MTD Budget		YTD Actual	YTD Budget	
Medicaid	3,147	174	262	(88)	2,158	787	1,371	174%
Medicare	2,713	79	226	(147)	1,566	678	888	131%
Other Public (Title V, Contract, Ryan White)	1,273	99	106	(7)	1,106	318	788	248%
Private Insurance	2,941	224	245	(21)	2,778	735	2,043	278%
Self Pay	24,170	1,317	2,014	(697)	15,278	6,043	9,236	153%
	<b>34,244</b>	<b>1,893</b>	<b>2,854</b>	<b>(961)</b>	<b>22,886</b>	<b>8,561</b>	<b>14,325</b>	<b>167%</b>

**Unduplicated Patients - Current vs. Prior Year**  
**UDS Data Calendar Year**  
**January through December**

	Current Year Annual Target	Jan-Mar 2021 Actual	Jan-Mar 2022 Actual	Increase/	% of Annual Target
				(Decrease) Prior Year	
Unduplicated Patients	16,370	3,303	3,911	608	24%

**Unduplicated Patients - Current vs. Prior Year**  
**HRSA Grant Year**  
**April through March**

	Annual HRSA Grant Budget	Apr 2020-Mar 2021 Actual	Apr 2021-Mar 2022 Actual	Increase/	% of Annual Target
				(Decrease) Prior Year	
Unduplicated Patients	16,370	6,918	8,588	1,670	52%





# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#11**

**Consider for Approval Quarterly Visit and Collection  
Report Including a Breakdown by Payor Source for Recent  
New Patients Submitted by Marlene Garcia**



**Coastal Health & Wellness - Quarterly Visit & Analysis Report  
for the period ending March 31, 2022**

*\*based on UDS Reporting period (January 1 to December 31) Qualified Encounters*

Total Visits by Financial Class	March 2022	March 2021	% Change	* YTD Average		% Change	* YTD Payor Mix		% Change
				2022	2021		2022	2021	
Self Pay	1,317	1,538	-14%	1,300	1,267	3%	66.3%	69.9%	-3.6%
Medicare	79	155	-49%	115	138	-17%	5.9%	7.6%	-1.7%
Medicaid	174	196	-11%	178	173	3%	9.1%	9.5%	-0.5%
Contract	62	10	520%	57	10	452%	2.9%	0.6%	2.3%
Private Insurance	224	212	6%	272	188	45%	13.9%	10.4%	3.5%
Title V	37	52	-29%	39	37	5%	2.0%	2.1%	-0.1%
<b>Total</b>	<b>1,893</b>	<b>2,163</b>	<b>-12%</b>	<b>1,961</b>	<b>1,814</b>	<b>8%</b>	<b>100%</b>	<b>100%</b>	

Department	* YTD Total Visits		% Change
	2022	2021	
Medical	3,832	3,839	0%
Dental	1,901	1,376	38%
Counseling	252	228	11%
<b>Total</b>	<b>5,985</b>	<b>5,443</b>	<b>10%</b>

Unduplicated Visits	* YTD Total Users		% Change
	2022	2021	
Medical	2,883	2,581	12%
Dental	970	673	44%
Counseling	104	86	21%
<b>Total</b>	<b>3,957</b>	<b>3,340</b>	<b>18%</b>

<b>NextGen / Crystal Reports - Summary Aging by Financial Class for the period ending March 31, 2022 (based on encounter date)</b>											<b>Days in A/R</b>	
	0-30	31-60	61-90	91-120	121-150	151-180	181-up	Total	%	Current		
										Period	Last Qtr	
Self Pay	50,778	50,361	44,115	39,747	38,239	15,806	15,443	\$254,489	21%	99	819	
Medicare	14,312	17,567	6,092	1,181	4,887	3,105	262,493	\$309,637	25%	502	161	
Medicaid	14,768	14,972	8,843	12,391	7,764	9,421	88,415	\$156,574	13%	148	151	
Contract	10,659	5,030	6,186	633	1,558	(1,472)	12,908	\$35,502	3%	48	289	
Private Insurance	40,266	32,299	31,924	27,855	14,223	13,280	313,342	\$473,189	39%	325	377	
Title V	4,766	3,598	7,547	6,595	5,204	-	78,782	\$106,493	9%	577	954	
Unapplied	(119,385)							(\$119,385)	-10%	-----	-----	
<b>Totals</b>	<b>\$16,165</b>	<b>\$123,827</b>	<b>\$104,707</b>	<b>\$88,402</b>	<b>\$71,875</b>	<b>\$40,140</b>	<b>\$771,383</b>	<b>\$1,216,500</b>	<b>100%</b>	<b>283</b>	<b>459</b>	

<b>Previous Quarter Balances</b>	<b>\$132,467</b>	<b>\$117,765</b>	<b>\$111,631</b>	<b>\$130,306</b>	<b>\$86,346</b>	<b>\$53,193</b>	<b>\$672,989</b>	<b>\$1,304,697</b>
<b>% Change</b>	-88%	5%	-6%	-32%	-17%	-25%	15%	-7%

<b>Charges &amp; Collections</b>	<b>March 2022</b>	<b>March 2021</b>	<b>% Change</b>	<b>* YTD 2022</b>	<b>YTD 2021</b>	<b>% Change</b>
Billed	\$618,688	\$645,778	-4%	\$1,940,026	\$1,606,813	21%
Adjusted	(412,935)	(462,438)	-11%	(1,344,487)	(1,159,128)	16%
Net Billed	\$205,752	\$183,340	12%	\$595,538	\$447,685	33%
Collected	172,694	\$129,537	33%	561,728	\$356,178	58%
% Net Charges collected	84%	71%	19%	94%	80%	19%

<b>Payor</b>	<b>YTD Current Period</b>				<b>YTD Prior Year</b>			
	<b>Visits</b>	<b>Payor Mix</b>	<b>Net Revenue</b>	<b>(Net Billed)</b>	<b>Visits</b>	<b>Payor Mix</b>	<b>Net Revenue</b>	<b>(Net Billed)</b>
			<b>per Visit</b>	<b>Net Revenue</b>			<b>per Visit</b>	<b>Net Revenue</b>
Self Pay	3,969	66.3%	\$58.18	\$230,932	5,098	64.5%	\$32.45	\$165,434
Medicare	348	5.8%	\$159.42	55,477	863	10.9%	\$80.54	69,503
Medicaid	549	9.2%	\$172.91	94,926	731	9.2%	\$125.26	91,563
Contract	173	2.9%	\$384.47	66,514	319	4.0%	\$96.27	30,709
Private Insurance	827	13.8%	\$158.51	131,085	772	9.8%	\$95.22	73,507
Title V	119	2.0%	\$139.53	16,604	126	1.6%	\$134.68	16,969
<b>Total</b>	<b>5,985</b>	<b>100%</b>	<b>\$99.51</b>	<b>\$595,538</b>	<b>7,909</b>	<b>100%</b>	<b>\$56.60</b>	<b>\$447,686</b>

<b>Item</b>	<b>2022</b>	<b>2021</b>
<b>Self Pay - Gross Charges</b>	\$1,155,414	\$979,559
<b>Self Pay - Collections</b>	219,829	\$158,344
<b>% Gross Self Pay Charges Collected</b>	<b>19.0%</b>	<b>16.2%</b>
<b>% Net Self Pay Charges Collected</b>	<b>95.2%</b>	<b>95.7%</b>

**Coastal Health & Wellness**  
**New Patients By Financial Class**  
**From 1/1/2022 to 03/31/2022**

<b>Summary</b>	<b>Current Period</b>		<b>Prior Period 2021</b>	
	<b>New Patients</b>	<b>Current %</b>	<b>New Patients</b>	<b>%</b>
Self Pay	494	<b>72.8%</b>	229	<b>68.2%</b>
Medicaid	58	<b>8.5%</b>	24	<b>7.1%</b>
Medicare	19	<b>2.8%</b>	13	<b>3.9%</b>
Private Insurance/Commerc.	100	<b>14.7%</b>	56	<b>16.7%</b>
Title V	3	<b>0.4%</b>	5	<b>1.5%</b>
Contracts	5	<b>0.7%</b>	9	<b>2.7%</b>
<b>Total</b>	<b>679</b>	<b>100.0%</b>	<b>336</b>	<b>100.0%</b>

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# **COASTAL HEALTH & WELLNESS**

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#12**

**Consider for Approval the Purchase of a New Payroll Software  
Submitted by Trish Bailey**

## Payroll Software

### Annual Cost

	Total	GF Cost	CHW Cost	GAAA Cost
One Time Fee	13,095.00	6,547.50	5,238.00	1,309.50
Monthly Cost	45,291.00	22,645.50	18,116.40	4,529.10

### Annual Cost Broken Out Monthly

	Total	GF Cost	CHW Cost	GAAA Cost
One Time Fee	-			
Monthly Cost	3,774.25	1,887.13	1,509.70	377.43

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**ORDER FORM**

Quote#: Q-95574  
Expires: 27 Feb, 2022  
Sales Executive: Richard Fedorczyk

Order Type: Quote  
Date: 06 Apr, 2022

**Bill To Contact:**

Bill To: COUNTY OF GALVESTON  
9850 EMMETT S LOWRY EXPY STE A  
TEXAS CITY, TX 77591-2122 USA

**Ship To Contact: Chris Davis**

Ship To: COUNTY OF GALVESTON  
9850 EMMETT S LOWRY EXPY STE A  
TEXAS CITY, TX 77591-2122 USA

Ship to Phone: 4099382221  
Ship to Mobile:  
Contact: Chris Davis  
Email: cdavis@gchd.org

Currency: USD  
Customer PO Number:  
Solution ID: 6185033  
Initial Term: 60 months  
Billing Start Date: 90 Days from Execution of Order Form

Shipping Terms: Shipping Point  
Ship Method: FedEx Ground  
Freight Term: Prepay & Add  
Renewal Term: 12 months  
Payment Terms: Net 30 Days

**Order Notes:**

This order entered into between the Customer and Kronos SaaShr, Inc. (a UKG company) is subject to the terms and conditions of the Master Agreement Reference #18221 dated March 18th, 2019 between the Lead Agency (acting as "Owner") and Kronos SaaShr, Inc. (as the "Contractor"), as amended (collectively referred to as the "US Communities Agreement #18221").

The Attachment 1 is included with this Order Form. Customer agrees that additional fees may be invoiced and owed if Customer incurs fees as outlined in <https://www.ukg.com/ukg-payroll-services-miscellaneous-pricing-schedule-August2019> ("Attachment 2").

The Professional Services Engagement Overview attached to this Order Form is a summary for the implementation services to be provided by UKG for the UKG Ready Setup Fees set forth on this Order Form.

The amount specified on this Order Form to be paid by Customer for its annual advance payment reflects Customer's minimum annual fees to be paid to UKG. Additional fees may be invoiced and owed on a monthly basis if Customer's actual usage of the Applications exceeds the minimum number of employees for which Customer is making its annual advance payment.

The fees for the Applications are invoiced 60 days prior to the Billing Start Date.

**SaaS Services**

Billing Frequency: Annual in Advance

Product Name	Quantity	PEPM	Monthly Price
UKG READY TIME	375	USD 3.54	USD 1,327.50
UKG READY ACCRUALS MANAGER	375	USD 0.59	USD 221.25



Product Name	Quantity	PEPM	Monthly Price
UKG READY SCHEDULER	100	USD 1.48	USD 148.00
UKG READY PAYROLL	375	USD 3.54	USD 1,327.50
UKG READY INTEGRATION HUB	1	USD 0.00	USD 0.00
UKG READY PAYROLL SERVICES WITH SMARTCHECK	375	USD 2.00	USD 750.00
<b>Total Price</b>			<b>USD 3,774.25</b>

**One Time Setup Fee**

Billing Frequency: Billed 100% upon signature of the order form

Item	Total Price
One Time Setup Fees	<b>USD 13,095.00</b>

**Quote Summary**

Item	Total Price
Minimum Monthly SaaS Service & Equipment Rental Fee	USD 3,774.25

Item	Total Price
Minimum Annual SaaS Service & Equipment Rental Fee	USD 45,291.00

Item	Total Price
Total One Time Fees	USD 13,095.00



## Professional Services Engagement Overview

### Purpose and Overview of Engagement

This Professional Services Engagement Overview outlines the scope of services to be provided by Kronos for the Setup Fees indicated on the applicable Order for, to COUNTY OF GALVESTON (“Customer”) related to the Core Modules, Value-add Modules, and/or Optional Services contained in the document. Our Professional Services engagements are designed to help our Customers successfully implement your Core Modules, as well as enable you to easily layer Value-add Modules and functionality over time based on your priorities, schedule, and resources.

The Ready® Professional Services engagement described herein is fixed price based and is subject to the terms and conditions governing your Ready – Software as a Service (the “Agreement”). Unless otherwise defined herein, words and expressions defined in the Agreement shall have the same meaning in this Professional Services Engagement Overview.

### Your Ready SaaS Solution

COUNTY OF GALVESTON and Kronos are deploying the following Ready modules with 3 location(s), EINS and 2 collective bargaining agreements(s).

### COUNTY OF GALVESTON and Kronos Collaboration

A successful Professional Services Engagement will require close collaboration between COUNTY OF GALVESTON and Kronos. The Kronos Professional Services team is equipped to help keep you on target for meeting project milestones and requirements, as well as to assist you in configuring and deploying the Ready solution that meets your organization’s specific requirements. Your organization’s participation and commitment to the project goals and timeline are critical to help ensure success.

The Estimated Duration stated above is an estimate based upon our experience with our customers and products. Depending upon the preparation and engagement of your organization, there may be opportunity to accelerate the completion of this engagement. However, the Estimated Duration may be exceeded based on the level of preparedness, bandwidth, and skill level of your available resources. Other examples that may extend the Estimated Duration include: separate deployments of the solution, having a unionized workforce, and policies that vary across employee groups.

### Core Functionality Deliverables

Working in close collaboration, COUNTY OF GALVESTON and Kronos will deploy the following core modules and functionality in 145 estimated days from project kick-off. Any quantified deliverables listed herein are based on services deliverables and are not to be considered system constraints.

Ready Core	Kronos Delivered Value
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<p><b>UKG Ready Time</b></p>	<p>UKG Ready Time deployment gets you started with the ability to accept punches and pay employees accurately through these core components:</p> <ul style="list-style-type: none"> <li>• Total Cost Centers</li> <li>• Profiles <ul style="list-style-type: none"> <li>• Timesheet</li> <li>• Time Off Request</li> <li>• Pay Calculations</li> <li>• Pay Prep</li> <li>• Security</li> <li>• Points</li> </ul> </li> <li>• Tables <ul style="list-style-type: none"> <li>• Rate</li> <li>• Holiday</li> </ul> </li> <li>• Manager Levels</li> <li>• Employee Perspective Scorecards</li> <li>• Workflows <ul style="list-style-type: none"> <li>• Time Off Requests</li> <li>• Timesheet Change Requests</li> </ul> </li> <li>• Schedules <ul style="list-style-type: none"> <li>• Daily Rules</li> <li>• Work Schedule Profiles</li> </ul> </li> <li>• Pay Periods</li> <li>• Counters</li> <li>• Time Off Categories</li> <li>• Reports <ul style="list-style-type: none"> <li>• 61 commonly used pre-configured reports are included in the implementation</li> <li>• Kronos will configure up to 5 additional custom reports using the standard functionality in the software</li> </ul> </li> <li>• Timekeeping Admin Training</li> </ul>
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<p><b>UKG Ready Accruals Manager</b></p>	<p>UKG Ready Accruals Manager adds comprehensive accrual administration to UKG Ready Time by automatically enforcing your time off policies through:</p> <ul style="list-style-type: none"> <li>• Consistent enforcement of policy</li> <li>• Configurable calculation methods &amp; grants</li> <li>• Time-Off routing &amp; approval workflow (requires UKG Ready Time)</li> <li>• Time-Off requests at data collection devices</li> <li>• Automatic updates to schedule &amp; timecard (requires UKG Ready Time)</li> <li>• Visibility to projected balances</li> <li>• Automatic balance reduction (requires UKG Ready Time or UKG Ready Payroll)</li> <li>• View time-off calendars for groups</li> <li>• Mobile access</li> <li>• One-Time data load using customer-supplied data for current year in a standard Kronos-supplied format</li> <li>• Configure accruals profiles and assign to employees</li> </ul> <p><b>Please note</b> that UKG Ready Accruals Manager requires UKG Ready Time.</p>
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<p><b>UKG Ready Payroll</b></p>	<p>UKG Ready Payroll deployment gets you started with the end-to-end payroll process with the ability to calculate gross-to-net, pay employees, make adjustments and export data needed for tax filing (if using a provider other than UKG Ready Payroll Services) through:</p> <ul style="list-style-type: none"> <li>• Pay Period Profiles</li> <li>• Up to two Parallel Payroll Tests</li> <li>• Company Tax Setup (Jurisdictions)</li> <li>• Custom Exports/Reports</li> <li>• Company Deduction Types</li> <li>• Company Earning Types</li> <li>• Configure Default Banks</li> <li>• Workers Comp Types</li> <li>• Payroll History up to 4 Quarter of Current Year</li> <li>• All Payroll Configurations Include: <ul style="list-style-type: none"> <li>• Standard Dashboard Widgets</li> <li>• Global Payroll Settings</li> <li>• Standard Notifications</li> <li>• GL Set Up</li> <li>• In-house manual check printing</li> <li>• Employee Imports</li> </ul> </li> <li>• Vendor Payments (ACH/Check)</li> <li>• Payroll Administrative Training</li> </ul> <p><b>Please note:</b> If UKG Ready Payroll Services module has been purchased, see UKG Ready Payroll Services deliverables in this document. If UKG Ready Payroll Services module has not been purchased, Kronos will configure tax filing options for one of the following vendors – BSI, ADP, Ceridian.</p>
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<p><b>UKG Ready Payroll Services</b></p>	<p>UKG Ready Payroll Services deployment prepares you to manage post payroll calculation functions utilizing the services as indicated in the Payroll Processing Addendum through:</p> <ul style="list-style-type: none"> <li>• Election of services</li> <li>• Confirmation of Funding method</li> <li>• Testing of Funding bank account</li> <li>• Tax Account ID, Frequency &amp; Rate*</li> <li>• Balancing Current Year Payroll Tax Payments</li> <li>• Collection of Power of Attorney forms for all jurisdictions</li> <li>• Delivery policy configuration</li> <li>• Shipping account authorization and configuration</li> <li>• Confirmation Multi-state new hire registration (if applicable)</li> <li>• Master Vendor maintenance</li> <li>• Payroll Processing Notifications</li> <li>• Tax Code configuration verification reporting</li> <li>• UKG Ready Payroll Services New administrator training</li> </ul> <p><i>*Services can only be provided for tax accounts with valid Tax ID provided</i></p> <p><b>Please note:</b> It is the responsibility of the customer to provide all requested information including year-to-date payroll and tax payment information, valid tax</p>
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	account ID's for all active tax jurisdictions and requested Power-of-attorney forms.
<b>UKG Ready Scheduler</b>	<p>UKG Ready Scheduler provides the automated tools and high-quality information to create accurate schedules aligning staffing requirements with budget and business demand through:</p> <ul style="list-style-type: none"> <li>• Schedule build based on budget &amp; demand</li> <li>• Fill w/best-fit employee preferences &amp; skills</li> <li>• Drag-n-Drop scheduling tools</li> <li>• Configurable color-coded scheduling views</li> <li>• Budgeting constraint visibility</li> <li>• Configurable routing &amp; approval workflow</li> <li>• Tools for determining schedule effectiveness</li> <li>• True rate cost of schedule*</li> </ul> <p>*Scheduler function requires UKG Ready Time</p>

### Value-Add Functionality Deliverables

Once your core functionality is deployed, Kronos will work in close collaboration with COUNTY OF GALVESTON to deploy the following Value-Add modules and/or functionality over time in short, agile deployments aligned with your priorities, schedule, and resources:

Value-Add	Kronos Delivered Value
<b>UKG Ready Integration Hub</b>	<p>UKG Ready Integration Hub enables data to flow between Ready and 3<sup>rd</sup> party applications and/or vendors. If the 3<sup>rd</sup> party application and/or vendor does not accept the standard Ready formatting and/or methods for automated delivery, a formatted file will be delivered instead. The customer is responsible for providing import files to Kronos in the standard Ready format and utilizing the standard Ready delivery method. Kronos will deliver a standard bundle of up to 5 interfaces as part of this project. Each direction (to/from) any 3<sup>rd</sup> party system and Kronos is considered a separate interface. Interfaces will be accomplished via standard file Exchange. Customer will work with Kronos and 3<sup>rd</sup> party vendors to facilitate design and testing. The Method of the file exchange will be determined by UKG Ready Professional Services Delivery Team. Kronos will provide standard Import/Export files using UKG Ready Integration Hub. Customer will work with the 3<sup>rd</sup> parties and Kronos to provide the data in the Kronos format for imports. Kronos will create a report from standard Ready fields in the 3<sup>rd</sup> party format to send to the 3<sup>rd</sup> party system. The types of interfaces/integrations that can be supplied under this project include:</p> <ul style="list-style-type: none"> <li>• UKG Ready Time Interface bundle using customer-supplied data in standard file formats <ul style="list-style-type: none"> <li>• UKG Ready Accruals Interface bundle using customer-supplied</li> </ul> </li> <li>• UKG Ready Scheduler Interface bundle using customer-supplied data in standard file formats <ul style="list-style-type: none"> <li>• Employee Availability Import from 3<sup>rd</sup> party system</li> <li>• Schedule detail export</li> </ul> </li> <li>• UKG Ready HR Interface bundle using customer-supplied data in standard</li> </ul>

	<p>file formats</p> <ul style="list-style-type: none"> <li>• Benefit enrollment exports</li> <li>• Employee deduction election imports</li> <li>• Employee demographic exports</li> </ul> <p>• UKG Ready Payroll Interface bundle using customer-supplied data in standard file formats</p> <ul style="list-style-type: none"> <li>• ACH payroll employee direct deposit file exports</li> <li>• ACH payroll payment for vendors (e.g. 401k, HSA, garnishments, etc.)</li> <li>• Payroll employee withholding amount exports</li> <li>• Pension enrollment export (e.g. 401k)</li> <li>• Pension census export (e.g. 401k)</li> <li>• New hire reporting export</li> <li>• Positive pay export</li> <li>• Payroll journal export to G/L, 1 acct structure</li> <li>• Tax payment &amp; filing Interface</li> </ul> <p>Kronos will use commercially reasonable effort to ensure all integrations/interfaces provide for the vendors below are designed in a manner which they can successfully pass data contained in standard Ready data fields to said 3<sup>rd</sup> party vendor and/or can accept data from said 3<sup>rd</sup> party vendor into Ready standard data fields. Below are some examples of interfaces which are typically part of the Integration Hub. Vendors and integration types may vary by customer.</p> <ul style="list-style-type: none"> <li>• John Hancock Retirement Planning Service</li> <li>• Blue Cross Blue Shield of Texas</li> <li>• HSA Bank</li> <li>• Discovery Benefits</li> <li>• Bankers Fidelity</li> <li>• The Standard</li> </ul> <p><b>Please note:</b> Non-standard, multi-directional, or API based integrations/interfaces are not included in the scope of this project. Custom Reports that cannot be delivered through the standard software functionality are also not included. If such integrations or reports are required, a separate quote will be provided after all requirements and specifications have been received.</p>

**Administrator and Super User Training**

Included in each Customer’s software subscription, Kronos will provide the following training:

Ready Core Training	Kronos Delivered Value
<p><b>Administrator and Super User Training</b></p>	<p>Each Customer will have access to:</p> <ul style="list-style-type: none"> <li>• Learning Center, Ready’s learning management system and training delivery platform, for each user. Learning experiences found within include, but not limited to: <ul style="list-style-type: none"> <li>• Interactive self-paced, on-demand modules</li> <li>• “How to” videos and snippets</li> </ul> </li> </ul>



	<ul style="list-style-type: none"> <li>• Printable job aids</li> <li>• Recommended learning plan(s) aligned to each user’s roles within Ready</li> <li>• Online, public instructor-led class(es)</li> <li>• “Train the Trainer” enablement and materials <ul style="list-style-type: none"> <li>• Editable templates and tools to be leveraged by the administrators to deliver manager and employee training</li> </ul> </li> <li>• Manager and employee-focused job aids for common tasks within Ready</li> </ul>
<b>Change Management and User Adoption Training</b>	<p>Each Customer will have access to:</p> <ul style="list-style-type: none"> <li>• Change management training for the project team on building a change management plan for Customer’s organization</li> <li>• Change management toolkit that includes pre-populated templates and supporting resources to be leveraged to deliver Customer’s change management plan</li> </ul>

## Assumptions & Notes

Kronos has used the following assumptions and dependencies in preparing this Professional Services Engagement Overview:

- All services will be delivered remotely, unless otherwise stated in the Order Form or this Professional Services Engagement Overview.
  - Please note that In the event that Customer requests Kronos to travel to Customer's location during the implementation, Customer agrees to pay any travel expenses, such as airfare, lodging, meals and local transportation, incurred by Kronos.
  - Such expenses shall be subject to the then-current standard Kronos travel and expense policies, which Kronos will provide to Customer upon request.
  - Kronos shall bill Customer for such travel expenses and payment thereof shall be due net thirty (30) days from date of invoice.
- The project kick-off date will be determined based on complexity of the implementation and resource availability, and may occur up to 30 days after a Ready Order Form is executed by the Customer.
- The customer agrees to accept specific responsibilities as part of this project including:
  - Completing all required, Kronos supplied templates used to complete the Discovery process
  - Physical installation and/or mounting of all time clocks associated with this project.
    - Kronos will complete the configuration of up to 5 clocks and will provide training to the Customer’s staff to replicate additional configurations
    - The Customer will configure any additional clocks unless otherwise agreed upon by both parties
  - Configuring the Customer’s network to allow inbound/outbound communications to and from the clocks, based on specifications provided by Kronos
  - Providing all required tax and wage history information (when applicable) for the configuration of Tax Filing services
  - Providing all required data imports in the approved Kronos format
  - Providing all required specifications for any exports from Kronos to a 3rd party system
- Prior to the start of the configuration build, the Customer will confirm (in writing) the business and technical requirements of the project as part of the Ready Professional Services Discovery process.

