

CORRECTIONAL MANAGED HEALTH CARE COMMITTEE

December 11, 2013

9:00 a.m.

Frontiers of Flight Museum
6911 Lemmon Ave, Conference Room #1
Dallas, Texas

- I. Call to Order
- II. Recognitions and Introductions
- III. Consent Items
 1. Approval of Excused Absences
 2. Approval of CMHCC Meeting Minutes, September 26, 2013
 3. TDCJ Health Services Monitoring Reports
 - Operational Review Summary Data
 - Grievance and Patient Liaison Statistics
 - Preventive Medicine Statistics
 - Utilization Review Monitoring
 - Capital Assets Monitoring
 - Accreditation Activity Summary
 - Active Biomedical Research Project Listing
 - Administrative Segregation Mental Health Monitoring
 4. University Medical Directors Reports
 - The University of Texas Medical Branch
 - Texas Tech University Health Sciences Center
 5. Summary of CMHCC Joint Committee / Work Group Activities
- IV. Update on Financial Reports
- V. Summary of Critical Correctional Health Care Personnel Vacancies
 1. Texas Department of Criminal Justice
 2. Texas Tech University Health Sciences Center
 3. The University of Texas Medical Branch

EACH ITEM ABOVE INCLUDES DISCUSSION AND ACTION AS NECESSARY

- VI. Medical Directors Updates
 - 1. Texas Department of Criminal Justice
 - Health Services Division FY2013 Fourth Quarter Report
 - 2. Texas Tech University Health Sciences Center
 - 3. The University of Texas Medical Branch
- VII. Novel Therapies for Cancer Treatment –
Avi Markowitz, MD, UTMB Chief Hematology/ Oncology;
Olugbenga Ojo, MD, UTMB Chief Medical Officer
- VIII. HCV Pilot Update – Owen Murray, DO, MBA
- IX. Public Comments
- X. Adjourn

Consent Item

Approval of CMHCC Meeting Minutes
September 26, 2013

CORRECTIONAL MANAGED HEALTH CARE COMMITTEE

September 26, 2013

Chairperson: Margarita de la Garza-Graham, M.D.

CMHCC Members Present: Cynthia Jumper, M.D., Harold Berenzweig, M.D., Ben Raimer, M.D., Craig Brown, M.D. (sitting in for Kyle Janek, M.D.)

CMHCC Members Absent: Lannette Linthicum, M.D.

Partner Agency Staff Present: Bryan Collier, Ron Steffa, William Stephens, Charlene Maresh, Robert Williams, M.D., George Crippen, Paula Reed, Marsha Brumley, Texas Department of Criminal Justice; Owen Murray, M.D., Anthony Williams, Stephen Smock, Lauren Sheer, UTMB, Denise DeShields, M.D., TTUHSC; Janice Harris Lord, Texas Board of Criminal Justice

Others Present:

Location: Frontiers of Flight Museum, 6911 Lemmon Ave., Dallas, Texas

Agenda Topic / Presenter	Presentation	Discussion	Action
I. Call to Order - Margarita de la Garza-Graham	Dr. de la Garza-Graham called the CMHCC meeting to order at 9:00 a.m. then noted that a quorum was present and the meeting would be conducted in accordance with Chapter 551 of the Texas Government Code, the Open Meetings Act.		
II. Recognitions and Introductions - Margarita de la Garza-Graham	Dr. de la Garza-Graham thanked everyone for being in attendance. Dr. de la Garza-Graham introduced Dr. Craig Brown who sat in for Dr. Kyle Janek, and William “Bill” Stephens, newly appointed Director, Correctional Institutions Division, TDCJ. Dr. de la Garza-Graham acknowledged that no one had registered to provide public comment.	Bryan Collier also gave a brief introduction and overview of Mr. Stephens’ tenure with the Texas Department of Criminal Justice.	
III. Approval of Consent Items - Margarita de la Garza-Graham	Dr. de la Garza-Graham noted that Dr. Ben Raimer was absent during the June 18, 2013, CMHCC meeting due to a scheduling conflict. Dr. de la Garza-Graham stated next on the agenda is the approval of the Minutes from the meeting held on June 18, 2013: TDCJ Health Services Monitoring Report; both UTMB and TTUHSC Medical Director’s Report; and the		
<ul style="list-style-type: none"> o Approval of Excused Absences 			
<ul style="list-style-type: none"> o Approval of CMHCC Meeting Minutes – June 18, 2013 			