- Kronos will communicate with Customer's Project Manager, the appointed Point of Contact for Customer on this project. He/she will be responsible for all communications and project management among all Customer parties (staff, vendors, consultants) and for the escalation and resolution of any issues for Customer.
- Customer is responsible for all hardware, software, and services provided by other consultants or third party vendors that may also be involved with the project.
- Kronos will not be responsible for troubleshooting the Customer's environment such as their operating system, hardware resources, database schema, or any applications and/or hardware not provided by Kronos.
- Change Orders are subject to scope review and may impact the project timeline or cost. If additional work beyond the initial scope of this Professional Services Engagement Overview is required as a result of a Change Order, the Customer may be charged.
- During the testing phase, the customer will be responsible for leading testing and providing documentation of testing results back to the Kronos implementation team.

## Project Delays

Should the need arise to place a project on hold due to issues not controlled by Kronos, Kronos will collaborate with a client to ensure appropriate project hold/delay procedures are executed. Secondly, Kronos reserves the right to execute project hold/delay procedures as a result of, but not limited to (1) a client not attending or cancelling more than three scheduled meetings or (2) if the client has been unable to contribute required deliverables to milestones to close the project or (3) has become non-responsive after 10 business days. Please note that any project hold and/or delays, whether approved or otherwise, will not impact the Fees and Payment Terms of the Agreement unless otherwise agreed to by both parties.

When resuming the project Kronos will follow normal assignment and staffing procedures. This may result in a new or modified project team based on resource availability at the time of re-engagement.

## Change Orders

Requests for change to this Professional Services Engagement Overview or the project it covers must be submitted to your Kronos Sales Executive and UKG Ready Consultant in writing.

Any of the following items will be considered Out of Scope and require a Change Order:

- Material changes in the Scope or effort (i.e. # of deployments or EIN's, request of onsite assistance, etc.)
- Material changes in the number or type of Deliverables to meet the defined scope of effort (i.e. additional integrations, profiles, etc.)
- Changes to the project resource requirements
- Changes to scheduled dates after acceptance of the Project Plan

Kronos will estimate the time and fixed cost needed to implement the change and the impact it may have on the delivery of project covered under this Professional Services Engagement Overview. Kronos will perform the requested work once the Change Order has been completed and signed by the Customer.

## Completion Criteria

The project covered under this Professional Services Engagement Overview will be considered complete when any one of the following completion criteria is met. Once one of these is met, no further work will be completed. If additional work is required, a Change Order or new Professional Services Engagement Overview must be generated.

Completion Criteria:

- The Customer has approved in writing
- The system has been used to generate, retain, or export data that is used to produce a live pay statement for an active employee
- More than twelve (12) months has passed since the date of signature of the Ready Order Form

The Customer may provide approval in writing via email or an alternative agreed upon method.

# UKG Ready Payroll Services Addendum

This Payroll Services Addendum, and all included exhibits, schedules, attachments or other addenda (the “**Addendum**”) is made part of the Kronos Workforce Ready Software-as-a-Service Agreement or the UKG Ready Software-as-a-Service Agreement (the “**Agreement**”) and governs the provision of the UKG Ready Payroll Services (the “**Payroll Services**”) by Kronos SaaS, Inc., a UKG Company (“**UKG**”) to the Customer defined below and, if applicable, any of Customer’s Covered Entities (“**Customer**”).

In rendering the Payroll Services, UKG will use the UKG Ready software-as-a-service platform (the “**UKG Ready Platform**”). Attachment 1 sets forth the applicable entities, including Customer itself (collectively the “**Covered Entities**”), along with each of their EINs and other information, if these Covered Entities are receiving Payroll Services from UKG. Customer is responsible for ensuring that all Covered Entities are bound by and comply with this Addendum. Covered Entities may be added or removed from Attachment 1, by Customer completing and signing the appropriate change form provided by UKG. Capitalized terms not defined within this Addendum are defined in the Agreement.

## General Terms and Conditions

### Article 1. Payroll Services

1.1 Subject to all of the terms and conditions of the Agreement and this Addendum, UKG shall provide Customer with the Payroll Services during the Term to the extent set forth on an Order Form. The Payroll Services are provided only in the United States (which includes Puerto Rico, U.S. Virgin Islands, Guam and Marianna) and shall only be provided with respect to Customer’s payroll obligations for United States-based employees of Customer and those Covered Entities included in Attachment 1. The following provisions shall apply to the extent the Payroll Service listed below is selected by Customer as indicated in writing on the Order Form or as part of the UKG Payroll Services (KPS) Services Election Form to be completed by the parties during implementation:

#### 1.1.1 Payroll Services.

- a. Customer agrees that the Payroll Services shall be provided in accordance with the pricing set forth on the Order Form and the responsibilities of Customer and UKG set forth throughout this Agreement. UKG’s standard fees for certain miscellaneous services, such as W2/1099 printing, fees for tax accounts with an “applied for” status, ACH returns, off-cycle payrolls, split wrap (delivery of checks to multiple locations, stop payment fees (for Customers purchasing UKG SmartCheck) and preparing/filing of amended returns, can be found in the Payroll Services Pricing Exhibit located at <https://www.UKG.com/UKG-payroll-services-miscellaneous-pricing-schedule-August2019> (“**Payroll Services Pricing Exhibit**”). Customer will submit payroll and tax monies via one of two funding methods (“**Funding Method**”): (i) Automated Clearing House (**ACH**) funding, or (ii) draw down wire (“**Draw Down Wire**”) funding. Customer is only eligible for ACH funding if approved by UKG. Customer will be required to utilize the Draw Down Wire Funding Method if Customer is not approved for ACH funding.
- b. Customer will submit the payroll information to UKG in the format and including the information specified by UKG from time to time. Submission is expected to occur two (2) Business Days prior to Customer’s scheduled check date. “**Business Day**” means any day of the



year other than (a) a Saturday, Sunday or (b) on day on which banking institutions in any jurisdiction of the banking institution of any applicable Client Entity are closed or (c) a statutory or civic holiday in the United States. The deadline for Customer's submission of payroll is determined by the applicable Funding Method. On the date Customer's payroll is submitted, if the Funding Method is ACH, then the deadline for submission is 3:00 p.m. Eastern Time; if the Funding Method is Draw Down Wire, then the deadline for submission is 1:30 p.m. Eastern Time on the scheduled processing date, and, provided Customer's payroll is submitted timely, UKG will initiate a Draw Down Wire not later than 2:30 p.m. Eastern Time, to be settled not later than 4:30 p.m. Eastern Time on the date the payroll is finalized. If payroll is submitted after the applicable submission deadline, payroll will be finalized the following day. Submission by Customer of payroll less than two (2) Business Days prior to Customer's scheduled check data may result in the requirement to utilize an alternative Funding Method, delayed processing of banking, and other transaction or additional fees may be imposed, including, without limitation, by the applicable financial institutions and/or as set forth in the Payroll Services Pricing Exhibit. Customer shall indemnify, defend and hold UKG harmless from and against claims, losses or any other liabilities arising from or relating to Customer's late submission of transactions. If Customer has elected for UKG to provide direct deposit services, UKG will provide on behalf of Customer electronic money movement and related banking services via its ACH credit facilities at one or more financial institutions in support of the direct deposit of funds into Customer's employee and third-party vendor accounts. If payroll is submitted less than two (2) Business Days prior to Customer's scheduled check date (by the deadline times set forth above), funds may not be available in employee accounts at the opening of the banking day.

- c. Customer will notify UKG if Customer is providing instructions to UKG to process payroll on behalf of a third party. Without limitation, UKG is not responsible for Customer errors, wage and hour violations, wage assignment errors, employment discrimination, or other employment policies that may violate any applicable laws, codes, legislative acts, regulations, ordinances, rules, rules of court, orders or similar, as well as any National Automated Clearing House Association ("**NACHA**") operating rules ("**Applicable Law(s)**"). Customer agrees to be bound by the then-current NACHA operating rules. "**ACH**" means the network used for electronic payments and money transfers, Automated Clearing House. UKG reserves the right to audit Customer's compliance with the NACHA operating rules and the terms of this Agreement.
- d. Customer authorizes UKG to prepare and file payroll tax returns and cause the issuance of payments on related tax obligations for Covered Entities and tax jurisdictions. Customer authorizes UKG via the applicable Funding Method and in accordance with the terms of this Agreement to: (a) debit Customer's or as applicable a Client Entity's demand deposit account or accounts at an applicable financial institution to be used in connection with the Payroll Services (the "**Customer Account**") for all payroll tax obligations and credit a like amount to an account designated by UKG, which may be held in trust by a third party trustee (the "**Payroll Services Accounts**"), which funds shall be held in such Payroll Services Accounts until such time as such funds are due to the appropriate taxing authorities; (b) remit such funds by electronic funds transfer ("**EFT**") or via check to the appropriate taxing authority; and (c) prepare, sign, and file with the appropriate taxing authorities all returns for such taxes on an ongoing basis.
- e. UKG shall not be responsible for the payment of any Customer taxes or the filing of any Customer tax returns prior to the check date of the payroll under this Addendum, nor is UKG

responsible in relation to any taxes which UKG did not collect from Customer (including without limitation, failure to collect due to non-sufficient funds or other funding issues (“NSF”)). Customer should confirm the appropriate federal tax deposits are being paid on behalf of the applicable Client Entity by enrolling in the Electronic Federal Tax Payment System (please visit: <https://www.eftps.gov/eftps>).

- f. Customer shall maintain and provide UKG accurate tax identification numbers, filing frequencies, filing jurisdictions, tax rates, tax types, and employee tax forms to enable UKG to properly complete all applicable tax returns and payments. If, as an accommodation to Customer and without implying any obligation, UKG files a tax return containing “Applied For” status, then Customer agrees and acknowledges that it releases UKG from any and all liability that may arise in connection with such accommodation (including without limitation, penalties and interest).

#### 1.1.2 Additional Payroll Services.

- a. **UKG SmartCheck** – means the Payroll Services with the issuing of employee payroll checks from UKG Payroll Services Accounts. This service is only available if UKG Payroll Services with UKG SmartCheck appears on Customer’s Order Form. If Customer uses UKG Payroll Services Accounts for distribution of funds via check, any stale dated checks will be voided and the funds returned to the Customer. The Customer is responsible for complying with all applicable unclaimed property reporting requirements. Customers electing this service must ensure that checks are not distributed to employees for payment prior to the Check Date. All checks issued on a Payroll Services Account must be printed by UKG for distribution.
- b. **Check Printing and Fulfillment Services.** - means the printing of employee payroll checks, direct deposit advices and third party checks drawn on Customer’s bank account, to distribute same to locations/destinations via FedEx or UPS either Next Day Air or Ground, all as directed by Customer. For delivery purposes, Customer shall obtain and provide either a FedEx or UPS account number for use by UKG for shipping of documents and/or checks. Unless Customer has purchased UKG SmartCheck, employee payroll checks will be drawn on the Customer’s bank account.
- c. **ACH Child Support & Third Party Vendor Processing** - means the impoundment and remittance of funds for third party payments, such as child support, via ACH to the applicable state child support agencies or other applicable payees.
- d. **W2 Filing** - means the electronic filing of employee W2 forms with all applicable Federal and State tax jurisdictions. Specific timelines are established for Customer to promptly complete its year end requirements in order for UKG to fulfill its obligations in a timely manner. This service includes filing of employee W2 information with the SSA, as well as all 50 State and local tax agencies, **excluding** Puerto Rico, U.S. Virgin Islands, Guam and Marianna.
- e. **1099 Filing**- means the electronic filing of contractor forms with the IRS only. Specific timelines are established for Customer to complete its year end requirements in order for UKG to timely fulfill its obligations.
- f. **New Hire Reporting** – means the electronic filing of new hire reports based on applicable state reporting requirements. Customer will be required to register for Multiple State reporting if required to file in more than one State and to maintain the registration as may be required. UKG will only report new hires to States that will accept electronic filing.

1.1.3 **UKG Ready Platform.** Customer acknowledges and agrees that the Payroll Services may only be used in conjunction with the UKG Ready Platform or any other product expressly authorized by UKG, and hereby authorizes and directs UKG to interface the UKG Ready Platform with such product for the purpose of providing the Payroll Services. Furthermore, Customer hereby grants UKG consent to administrative access rights to the UKG Ready Platform for the purpose of fulfilling UKG' obligations under this Addendum.

## Article 2. Fees; Billing

Payroll Services shall be considered part of the Services for purposes of Fees and Billing under the Agreement. The Fees set forth in the Payroll Services Pricing Exhibit are subject to change after the Initial Term (as defined in the Agreement) upon thirty (30) days written notice from UKG to Customer.

## Article 3. Customer Content

3.1.1 UKG will not be responsible for storing copies of Customer Content when UKG no longer requires such information to provide Payroll Services to Customer, and Customer shall be responsible for retaining its own tax and payroll records according to the schedules established by governmental authorities for Customer. Customer will reimburse UKG for the costs of producing any information in UKG' possession or control relating to Customer's business or employees that UKG produces in response to a Customer request or court order. Unless otherwise required by Applicable Law, upon termination of this Addendum, UKG may dispose of Customer Content in accordance with UKG' data retention policy in effect from time to time. In the case of termination of one but not all Payroll Services, UKG may dispose of Customer Content not related to the remaining Payroll Services, unless otherwise required by Applicable Law, in accordance with UKG' data retention policy in effect from time to time.

3.1.2 Notwithstanding anything to the contrary in this Addendum, each party's use and disclosure of tax return information pursuant to or in connection with this Addendum shall be conducted in compliance with and subject to the limitations of Section 7216 of the Internal Revenue Code of 1986, as amended.

## Article 4. Customer Covenants

4.1 Customer shall, and shall cause any Covered Entities to, accurately and timely complete all forms and documents requested by UKG from time to time in order for UKG to provide the applicable Payroll Services, including, without limitation, all necessary credential and related action required by UKG to integrate Payroll Services with the UKG Ready Platform as described in Section 1.1.3. Payroll Services will not commence until Customer (or the applicable Client Entity) provides to UKG all of the forms and documents requested by UKG, and any agreed timelines shall be automatically adjusted accordingly with no liability to UKG attributable to any failure or delay by Customer with respect to the foregoing. In addition to forms and documents requested at the commencement of Payroll Services, Customer shall, and shall cause any Client Entity to, timely provide to UKG other forms and documents requested by UKG necessary to deliver the Payroll Services during the Term.

4.2 To the extent required in connection with any Payroll Services, Customer hereby appoints UKG as its attorney-in-fact with authority to receive, sign and file state and local tax returns and to cause the issuance of payments in connection therewith. UKG shall also be authorized as Customer's designee to receive

correspondence and transcripts with respect to federal, state or local tax returns designated by Customer. Customer shall cooperate in executing and filing any and all forms or other documents required by a taxing authority to appoint UKG as its reporting agent, or otherwise to make effective the appointments and designations described in the preceding two sentences, including but not limited to IRS Form 8655. Such appointment and authorization shall commence as of the Effective Date and remain in effect through subsequent tax periods until the earlier of the termination date of this Addendum and the date UKG is notified by Customer of revocation of the authorization, and Customer shall cooperate in executing and filing any and all forms and documents required by any taxing authority to do so. Customer hereby revokes all earlier powers of attorney and tax authorizations on file with the respective taxing authorities with respect to the same tax matters and tax period covered by this Addendum and shall execute and file all documents necessary to effectuate such revocation. UKG reserves the right to remove itself as attorney-in-fact or reporting agent in its sole discretion, upon at least ten (10) Business Days' written notice to Customer. An authorization does not relieve the Customer of responsibility (or from liability for failing) to ensure that all tax returns are filed timely and that all FTDs and FTPs are made timely.

4.3 Customer shall at all times maintain balances sufficient to fund its payroll and related obligations. Customer acknowledges that if Customer fails to properly fund the Customer Account or otherwise prevents the timely receipt of funds, then Customer's payroll and related services will be delayed and/or suspended at UKG' sole discretion and UKG may immediately terminate this Addendum upon notice to Customer.

#### 4.4 Banking and Funding Covenants

4.4.1 Funding Payroll Obligations All monies caused to be transferred by UKG on behalf of Customer will be funded via the applicable Funding Method initiated by UKG to Customer's account in accordance with this Section 4.4.1. Customer agrees to execute with its financial institution any agreements necessary to allow UKG to cause the initiation of the Funding Method to and from Customer's bank account in accordance with the operating rules governing such transactions. Customer acknowledges that if Customer fails to properly fund its account or otherwise prevents the successful completion of the Funding Method, then Customer's payroll and related services will be delayed or suspended. Customer shall indemnify, defend and hold UKG harmless from and against claims, losses or any other liabilities arising from or relating to Customer's failure to properly fund its account or its other prevention of UKG from effecting the Funding Method. For quarter end and year end reconciliation purposes, UKG will utilize standard ACH services to reconcile Customer tax remittances and liability variances. UKG shall use commercially reasonable efforts to notify Customer not less than five (5) Business Days prior to UKG causing a debit of the Customer's bank account for the amount required to satisfy such variances.

4.4.2 Funding Payroll Obligations via Direct Wire In the sole discretion and upon the written authorization of UKG, a direct wire (Customer initiates Customer's own wire transfer to a Payroll Services Account) may be utilized as a Funding Method on an exception-only basis. Exceptions may arise for various reasons, including (a) due to funds not being available in the Customer Account at the time that other Funding Method(s) are initiated, or (b) proper authorization was not granted to UKG to cause the collection of funds via the other Funding Method(s), or (c) Customer is approved for ACH Funding but fails to submit payroll timely or submits a payroll that exceeds the approved ACH limit. Any exception processing, by its very nature, runs the risk of delayed funding to third parties such as employees, tax agencies, and child support or garnishment recipients. Penalties, interest and other charges related to Customer's failure in

meeting timelines, sufficient debit limit authorization or funding adequacy will be the liability of the Customer, and Customer shall indemnify, defend and hold UKG harmless from and against claims, losses or any other liabilities arising from or relating to exception processing, except to the extent arising from UKG' gross negligence or willful misconduct.

4.4.3 Payment Scheduling Collection for payroll direct deposits, vendor or garnishment payments, and payroll tax liabilities will be made as needed, based on the Payroll Services elected, and will depend on the payroll schedules that Customer utilizes to pay its employees and/or contractors. The draft for the collection will be via the Funding Method request mechanism. Payments made to employees on Customer's behalf are dependent on the check date associated with those payments. Payments made to agencies and garnishment recipients are based on payroll check date(s). These payments are disbursed to the receiving parties utilizing the ACH network (where possible) in compliance with the NACHA guidelines and regulations or by check drawn on Customer's account. For customers funding via Draw Down Request or by Direct Wire on an exception basis as noted above, all payments made on Customer's behalf via ACH money movement will be caused to be released by UKG only after UKG receives confirmation of collection of amounts drafted from Customer's account. Therefore, even if amounts are due, UKG will not cause the release of the ACH payments unless confirmation of receipt of funds has been received by UKG.

4.4.4 Collection Account Testing. Customer hereby authorizes UKG to perform collection account testing as described in this Section 4.4.4. The Customer's collection account(s) used for funding and the drafting process is required to be thoroughly tested to avoid funding failures. Any such failure may result in agency penalties, delayed employee direct deposit payments, etc. This funding account test will ensure the originating bank identifiers for the applicable Payroll Services Accounts have successfully been added to Customer's debit filters. To test the collection account(s), UKG will cause the initiation of test transactions in the amount of \$1.00 each. The transactions will be initiated from every unique Payroll Services Account provided to Customer during implementation. Testing of the funding account(s) shall occur two (2) to four (4) weeks prior to the first payroll check date to insure a successful processing of the first payroll. Customer must notify UKG in writing not less than two (2) weeks prior to the effective date of a change in Customer bank account(s).

4.4.5 Customer agrees to: (a) complete and execute any necessary forms with Customer's Receiving Depository Financial Institution ("RDFI") providing authorization that will require Customer's RDFI to honor all drawdown requests and standard ACH transfers received from UKG and/or its agent, (b) promptly notify UKG of any discrepancies between transaction amounts and the amounts expected by Customer; and (3) notify UKG immediately if any circumstances arise that could impact the collection of sufficient funds from Customer's account.

4.5 The ACH Reversal function allows Customer to submit a request to cancel a previously submitted ACH transaction. This function is utilized primarily to reverse direct deposits from employee accounts where the original direct deposits were in error. UKG' and/or the applicable financial institution's then-standard fees for ACH reversals will apply. Customer may initiate an ACH reversal request by submitting a voiding transaction in the UKG Ready Platform. Once the ACH reversal request is submitted to the financial institution, a credit is generated to the Customer Account and a request to debit the funds is sent to the employee's bank account. If the debit request for the ACH reversal to the employee's account is denied (for example, due to NSF), UKG will debit the total amount of the NSF and any banking fees/charges associated with the NSF from Customer's authorized funding account. UKG will not reattempt collection

of any NSF's from employee accounts. Customer shall be solely responsible for obtaining reimbursement from its employees for the NSF amounts and any related fees/charges, whether the employees are active or terminated.

4.6 If Customer defaults under this Addendum, including, without limitation, by Customer's failure to have in the Customer Account sufficient, readily available funds to cover the payroll, payroll tax, and other disbursements, or if a financial institution rescinds a Customer credit to one or more Payroll Services Accounts, then UKG may, in its sole discretion: (a) terminate this Addendum with written notice, and/or (b) exercise any and all reasonable actions necessary and appropriate to limit the loss to, or liability of, UKG or its Affiliates. "**Affiliate**" means any entity that, directly or indirectly, controls, is controlled by or is under common control with such entity (but only for so long as such control exists), where "Control" (in this context) means the possession, directly or indirectly, of the power to direct or cause the direction of the management and operating policies of the entity in respect of which the determination is being made through the ownership of the majority of its voting or equity securities, contract, voting trust or otherwise.

4.7 Customer shall promptly review all reports and documents provided or made accessible by UKG or through the Payroll Services and shall inform UKG of any inaccuracies not later than five (5) Business Days after receipt or notification of availability.

4.8 Customer is responsible for ensuring that the use of the Payroll Services to effect payments to or for its authorized users does not contravene any Applicable Law, including, without limitation, the Bank Secrecy Act, as amended by the USA PATRIOT Act, and any and all anti-money laundering laws and regulations now existing or promulgated after the date of this Addendum. Any use of the Payroll Services in contravention of the foregoing sentence will be a material breach of this Addendum by Customer.

4.9 **Credentialing.** Customer understands and acknowledges that the implementation and ongoing provision of Payroll Services are conditioned upon Customer and each Client Entity passing (and continuing to pass) a credentialing process that UKG may deem necessary in connection with the provision of Payroll Services. UKG shall have the right to (i) refuse to provide the Payroll Services for Customer with respect to any Client Entity that does not pass UKG' initial credentialing process (ii) terminate the Payroll Services for Customer with respect to any Client Entity that does not continue to pass UKG' ongoing credentialing process and (iii) terminate this Addendum, and the Agreement, if Customer does not continue to pass UKG' ongoing credentialing process. Customer shall be solely responsible for complying with all Applicable Laws, including, without limitation, ensuring the Covered Entities and payees of Customer on whose behalf UKG is causing the delivery of payments are not sanctioned parties under the regulations promulgated by the Office of Foreign Assets Control (OFAC). Customer shall also be responsible for (i) performing, and ensuring passage of, know your customer due diligence on all Covered Entities prior to requesting UKG to provide any Payroll Services to such Covered Entities, and (ii) providing UKG with the information as may be reasonably requested by UKG, for each Client Entity prior to UKG providing Payroll Services to such Client Entity. Customer agrees to provide UKG with an accurate and complete listing of Covered Entities receiving any Payroll Services and to inform UKG promptly of any changes in any Client Entity information previously provided to UKG.

## Article 5. Warranty

5.1 UKG warrants that the Payroll Services will be provided in a professional and workmanlike manner. TO THE EXTENT PERMITTED UNDER APPLICABLE LAW, UKG DISCLAIMS ALL OTHER WARRANTIES RELATED TO THE SERVICES, EITHER EXPRESS OR IMPLIED, INCLUDING THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE. If Customer informs UKG in writing that there is a material deficiency in the Payroll Services which is making this warranty untrue, UKG will use its commercially reasonable efforts to correct the non-conforming Payroll Service at no additional charge, which, subject to Section 5.2 below, will be Customer's sole and exclusive remedy. Customer shall provide UKG with reasonable information and assistance to enable UKG to reproduce or verify the non-conforming aspect of the Payroll Services.

5.2 If UKG makes an error or omission in the preparation or filing of Customer payroll tax returns, or breaches its obligation to cause the issuance of timely payments of payroll tax and/or business tax obligations, which error or failure results in an assessment of penalty or interest by any taxing authority against Customer, then UKG's sole responsibility, and Customer's only remedy, will be for UKG to correct the error or omission under this Addendum and pay such penalty and interest (notwithstanding the dollar limitation on UKG liability contained in this Addendum). As a condition precedent to UKG's obligation to pay such penalty and interest, Customer will provide UKG timely notice of any such assessment, and UKG shall be responsible for all defense actions for any such tax claim for penalties and interest, provided however, Customer shall be consulted during all stages of any defense. Timely notice to UKG shall mean within ten (10) Business Days of receipt of the initial notice of assessment by Customer delivered to UKG in accordance with the notice provisions described in the Agreement. Customer's failure to provide timely notice to UKG shall release UKG from any and all obligations to indemnify Customer for the payment of penalty and interest hereunder and/or for effecting such payments on Customer's behalf, but only to the extent such delay caused such or additional penalty, interest or other losses. At all times as between UKG and Customer, Customer shall be exclusively responsible for any tax assessed but without limiting UKG's remittance obligations included in the Payroll Services.

## Article 6. Independent Contractor and Subcontractors

6.1 UKG is acting as an independent contractor of Customer under this Addendum. Without limiting the foregoing, UKG shall serve as a limited agent for Customer solely for purposes of any required agency for filings and/or payments with the appropriate taxing authorities. UKG is not otherwise an agent of Customer, nor are the Parties in a partnership, joint venture, or other similar relationship, and this Addendum shall not be construed to authorize either Party to act as agent for the other except as expressly provided herein.

6.2 Customer acknowledges that in providing the Payroll Services, UKG may use any agent, subcontractor or third party and may delegate its duties to such agent or third party to perform such tasks and functions as UKG chooses, including without limitation, third party software to perform Payroll Services and to store Customer Data, data security, and other services provided by third parties.

6.3 Customer acknowledges that UKG is not rendering legal, tax, or accounting advice in connection with the Payroll Services, including without limitation Customer's obligation to withhold in a particular jurisdiction, nor is UKG a fiduciary of Customer.

6.4 No third-party beneficiaries exist under this Addendum.

## Article 7. Effects of Termination

7.1 If this Addendum is terminated or expires in accordance with its terms or otherwise terminated pursuant to a termination of the Agreement, for any reason, all rights and obligations of the parties hereunder shall terminate upon such expiration or termination, provided that all Customer indemnification obligations in Sections 1.1.1(b), 4.4.1, 4.4.2 and Article 8, as well as Sections 2 (with respect to amounts owed through the effective date of termination), 3, and 5 through and including 9 shall survive any expiration or termination of this Agreement.

## Article 8. Indemnification

8.1 Customer will, at its own expense, indemnify, defend and hold UKG and its third-party technology suppliers and each of their respective directors, officers, employees, agents and independent contractors (the "**UKG Indemnified Parties**") harmless from and against any and all notices, charges, claims, proceedings, actions, causes of action and suits, brought by a third party ("**Claims**") arising from or related to: (a) any expense or financial obligation which is the responsibility of Customer hereunder; (b) any allegation that the Customer Content or its collection or use by Customer violates Applicable Laws; (c) the performance by UKG of any of Customer's payroll tax duties (including, without limitation, acting as Customer's attorney-in-fact or reporting agent), except to the extent attributable to the gross negligence or willful neglect of UKG; (d) the breach of any agreement, covenant, duty or obligation of Customer arising hereunder, (e) UKG filing an "APPLIED FOR" return as an accommodation to Customer, or (f) Customer directing UKG to make a payment to any person or entity where issuance or receipt of such payment violates Applicable Law. UKG will cooperate fully (at Customer's expense) in the defense, settlement or compromise of any such action. Customer will indemnify and hold harmless the UKG Indemnified Parties against any liabilities, obligations, costs or expenses (including, without limitation, reasonable attorneys' fees) incurred in connection with any such Claims, including, without limitation, any such amounts awarded to a third party as a result of such Claims by a court of applicable jurisdiction or as a result of Customer's settlement of such a Claim. Customer's indemnity under this Section 8.1 shall survive the termination of this Addendum.

8.2 UKG and/or the applicable UKG Indemnified Party will provide written notice to Customer promptly after receiving notice of any third-party Claim for which it seeks indemnification under this Addendum. If the defense of such Claim is materially prejudiced by a delay in providing such notice, Customer will be relieved from providing such indemnity to the extent of the delay's impact on the defense. Customer shall immediately take control of the defense and investigation of such Claim and shall employ counsel reasonably acceptable to the applicable UKG Indemnified Party to handle and defend the same, at the Customer's sole cost and expense. Customer will have sole control of the defense of any indemnified Claim and all negotiations for its settlement or compromise, provided that (i) Customer will not enter into any settlement which imposes any obligations or restrictions on the applicable UKG Indemnified Parties without the prior written consent of applicable UKG Indemnified Parties; and (ii) if Customer has refused or failed to assume control of the defense or to diligently pursue the defense thereafter, UKG and/or applicable UKG Indemnified Parties may assume sole control of the defense and all negotiation for any settlement or compromise of the applicable Claim in such a manner as UKG and/or applicable UKG Indemnified Parties may deem appropriate, at the applicable UKG Indemnified Party's sole expense, until such time as Customer does assume such control. The applicable UKG Indemnified Parties will cooperate



fully (at Customer's request and expense) with Customer in the defense, settlement or compromise of any such action. The applicable UKG Indemnified Parties may retain their own counsel at its own expense, subject to Customer's rights above.

## Article 9. Extent and Limitations of Liability

9.1 THE TOTAL AGGREGATE LIABILITY (REGARDLESS OF THE NUMBER OF CLAIMS) OF UKG TO CUSTOMER OR TO ANY THIRD PARTY IN CONNECTION WITH THIS ADDENDUM AND THE PROVISION OF PAYROLL SERVICES WILL BE LIMITED TO ACTUAL AND DIRECT DAMAGES PROVEN BY CUSTOMER, SUCH DAMAGES NOT TO EXCEED AN AMOUNT EQUAL TO THE TOTAL NET PAYMENTS RECEIVED BY UKG FOR THE PAYROLL SERVICES IN THE TWELVE (12) MONTH PERIOD IMMEDIATELY PRECEDING THE DATE ON WHICH THE FIRST CLAIM GIVING RISE TO LIABILITY ARISES.

9.2 EXCEPT AS EXPRESSLY STATED IN THIS ADDENDUM, NEITHER PARTY WILL BE LIABLE FOR ANY INDIRECT, CONSEQUENTIAL, INCIDENTAL, SPECIAL, OR PUNITIVE DAMAGES. NEITHER PARTY WILL BE LIABLE FOR THE COST OF ACQUIRING SUBSTITUTE OR REPLACEMENT SERVICES. NEITHER PARTY WILL BE LIABLE FOR ANY LOST OR IMPUTED PROFITS OR REVENUES OR LOST DATA RESULTING FROM DELAYS, NONDELIVERIES, MISDELIVERIES OR SERVICES INTERRUPTION, HOWEVER CAUSED, ARISING FROM OR RELATED TO THE PAYROLL SERVICES OR THIS ADDENDUM. THESE LIMITATIONS APPLY FOR ANY REASON, REGARDLESS OF ANY LEGAL THEORY AND FOR WHATEVER REASON LIABILITY IS ASSERTED. THIS IS TRUE EVEN IF UKG AND CUSTOMER HAVE TOLD EACH OTHER THAT EITHER ONE IS CONCERNED ABOUT A PARTICULAR TYPE OF LIABILITY.

Effective Date: \_\_\_\_\_

### Customer:

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

### UKG:

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_





# Ready HCM for Local Government



## Primary Contact

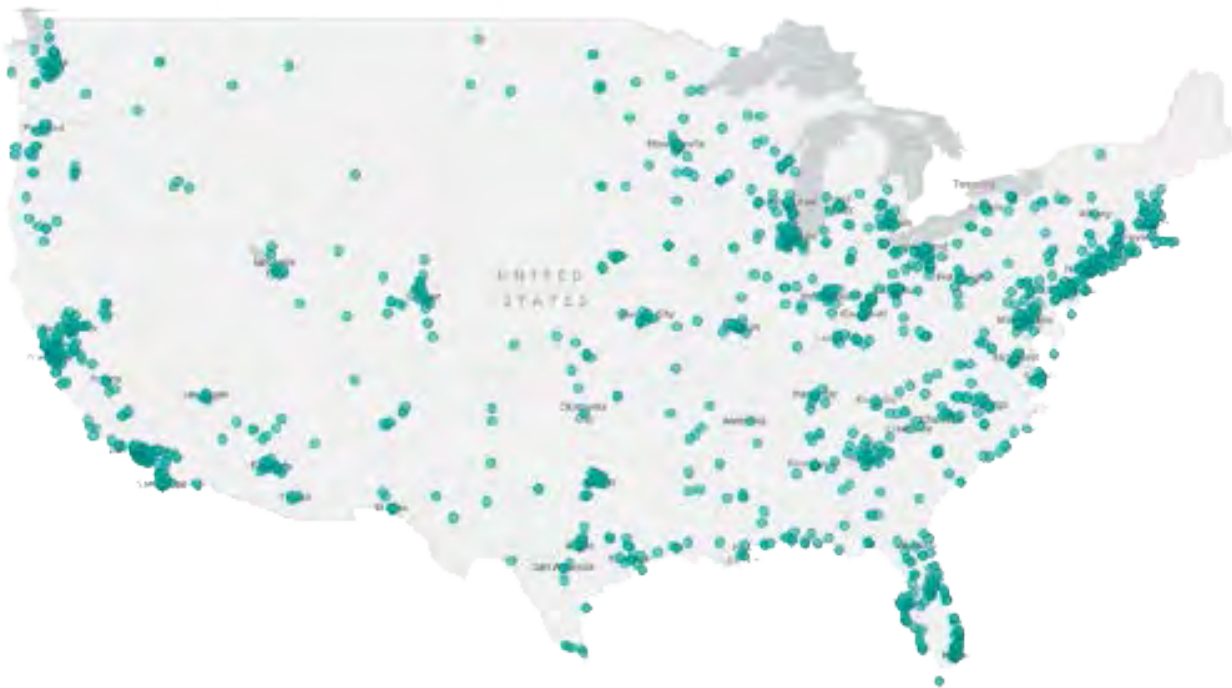
Chris Fedorczyk  
Local Government Sales Executive  
(p) 817-600-3670



# For Local Government

Under the scrutiny of the public eye, public sector organizations operate with tight budgets and complex rules that are designed to ensure that quality services are provided at a minimal cost to the taxpayers. Leading these organizations are fiscally responsible individuals who have sworn an oath to uphold the rules that govern these public organizations and to provide leadership for the employees who are expected to operate within them. As a public sector organization there is no room for error, particularly in the realm of Human Capital Management. You require an experienced and trusted vendor like UKG who has proven public sector workforce management and human capital management experience.

## Where is UKG in Government?



**50**  
States

**1,600+**  
State/Local  
Government Agencies

**~3,500,000**  
Government Users

\*Data according to 2020 Fortune 1000 list



# Differentiators



## Our Company

- At UKG, 'People First' means all people. We believe the most creative and innovative business results occur when people's differences are celebrated in the workplace.
- 40+ year track record of delivering innovation and enabling customer success
- More than ~\$3.2 billion in annual revenue in FY21 with a research & development expenditure of \$500 million
- Public Sector Focus and Industry Knowledge: 1600+ state/local customers in USA, including over 1000 police, fire, corrections and public safety customers.
- Widely recognized for culture of innovation and engagement, including Fortune 100 Best Companies to Work For and Workplace for Diversity, Glassdoor Best Places to Work, Fortune Best Technology Company to Work and multiple other "Top Places to Work" awards



## Our Offering

- Organically Built Unified human capital and workforce management solution in the Google Cloud
- Rapid provisioning and deployment
- Agile development allows for published roadmap and semi-annual feature updates
- Robust cloud integration platform
- Responsive mobile-first design delivers anywhere, any device access
- Leaders can gain additional context for further analysis to help achieve a more equitable workplace, where people are rewarded fairly based on their contribution and efforts.
- Dedicated named support contacts for all things related to UKG. Customer support is US Based support team members.



**LEADER**  
Gartner Magic Quadrant for Cloud HCM Suites, 2020



**LEADER**  
The Forrester Wave™ for Cloud Human Capital Management Suites, Q2 2020

**LEADER**  
Nucleus HCM Value Matrix, 2020  
Nucleus WFM Value Matrix, 2020



# Why Should YOU Select Us?



## WHY UKG?

- Scalable Technology and Customer Service Model
- Proven Government Expertise for more than 25 years
- Dedicated “Government” Implementation Team and Industry Experts (many have come from Government)...Delivers best practices, guidance, support and more.
- Powerful Data Driven Metrics, Dashboards and over 150 standard reports
- Vertical Benchmarking
- Unlimited Training
- Seamless Integration with 3<sup>rd</sup> Party Systems
- We can meet all of your requirements...Like Automate Comp Time and Related Process. Also, allocating time and tracking time to different funding sources.
- Can add additional Modules at anytime (LMS, Performance, Hiring, Compensation and more)
- Local Government References available.



## WHY UKG?

- Customer Retention is 96%
- Our Services processed \$23 Billion in annual payroll for our customers
- 4+ million active users in UKG Ready
- In addition to our exemplary customer service...Our customers ALSO can access in-application live chat to access our support team in under 10 seconds, right within the flow of work, and automatically get directed to the most relevant expert based on where they are in the system. 85% of support requests made through live chat are resolved within 15 minutes.
- Hyper care – Program designed for system administrators to drive better knowledge and ensure strong user adoption
- readyConnect panel that provides guided checklists and recommendations to help you streamline your work and make sure you feel informed and prepared
- UKG Community and Collaboration



Galveston County Health District  
 9850 Emmett F. Lowry Expressway  
 Texas City TX 77591  
 409-938-2221  
 Chris Davis  
 cdavis@gchd.org

Proposal Date:  
 March 31, 2022

Workforce Go! HCM Business Solution  
 Superior Sage Intacct Integration

	# of EINs	
		3
	# Employees	375
Full Service Processing Payroll Suite (Per Employee Per Month - Retail \$5.00)	375 Employees	\$4.50
Time & Labor Management (PEPM - Retail \$4.00)	375 Employees	\$3.60
Advanced Scheduler (PEPM - Retail \$2.50)	100 Employees	\$2.25
<b>Integration Advanced Options</b>		<b>Annual</b>
Traditional		Included
Superior		\$1,590.00
<b>Workforce Go! Tax Management Services</b>		<b>Annual</b>
Included: Federal/FUTA & Quarterly Returns, State Withholding and Unemployment, New Hire Reporting (Full Service PR Only)		
Total Number of State Jurisdictions:	3	\$763.20
Total Number of Local Jurisdictions:	0	\$0.00

SUMMARY		
Per Employee Per Month Core Modules (PEPM)	\$10.35	PEPM is based on 375 employees not employees per module
Additional Annual Items(Annual)	\$0.00	
Integration Advanced Options(Annual)	\$1,590.00	
Tax Management Services(Annual)	\$763.20	
<b>Total Annual</b>		

<b>Workforce Go! Suite Total Deployment Services</b>	<b>\$19,000.00</b>
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**Proposal Summary**

Retail Annual Subscription	\$45,853.20
Discount for the Initial Annual Subscription	\$4,350.00
<b>Total Annual Subscription</b>	<b>\$41,503.20</b>
<b>Total Deployment Fee Estimate</b>	<b>\$19,000.00</b>
Deployment Fee Deposit	\$9,500.00
<b>Total Project Cost</b>	<b>\$60,503.20</b>

<b>Total Due at Signing</b>	<b>\$51,003.20</b>
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**Additional Monthly Options:**

Spenra allows employees to load up to \$100 of the money they've earned in the current pay period to their card for a \$1 transaction fee, paid by the employee.  
 Wage Garnishment/Vendor Liability(Per Payment) \$2.40

**Additional Annual Options:**

Additional State Jurisdiction (Per Year)	\$270.00
Additional Local Jurisdictions (Per Year)	\$134.40
Employer W-3 (Per Form/Per State)	\$56.20
Employee W-2's / 1099 (Per Form)	\$2.20
Employee W-2's / 1099 (Per Form) - Full Service Option	\$5.60
Employer 1094-C (Per Form/Per EIN)	\$56.20
Employee 1095-C (Per Form)	\$2.20
Employee 1095-C (Per Form) - Full Service Option	\$5.60



**Payment Terms:**

\* Consulting: The Workforce Go! Deployment Summary includes the detailed consulting services of the quoted Workforce Go! HCM solutions and services above. Fees for this implementation project are based on the above quoted hourly rate and using a Standard Workforce Go! HCM Deployment Methodology excluding any travel or other expenses. Services for custom implementation items such as API integration and custom reporting are quoted separately. Consulting fees will be invoiced per the Workforce Go! Deployment Summary.

\*\* Subscription: Subscription and service fees, excluding additional per usage options listed above, are due one year in advance with the signed proposal and will be renewed annually per the Workforce Management Service Agreement. The subscription effective date will be the first business day of the month following the date of this signed proposal. The current annual amount for the above is \$41,503.20 and will be credited to all future solution and service invoices which will include additional Subscription and Service Fees for Payroll Suite, Additional Monthly Items, Additional Annual Items and additional active employees based on the minimum employee count stated above.

An Auto-ACH will be processed on the due date noted on your invoices, if you have made arrangements for Workforce Go! to complete payment for any and all invoice fees. If you have not made arrangements for Workforce Go to ACH your fees, payment will be due by the due date via the payment options on the the invoice.

\*\*\* Above Payroll Suite and Additional Annual Options do not include shipping. Actual shipping fees, with a minimum of \$25.00, will be drafted via ACH with the appropriate payroll process as incurred.

**Accepted:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**This Proposal expires on June 29, 2022**





## Standard Deployment Summary

Galveston County Health District  
 9850 Emmett F. Lowry Expressway  
 Texas City, TX 77591  
 Chris Davis  
 409-938-2221  
 cdavis@gchd.org

Client Details	
Employee Count	375
Number of EINs	3
ERP Integration/Interface Option	Sage Intacct Integration
Total Estimated Hours for this project	190

Project Overview		Estimated Hours	17
<b>Project Milestones</b>		<b>Data Imports Utilizing Standard Workforce Go! HCM Excel Templates</b>	
Planning		Employee Import	Single Import
Discovery \ Design		Employee Earnings	Single Import
System Configuration \ Build		Employee Tax Filing Status/Exemptions	Single Import
Test \ Verify System Readiness		Employee Deductions	Single Import
Deploy & Support		Employee Direct Deposit	Single Import
Project Commencement		Current Year Pay History	Single Import
<b>Workforce Go! HCM Security Profiles</b>		Employee Benefit Plan Detail	Single Import
Company Admin		Employee Dependents	Single Import
Department Manager			
Employee			
Timekeeper			
HR Manager			
Payroll Admin			
Entity Setup			

Workforce Go! HCM Payroll Module		Estimated Hours	69
<b>Payroll Process</b>		<b>Earnings Codes</b>	
Calculations As You Go		Earnings Code - Bonus	
Payroll Prep Checklist and Quick Links		Earnings Code - Bereavement	
Correction Delta Process for Easy Recalculation of Payroll Edits		Earnings Code - Commission	
Direct Deposits		Earnings Code - Double Time	
Gross to Net		Earnings Code - Flat Amount	
Pay Stub Printing/Distribution		Earnings Code - Group Term Life	
Payroll Alerts		Earnings Code - Holiday	
Payroll Batches by Pay Frequency		Earnings Code - Jury Duty	
Real-time Payroll Processing		Earnings Code - Overtime	
Reconciliation of Pay Statement		Earnings Code - PTO	
Multiple EIN Payroll Processing		Earnings Code - Regular	
Garnishment Deduction Wizard		Earnings Code - Reimbursement (Non-Taxable)	
<b>Payroll Reporting</b>		Earnings Code - Retro Pay	
Standard Reports		Earnings Code - Salary	
New Hire Reporting	Full Service Payroll Only		
<b>Payroll Setup</b>		Earnings Code - Sick	
Geospatial Tax Identification		Earnings Code - Bonus Supplemental Tax	
Multi-EIN Support		Earnings Code - Vacation	
Payroll Prep	1 Profile Included	<b>Deduction Codes</b>	
<b>General Ledger/Year End</b>		Deductions - 401K	
Automated Reciprocity Tax Withholding		Deductions - Roth	
General Ledger Processing		Deductions - Basic Life	
Year-End Processing		Deductions - Bankruptcy	
<b>Payroll Services</b>		Deductions - Child Support	
Check Printing/Distribution		Deductions - Child Support _2	
Employee Direct Deposit		Deductions - Dental Pre Tax	
Tax Filing/Payments		Deductions - Dental Post Tax	
Garnishment Disbursement	Full Service Only	Deductions - Federal Levy	
<b>Benefits Administration</b>		Deductions - Federal Student Loan	
Workers' Compensation		Deductions - FSA Dependent Care	
<b>Platform and Security</b>		Deductions - FSA Medical	
Profile-Based Security		Deductions - Garnishment 1	
Unlimited Users with Security		Deductions - Garnishment 2	
Unlimited Data Storage		Deductions - Long-term Disability	
<b>Taxes</b>		Deductions - Medical Pre Tax	
Taxes - Federal Income Tax		Deductions - Medical Post Tax	
Taxes - Federal Unemployment Tax		Deductions - Miscellaneous Deductions	
Taxes - FICA		Deductions - Parking Post - Tax	
Taxes - Medicare		Deductions - Parking Pre - Tax	
Taxes - Additional Medicare		Deductions - Short-term Disability	
Taxes - State Taxes	3	Deductions - Transit Post-Tax	



## Standard Deployment Summary

Galveston County Health District  
 9850 Emmett F. Lowry Expressway  
 Texas City, TX 77591  
 Chris Davis  
 409-938-2221  
 cdavis@gchd.org

Client Details	
Employee Count	375
Number of EINs	3
ERP Integration/Interface Option	Sage Intacct Integration
Total Estimated Hours for this project	190

Taxes - Local Taxes	0	Deductions - Transit Pre-Tax	
<b>Workforce Go! Tax Services Setup</b>		Deductions - Vision Pre Tax	
IRS Setup		Deductions - Vision Post Tax	
State Setup	3	<b>Certified Payroll</b>	<b>Not Included</b>
Local Jurisdiction	0	Estimated Hours	0