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>III. Approval of Consent Items (Cont.)</p> <ul style="list-style-type: none"> ○ Approval of TDCJ Health Services Monitoring Reports ○ University Medical Director's Reports <ul style="list-style-type: none"> - UTMB - TTUHSC ○ Summary of CMHCC Joint Committee/ Work Group Activities <p>IV. Update on Financial Reports</p> <ul style="list-style-type: none"> - Charlene Maresh 	<p>Summary of Joint Committee Activities.</p> <p>Dr. de la Garza-Graham asked if the committee would like to review and approve each item separately or approve as a whole and if there were any amendments or objections to the proposed consent item?</p> <p>Dr. de la Garza-Graham called on Ms. Maresh to present the financial report.</p> <p>Charlene Maresh reported on statistics for the Third Quarter of FY 2013, as submitted to the Legislative Budget Board (LBB). The report was submitted in accordance with the General Appropriations Act, Article V, Rider 55.</p> <p>Ms. Maresh explained that the TDCJ staff worked closely with the LBB, the Governor's office, the House Appropriations Committee and the Senate Finance Committee to determine the format to use for submitting the financial data. This financial report is in the approved format.</p> <p>Ms. Maresh explained that the report indicates a high level summary of funding and expenditures as follows:</p> <p>Funding received by the universities is \$358.1 million and the total expenditures were \$380.5 million, resulting in a shortfall of \$22.5 million. Since the universities are not expected to operate at a loss, quarterly reconciliation payments are submitted to the universities to make up that difference.</p>		<p>Dr. Ben Raimer made a motion for the items to be approved by consent agenda as found in Tab A of the agenda book. Dr. Jumper seconded the motion which prevailed by unanimous vote.</p>

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>IV. Update on Financial Reports (Cont.)</p>	<p>The report also shows the expenditures broken down by strategies.</p> <p>Unit and psychiatric care makes up the majority of the costs at 57.1 percent, for a total of \$217.2 million. 84 percent is for unit care and 16 percent is for psychiatric care.</p> <p>Hospital and clinical care accounts for 33.4% of total expenditures at a cost of \$127.1 million, which is greatest part of the projected shortfall in health care costs.</p> <p>Pharmacy services makes up 9.5 % of total health care expenditures at a cost of \$36.2 million. \$27.5 million of that number is drug cost alone.</p> <p>The average service population is 148,794 which is a slight decrease from FY 2012.</p> <p>The offender population age 55 and over continues to grow with an increase of 3.5% from FY 2012. The average daily census is 14, 107, making up 9.5% of total service population and accounts for 37.4 percent of total health care cost.</p> <p>The Human Immunodeficiency Virus (HIV) population average daily census is 2, 229, making up 1.5% of the total population.</p> <p>The average daily inpatient census is 105.</p> <p>The average outpatient visits are 5, 533.</p> <p>The average mental health inpatient census is 1,740.</p> <p>The average mental health outpatient census is 19,142.</p> <p>The funding and expenditures for the Correctional Health Care Committee staff is \$379,551.</p> <p>The combined expenditures for UTMB and TTUHSC as well as the annual projected expenditures provided by universities through the Fourth Quarter of FY 2013 is \$511 million, with a projected shortfall of \$32.7 million.</p>		

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>V. Summary of Critical Correctional Health Care Personnel Vacancies (Cont.)</p> <p>VI. Medical Director's Updates</p> <ul style="list-style-type: none"> • TDCJ – Health Services Division FY 2013 Third Quarter Report - Robert Williams, MD ○ Operational Review Audit 	<p>Dr. DeShields further reported that the Medical Director position that will be housed at the Dalhart Unit is also still vacant; this too, is a challenging position and is difficult to fill due to the geographical location. They are continuing to advertise through recruitment agencies.</p> <p>Hearing no further discussions, Dr. de la Garza-Graham then called on Dr. Robert Williams to provide the Medical Director's Update for TDCJ.</p> <p>Dr. Williams began by explaining that the deficiencies reported during operational reviews have been addressed with the units and each unit is working on corrective action plans to gain compliance. During the Third Quarter of FY 2013, (March, April and May), operational review audits (ORAs) were conducted on ten facilities: Clements, Ferguson, Gist State Jail, Havins, Hodge, Johnston, LeBlanc, Lindsey State Jail, Neal and West Texas Intermediate Sanction Facility.</p> <p>Dr. Williams summarized the 11 items found to be most frequently scoring below 80 percent compliance in the ten ORAs.</p>	<p>Dr. de la Garza-Graham asked a question about Item 5.251; what percent of the Hemocult cards tested positive?</p> <p>Dr. Williams deferred the question to the university directors.</p> <p>Dr. Murray responded that this is difficult to determine in that cards are given to offenders; however, they may not return the cards. It becomes a symptom based presentation when the offenders may advise they have blood in their stool or dark stools. Dr. Murray will investigate where the results are entered in the electronic medical record (EMR). It is not like lab results where a system-wide query can provide a total number. Dr. Murray further noted that the cards are hand entered. Getting an accurate number will require several changes to how this data is collected and entered into the EMR.</p>	