### Workforce Go! HCM Time & Labor

Estimated Hours 64

Time & Labor Module		64 Estimated Hours	
<b>Labor Management</b>		<b>Notifications (alerts, reminders, etc.)</b>	
Employee & Manager Self-Service		Email	2 Notifications
Timesheet Approval Workflow	1 Standard Workflow	<b>Time Counters</b>	
Mass Edit Capabilities		Time Counters - All Counter	
Import/Export Utility		Time Counters - Bereavement	
Exception Handling		Time Counters - Double Time	
Employee Self-Service Time Off Request & Manager Approval Workflow		Time Counters - Holiday	
<b>Accruals</b>		Time Counters - Jury Duty	
Tracking of Eligibility, Tenure, Hours Worked		Time Counters - Overtime	
<b>Scheduling</b>		Time Counters - PTO	
Daily, Weekly, or Configurable Recurring Patterns		Time Counters - Regular Earnings	
Visibility into Employee Timesheet		Time Counters - Salary Earnings	
Assign Employees to Schedules or Schedules to Employees		Time Counters - Sick	
View Schedule, Location, Department, Job, etc.		Time Counters - Vacation	
<b>Pay Rules</b>		<b>Time -Off Codes</b>	
Pay Calculation Profiles	1 Non-Exempt & 1 Exempt	Time Off - All Counter	
<b>Reports</b>		Time Off - Bereavement	
Standard Reports		Time Off - Double Time	
Custom/Ad Hoc Reporting		Time Off - Holiday	
Data Visualization and Dashboarding Capabilities		Time Off - Jury Duty	
<b>Security</b>		Time Off - PTO	
Permanent, Detailed Audit Trail		Time Off - Sick	
IP Address and/or Punch Restriction		Time Off - Vacation	
Application Manager/User Access Profiles		<b>Accruals Module</b>	
Virtual Code Authentication		Paid Time Off Accruals	1 Profile & 2 Accrual Plans

### Workforce Go! Advanced Scheduler Module

Estimated Hours 20

Schedule Management	
Define shifts and schedules	Call list
Define schedule rules and constraints	Employee preferences
Schedule pattern templates	Open shift management
Schedule groups	Employee Self Service
Open shift visibility	- Request coverage
Automatic shift assignment	- Shift swap
Drag and drop schedule fill	- Request open shift
Schedule change alerts and notifications	Timesheet sync
Staff management drag and drop shift transfer	

### Workforce Go! HCM Training

Training is included only for the modules listed in the proposal

<b>Workforce Go! HCM Employee Maintenance Training</b>	<b>Workforce Go! HCM Time &amp; Labor Training</b>
New Hire	Workforce Go! HCM Time & Labor Overview - Logging In
Rehire	Employee Experience - Logging/Submitting Timesheets
Terminations	Manager Experience - Approving Timesheets
Managing Cost Center Assignments	Admin Experience - Finalizing Timesheets
Manager Assignments	Pay Prep Process
Managing Base Compensation Administration	Calculate Payroll
Mass Edit	Process Records
Managing Groups	Review Results
Managing Passwords/Unlock	Lock Timesheets
Managing Security Profiles	Time-Off Overview



## Standard Deployment Summary

Galveston County Health District  
 9850 Emmett F. Lowry Expressway  
 Texas City, TX 77591  
 Chris Davis  
 409-938-2221  
 cdavis@gchd.org

Client Details	
Employee Count	375
Number of EINs	3
ERP Integration/Interface Option	Sage Intacct Integration
<b>Total Estimated Hours for this project</b>	<b>190</b>

<b>Workforce Go! HCM Payroll Training</b>	Time-Off Requests
Child Support Setup	Time-Off Approvals
Vendor Setup	Time-Off Changes
Deductions	Time-Off Adjustment
Earnings	<b>Workforce Go! HCM People</b>
<b>Payroll Process</b>	Onboarding
Initiate Payroll	Offboarding
Create Pay Statements	Benefits Administration
Review Reports	HR Resources Overview
Submit Payroll	Benefits Enrollment
General Ledger Overview	Performance Management Overview

Workforce Go! HCM Additional Feature Deployment Options	
Estimated Hours	4
<b>Workforce Go! HCM Rate Tables</b>	<b>4 Estimated Hours</b>
Multipliers/Special rates + 2 Standard Rate Tables	
Effective dating	

Sage Intacct Traditional Integration	
Estimated Hours	Included
<b>Workforce Go! HCM Cost Center Sync from Sage Intacct Dimensions</b>	
One-to-One Sage Intacct dimension(s) to Workforce Go! HCM cost center(s)	
All available values for defined dimension(s) in Sage Intacct will be synced	
All values must originate in Sage Intacct	
Sync is one way from Sage Intacct to Workforce Go! HCM	
<b>General Ledger Posting from Workforce Go! HCM to Sage Intacct</b>	
Automatically combining General Ledger Summary and Payroll Funding Workforce Go! HCM reports. (This allows the corresponding cash portion of the general ledger entry that posts in Sage Intacct to match what will actually hit the corresponding bank account.)	
Workforce Go! HCM building blocks of general ledger transaction:	
a. Workforce Go! HCM = earning\deduction\tax codes will define the General Ledger account value	
b. Workforce Go! HCM Cost Center(s) = Sage Intacct Dimension(s) values	
Basic General Ledger cost allocation to breakout payroll costs by Dimension(s) (Configurable in Workforce Go! HCM Company Settings\Global Setup\Payroll Tab - Distribution section)	
<b>Advanced General Ledger Posting from Workforce Go! HCM to Sage Intacct</b>	
Includes up to five (5) General Ledger overrides setup in Workforce Go! HCM	
Includes up to five (5) Custom Field(s)/Calculations in Workforce Go! HCM General Ledger Summary reports	
Provides advanced General Ledger summary process allowing summarization by any combination	
<b>Employee Sync from Workforce Go HCM to Sage Intacct</b>	
1. Employee name	
2. Employee default values for cost centers if applicable	
3. Title	
4. Employee base compensation rate	
5. Status (Active vs. Inactive)	
<b>Project Assumptions</b>	
1. Up to eight (8) single level Workforce Go! HCM cost center(s) included	
3. No accommodation for Sage Intacct Dimension(s) restrictions or Sage Intacct Dimension(s) interactions	
4. No integration with Sage Intacct Time and Expense	
5. No accommodation for Sage Intacct Project/Task sync from/to Workforce Go! HCM	
6. No accommodation for Certified payroll	
7. No parent/child relationship for Sage Intacct Dimension(s)/Workforce Go! HCM Cost Center(s)	
9. One company Employer Identification Number (EIN)	
10. Single entry/batch for each payroll process finalized	
11. No accommodation for statistical/non-financial posting	
12. Workforce Go! HCM Cost Center fields that are reserved for Integration:	
a. Name	
b. Abbrev	
c. Description	
d. External ID	
e. Payroll Code	
<b>Sage Intacct Superior Integration</b>	
<b>Estimated Hours</b>	<b>16</b>



## Standard Deployment Summary

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 Chris Davis  
 409-938-2221  
 cdavis@gchd.org

Client Details	
Employee Count	375
Number of EINs	3
ERP Integration/Interface Option	Sage Intacct Integration
Total Estimated Hours for this project	190

Includes all Sage Intacct Traditional Integration Features & Assumptions Unless Otherwise Noted
Accommodates multiple Employer Identification Numbers (EIN)
Accommodates integration with Sage Intacct Projects/Tasks
Accommodates multi-level Workforce Go! HCM cost centers for Projects and Tasks
Accommodates sync from Workforce Go! HCM Timesheet to Sage Intacct Timesheets
<b>Assumptions:</b>
Workforce Go! HCM multi-level Cost Center(s) include up to three (3) levels for Project/Task
Up to three (3) company Employer Identification Numbers (EIN) (additional can be added)
Single entry/batch per Employer Identification Number (EIN)
No logic accommodation for Sage Intacct certified projects or worksite designations
No accommodation for Sage Intacct additional fields or custom fields for Workforce Go! HCM Cost Center(s)

Workforce Go! HCM Additional Configuration
<b>Includes the following:</b>
hours added for additional eins and pay frequencies
additional hours added for salary timesheet set up for allocations not pay and additional accrual policies comp time/OT timerules set up

Scope Assumptions
<b>SFTP - Required Information</b>
A SFTP site will be utilized to assist with the Client onboarding process to share data and confidential files between the project teams. The Project Manager will provide the Client staff with access to the SFTP site and a tutorial on the use of the tool. The required basic information will include the following: Assumptions <ul style="list-style-type: none"> <li>Client will provide and enter all information timely that will be required to perform configuration</li> <li>Default Earning Codes and Deduction Codes will be used for implementation</li> </ul>
<b>Accounting Interface</b>
Client will provide the necessary information to establish an interface with the Client accounting system. This information will need to be setup prior to processing payroll in order to provide information back to the accounting system from Workforce Go! HCM. <ul style="list-style-type: none"> <li>GL Accounts for posting expenses, liabilities, and cash transactions</li> </ul> Assumptions <ul style="list-style-type: none"> <li>The GL for the accounting system will be defined prior to payroll processing</li> <li>Client will maintain all data in the accounting system and Workforce Go! HCM once initial integration is setup</li> <li>Client will ensure the values in both systems are accurate</li> <li>Client will immediately communicate changes to the GL that could impact the interface</li> <li>Live Payroll will not be processed until integration is completed and tested with accounting system</li> </ul>
<b>System Configuration</b>
Assumptions <ul style="list-style-type: none"> <li>Client will provide proper information up front before configuration begins</li> <li>Configuration will only occur one time and major changes to configuration will not be required during the implementation without a signed Change Order</li> <li>New companies or EINs will not be added during the implementation (if additional EINs are required additional fees will be charged) without a signed Change Order</li> <li>Only standard reports will be deployed as part of this implementation</li> <li>The number of employees will match signed proposal</li> <li>Importing current year active employee data is included for the number of employees listed in the proposal.</li> <li>Importing current year inactive/terminated employees is for W2 purposes only</li> <li>Payroll history will be imported for current quarter tax filing and current year W2 purposes only</li> </ul>
<b>Reports</b>
Throughout the system Client will have access to many standard reports. Client will also have access to create unlimited custom reports. Assumptions <ul style="list-style-type: none"> <li>Only standard reports and default report settings are included in this implementation</li> <li>All reports are generated by the standard built in reporting tool</li> </ul>
<b>Payroll Processing</b>
Assumptions <ul style="list-style-type: none"> <li>Client will verify that pay rates and deductions are correct for each employee</li> <li>Client will verify that tax requirements are correct for each employee</li> <li>Client will verify that all Direct Deposit and bank information is correct</li> </ul>
<b>Transition to Customer Service</b>
After two (2) successfully processed payrolls with the Workforce Go! Implementation Lead, Client will be transitioned to their assigned Customer Support Representative. Future payroll processing will be handled by the Customer Support Representative Team. The Customer Support Representative Team will handle incoming requests from Client and will assign the appropriate resource to handle Client needs. Should, additional implementation services be needed, a Statement of Work will be created and the work will be performed by the Workforce Go! Implementation Team. Assumptions <ul style="list-style-type: none"> <li>Client is responsible for keeping employee data up to date</li> <li>New employees or changes to employees will be entered by Client</li> <li>All future payroll approvals must be received by 2:00 PM Central Time two (2) days prior to actual payroll check date</li> </ul>



## Standard Deployment Summary

Galveston County Health District  
 9850 Emmett F. Lowry Expressway  
 Texas City, TX 77591  
 Chris Davis  
 409-938-2221  
 cdavis@gchd.org

Client Details	
Employee Count	375
Number of EINs	3
ERP Integration/Interface Option	Sage Intacct Integration
Total Estimated Hours for this project	190

### Client Responsibility

- Client is responsible for providing all Federal, State, and local tax id and other compliance related material
- Client is responsible for timely communications of any future change in Federal, State, or local tax or compliance changes
- Client is responsible for providing required information, data, documentation, and test data to facilitate the Consultant's performance of the work, and will provide such additional assistance and services as is specifically set forth in the Project Plan and/or Implementation Task List established for this implementation.
- Client is responsible to manually enter all active employee data including any current year non active employee data. Extracting data from current system or formatting data into the standard format is not included in the scope of services
- Client is responsible for learning the new system. This includes scheduling the time for training, doing the training tasks, and asking questions whenever unsure. Client staff should enter a cross training system as soon as possible to reduce the cost of "down time" due to employee illness and turnover.
- Client shall seek to establish a realistic training schedule and devote the time and effort required of Client personnel for training purposes.
- Client is responsible for ensuring the accuracy of the payroll, time, benefit, time off, and tax records.
- Client is responsible for ensuring all manually entered data is accurate.
- Client shall enter all future data and on-going transactions once the initial data migration from current system is completed.
- Client will provide a project team that will actively participate in this project. Project team members are key individuals in the organization who are knowledgeable of the business needs of Company, have the ability to make decisions, and are committed to the success of the project.
- Client will identify a dedicated project manager who will co-manage the project to a detailed plan and conduct regular project status meetings with the Client project team outside of the Workforce Go! status meetings.
- Client agrees to exhibit a willingness to ask questions and volunteer suggestions as they relate to the project on a timely basis.
- Client will address any billing issues or disputes within 10 days of the work that is performed and billed to the Client. If a dispute is not addressed within 10 days of corresponding billing to Client, we assume the invoice will be paid in full. Client agrees to pay all invoices within 30 days of the date of the invoice.
- Client acknowledges that a delay or failure by the Client to fulfill the above described responsibilities, such that the Consultant, prevented from performing in accordance with this engagement's Project Plan or Implementation Task List, may result in additional costs to the Client and deviations from previously agreed upon work schedules.

### Risks and Assumptions

The project is subject to the three standard consulting assumptions, which are: Problem solving requires valid data, decision making requires free choice, and implementation is best achieved through collaboration.

- All tasks on this project could be performed by employees of Client. Use of Workforce Go! personnel is at the discretion of Client
- Project management including the maintenance of the Issues Lists and Change Orders will be performed by Workforce Go!. In addition, scheduling regular meetings and managing scope change will reside with Workforce Go!.
- This document outlines parameters of consulting time that could be required. Depending on actual requested work and ultimate changes to the scope of the project, the time estimated in the proposal could change significantly.
- All Data imports and Integration processes are based on the standard tools and templates.
- In the Scope Definition section, if certain assumptions are not correct, additional cost could be incurred.
- Failure of Client to note and communicate desired functionality or properly test system functionality as required will result in a system that does not perform as needed.
- Workforce Go! cannot be responsible for hardware problems, network performance, system performance issues that arise during implementation process.
- Workforce Go! cannot be held responsible for any down time, loss in productivity or loss of revenue to Client due to changes in the system.
- No work will be performed outside of scope without the prior written consent of Client.
- All consulting services in this proposal will be performed off-site unless otherwise requested. If on-site assistance is scheduled all travel expenses will be billed at actuals, as incurred.

#### Training Assumptions:

- Training sessions are available for multiple attendees to attend at the same time. Additional sessions could result in additional charges.
- Training sessions are single sessions and not further sub divided (i.e. one 4 hour session vs. four 1 hour sessions)
- We will provide training to core Client team. The core Client team will train the actual employees and end users
- Client is responsible for learning the software
- Client will dedicate time for learning and training

### Terms and Conditions

**Existing Hardware:** Workforce Go! will take every reasonable precaution to protect existing hardware, programs, and data. However, it is required that the Client ensures that adequate backups of existing software are available to protect against the unlikely event of data loss. Workforce Go! cannot be responsible for the failure of existing hardware, which could take place during implementation. Workforce Go! cannot be responsible for any downtime, loss in productivity, or time required by Client during the implementation or running of Workforce Go! HCM.

**Return Policy:** Software purchases, services, and professional services are non-refundable. Custom programming services and integration services are non-refundable and must be paid for prior to work beginning.

**Consulting:** This project will be time and materials based, unless otherwise noted as fixed fee, with a total estimated hours of 190 at an hourly rate \$100.00 is based on details outlined in this document excluding travel or expenses. A project deposit is due with this signed agreement. All remaining hours used above the deposit will be billed weekly.

Estimated Deployment fee:	\$ 19,000.00	Fees	Remaining Project Hours
		Project Deposit	95
		Carrier Communication Setup Fees	
		<b>Due with Contract Signature</b>	
		\$9,500.00	
		\$0.00	
		<b>\$9,500.00</b>	



## Standard Deployment Summary

Galveston County Health District  
 9850 Emmett F. Lowry Expressway  
 Texas City, TX 77591  
 Chris Davis  
 409-938-2221  
 cdavis@gchd.org

Client Details	
Employee Count	375
Number of EINs	3
ERP Integration/Interface Option	Sage Intacct Integration
Total Estimated Hours for this project	190

**Professional Services Rates:** Services outside of the scope of this project will be billed at an hourly rate of \$175 per hour, after hours rate of \$250 per hour, and a daily rate of \$2,000 per day.

**Travel:** All travel related expenses will be billed as incurred. Normal and reasonable charges for airfare, hotel, meals, mileage, rental car charges, tolls and other incidentals will be billed as incurred.

**Invoices:** All invoices will be paid within 30 days of the invoice date.

**Project Change Control**

Workforce Go! understands that a project of this nature impacts many business processes and systems within the organization. As processes are reviewed and the capabilities of the new system is gained, it is understandable that Client may want to take advantage of improved processes. Workforce Go! encourages and supports making improvements to business processes.

Any changes to these processes that effect the project deliverables and scope of this project, will require prior signed approval through the change control process. A Change Order is required to be completed and signed by Client and Workforce Go! prior to performance of related tasks.

**Approval**

We have examined this scope document and we agree with and understand the necessary responsibilities needed to complete this project successfully.

By: \_\_\_\_\_  
 Authorized Representative of Aterran, LLC. (DBA Workforce Go!)

\_\_\_\_\_ Title

Date: \_\_\_\_\_

By: \_\_\_\_\_  
 Authorized Representative of Galveston County Health District

\_\_\_\_\_ Title

Date: \_\_\_\_\_

# Service Agreement



<b>Company Legal Name</b>	Coastal Health & Wellness	<b>Contact Name</b>	Ashston Martin	<b>Contract Term (Years)</b>	2
<b>Company Address</b>	9850 Emmett F Lowry Expy Texas City Texas 77591	<b>Phone</b>		<b>Start Date</b>	7/1/2022
<b>Company Phone</b>	409-938-2300	<b>Email</b>	amartin@gchd.org	<b>Sales Representative</b>	Connor Vining (678) 805-2010 ext 127 connor.vining@proliant.com

Enhanced Plus							
Primary Frequency	FEIN Qnt.		Base Fee	Rate	Description	Employee Quantity	Total Per Payroll
Bi-Weekly	3		\$35.00	\$5.41	per check	375	\$2,133.75

**Included Products/Services**

- ACA Suite
- Automated Tax LookUp
- Check Signing/Stuffing
- Direct Deposit
- Electronic Onboarding
- Garnishment/Child Support Payments
- HRIS
- Self-Service
- Work Number Wage Verification
- Accrual Tracking
- Electronic Onboarding "Click to Sign"
- Mobile
- New Hire Reporting
- Payroll Processing
- Positive Pay (Bank Checks)
- Report Writer
- Tax Filing
- GL - SageIntacct

Additional Product(s)			
	Rate	Quantity	Total
Time & Labor	Included	375	Included
Benefits Administration	Included	375	Included
			\$0.00

Additional Services				
Name	Rate	Quantity	Description	Total
401K Interface	\$18.46	3	per interface	\$55.38
Performance Mgmt & Advanced Coaching	\$1.15	375	per employee	\$431.25
WorkSync - Visual Scheduling	\$0.23	375	per employee	\$86.25
				\$572.88
				<b>Total Per Payroll*</b>
				<b>\$2,706.63</b>



# Standard Implementation Fields

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The following information is the standard data that is imported into ReadyPay Online during the payroll implementation process. It is recommended that Implementation have access to a Report Writer feature that can provide this information in either an Excel or CSV format. If the data is not extractable from the client's prior vendor, they can provide Implementation with the data in electronic format and it will be imported at no additional charge.

## Employee Demographic Information

Employee ID	Date of Termination	Pay Group
Last Name	Adjusted Seniority Date	
First Name	Employee Status (Active, Term, LOA, etc.)	<b>Tax Information</b>
Middle Name	Employee Type (FT, PT, etc.)	Tax Form (W2, 1099)
Address Line 1	Clock/Badge Number	Work State
Address Line 2	Cost Center/Department	FITW Status
City	Structure (CC1-CC5)	FITW Exemptions
State	Base Rate	FITW Additional \$
Zip	Rate 2	FITW Additional %
Social Security Number	Default Hours (per pay period)	SITW State
Gender	Salary	SITW Status
Ethnicity	Pay Frequency	SITW Exemptions
Home Phone	Auto Pay (Salary or Hours)	SITW Exemptions 2
Work Phone	Workers Comp Code	SITW Additional \$
Personal Email Address	EEO Class Code	SITW Additional %
Work Email Address	Vet Status	SUI State
Date of Birth	Supervisor ID	
Date of Hire		

## Direct Deposit Information

Routing Number	Priority	Start Date
Account Number	Amount	End Date
Checking or Saving	Amount Code (% , Flat, etc.)	Pre-Note Date

## Recurring Deductions

Deduction Code	Goal	Annual Max
Calculation Code	Paid Towards Goal	Min
Rate	Frequency	Max
Start Date	Agency	Arrear
End Date	Misc. Info	





### Employee Accruals

Accrual Code	Available Hours	Start Date
Used Hours	Available Dollars	End Date
Used Dollars	Last Accrue Date	Length of Service (LOS) Date

### Permanent Labor Allocations

Percentage	Job Code	End Date
CC1-CC5	Start Date	

## ACA Suite Clients

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The following information should be imported into ReadyPay Online for all accounts using Proliant's ACA Suite Services. The information must be provided to Implementation in an electronic format and include employee IDs or social security numbers.

### Employee Dependents

First Name	Gender	State
Last Name	Relationship	Zip
Middle Name	Address Line 1	Country
Social Security Number	Address Line 2	Smoker (Yes/No)
Date of Birth	City	Telephone

### Employee Insurance

Insurance Code	End Date	Coverage Type (EE, Spouse, Family, etc.)
Start Date		

## Additional Human Resources Fields

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The following Human Resources information can be imported into ReadyPay Online for an additional fee. Please note that costs are determined on a case by case basis dependent on the scope of the project. The information must be provided to Implementation in an electronic format and include employee IDs or social security numbers.

### Employee Emergency Contacts

Name	State	Home Phone
Address Line 1	Zip	Work Phone
Address Line 2	Country	Cell Phone
City	Relationship	



### Employee Certifications

Certificate Code	Effective Date	Paid Employee
Description	Expiration Date	Reimbursed (Yes/No)
Certificate Number	Paid Employer	Notes

### Company Assets

Asset Code	Receipt Date	Notes
Model	Returned Date	
Serial Number	Value	

### Employee Education

School	Years (2000-2004)	Awards
Major	GPA	Notes
Degree Awarded	Classes	

### Employee Licenses

License Code	Expiration Date	Notes
License Number	State	
Issued Date	Exam Date	

### Employee Previous Employment

Employer	Job Title	Salary
Employer Phone Number	Termination Reason	Salary Per (period, annual, etc.)
Business Type	Start Date	Can Contact (Yes/No)
Supervisor	End Date	Contacted (Yes/No)

### Employee Skills

Skill Code	Date	Notes
Skill Description	Proficiency	

### Employee Training

Training Code	Renewal Frequency	Score
Training Description	Status	Paid Employer
Scheduled Date	Level	Paid Employee
Start Date	Instructor	Reimbursed (Yes/No)
Completed Date	Certificate	Training Notes
Expiration Date	Hours	



# Additional Historical Information

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The following historical information can be imported into ReadyPay Online for an additional fee. Please note that costs are determined on a case by case basis dependent on the scope of the project. The information must be provided to Implementation in an electronic format and include employee IDs or social security numbers.

## Employee Rate History

Rate Code	Salary	Change Reason (COLA, Grade, Merit, Position Change, etc.)
Start Date	Rate Per (Hour, Day, etc.)	
End Date	CC1-CC5	
Rate	Shift	

## Employee Position History

Effective Date	Job Code	Mail Stop
Start Date	Employee Status	Default Hours
End Date	Employee Type	Pay Frequency
CC1-CC5	EEO Class	Base Auto Pay
Position	Workers Comp Code	Seasonal
Title	Pay Group	OT Exempt
Supervisor	Work Phone	

# Service Agreement



## Year End Fees

	Quantity	Base per Company ID	Rate	# of Company IDs	Total
W-2/1099(turnover not included)	375	\$50.00	\$3.50	3	\$1,462.50
1094/1095-C (0% benefits eligible)	0	\$250.00	\$5.00	3	\$750.00
				<b>Total:</b>	<b>\$2,212.50</b>

## One-Time Fees

<b>All Inclusive Setup Fees</b>	<b>\$7,875.00</b>
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## Total Cost Summary

<b>One-Time Fees</b>	<b>\$7,875.00</b>
<b>Year-End Fees</b>	<b>\$2,212.50</b>
<b>Annual Fee (estimated)</b>	<b>\$70,372.38</b>

\* Total assumes One Payroll Run per Pay Cycle

\* For processing of off-cycle payroll runs, the Company will be charged the lower of \$1.25 or the quoted per check rate plus the base fee stated on this quote

\* Base Fee Applies to All Payroll Runs, Including Adjustment Runs.

\* Estimated Totals Only which do not include applicable sales tax.. Proliant will notify client of bill total once the project is complete.

\* Total Delivery Fees for Paperless Delivery are not included and are TBD

**ACA History Load: TBD by Proliant Implementation Team**



# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#13**

**Consider for Approval 2021 Bad Debt Write-off and Adjustment  
Report Submitted by Jonathan Jordan**

**Coastal Health & Wellness  
Adjustment - Primary Payer  
From 01/01/2021 to 12/31/2021**

^Totals for Billing Write-offs	\$ (651.47)
*Totals for Bad Debt	\$ (352,240.52)
<b>Total</b>	<b><u>\$ (352,891.99)</u></b>

* Bad Debt Writeoffs	Amount
2017	\$ 313,318.00
2018	\$ 392,919.00
2019	\$ 478,526.90
2020	\$ 369,872.26
<b>4 Year Average</b>	<b><u>\$ 388,659.04</u></b>

^ July 2021 through December 2021

**FY22 Initiatives**

- Complete Writeoffs
- Align NG with Collection and Statement Policies

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# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#14**

**Consider for Approval Quarterly Compliance Report for the  
Period Ending March 31, 2022 Submitted by Ami Cotharn**

**Coastal Health & Wellness Governing Board  
Quarter 4 (January – March), FY2021 Compliance Report**

<b>Internal Audits</b>		
<b>AUDITOR- DATE CONDUCTED</b>	<b>TYPE OF AUDIT &amp; FINDINGS</b>	<b>ACTION TAKEN</b>
<b>Patient Services Manager -</b> January 1, 2022 – March 31, 2022	<b>Financial Screening Audit:</b> <ul style="list-style-type: none"> <li>• Financial screening audits were performed by randomly pulling applications monthly (13 charts January, 14 charts February, 13 charts March) to establish the accuracy and completeness of said applications.</li> <li>• An inclusive application requires Patient Service Specialists to ensure the accurate completion of eleven different fields within each application, all of which are reviewed during the audit.</li> <li>• Among the 40 applications reviewed, which collectively encompass 440 individual fields, there was one error – yielding a 99.5% rate of accuracy.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue operating under current protocol.</li> </ul>
<b>Nursing Director</b> January 1, 2022 – March 31, 2022	<b>340B Medication Audit:</b> <ul style="list-style-type: none"> <li>• The Nursing Director performed a 340B medication audit to determine fullness of charting 340B ordered meds, which requires documentation reflecting consistency in medication logs, NextGen and billing activities.</li> <li>• Of the 20 charts analyzed (ten at each of the two sites), no discrepancies were discovered, yielding a clean audit.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue operating under current protocol.</li> </ul>
<b>Dental Director</b> January 1, 2022 – March 31, 2022	<b>Ryan White Quality Review</b> <ul style="list-style-type: none"> <li>• In accordance with stipulations issued by the Ryan White dental grant, charge for all 10 patient charts receiving dental services funded by Ryan White</li> </ul>	<ul style="list-style-type: none"> <li>• Continue operating under current protocol.</li> </ul>



## Coastal Health & Wellness Governing Board Quarter 4 (January – March), FY2021 Compliance Report

	<p>during the denoted were surveyed to verify provider adherence with appropriate protocols.</p> <ul style="list-style-type: none"> <li>Of the 122 required elements evaluated, 119 were adequately completed yielding a 97.54% compliance rate.</li> </ul>	
<b>External Audits</b>		
<b>AUDITOR – DATE OCCURRED</b>	<b>TYPE OF AUDIT &amp; FINDINGS</b>	<b>ACTION TAKEN</b>
<b>TVFC Nursing</b> VACCINES FOR CHILDREN PROGRAM (VFC) March 25, 2022	<ul style="list-style-type: none"> <li>Vaccine for Children Audit by DSHS</li> <li>Only one issue was found after both Galveston and Texas City clinics were audited; out of all charts audited there was only 1 vaccine missing documentation that the VIS was not given to the patient.</li> </ul>	<ul style="list-style-type: none"> <li>Continue operating under current protocol.</li> </ul>
<b>TVFC Screening and Documentation</b> VACCINES FOR CHILDREN PROGRAM (VFC) March 25, 2022	<ul style="list-style-type: none"> <li>VFC providers must screen for and document VFC eligibility at EACH immunization visit.</li> <li>Documentation must include the date of the visit and the child’s specific eligibility category.</li> <li>VFC providers must use screening results to ensure that only VFC-eligible children receive</li> <li>VFC vaccine and that administration fees are billed for as appropriate.</li> <li>Eligibility status must be readily available to staff administering vaccine prior to selecting which vaccine stock to use.</li> <li>There were no findings for Eligibility Screening &amp; Documentation during this audit for Patient Services.</li> </ul>	<ul style="list-style-type: none"> <li>Continue operating under current protocol.</li> </ul>
<b>HIPAA Breach Reports</b>		
<b>DEPARTMENT – DATE OCCURRED</b>	<b>SUMMARY</b>	<b>FOLLOW-UP</b>

**Coastal Health & Wellness Governing Board  
Quarter 4 (January – March), FY2021 Compliance Report**

	None to report	
<b>Warning and Termination Letters</b>		
<b>REASON</b>	<b>TYPE OF LETTER</b>	
Debt Collection Policy	Suspensions 192 Reinstatements:138	
Behavioral Letters Issued	Terminations: 0; Warnings: 0	

**NOTE: Various issues were discussed in peer review.**

*Incidents involving quality of care issues, In accordance with Section 161 et seq., Health and Safety Code, are reviewed such that proceedings and records of the quality program and committee reviews are privileged and confidential.*

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# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#15**

**Consider for Approval the 2022-2023 Risk Management  
Training Plan Submitted by Ami Cotharn**



**Coastal Health & Wellness  
Risk Management Training Plan  
2022 - 2023  
Approved: September 2020  
Revised: April 2022**

## **Article I Risk Management Training Program Goals**

Risk Management is the responsibility of all Coastal Health & Wellness (“CHW”) employees, including providers, clinicians, managers, volunteers, and staff. Risk management spans the entire operation and most functional areas, and all employees should be trained on risk management functions and responsibilities. CHW’s Risk Management Training Program’s goals and objectives are to create a culture of safety by:

1. Promoting safe and effective patient care practices;
2. Minimizing errors, events, and system breakdowns;
3. Minimizing effects of adverse events when they occur;
4. Minimizing losses to CHW by being proactive and attentive;
5. Maintaining a safe working environment;
6. Facilitating compliance with regulatory, legal, and accrediting agencies;
7. Protecting CHW’s financial resources; and
8. Protecting human and intangible resources.

## **Article II Process for Selection of Training Requirements**

1. Using trend data and other risk management data (e.g., claims data, patient complaints, incident reports, adverse events, services provided and inherent nature/risk of such services), the areas/activities of highest risk for CHW patient safety and ensuring consistency with CHW’s identified scope of project(s).
2. Training courses are then selected to mitigate or minimize the areas identified as highest risk.

## **Article III Training Courses**

1. All staff will be trained on risk management topics applicable to their scope of work upon hire and thereafter on an annual basis. This includes providers, clinicians, managers, volunteers, and support staff.
2. CHW has identified required courses for all staff and specialized training to mitigate or minimize risk of injury to patients and potential for liability to CHW, as set forth in Paragraphs 3 and 4 of this Article.

3. **Required Courses for All Staff.** All staff will be required to complete risk management training on the following in accordance with the schedule/due dates outlined in CHW's Risk Management Training Log (see, Risk Management Training Log):

***COURSE NAME (TENTATIVE DATE OF TRAINING\*\*)***

- a. Infection Control: Hand Hygiene (August/September 2022)
- b. Infection Control: Bloodborne Pathogen Exposure (August/September 2022)
- c. Safety Management Plans (October 2022)
- d. Hazardous Communication Training (October 2022)
- e. Identifying and Reporting Human Trafficking (November 2022)
- f. HIPAA and Patient Confidentiality (December 2022)
- g. Emergency Operations Plan (January 2023)
- h. Anti-Fraud Training (February 2023)
- i. Child, Elderly and Domestic Abuse Reporting Training (March 2023)
- j. Cultural and Linguistic Training (April 2022)
- k. Fire Safety Training (May 2022)
- l. Creating a Culture of Safety (June 2022)

*\*\*Note that due to COVID-19, annual trainings from were postponed several months as new methodologies to facilitate these trainings were considered.*

4. **Specialized Courses for Select Staff.** In addition to the required courses outlined above, staff in the following professions/fields will also be required to attend and complete specialized risk management courses applicable to these professions/fields, in accordance with the schedule/due dates outlined in CHW's Risk Management Training Log (see, Risk Management Training Log):

- i. All practitioners must complete their continuing medical education requirements or other applicable licensure requirements to maintain licensure, registration or certification.
- ii. Obstetrics/Gynecology: Prenatal and postpartum care providers are required to complete risk management training specific to this type of care.  
**\*Please note CHW does not provide prenatal, postpartum or**

**labor/delivery services. Patients are referred to the University of Texas Medical Branch for such procedures.**

- iii. Dental Instrument Sterilization Training for select staff, as applicable. *CHW exclusively uses disposable instruments for all medical and laboratory procedures, therefore only members of the dental staff are required to undergo instrument sterilization training.*
  - iv. CHW requires specific risk management trainings for groups of providers that perform various services which may lead to potential risk including:
    - 1. Behavioral Health
    - 2. Dental
  - v. Staff that handle hazardous materials must complete Hazardous Waste and Disposal training within thirty (30) days of hire and every three years thereafter.
  - vi. Providers will be trained on reporting potential malpractice claims that could invoke litigious action, and the Anti-Kickback and Stark Laws.
5. **Other Courses/Training.** The Risk Manager may identify and require additional courses/training for some or all staff, as appropriate, to address any incident, identified trend, near miss, patient complaint or any other circumstance.

#### **Article IV Tracking Training Attendance and Completion**

- 1. Tracking Methods
  - a. Staff must complete required all applicable risk management trainings upon hire and on an annual basis thereafter.
  - b. Attendance and/or completion of training courses will be tracked in a manner appropriate to the method by which the course was conducted (e.g., in-service sign-in log for in-person courses; certificates of completion for individual online courses, attestation of review and completion for other courses).
  - c. Staff who are unable to attend in-service sessions during which a required training is provided must make-up the training by attending the next New Hire Orientation session, where the trainings will be offered (every other week).

2. Performance Reviews/Credentialing and Privileging
  - a. Compliance with training requirements will be documented in staff personnel records and considered during performance reviews and/or credentialing and privileging determinations.
  
3. Non-Compliance with Training Requirements
  - a. The Risk Manager in conjunction with Human Resources will monitor staff compliance with training requirements. Failure to complete the training may result in the staff member's referral to Human Resources for disciplinary action, up to and including termination.
  
4. Appropriate Sources of Training/Mode of Delivery
  - a. Trainings are facilitated during employee in-service sessions, which are held from 8:00 am-12:00 pm on the second Wednesday of every month.
  - b. Training may also be conducted either in person, online, individually or in a group setting utilizing courses developed by CHW or through outside sources (e.g., ECRI Institute; MedTrainer).

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# **COASTAL HEALTH & WELLNESS**

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#16**

**Consider for Approval Coastal Health & Wellness No Show-Policy**

**Submitted by Ami Cotharn**

## NO SHOW AND CANCELLATION POLICY

### PURPOSE:

To maximize open access to care for patients by reducing No-Shows, late arrivals, and late cancellations.

### POLICY:

It is the policy of Coastal Health & Wellness (CHW) to educate our patients about the importance of keeping their scheduled appointments, and the expectation of notifying the center of any cancellations within the allotted timeframe. Failure to comply with this policy may result in appointment limitations and/or restrictions.

### PROCEDURE:

1. Each patient will receive notice of the most current *No Show and Cancellation Agreement* policy.
2. CHW's automated system will send a reminder at least **48** business hours prior to the schedule visit to remind patients of their appointments. Patients are encouraged to confirm the appointment by using the automated system protocol or by calling (409) 938-2234.
3. The patient must notify CHW **24** hours in advance if they are unable to attend their scheduled appointment and notify CHW of any changes in the preferred contact method. Cancellations with less than 24 hours cancellation notice will be considered a No Show.
4. Patients are encouraged to arrive 20 minutes prior to their appointment time if a patient arrives 15 minutes late to their appointment they may be asked to reschedule, and the appointment will be considered a No Show.
5. A warning notice will be sent to the patient if a patient fails to keep **2** consecutive scheduled appointments. If 3 consecutive or 3 out of 5 scheduled appointments are missed, the patient will only be allowed to schedule appointments on the same day, and only if cancellation is available.
6. This policy will be enforced uniformly and consistently by all Medical and Dental staff and administration of Coastal Health & wellness.



Date:

Dear:

We value you as a patient and thank you for choosing Coastal Health & Wellness as your healthcare provider. Our records indicate that you have failed to keep 2 consecutive scheduled appointments. Please understand that our policy states if you fail to keep 3 consecutive scheduled appointments OR miss 3 out of 5 appointments OR show up so late to an appointment that we cannot see you then you will only be allowed to schedule appointments on the same day, if and only if, a cancellation is available and may cause a disruption in having your medication refilled or having treatment completed. Under special circumstances or urgent matters, you will have to speak with the Patient Information Manager. If you have any questions, please contact our office at 409-938-2234. One way of participating in your health care is keeping your appointments, help us help you. We want to work with you to ensure that you are aware of all the resources available to you, so you do not miss any further appointment. We really want to continue caring for you but cannot effectively do so if you continue to miss appointments. Please give us a call and let us know if there is any way we can assist you in keeping your appointments.

### **Back to Agenda**

Sincerely,

Coastal Health & Wellness

*Coastal Health & Wellness has clinic locations in Texas City and Galveston, offering primary medical, dental and counseling services. CHW accepts Medicaid, Medicare and many major insurance plans and offers discounted rates for those who qualify. Call (409) 938-2234 for information or appointments. Learn more at [www.coastalhw.org](http://www.coastalhw.org).*





# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#17**

**Consider for Approval Governing Board Member  
Sharon Hall, PhD, to serve on the QA Committee**

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# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#18**

**Consider for Approval Governing Board Member  
Victoria Dougharty to Serve on the Finance Committee**

[Back to Agenda](#)



# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#19**

**Consider for Approval Governing Board Member  
Elizabeth Williams to Serve on the Appointing Committee**

[Back to Agenda](#)



# COASTAL HEALTH & WELLNESS

**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#20**

**Consider for Approval Governing Board Member  
Elizabeth Williams to Serve as the Secretary/Treasurer**

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# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#21**

**Consider for Approval Governing Board Member  
Elizabeth Williams to Serve on the Executive Committee**

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# **COASTAL HEALTH & WELLNESS**

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**April 2022**

**Item#22**

**Presentation on Strategic Health Plan**

**Presented by Shelby Evans**

# 2022-2025 CHW Strategic Health Plan

Presented to the Governing Board by Shelby Evans

4/28/22

# Overview

- 2022-2025 SHP Planning Process
- Needs Assessment Findings
- Priorities and Goals
- Timeline for SHP Execution
- Questions

# 2022-2025 SHP Planning Process

- Staff feedback sessions, patient interviews, Governing Board survey
- Feedback analysis
- Review of 2016-2021 SHP
- Galveston County & CHW data scan
- Writing, editing, and proposal



# Needs Assessment Findings

## Population Characteristics

- CHW serves a higher proportion of patients who are Hispanic and African American proportional to the population of Galveston County.
- The median age for a CHW patient is 46, compared to Galveston County's median age of 38.
- The majority of CHW patients fall below the 100% federal poverty line (FPL).

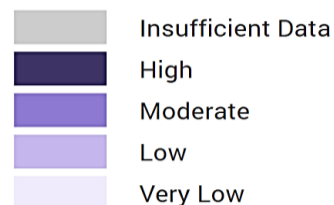
*Percentage of Poverty and Uninsured in Galveston County and CHW Populations*

	Galveston County	CHW
% of Population in Poverty	9.9%	57%
Population Below the 100% Federal Poverty Line	33,751	4,734
% of Population Under 18 in Poverty	8.6%	0.04%
Uninsured	19.8%	71.2%

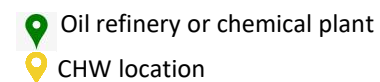
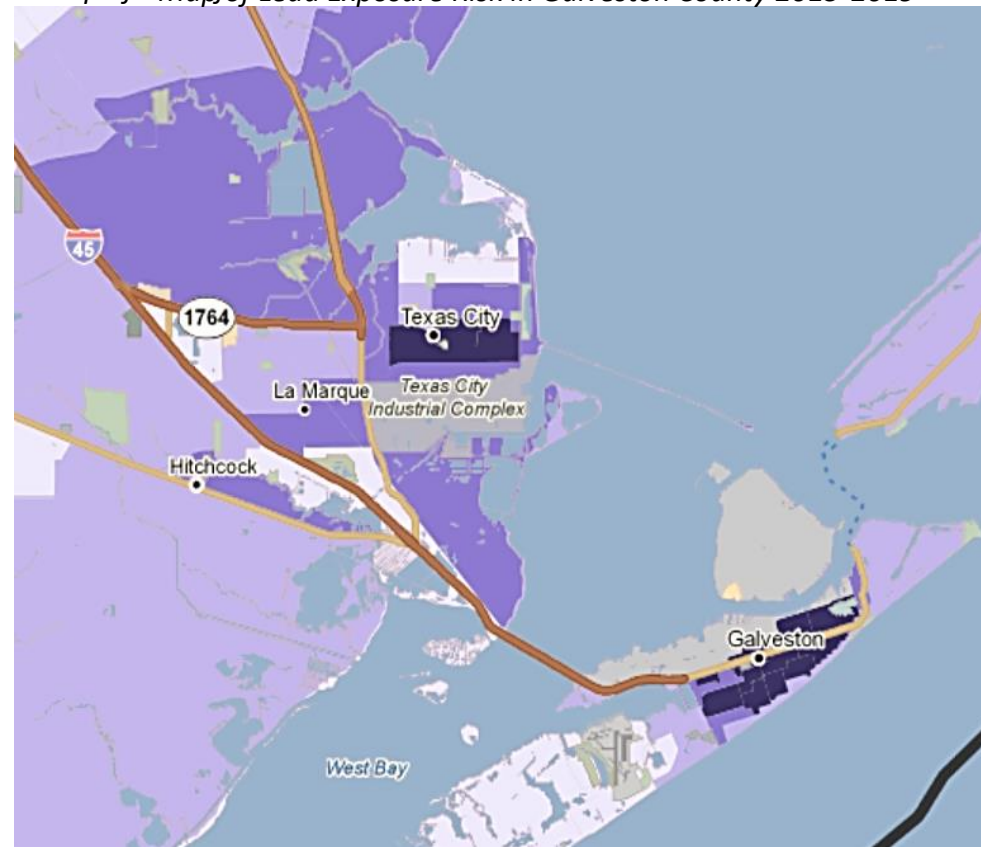
# Needs Assessment Findings

## Environmental Factors

- According to Feeding America, 17% of Galveston County suffers from food insecurity.
- Approximately 5% of households do not have access to a motor vehicle. Public transit is extremely limited.
- Between 2015-2019 Galveston County had low-, moderate-, and high-risk lead exposure areas.
- Galveston County Economic Development states, “The Texas Gulf Coast has 25% of the nation’s refining capacity.” Oil refinery and chemical plant work poses hazards toward health, especially respiratory health.



Map of OMB Refinery and Chemical Plant in Galveston County, 2015-2019



# Needs Assessment Findings

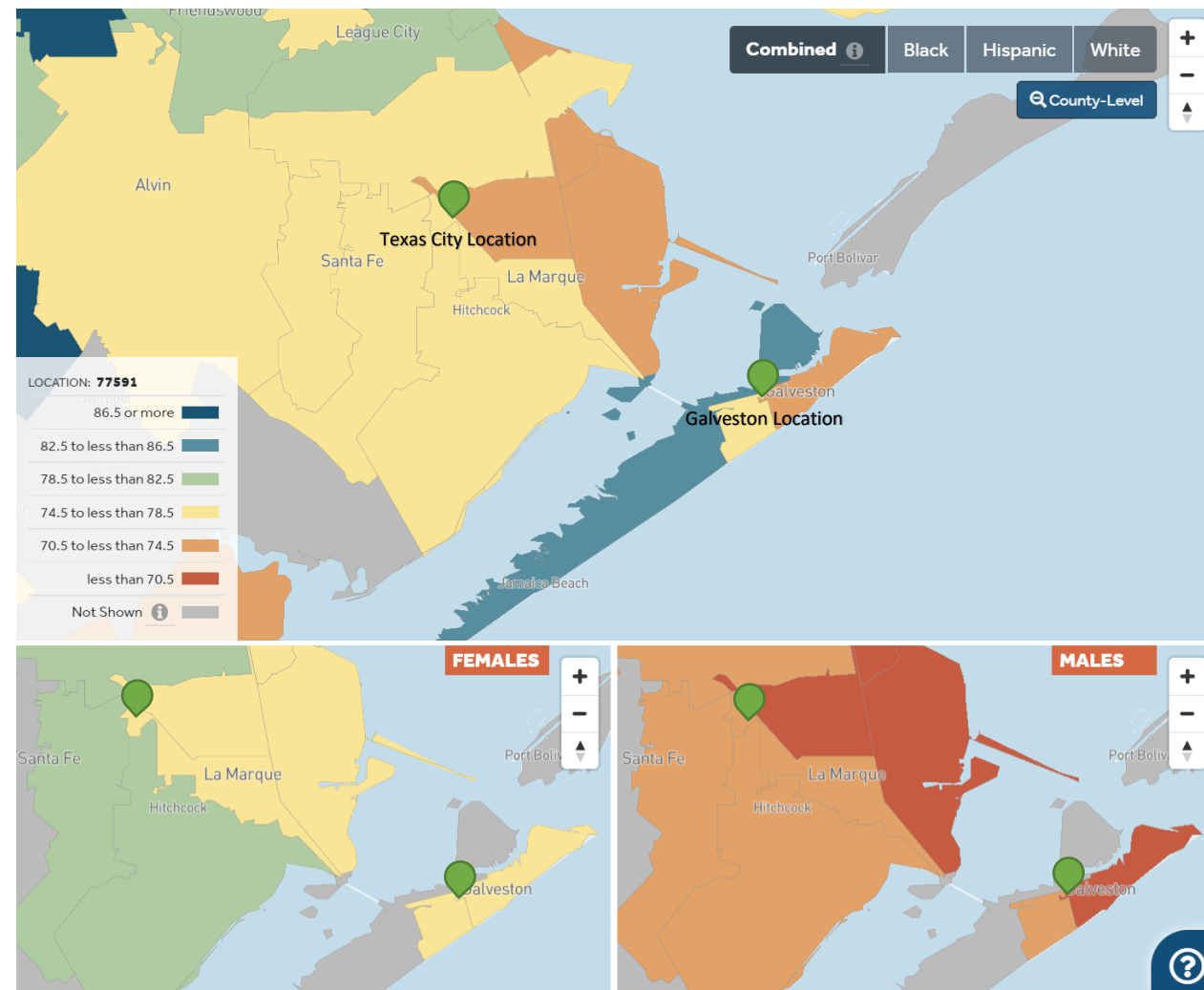
## Health Behaviors & Outcomes

- Galveston County has higher rates of physical inactivity, smoking, and excess drinking than state averages, all factors which impact health.
- Life expectancy in the CHW location zip code is 71.8 and 75 years. This is lower than Texas' average of 78.5 years.

Health Behaviors in Galveston County, Brazoria County, and Texas.

Health Behavior	Galveston County	Brazoria County	Texas
Physical inactivity	26%	32%	23%
Adult smoking	18%	15%	14%
Excessive Drinking	22%	19%	19%

Life Expectancy in Galveston County



# Needs Assessment Findings

## Health Outcomes Continued

The most prevalent, critical, medical conditions across the CHW patient population are diabetes, cardiovascular disease, cancer, HIV, overweight and obesity, chronic respiratory disease, and mental health disorders.

*Mortality Data: Underlying Cause of Death 2018-2020 (Crude Rate per 100,000)*

Underlying Cause of Death	Galveston County	Brazoria County	Texas
Malignant neoplasms of trachea, bronchus, and lung	48.1	33.0	30.2
Influenza and Pneumonia	12.8	11.6	11.7
Chronic Lower Respiratory Diseases	44.0	31.1	36.7
Other Chronic Lower Respiratory Diseases (COPD and Asthma)	38.0	28.0	34.3

*CHW Visits and Diagnoses in 2021*

Diagnostic Category	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
Overweight and obesity	4796	2926
Hypertension	5104	2536
HIV test	1813	1681
Diabetes mellitus	3718	1564
Emergency services	1704	1475



# Needs Assessment Findings

## Dental

- There are only three locations in Galveston County where one can receive dental care: CHW, St. Vincent's, and St. Hope. Currently, St. Vincent's only offers extractions. The 2020 BRFSS reported 43.4% of service area adults did not visit a dentist or dental clinic in the past year, and around 39.9% report having permanent teeth extracted.
- At CHW in 2021
  - 1,475 patients were diagnosed as needing emergency services (any dental procedure deemed an emergency).
  - 1,190 patients had oral exams.
  - 746 patients had restorative services (repairing damaged oral structures such as fillings, bridges, implants, etc.).
  - 739 patients received oral surgeries (extractions and other surgical procedures).
- **A total of 5,432** visits addressing these conditions occurred in 2021.

# Priorities and Goals

**Priority 1:** Be an Exceptional Health Center and Workplace

**Priority 2:** Scale Services

**Priority 3:** Strategically Address Health Disparities

**Priority 4:** Expand CHW Community Reach through Maximizing Community Stakeholder Relationships

**Priority 5:** Upgrade Technology and Processes

# Priority 1: Be an Exceptional Health Center and Workplace

- **Goal one:** Recruit and retain top talent.
- **Goal two:** Expand facility resources.
- **Goal three:** Maintain excellent care that is patient centered.

*“Focus on retention and staff growth. strong base and core for the long run.”* – Staff feedback session

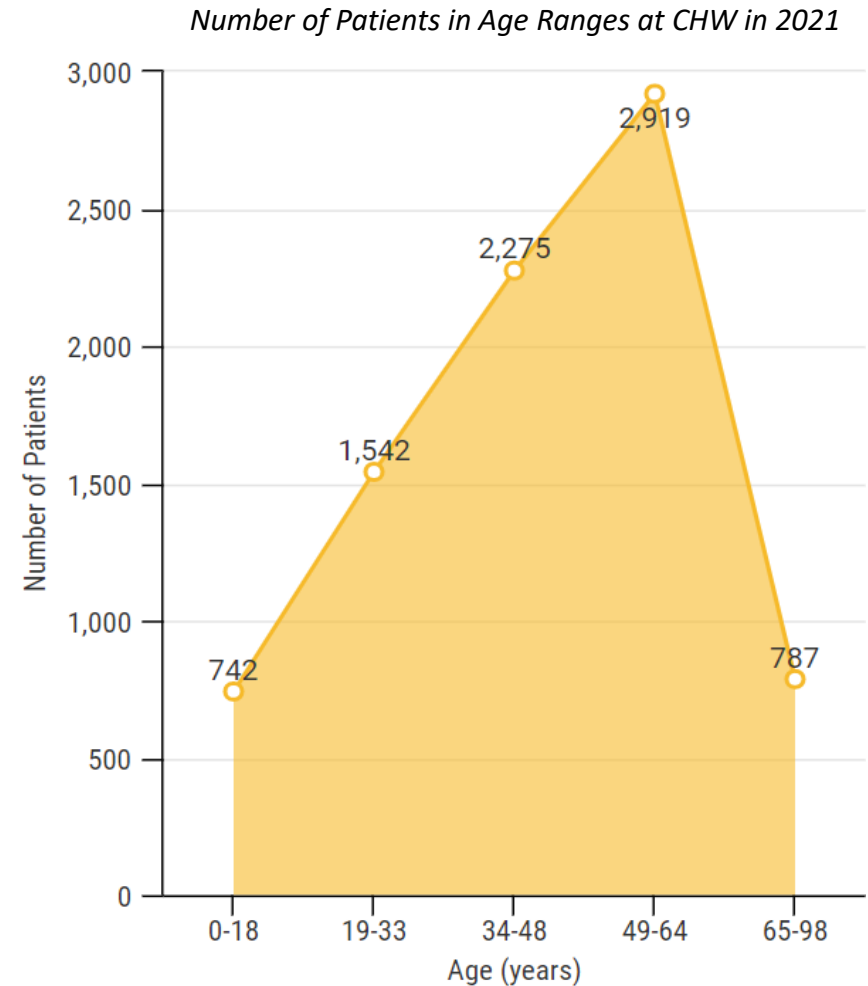
*“All my doctors are great. I love coming to this clinic. You treat me like a person.”* – Patient interviews

# Priority 2: Scale Services

- **Goal one:** Expand access to specialties.
- **Goal two:** Grow child health.
- **Goal three:** Grow patient population.

*“I would like to see more specialty doctors at the clinic.”*

– Governing Board survey



# Priority 3: Strategically Address Health Disparities

- **Goal one:** Deliver care that is patient centered and responsive to community.
- **Goal two:** Identify and address disparities.

*Percentage of Poverty and Uninsured in Galveston County and CHW Populations*

	Galveston County	CHW
% of Population in Poverty	9.9%	57%
Population Below the 100% Federal Poverty Line	33,751	4,734
% of Population Under 18 in Poverty	8.6%	0.04%
Uninsured	19.8%	71.2%

# Priority 4: Expand CHW Community Reach through Maximizing Community Stakeholder Relationships

- **Goal one:** Expand and maintain strategic partnerships with other organizations and community leaders.
- **Goal two:** Execute activities with attention to maximizing impact.



# Priority 5: Upgrade Technology and Processes

- **Goal one:** Upgrade CHW technology for care improvements and efficiency.
- **Goal two:** Develop or update processes enhancing communication and work performance.
- **Goal three:** Leverage existing technologies.

*“Faster turn over, more attentiveness to phone calls and reduce wait times on phone calls”*

– Governing Board survey



**sage**



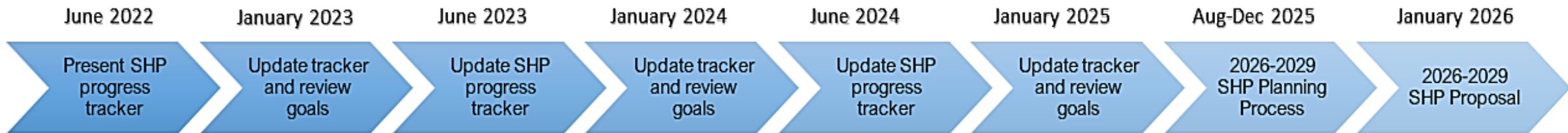
**bamboohR**

*Providing access to high-quality primary care to any and all individuals in need.*

coastalhw.org 

# Timeline for SHP Execution

Regular bi-annual check-in on progress toward goals and annual evaluation of priorities and goals.





# Questions?

# CHW 2022-2025 SHP Outline

Strategic planning at Coastal Health and Wellness (CHW) employs a thorough evaluation of how the practice organization is performing, using a comprehensive review of current performance and data analytics that enable insights into current and projected future operations. Strategic planning assists CHW to manage performance in a changing environment; helps to align goals and top initiatives; creates a culture of accountability and expectations on results; clearly defines goals and objectives in relation to organization-wide communication and demonstrates a commitment to progress monitoring with a comprehensive review of performance. The Strategic Health Plan (SHP) priorities, goals, and action steps to achieve those goals, will be executed inline with CHW’s mission, vision, and values.

### Mission

Providing high quality healthcare to all

### Vision

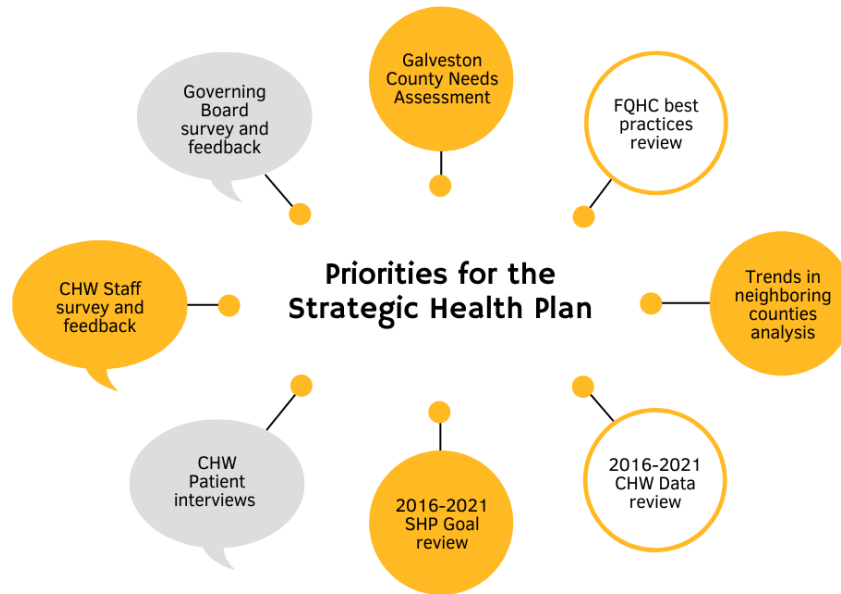
Healthy people in healthy communities.

### Values

I CARE – Integrity, Customer Service, Accountability, Respect, and Equality

## Approach

The SHP Team engaged stakeholders across the organization, conducted internal and external data reviews, and researched best practices. This information was synthesized into summaries and was made available to stakeholders where applicable. Through the feedback, reviews, and analyses, the SHP Team determined the 2022-2025 SHP priorities.



The entire CHW leadership team were provided a draft of the strategic priorities and were offered several opportunities to provide direct feedback to the plan. Internal stakeholders were given an opportunity to provide feedback ahead of the proposal for SHP approval. External stakeholders can comment on the proposed SHP at the Governing Board Meeting. Any additional feedback will be

considered and potentially implemented at the annual checkpoints where progress toward these priorities and their goals will be reviewed.

## External Needs Assessment

### Environmental Factors

A community's environment affects its health outcomes. Healthy People 2030 highlights the risks associated with pollutants in homes, workplaces, food, water, and air. Pollutants are linked to some cancers, respiratory diseases, and heart conditions.<sup>1</sup> Individuals living in low-income areas are more likely to be exposed to these environmental risks.<sup>2</sup> This section explores some of the more pervasive environmental factors impacting community health in Galveston County.

### Lead Exposure Risk Index

Exposure to lead can create short- and long-term effects, ranging from physical discomfort to death.<sup>3</sup> In 2021, Epidemiology at GCHD reported 23 cases of elevated blood lead levels, an increase from the 15 cases in 2020.<sup>4</sup> Using data from the CDC and an academic study of lead poisoning risk, PolicyMap found that between 2015-2019 Galveston County had low-, moderate-, and high-risk lead exposure areas, with the outskirts mostly considered very low risk.<sup>5</sup> The map below shows these areas and their respective levels of risk.

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<sup>1</sup> Office of Disease Prevention and Health Promotion, Office of the Assistant Secretary for Health, Office of the Secretary, and U.S. Department of Health and Human Services. 2022. "Healthy People 2030: Environmental Health." Health.gov.

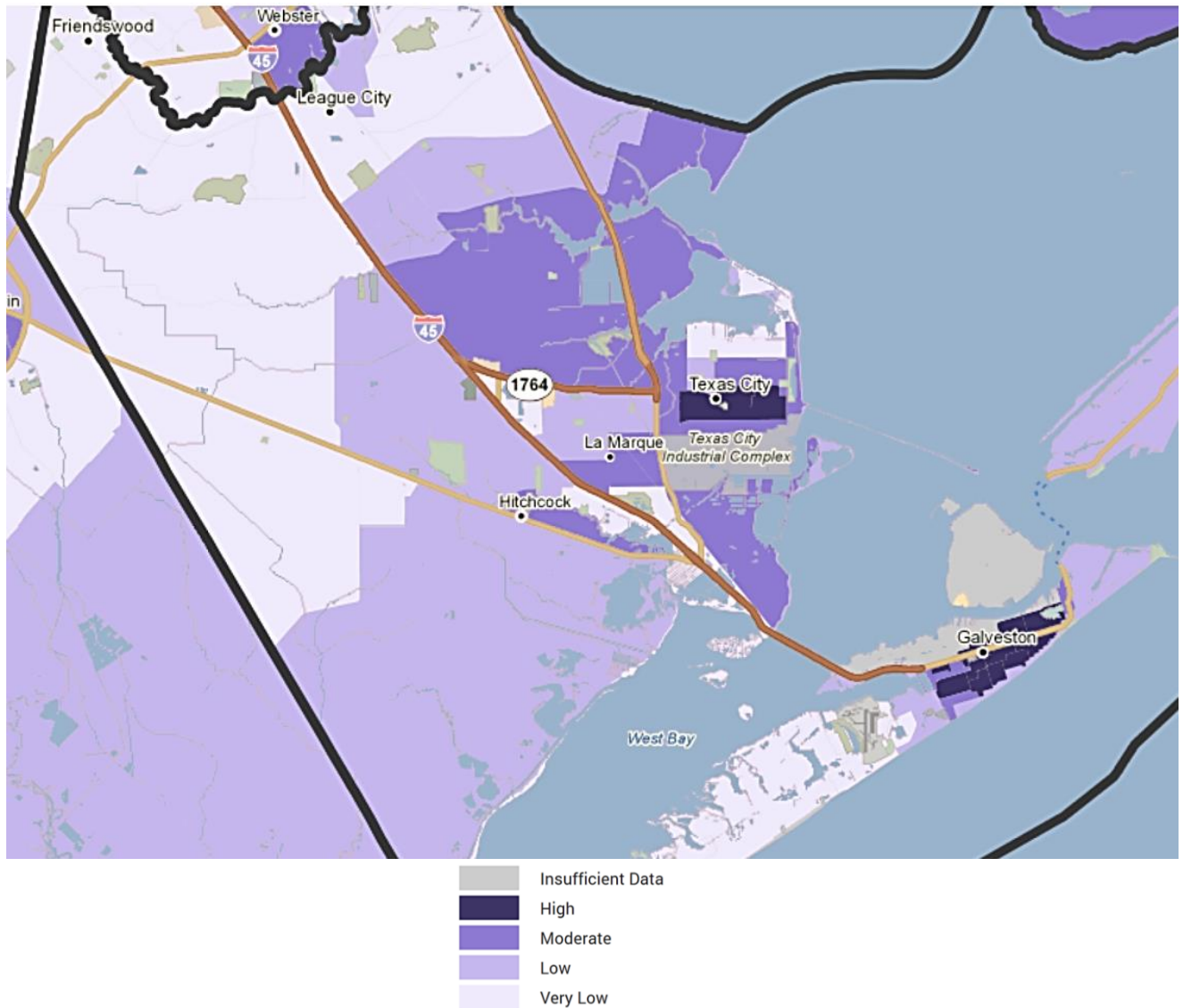
<sup>2</sup> Brusseau, M.L., M. Ramirez-Andreotta, I.L. Pepper, and J. Maximillian. 2019. "Environmental Impacts on Human Health and Well-Being." In *Environmental and Pollution Science*, 477–99. Elsevier.

<sup>3</sup> The National Institute for Occupational Safety and Health (NIOSH), and Centers for Disease Control and Prevention. December 9, 2021. "Lead: Health Problems Caused by Lead." cdc.gov.

<sup>4</sup> GCHD. 2022. "Galveston County Health District Morbidity Report." gchd.org.

<sup>5</sup> PolicyMap. 2019. "Map with Risk of Exposure to Lead in 2015-2019." PolicyMap. 2019. www.policymap.com.

Map 1 Lead Exposure Risk in Galveston County 2015-2019<sup>6</sup>



In 2021 CHW saw 33 visits for childhood lead test screenings. GCHD conducted 23 investigations of lead exposure, an increase from 15 investigations in 2020.

### Occupational Risk Hazards

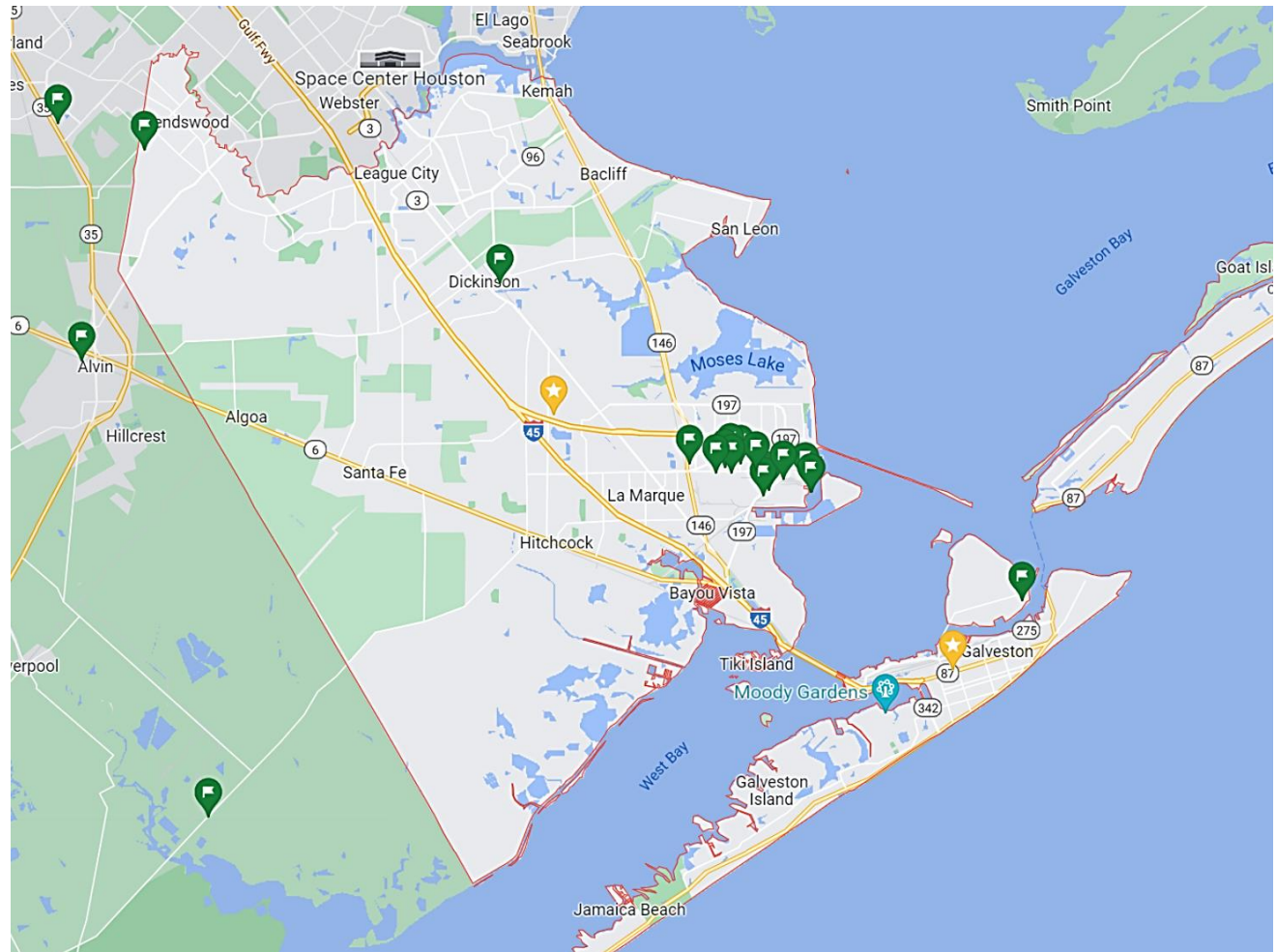
According to Galveston County Economic Development, “The Texas Gulf Coast has 25% of the nation’s refining capacity, capable of refining 4.8 million barrels of oil per day.” The same source indicates about one-third of oil and gas extraction jobs in the United States are in (or around) Houston. The Occupational Health and Safety Administration (OSHA) lists hazards associated with working in oil and gas extraction on their website. One of the most notable health concerns is respiratory issues.<sup>7</sup> Chemical

<sup>6</sup> PolicyMap. 2019. “Map with Risk of Exposure to Lead in 2015-2019.” PolicyMap. 2019. [www.policymap.com](http://www.policymap.com).

<sup>7</sup> Occupational Safety & Health Administration. 2022. “Health Hazards Associated with Oil and Gas Extraction Activities.” United States Department of Labor.

plants carry many of the same risks associated with oil refineries. The map below shows oil refineries and chemical plant locations in Galveston County in relation to the location of the CHW clinics.

Map 2 Oil Refineries and Chemical Plants in Relation to CHW Locations<sup>8</sup>



### Food Access

According to Feeding America, 17% of Galveston County suffers from food insecurity. In Texas, 1 and 7 adults and 1 and 5 children face hunger each day. 21.9% of children within the service area suffer from food insecurity.<sup>9</sup> Improper and limited nutritional intake during childhood can lead to chronic illnesses, obesity, diabetes, and a life-long pattern of poor eating habits. 47% of Galveston County children are eligible for the reduced school lunch program, which is an income-based program that

<sup>8</sup> Google Maps. "Galveston County." 2022. [google.com/maps](https://www.google.com/maps)

<sup>9</sup> Gundersen, C., A. Dewey, A. Crumbaugh, M. Kato & E. Engelhard. Map the Meal Gap 2018: A Report on County and Congressional District Food Insecurity and County Food Cost in the United States in 2016. Feeding America, 2018.

provides discounted or free school meals to school-aged children. This program provides adequate nutrition for children who may be suffering from food insecurity at home. Of the food insecure population in Galveston County 45% are likely ineligible for food assistance programs. In 2019, 34,637 individuals were receiving SNAP benefits in Galveston County compared to 28,645 individuals in neighboring Brazoria County.<sup>10</sup>

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*Galveston County has an environmental food index score of 7.2, which is significantly higher than Texas' 5.9, but much lower than US Top Performers at 8.7.*

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The environmental food index measures the quality of foods available regardless of household income. Limited access to healthy foods due to food deserts is associated with higher rates of obesity, chronic illnesses, and poor health outcomes. Galveston County has an environmental food index score of 7.2, which is significantly higher than Texas' 5.9, but much lower than US Top Performers at 8.7.<sup>11</sup> Populations living in food deserts often eat high-fat, high-carbohydrate foods like those which can be purchased at fast-food restaurants or corner stores. Overweight and obese patients are at increased risk of developing numerous chronic health problems, including diabetes, hypertension, cardiovascular disease, stroke, and certain kinds of cancer, to name a few.

### Geography and Transport

In CHW's service area, approximately 5% of households do not have access to a motor vehicle. Areas with large concentrations of poverty and racial segregation are correlated with limited access to motor vehicles.<sup>12</sup> Having no access to a car in an urban area is a great barrier to reaching essential destinations such as medical care facilities, grocery stores, places of employment, and critical service providers. There are some limited public transportation options in the Galveston area, but even traveling short distances by bus can double or triple the time the same trip would take by car. Local bus services (Island Transit) arrives/departs at the Texas City location at the top of every hour. For the Galveston location, bus services arrive inconsistently every 90 minutes. Local bus fare is 50 cents for a disabled individual vs. \$1.25 for all others. Patients traveling with small children or having mobility issues can further complicate using public transportation. CHW patients often do not have money for bus fare.

UTMB and the City of Galveston are partners in an extended transit service that only serves the needs of the university's employees, students, visitors, and patients. Patients who show proof of scheduled appointments, admittance, or pharmacy visits may also ride at no cost. In addition, people who are assisting patients or children under 18 accompanied by a patient ride free. Fixed-route buses and Dial-a-Ride (DART) services, a curb-to-curb service for those persons who are unable, due to disability, to use the regular fixed route service, run Monday through Saturday from 6 a.m. to 7:30 p.m. and Sundays from 8 a.m. to 7 p.m. DART participants ride for \$2 each way. DART services require 24-hour notice and therefore are not available for those with urgent or emergent care needs.

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<sup>10</sup> U.S. Census Bureau, SNAP Benefits Recipients in Galveston and Brazoria County, TX. FRED, Federal Reserve Bank of St. Louis. Fred.stlouisfed.org.

<sup>11</sup> County Health Rankings, University of Wisconsin Population Health Institute, and Robert Wood Johnson Foundation. 2022. "County Health Rankings: Galveston (GAL) County, Texas." County Health Rankings & Roadmaps.

<sup>12</sup> US Census Bureau, ACS. 2014-2019. "Means of Transportation to Work." Data.census.gov.

## Population Characteristics

### Demographics

In 2021 CHW saw 8,304 unique patients. CHW sees a higher proportion of Hispanic and African American patients compared to the population of Galveston County. Race and ethnicity are not mutually exclusive, so the percentages do not add up to 100%.

*Table 1 Race and Ethnicity Percentages in Galveston County and CHW Populations in 2021*

<b>Race or Ethnicity</b>	<b>Percent of Galveston County Population<sup>13</sup></b>	<b>Percent of CHW Population</b>
Ethnicity: Hispanic	25.4%	43.5%
White Alone	56.7%	71.5%
African American Alone	13.2%	24.9%
Multi-Racial	2.1%	0.01%
Asian Alone	3.5%	0.02%
Native Hawaiian and Other Pacific Islander Alone	0.01%	0.00%
American Indian & Alaska Native Alone	0.77%	0.002%

*\*Percentages may not add up to 100% because ethnicity and race are not mutually exclusive*

### *Economic factors*

Poverty is well-researched as a determinant of health. The Office of Disease Prevention and Health Promotion (ODPHP) explains communities living in poverty have more adverse health outcomes and are at higher risk for chronic conditions like diabetes, obesity, and heart disease.<sup>14</sup> Most patients, 71.2%, served at CHW are uninsured and more than half fall below the federal poverty line. This population is at greater risk for chronic conditions, in part because of lack of access to healthcare, as well as other environmental factors.

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*Most patients, 71.2%, served at CHW are uninsured and more than half fall below the federal poverty line.*

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<sup>13</sup> United States Census Bureau, and American Community Survey (ACS). 2021. "QuickFacts: Galveston County, Texas." Data.Census.Gov. 2021. data.census.gov.

<sup>14</sup> Office of Disease Prevention and Health Promotion (ODPHP). February 6, 2022. "Healthy People 2020 Social Determinants of Health: Poverty." HealthyPeople.Gov.

Table 2 Percentage of Poverty and Uninsured in Galveston County and CHW Populations

	Galveston County <sup>1516</sup>	CHW
% of Population in Poverty	9.9%	57%
Population Below the 100% Federal Poverty Line	33,751	4,734
% of Population Under 18 in Poverty	8.6%	0.04%
Uninsured	19.8%	71.2%

Texas has chosen not to expand Medicaid under the Affordable Care Act, there are around 771,000 Texans who fall into the health care coverage gap, meaning they are not eligible for Medicaid under Texas’ stringent rules, the income cap for a family of three is \$3,740 annually, or 18% of the FPG but also not eligible for Marketplace subsidies.<sup>17</sup> Were Texas to expand Medicaid, some 1,534,000 residents would become eligible.

Limited or no access to health insurance impacts individuals living in poverty the greatest. A population who already face increased risks of poor health outcomes and early mortality. Having no access to health care services can result in unmanaged or poorly managed health conditions that can lead to reduced participation in the workforce. This only increases costs throughout the health care systems and increased early mortality rates. Access to healthcare for uninsured individuals is addressed in [Priority 1: Be an Exceptional Health Center and Workplace](#).

In Galveston County, the median income is \$74,977, which is higher than the state (\$64,034) and national (\$65,712) figures and reflects the impact of high-paying jobs in the health and petrochemical industries and the influx of wealthy residents that joined the community. However, in CHW’s service area, the median family income is only \$53,275, well below the local, state, and national averages.<sup>18</sup>

Per the US Bureau of Labor Statistics, the December 2022 unemployment rate for the service area was 5.1%. This figure is significantly higher than the state (4.8%) and national rate (3.9%).<sup>19</sup> The unemployment rate in Galveston County spiked in 2020, peaking at about 15%, and then declined in 2022.<sup>20</sup> As of January 2022, Galveston County’s unemployment rate is reported to be 5.8%. CHW began collecting employment status information in December 2021 and thus does not have patient specific data to report at this time.

### Age

The population in Galveston County is evenly divided among the various age groups; however, as is happening across the U.S., Galveston’s 65+ population continues to grow, which will ultimately impact the area’s health care utilization patterns. An early indication of this change may be reflected in

<sup>15</sup> United States Census Bureau. 2020. “Small Area Income and Poverty Estimates (SAIPE).” Census.Gov.

<sup>16</sup> UDS Mapper. 2021. <https://udsmapper.org>

<sup>17</sup> Garfield, Rachel, and Kendal Oregre. January 21, 2021. “The Coverage Gap: Uninsured Poor Adults in States That Do Not Expand Medicaid.” Keiser Family Foundation.

<sup>18</sup> Ibid.

<sup>19</sup> U.S. Bureau of Labor Statistics. January 2022. “Unemployment Rate in Galveston County, TX.” Federal Reserve Bank of St. Louis (FRED). FRED, Federal Reserve Bank of St. Louis.

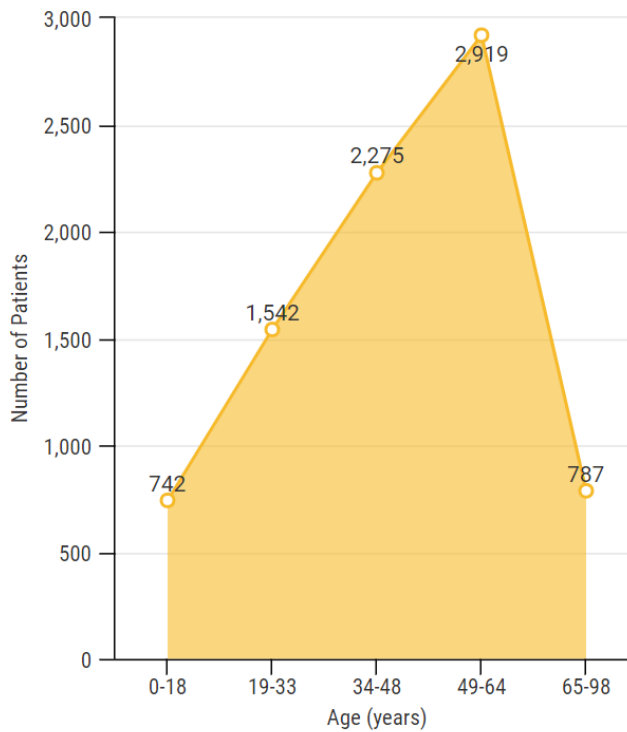
<sup>20</sup> Ibid.



the service area’s high proportion, 41.5%, of disabled individuals compared to the state’s average of 35.8%.<sup>21</sup>

Patients at CHW primarily fall between 19-64 years old, with the highest proportion falling between 34-48 years old. The median age for a CHW patient is 46, compared to Galveston County’s median age of 38. The population under 18 years old made up <1% of total CHW patients. This represents an area of potential growth for the clinic that is further discussed in the [Priorities and Goals](#) section. The population over 65 years old also made up less than 1% of the patient population and may also represent an area of potential growth.

*Graph 1 Number of Patients in Age Ranges at CHW in 2021*



*Table 3 Percent of CHW Patient Age Ranges in 2021*

Age	CHW Population
0-2 years	0.006%
3-5 years	0.01%
6-13 years	0.04%
14-18 years	0.04%
19-33 years	18.5%
34-48 years	27.4%
49-64 years	35.1%
65-78 years	0.08%
79-98 years	0.01%

<sup>21</sup> United States Census Bureau, and American Community Survey (ACS). 2022. “2020 ACS 5-Year Estimates Data Profiles: Selected Social Characteristics in the United States.” Data.Census.Gov.

## Language

Communication is key to accessing health care, from finding a provider and scheduling an appointment through discussion of patient symptoms and treatments. An estimated 20% of Galveston County residents do not exclusively speak English at home.<sup>22</sup> 15.5% of residents reported speaking Spanish and 5% said they do not speak English very well. Even those who speak English well may feel more comfortable discussing their health in Spanish.

Many staff at CHW are bilingual and able to speak with patients in Spanish. Of 50 patients interviewed about their care at CHW, 5 mentioned the importance of speaking Spanish. One patient said, “Everyone speaks Spanish – that helps me understand.” Delivering care in an appropriate manner that responds to a patient’s needs is and remains a priority and is further discussed in [Priority 3: Strategically Address Health Disparities](#).

## Health Behaviors

Health behaviors such as inactivity, smoking, mental health conditions, and non-medical drug use are important factors impacting community health.<sup>23</sup>

According to County Health Rankings, 26% of Galveston County adults are physically inactive compared to 23% of Texas adults reporting complete physical inactivity.<sup>24</sup> The top US performers only have 19% of physically inactive adults. Little to no physical activity leads to higher rates of obesity, type 2 diabetes, heart disease, and early mortality rates. Participating in physical activity not only improves overall health, but studies have shown that it decreases the rates of depression and anxiety.

The rate of deaths caused by drug overdose and suicide is higher in Galveston County when compared to the state. In a GCHD survey, approximately 55% of county residents report limited access to mental health services as a serious problem, second to obesity.<sup>25</sup> Residents of Galveston County report a higher number of poor mental health days (4.3) than the state and the national number of 3.8.<sup>26</sup> Further, a survey of area residents conducted by the Galveston County Health District found that 75% of survey respondents ranked access to mental health services as a serious or somewhat serious problem. [This is addressed in Priority 2: Scale Services](#).

Adult smoking in Galveston County is estimated to occur in 18% of the population, 4% higher than the state average of 14%.

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<sup>22</sup> United States Census Bureau, and American Community Survey (ACS). 2022. “2020 ACS 5-Year Estimates Data Profiles: Selected Social Characteristics in the United States.” Data.Census.Gov.

<sup>23</sup> Short, Susan E., and Stefanie Mollborn. 2015. “Social Determinants and Health Behaviors: Conceptual Frames and Empirical Advances.” *Current Opinion in Psychology* 5 (October): 78–84.

<sup>24</sup> County Health Rankings, University of Wisconsin Population Health Institute, and Robert Wood Johnson Foundation. 2022. “County Health Rankings: Galveston (GAL) County, Texas.” *County Health Rankings & Roadmaps*.

<sup>25</sup> Galveston County Health District. 2017. “Galveston County Health District 2017-2022 Strategic Health Plan.”

<sup>26</sup> County Health Rankings, University of Wisconsin Population Health Institute, and Robert Wood Johnson Foundation. 2022. “County Health Rankings: Galveston (GAL) County, Texas.” *County Health Rankings & Roadmaps*.

Table 4 Health Behaviors in Galveston County, Brazoria County, and Texas<sup>27</sup>

Health Behavior	Galveston County	Brazoria County	Texas
Physical inactivity	26%	32%	23%
Adult smoking	18%	15%	14%
Excessive Drinking	22%	19%	19%

CHW measures health behavior data based on 2021 Universal Data System (UDS) measures. Patients may self-report behaviors and some conditions are diagnosed. In 2021, 1079 patients were diagnosed with depression and other mood disorders, 815 were diagnosed with anxiety disorders including post-traumatic stress disorder (PTSD), and 213 were diagnosed with other mental conditions. Also in 2021, 821 patients were diagnosed with tobacco use disorder, 218 patients were diagnosed with alcohol-related disorders, and 132 were diagnosed with other substance-related disorders. Currently, inactivity is difficult to measure at the clinic level, an issue that informs [Priority 3: Strategically Address Health Disparities](#) and [Priority 5: Upgrade Technology and Processes](#).

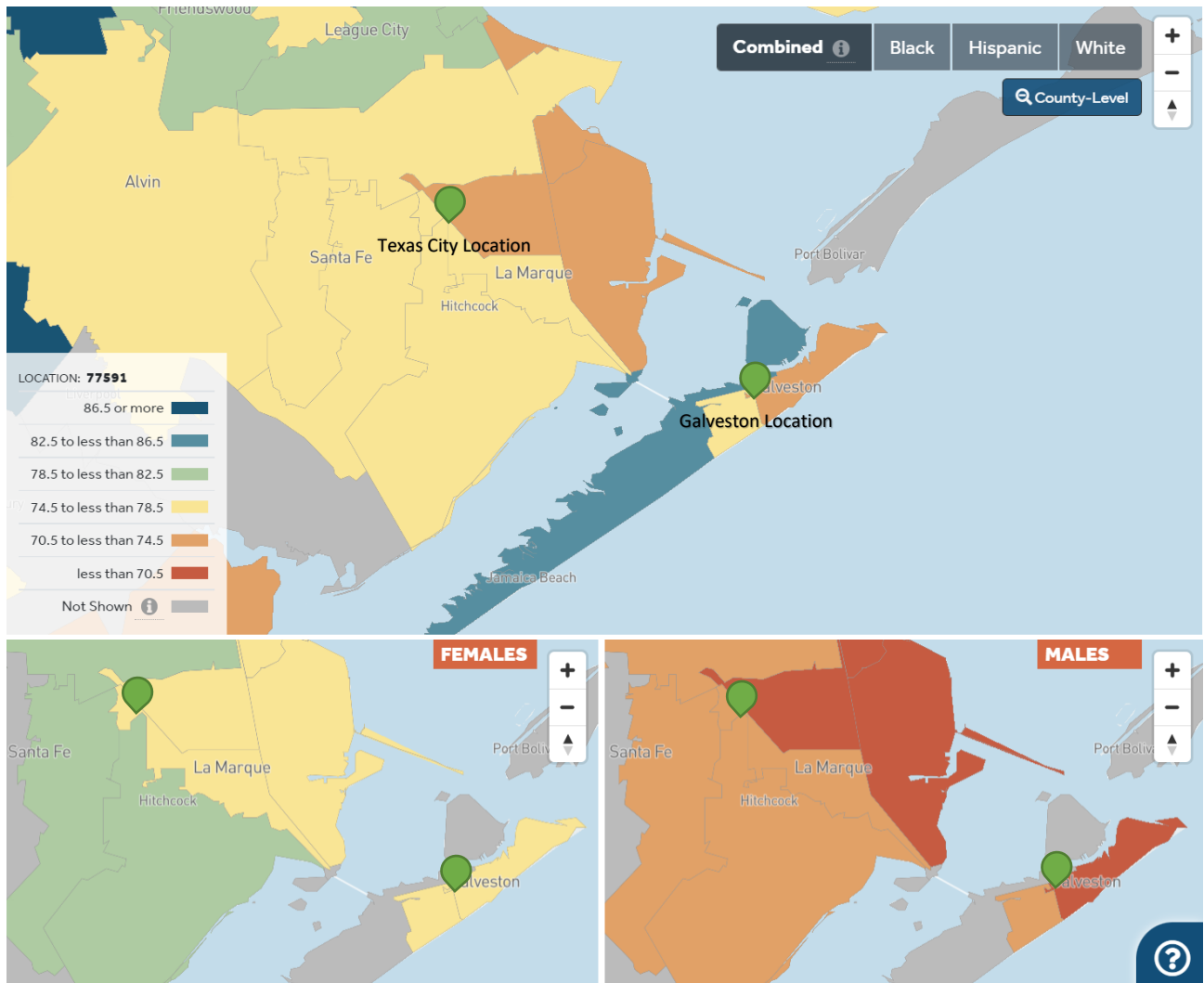
## Health Outcomes

Coastal Health and Wellness has two locations, one in Texas City and the other in Galveston. The average life expectancy of people living in the Texas City 77591 zip code is 71.8 years.<sup>28</sup> The average life expectancy for people in the Galveston 77551 zip code is 75 years. Both these life expectancies are lower than the average for Galveston County’s 76.7 years and Texas’ average of 78.5 years. The approximate location of the two clinics is marked on University of Texas Southwestern’s life expectancy map below.

<sup>27</sup> Ibid.

<sup>28</sup> Karimifar, Em, UT Southwestern, and UT Health. 2014. “Life Expectancy in Texas.” Texashealthmaps.com.

Map 3 Life Expectancy in Galveston County<sup>29</sup>



CHW facilities are in locations where the life expectancy is lower than the surrounding areas. This means CHW is strategically located to provide access to care for those who may have a higher need for services.

Health factors, which are the environmental factors, community characteristics, and health behaviors, of Galveston County help CHW better understand the context developing health outcomes. County Rankings summarizes these factors in a score and rank system, visualized in the tables below. Galveston County, Brazoria County, and Bell County are included due to their size and comparability. In 2021, Galveston County ranked lower across all subcategories except physical environment.

<sup>29</sup> Karimifar, Em, UT Southwestern, and UT Health. 2014. "Life Expectancy in Texas." Texashealthmaps.com.

Table 5 Texas County Rankings in 2021<sup>30</sup>

County	Length of Life		Quality of Life		Health Behaviors	
	Z-Score	Rank	Z-Score	Rank	Z-Score	Rank
Galveston	-0.29	57	-0.22	63	0.02	137
Brazoria	-0.68	19	-0.40	35	-0.15	32
Bell	-0.30	56	-0.15	74	-0.02	112
County	Clinical Care		Social & Economic Factors		Physical Environment	
	Z-Score	Rank	Z-Score	Rank	Z-Score	Rank
Galveston	-0.10	48	-0.12	78	0.02	147
Brazoria	-0.11	43	-0.23	36	0.10	240
Bell	-0.16	24	-0.16	62	0.04	166

In 2021, Galveston County ranked lower across all subcategories except physical environment. Health outcomes are the length and quality of life and are the result of numerous factors combined. Overall health outcomes in Galveston County are ranked 55<sup>th</sup> in the state of Texas. In health factors, Galveston County ranked 77<sup>th</sup> out of 243 ranked counties.

Table 6 Texas County Rankings in 2021<sup>31</sup>

County	Health Outcomes		Health Factors	
	Z-Score	Rank	Z-Score	Rank
Galveston	<b>-0.50</b>	<b>55</b>	<b>-0.18</b>	<b>77</b>
Brazoria	-1.09	17	-0.39	39
Bell	-0.46	62	-0.31	50

## Prevalent Conditions

The most prevalent, critical, medical conditions across the CHW patient population are diabetes, cardiovascular disease, cancer, HIV, overweight and obesity, chronic respiratory disease, and mental health disorders.

### Diabetes

The service area's diabetes prevalence rate is 12%, which is higher than the state's 10% rate.<sup>32</sup> Similarly, the percentage of Medicare beneficiaries with diabetes is 28.08%, which is higher than the national rate of 26.95% but slightly lower than the state's 28.78% rate.<sup>33</sup> Individuals without proper management of diabetes end up having higher utilization rates of dialysis centers and emergency rooms, and their health status suffers due to loss of limbs, eyesight, and the ability to work.

<sup>30</sup> County Health Rankings, University of Wisconsin Population Health Institute, and Robert Wood Johnson Foundation. 2022. "County Health Rankings: Galveston (GAL) County, Texas." County Health Rankings & Roadmaps.

<sup>31</sup> Ibid.

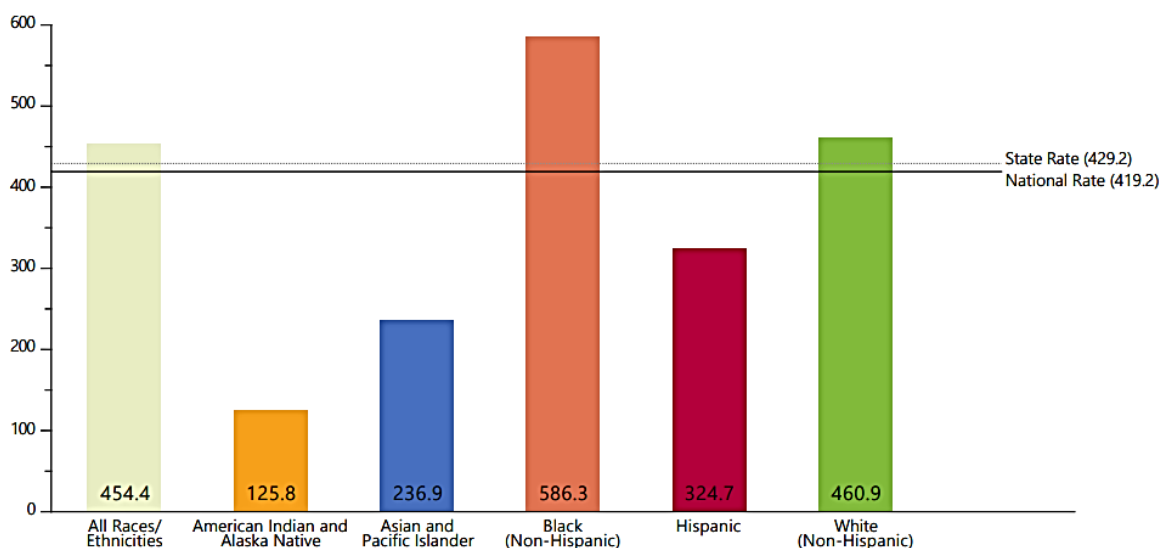
<sup>32</sup> US Census Bureau, ACS. 2014-2019. Data.census.gov.

<sup>33</sup> Centers for Medicare and Medicaid Services. 2018. cms.gov

## Cardiovascular Disease

At CHW, the most frequently observed conditions are cardiovascular disease and overweight and obesity, both are seen at a rate of 35% in the patient population. Death rates from hypertension in the service area are 264.2 per 100,000 deaths; this is higher than the national hypertension death rate of 241.2/100,000.<sup>34</sup> In Galveston County, approximately 454.4 per 100,000 deaths are attributed to cardiovascular disease, which is higher than the national rate of 419.2/100,000 and the state rate of 429.2/100,000.

*Graph 2 Total Cardiovascular Disease Death Rate per 100,000 in Galveston County, All Races/Ethnicities, Both Genders, Ages 35+, 2017-2019<sup>35</sup>*



*Graph from CDC Interactive Atlas of Heart Disease and Stroke*

Many patients who lack a regular health care provider or medical access are unaware they have high blood pressure, which has coined hypertension as the silent killer. The graph above reflects racial disparity in cardiovascular disease death rate, with the Black/African American population highly overrepresented. This inequity is addressed in [Priority 3: Strategically Address Health Disparities](#). Unawareness of a high blood pressure diagnosis can lead patients to seek medical care from emergency rooms and urgent care centers when the condition reaches dangerous limits. Patients with high blood pressure can avoid this outcome with the help of preventive care, healthcare provider visits, medications, diet, and exercise.

A lack of primary care services for low-income, uninsured, patients in CHW's service area means that many people are not receiving preventive care that could help them manage their high blood pressure. Over the years, high blood pressure damages the body, which is demonstrated by the high rate of heart attacks in the target population. These heart attacks could be prevented with proper primary care management, thereby reducing patients' long-term health care utilization, and improving their health status.

<sup>34</sup> Centers for Disease Control and Prevention. 2017-2019. "Interactive Atlas of Heart Disease and Stroke." [nccd.cdc.gov](http://nccd.cdc.gov).

<sup>35</sup> Centers for Disease Control and Prevention. 2017-2019. "Interactive Atlas of Heart Disease and Stroke." [nccd.cdc.gov](http://nccd.cdc.gov).

## Cancer

Cancer mortality data from 2015-2019 show Galveston County has high incidence rates of certain kinds of cancer, including breast, colon and rectum, lung, and prostate, and a high cancer mortality rate.

*Table 7 Cancer Mortality Rates per 100,000 between 2015-2019*<sup>36</sup>

	Galveston County	Texas	United States
All Cancer	174.8	146.5	152.4
Lung and Bronchus	45.0	32.5	36.7
Breast	23.4	19.9	19.9
Prostate	21.8	17.7	18.9
Colon and Rectum	18.8	17.2	16.0
Kidney and Renal Pelvis	6.2	6.0	5.2
Bladder	8.5	6.3	7.3

Education, awareness, and regular screenings are critical to prevention, early detection, and, if necessary, treatment. However, only 75% of women aged 18 and older in the service area reported having a cervical cancer screening in the last three years compared to the national rate of 77.7%. Only 68.2% of women over age 40 reported having a mammogram within the past two years while the national rate is 71.5%.<sup>37</sup> CHW has worked diligently over the last year to make patients aware of free and reduced-price cancer screenings, particularly breast and cervical cancer screenings.

Between 2018-2020, Galveston County saw a higher mortality rate caused by malignant neoplasm than neighboring Brazoria County and the state of Texas.

*Table 8 Underlying Cause of Death 2018-2020*<sup>38</sup>

Underlying Cause of Death 2018-2020 (Crude Rate per 100,000)	Galveston County	Brazoria County	Texas
Malignant Neoplasm	189.2	142.9	143.0

## HIV

Since 2010, Texas has seen an increase in total number of people living with HIV. Galveston County saw an increase between 2017 and 2018, with a slight decrease between 2018 and 2019. However, total number of people living with HIV in Galveston County is almost double than the number of people living with HIV in neighboring Brazoria County.

<sup>36</sup> National Institutes of Health, National Cancer Institute, and U.S. Department of Health and Human Services. "State Cancer Profiles: Texas." 2021. State Cancer Profiles. [Statecancerprofiles.cancer.gov](http://Statecancerprofiles.cancer.gov).

<sup>37</sup> Behavioral Risk Factor Surveillance System (BRFSS), Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, and Division of Population Health. 2020. "BRFSS Prevalence & Trends Data." [nccd.cdc.gov/BRFSSPrevalence](http://nccd.cdc.gov/BRFSSPrevalence).

<sup>38</sup> Centers for Disease Control and Prevention, and U.S. Department of Health & Human Services. December 22, 2021. "National Center for Health Statistics Mortality Data on CDC WONDER." CDC WONDER.

Graph 3 Persons Living with HIV in Texas by Year<sup>39</sup>

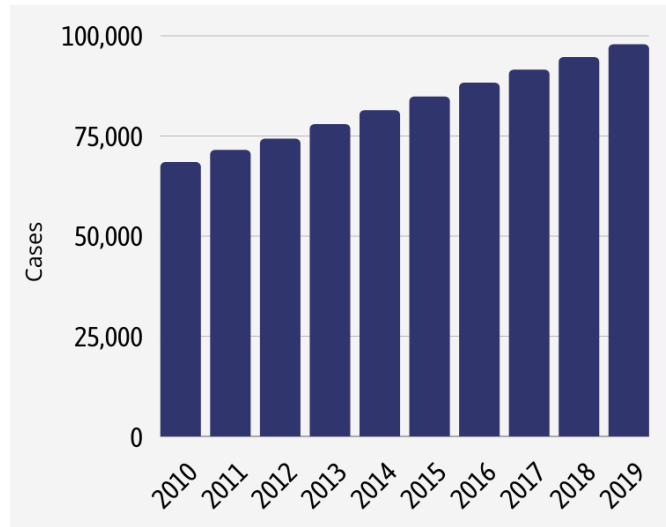


Table 9 Persons Living with HIV in Galveston, Brazoria, and Bell County between 2017-2019<sup>40</sup>

Year	Galveston County	Brazoria County	Bell County
2017	1,038	643	758
2018	1,239	667	804
2019	1,118	684	855

Between 2017-2019 Galveston County had a higher number of people living with HIV than Brazoria and Bell County. In 2021, CHW provided medical care for 1,681 patients diagnosed with HIV. This number is more than 50% higher than the 2019 total cases in Galveston County. The CDC reports about 40% of people with HIV are unaware of their status, which may mean case numbers are underreported.<sup>41</sup>

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*In 2021, CHW saw 1,681 patients diagnosed with HIV. This number is more than 50% higher than the 2019 total.*

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Black and Hispanic communities are the most disproportionately impacted by HIV. In 2019, 31.5% of HIV cases were among Black/African American individuals who only make up 12.6% of the Galveston County population. This is a 19% over-representation of HIV cases compared to the population. In 2019, 40% of HIV cases were among White individuals who make up 61.2% of the Galveston County population. This is 21% underrepresentation proportional to the population. Disproportionality reflects inequity and requires health centers to make strategic efforts to address disparities. Awareness through testing, treatment, and education, is essential for those living with the virus and to prevent transimission. HIV has been, and will continue to be, a priority for CHW and GCHD.

<sup>39</sup> Texas Department of State Health Services. 2022. "Texas Health Data - People Living with HIV 2010-2019." Texas Health Data. 2022. healthdata.dshs.texas.gov.

<sup>40</sup> Ibid.

<sup>41</sup> Centers for Disease Control and Prevention. 2020. "HIV Testing HIV/AIDS." cdc.gov.



## Overweight and Obesity

Overweight and obesity increases health risks and is a comorbidity related to cancers, type 2 diabetes, cardiovascular disease, depression, and respiratory disease.<sup>42</sup> The 2021 America's Health Rankings list Texas 39th (out of the 50 states) for obesity. Several environmental factors likely play a role in the service area's high rate of overweight and obese residents. The highest number of CHW patients seen in 2021 were diagnosed with overweight and obesity at 2,926 patients, representing 35% of the population. Overweight and obesity was the second highest diagnosis related to patient visits, with 4,796 visits in 2021.

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*Overweight and obesity was the second highest diagnosis related to patient visits, with 4,796 visits in 2021.*

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As discussed in the [Environmental Factors: Food Access](#) section, access to healthy foods is one factor influencing overweight and obesity. Social determinants of health, such as income, environment, education, community context, and health care access, also influence overweight and obesity.<sup>43</sup> For example, someone working multiple jobs with a lower income may not have the resources to buy fresh produce, cook, and engage in leisurely physical activity. CHW has and will continue to engage patients with respect to their individual circumstances to best support their health and addresses this in [Priority 3: Strategically Address Health Disparities](#) and [Priority 4: Expand CHW Reach into the Community Through Maximizing Community Stakeholder Relationships](#).

## Chronic Respiratory Disease

Chronic respiratory disease impacts airways and lungs and yield major impacts on an individual's health. Respiratory disease can be caused by tobacco smoke, air pollutants, exposure to occupational dust and chemicals, and frequent lower respiratory infections during childhood.<sup>44</sup>

*Table 10 Mortality Data: Underlying Cause of Death 2018-2020<sup>45</sup>*

<b>Underlying Cause of Death 2018-2020 (Crude Rate per 100,000)</b>	<b>Galveston County</b>	<b>Brazoria County</b>	<b>Texas</b>
Malignant neoplasms of trachea, bronchus, and lung	48.1	33.0	30.2
Influenza and Pneumonia	12.8	11.6	11.7
Chronic Lower Respiratory Diseases	44.0	31.1	36.7
Other Chronic Lower Respiratory Diseases (COPD and Asthma)	38.0	28.0	34.3

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<sup>42</sup> Harvard T.H. Chan. 2021. "Obesity Prevention Source." Harvard T.H. Chan Obesity Prevention Source. [hsph.harvard.edu](https://hsph.harvard.edu).

<sup>43</sup> Office of Disease Prevention and Health Promotion, Office of the Assistant Secretary for Health, Office of the Secretary, and U.S. Department of Health and Human Services. 2022. "Healthy People 2030: Food Insecurity." [Health.Gov](https://www.health.gov).

<sup>44</sup> World Health Organization. 2022. "Chronic Respiratory Diseases." WHO Health Topics. [WHO.int](https://www.who.int).

<sup>45</sup> Centers for Disease Control and Prevention, and U.S. Department of Health & Human Services. December 22, 2021. "National Center for Health Statistics Mortality Data on CDC WONDER." [CDC WONDER](https://wonder.cdc.gov).

The death rates in Galveston County for malignant neoplasms of trachea, bronchus, and lung, influenza and pneumonia, and chronic lower respiratory diseases, are higher than Brazoria County and Texas. Treatment and maintenance for respiratory conditions necessary to avoid negative and even deadly health outcomes.

### Mental Health

Mental health is an increasingly important focus in healthcare. Conditions such as anxiety, post-traumatic stress disorder (PTSD), depression, and others, can affect how people feel, think, and act, all factors in a person's overall well-being. If unaddressed, mental conditions can lead to consequences as severe as self-harm. The table below shows Galveston County's drug overdose and suicide mortality rate is higher than Texas.

*Table 11 Drug Overdose Death and Suicide Rates in 2021<sup>46</sup>*

	Galveston County	Texas
<b>Drug Overdose Death Rate</b>	16	11
<b>Suicide Rate</b>	16	13

In 2021, CHW provided medical care for 1,079 patients diagnosed with depression and other mood disorders, 815 patients with anxiety disorders (including PTSD), 213 patients with mental disorders excluding alcohol and tobacco disorders, and 49 patients with attention deficit and disruptive behavior disorders. A total of 5,130 visits occurred in 2021 to address mental health conditions, excluding substance use disorders.

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*In 2021 CHW saw 5,130 visits to address mental health conditions and 2,252 visits to address substance use disorders.*

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Substance use disorders (SUD) are separate but sometimes co-occurring with mental health disorders. Both mental health and substance use disorders can disrupt daily life and cause impairment and health problems. In 2021 CHW saw 821 patients diagnosed with tobacco use disorder, 218 patients with alcohol-related disorders, and 132 patients with other substance-related disorders (excluding tobacco use disorders). A total of 2,252 visits to CHW in 2021 addressed substance use disorders. Mental health and wellbeing are an essential facet of community health and priority for CHW, addressed in [Priority 2: Scale Services](#).

### Conditions Affecting Child Health Outcomes

In Texas, 35.3% of the total population ages 19 to 35 months has not received the recommended 7-vaccination series. For children who are at or below poverty, this figure increases to 37.8%. 53.3% of uninsured children did not receive the recommended 7-vaccine series in Texas.<sup>47</sup> Obesity is another significant, and worsening, problem for service area children ages 10 to 17, particularly low-income

<sup>46</sup> County Health Rankings, University of Wisconsin Population Health Institute, and Robert Wood Johnson Foundation. 2022. "County Health Rankings: Galveston (GAL) County, Texas." County Health Rankings & Roadmaps.

<sup>47</sup> Centers for Disease Control and Prevention. "CDC ChildVaxView." 2017. CDC.gov.

children. Approximately 24.2% of Texas children who are between 300-399% of the FPG are obese. For comparison, only 8.7% of children who are at or below 400% of the FPG are obese.<sup>48</sup> Currently CHW’s child patient population is less than 1% of total population. This will inform the strategic priorities for 2022-2025 and is discussed further in [Priority 2: Scale Services](#).

## Dental

There are only two locations in Galveston County where one can receive dental care at reduced cost: CHW, St. Vincent’s, and St. Hope. Currently, St. Vincent’s only offers extractions. The 2020 Behavioral Risk Factor Surveillance System (BRFSS) reported 43.4% of service area adults did not visit a dentist or dental clinic in the past year, and around 39.9% report having permanent teeth extracted.<sup>49</sup>

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*There are only three locations in Galveston County where one can receive dental care: CHW, St. Vincent’s, and St. Hope. Currently, St. Vincent’s only offers extractions.*

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Poor oral health can seriously compromise a person's general health, quality of life, and life expectancy. Oral disease can lead to systemic problems that damage other parts of the body and result in the need for expensive emergency department visits, hospital stays, and medications. Community members who are in financial trouble often forego treatment or neglect their oral health, placing priority on other problems they may be facing—unemployment, eviction, and childcare.

In 2021, 1,475 patients were diagnosed as needing emergency services (any dental procedure deemed an emergency), 1,190 with oral exams, 746 patients with restorative services (repairing or restoring damaged oral structures such as fillings, bridges, implants, etc.), and 739 for oral surgeries (extractions and other surgical procedures). A total of 5,432 visits addressing these conditions occurred in 2021. The limited availability of dental services in the service area, as well as the expense associated with dental procedures, bolsters the importance of CHW’s dental services. Support for dental services is highlighted in [Priority 2: Scale Services](#).

## Coastal Health and Wellness Visit and Diagnosis Data

Top diagnosed conditions in 2021 were overweight and obesity, hypertension, HIV, diabetes mellitus, and emergency services. Emergency services is any dental procedure deemed an emergency (extreme pain, potential infection, extraction, fever, body can suffer, etc.).

*Table 12 CHW Visits and Diagnoses in 2021*

<b>Diagnostic Category</b>	<b>Number of Visits by Diagnosis Regardless of Primacy (a)</b>	<b>Number of Patients with Diagnosis (b)</b>
<i>Overweight and obesity</i>	4796	2926
<i>Hypertension</i>	5104	2536

<sup>48</sup> US Census Bureau, ACS. 2014-2019. Data.census.gov.

<sup>49</sup> Behavioral Risk Factor Surveillance System (BRFSS), Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, and Division of Population Health. 2020. “BRFSS Prevalence & Trends Data.” [nccd.cdc.gov/BRFSSPrevalence](https://nccd.cdc.gov/BRFSSPrevalence).

<i>HIV test</i>	1813	1681
<i>Diabetes mellitus</i>	3718	1564
<i>Emergency services</i>	1704	1475
<i>Coronavirus (SARS-CoV-2) vaccine</i>	2384	1415
<i>Seasonal Flu vaccine</i>	1316	1269
<i>Hepatitis C test</i>	1331	1243
<i>Oral exams</i>	1288	1190
<i>Depression and other mood disorders</i>	2459	1079
<i>Tobacco use disorder</i>	1267	821
<i>Anxiety disorders, including post-traumatic stress disorder (PTSD)</i>	2061	815
<i>Restorative services</i>	1419	746
<i>Oral surgery (extractions and other surgical procedures)</i>	1021	739
<i>Hepatitis B test</i>	756	729
<i>Pap test</i>	692	689
<i>Prophylaxis—adult or child</i>	769	658
<i>Fluoride treatment—adult or child</i>	747	647
<i>Novel coronavirus (SARS-CoV-2) diagnostic test</i>	702	628
<i>Abnormal breast findings, female</i>	98	86
<i>Hepatitis C</i>	148	85
<i>Sexually transmitted infections</i>	59	51
<i>Abnormal cervical findings</i>	74	49
<i>Attention deficit and disruptive behavior disorders</i>	113	49
<i>Childhood lead test screening (9 to 72 months)</i>	33	33
<i>Symptomatic/Asymptomatic human immunodeficiency virus (HIV)</i>	24	19
<i>Lack of expected normal physiological development (such as delayed milestone, failure to gain weight, failure to thrive); nutritional deficiencies in children only. Does not include sexual or mental development.</i>	19	17

<i>Pre-Exposure Prophylaxis (PrEP)-associated management of all patients on PrEP</i>	36	15
<i>Acute respiratory illness due to novel coronavirus (SARS-CoV-2) disease</i>	12	12
<i>Otitis media and Eustachian tube disorders</i>	13	10
<i>Dehydration</i>	4	4
<i>Exposure to heat or cold</i>	3	3
<i>Tuberculosis</i>	4	1
<i>Hepatitis B</i>	2	1

The visit and diagnosis data follows similar trends to the Galveston County health data.

## Internal Organizational Needs Assessment

### Staffing

Adequate staffing is essential for a functioning workplace and to deliver quality care to patients. Between 2016 and 2021, total staff numbers declined by 10. As of March 2022, that number declined further to 86 staff.

Table 13 Number of CHW Staff 2016-2021

Year	Total CHW Staff
2016	104
2017	99
2018	103
2019	100
2020	94
2021	94

In 2021, 23 new staff were hired. The average number of years worked by existing employees is 7.5 years. Available data related to staffing was limited. The total number of new positions added in the last year and current open positions cannot be confirmed. Almost all HR processes and records were hard copy on paper between 2016-2021. Migrating documents and processes to a digital platform is necessary for better tracking and understanding staff needs and is addressed [in Priority 5: Upgrade Technology and Processes](#).

Coastal Health and Wellness staff participated in a Strategic Health Plan (SHP) information and feedback session during an in-service held February 9th, 2022. Staff felt the top items needed to better the clinic for patients and employees were improved recruitment efforts related to posting and filling positions, service expansion, increased communication and team building, and opportunities for

performance enhancement and incentives. These are addressed in [Priority 1: Be an Exceptional Health Center and Workplace](#).

## Priorities and Goals

Priorities and goals are the responsibility of every staff member at CHW. CHW leadership are accountable to ensure tracking of each goal. The [Checkpoint Timeline](#) section details the timing of check-ins toward priorities and goals.

### Priority 1: Be an Exceptional Health Center and Workplace

Goal one: Recruit and retain top talent.

Examples of previous progress: In January of 2020, an employee survey was conducted by executive leaders.

#### Action steps:

- Complete market analysis and applicable wage adjustments by 2025.
- Explore options for performance-based incentives by 2025.
- Provide staff shout outs, icebreakers, and team building on an ongoing basis.
- Provide opportunities to laterally transfer and be promoted.
- Increase the number of educational opportunities for all CHW staff.
- Work toward CHW becoming a teaching facility for community healthcare and clinical site rotations.

Goal two: Expand facility resources.

Examples of previous progress: CHW obtained a series of grants through HRSA that enabled more resources for staff and patients.

#### Action steps:

- Grant exploration in the areas of substance use disorder, mental health counseling, social work, and dental health.
- Counsel patients who qualify for coverage in accessing insurance.
- Develop ideas to create new revenue streams.

Goal three: Maintain excellent care that is patient centered.

Examples of previous progress: PCMH certification through TJC was achieved in 2021. In September of 2021, TJC conducted a 2-day site survey specifically to review CHW standards for PCMH. CHW passed TJC's PCMH survey and remains fully certified.

#### Action steps:

- PCMH certification through TJC was achieved in 2021. We continue to follow workflows and processes.
- Explore applicability of PCMH to the Dental Clinic.
- Use PCMH Patient Guide for new patient introduction to CHW.
- Increase screening and prevention of the following chronic conditions:
  - HTN
  - A1C or diabetes care
  - Mammograms

- Colorectal Screening
- HIV care

## Priority 2: Scale Services

Goal one: Expand access to specialties.

Example of past progress: Assessment of specialties needed was conducted in October of 2021.

Patients and staff noted a need to expand services. Increasing specialists available at the clinic enhances efficiency and access of care by ensuring patients can have a larger scope of their health concerns addressed in one space. Specialists contribute a greater range of services through their expertise. Referrals, while necessary and helpful, can mean added wait time and rerouting a client to another location that may be harder to reach.

### Action steps:

- Integrate specialists for Physical Therapy, Gastroenterology, and Cardiology.
- Expand mental health resources.
- Expand general dentistry resources.

Goal two: Grow child health.

Example of past progress: CHW hired a 0.5 FTE Pediatrician in Fall of 2021.

### Action steps:

- Partner with school health advisory councils and school nurses to expand CHW's reach to the pediatric population.
- Operating with an increased number of providers and ancillary staff in comparison to the close of 2016-2021 SHP date.

Goal three: Grow patient population.

Example of past progress: The patient population grew between 2020-2021.

### Action steps:

- Increase number of total unduplicated patients by 3,500 patients by December 2025.
- Leadership ensures marketing and promotion of CHW across all platforms.

## Priority 3: Strategically Address Health Disparities

Goal one: Deliver care that is patient-centered and responsive to community.

Examples of past progress: Many of our staff are bilingual and communicate with patients who speak languages other than English.

### Action steps:

- Monthly review of chronic disease best practice workflows using Population Health software, and provide more opportunities for staff, leader, and provider input.
- Continue to grow bilingual staff and providers.

Goal two: Identify and address disparities.

Examples of past progress: CHW works with patients who do not have insurance in an effort to ensure they receive care. Providers and staff receive trainings related to addressing bias and providing equitable care

**Action steps:**

- Implement the TACHC Pilot program, the Social Determinants of Health (SDoH) Initiative in 2022. The SDoH Initiative will allow CHW to identify and address disparities and in turn focus on providing greater resources were needed to patients.
- Implementation of value-based care into practice.
- Utilize Electronic Medical Record (EMR) data from NextGen to drive SDoH efforts.
- In-service discussions to educate collection of SDoH data, identify patient needs, and connect patients to resources.

**Priority 4: Expand CHW Community Reach through Maximizing Community Stakeholder Relationships**

Goal one: Expand and maintain strategic partnerships with other organizations and community leaders.

Examples of past progress: CHW has key partnerships with the following entities depicted below (this is not an all-inclusive list).

*Image 1 CHW Partnerships*



**Action steps:**

- Expand partnerships with more community leaders through community health worker outreach and outreach activities, leveraging the special relationship between GCHD and CHW to enhance outreach.
- Maintain communications with partners through in-person meetings, phone calls, emails, and events. Ensure communications occur at least every six months.
- Provide opportunities for partners to deliver feedback to CHW through surveys, interviews, and focus groups.
- Co-host collaborative events with partners' involvement quarterly.



Goal two: Execute activities with attention to maximizing impact.

Examples of past progress: An analysis of the patient population at CHW reflects that those who have less access to care are being served at the clinic at a higher proportion than the population of Galveston County. The clinic locations are positioned where health outcomes are worse than the surrounding areas.<sup>50</sup> This maximizes impact for communities who may otherwise not have access to care.

**Action steps:**

- Utilize the most up to date data, including heat maps, regarding health concerns in Galveston County and create activities to address those concerns.
- Conduct educational and health promoting activities in geographic locations that respond to needs relevant to that area.
- Increase social media outreach partnerships, sharing information from partners to CHW's network and ask partners to share CHW posts to their networks.

## Priority 5: Upgrade Technology and Processes

Goal one: Upgrade CHW technology for care improvements and efficiency.

Examples of past progress: Departments researched software to improve efficiency, between 2016-2021, all providers, staff, and leaders are provided with monthly patient satisfaction scores and comments. Patient satisfaction concerns/complaints are followed up promptly by supervisors, managers, directors, COO, and Executive Director.

**Action steps:**

- Bamboo HR implementation.
- SAGE implementation for accounting and finance.
- Expand and optimize virtual care.
- Population Health implementation beginning in April 2022.
- Monitor patient experience based on patient satisfaction surveys and develop interventions as needed.
- Routine audits of newly implemented technology for functionality and potential gaps.

Goal two: Develop or update processes enhancing communication and work performance.

Examples of past progress: A new approach to addressing no-shows was developed in 2021 and implemented in 2022.

**Action steps:**

- Develop more robust standard operating procedures for all aspects of care.
- Regularly solicit and act upon meaningful staff and patient feedback.
- Conduct annual performance reviews and improvement plans.
- Development of SHP dashboard that is updated bi-annually.

Goal three: Leverage existing technologies.

Examples of past progress: Plan for implementing new no-show/reminder practice was developed November 2021.

**Action steps:**

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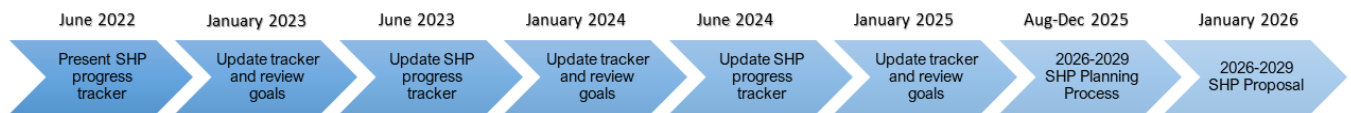
<sup>50</sup> Karimifar, Em, UT Southwestern, and UT Health. 2014. "Life Expectancy in Texas." Texashealthmaps.com.

- Maximize the current use of NextGen through tracking patient referrals and emergency room discharges.
- Maximize the current use of NextGen by creating workflows that allow improved patient follow-up.

## Checkpoint Timeline

The CHW SHP tracker will be developed upon approval of the 2022-2025 SHP. Bi-annual updates to the SHP tracker will be delivered to Governing Board in June and January. Once a year priorities and goals will be evaluated for their applicability and can be updated as needed.

*Image 2 CHW SHP Checkpoint Timeline 2022-2025*



*\*2022-2025 CHW SHP Checkpoints pending SHP approval*

Regular check-ins will keep the organization centered on its priorities and on track toward its goals. Regular evaluation of goals will allow space to address challenges and act accordingly. Additionally, consistent tracking will better enable establishment of future priorities and goals.

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# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board  
April 2022  
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Comments from Board Members**

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