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>VI. Medical Director's Updates (Cont.)</p> <ul style="list-style-type: none"> ○ Capital Assets Monitoring ○ Dental Quality Review Audit ○ Grievance and Patient Liaison Correspondence 	<p>Dr. Williams next reported that the same ten units listed above were audited and determined to be in compliance range for capital assets.</p> <p>Dr. Williams explained that Dental Quality Review audits were conducted at the following eighteen facilities: Briscoe, Clemens, Cotulla, Gist, Goodman, Henley, Hightower, Kegans, LeBlanc, Lychner, Ney, Plane, Ramsey, Scott, Stiles, Stringfellow, Terrell, and Torres.</p> <p>Dr. Williams summarized the items found to be most frequently below 80 percent compliance.</p> <p>Dr. Williams then noted that during the Third Quarter of FY 2013, the Patient Liaison Program (PLP) and the Step II Medical Grievance Program received 3,960 correspondences. The PLP received 2,081 correspondences and Step II Medical Grievance received 1,879. There were 544 Action Requests generated. The percentage of sustained Step II medical grievances from UTMB was 13 percent and eight percent for TTUHSC.</p>	<p>Janice Harris Lord stated to Dr. Williams that she has been bothered by the number of medical grievances that are submitted. She has noticed a significant increase in sustained Step II Medical Grievances.</p> <p>Ms. Lord asked Dr. Williams if that is coincidental, or if this represents a trend, and to please explain?</p> <p>Dr. Williams noted that when the Annual Offender Health Services Fee was initiated, a significant number of grievances pertained to that issue. Many of those have been sustained as the staff are learning to adjust to the guidelines. There was a lot of misinformation and misinterpretation early on regarding the policy. The dramatic incline of sustained grievances has more to do with the Annual Offender Health Services Fee.</p> <p>Ms. Lord stated that she had requested an audit regarding the \$100 fee.</p> <p>Dr. Williams advised that an Internal Audit is currently in process.</p>	

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>Medical Director's Updates (Cont.)</p> <ul style="list-style-type: none"> ○ Quality Improvement (QI) Access to Care Audit ○ Chronic Disease Audit: Chronic Heart Disease ○ Office of Public Health 	<p>Dr. Williams added that 49 Sick Call Request Verification Audits were conducted on 46 facilities. A total of 369 indicators were reviewed and only three of the indicators fell below 80 percent compliance.</p> <p>Dr. Williams next noted that TDCJ Health Services conducted a Chronic Disease Quality of Care Audit to assess the primary care management of offenders with Congestive Heart Failure (CHF). A total of 232 charts were audited which represents 39 percent of the 595 offenders with CHF.</p> <p>Dr. Williams explained that the audit is divided into two categories. There are five common questions relative to all seven disease audits and there are six disease specific questions.</p> <p>Dr. Williams reported that there were 703 cases of HIV identified for the Third Quarter FY-2013. 18,207 offenders were tested at intake, and 125 were positive. 11,578 offenders were tested prior to release and none tested positive.</p>	<p>Ms. Lord asked if we know what percentage of offenders can actually pay the fee?</p> <p>Dr. Williams stated that approximately 50 percent of offenders are indigent. TDCJ does not expect to collect the annual health services fee from them. The medical staff determines whether or not the visit is an offender initiated visit. They are not deciding if the fee is to be charged. That information is transmitted from the EMR to the TDCJ mainframe computer. The TDCJ mainframe is programmed to determine indigent status, how much is in the account, and how much to charge.</p> <p>Ms. Lord stated she wasn't sure that it's worth the effort, but that will later be determined.</p> <p>Dr. de la Garza-Graham asked if these were new cases.</p> <p>Dr. Williams explained that they were newly identified cases, and that by the time HIV is identified, it is already chronic. Dr. Williams further noted that they may have been newly received offenders.</p>	

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>Medical Director's Updates (Cont.)</p>	<p>There were 16 new Acquired Immunodeficiency Syndrome (AIDS) cases identified during the Third Quarter FY 2013.</p> <p>271 cases of suspected Syphilis were reported in the Third Quarter FY 2013. 20 of those required treatment or retreatment.</p> <p>189 Methicillin-Resistant Staphylococcus Aureus (MRSA) cases were reported for the Third Quarter FY 2013.</p> <p>Dr. Williams advised that there was an average of 18 Tuberculosis (TB) cases under management for the Third Quarter FY 2013.</p> <p>Dr. Williams next reported the activities of the Sexual Assault Nurse Examiner (SANE) Coordinator. During the Third Quarter FY 2013, 26 training sessions were held and 243 medical and mental health staff received training. This position also audits the documentation and services provided by medical personnel for each sexual assault reported. There were 236 chart reviews of alleged sexual assaults. There were no deficiencies found this quarter. 49 bloodborne exposure baseline labs were drawn on exposed offenders, and there were zero conversions as a result of sexual assault.</p> <p>Dr. Williams noted that the Willacy Unit received a four day training which included the Wall Talk Training. 111 facilities have active peer education programs. 146 offenders trained to become peer educators. 20,414 offenders attended classes presented by educators.</p>	<p>Dr. de la Garza-Graham asked if all TB patients are housed on one unit?</p> <p>Dr. Williams explained that when patients are still potentially communicable, they are kept in respiratory isolation. There are approximately 30 units throughout the system that have respiratory isolation cells. Once patients have been treated for two weeks and have had three negative sputum culture tests, they are returned to their unit. The remainder of their treatment is done as an outpatient.</p>	

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>Medical Director's Updates (Cont.)</p> <ul style="list-style-type: none"> <li data-bbox="107 228 401 253">○ Mortality and Morbidity <li data-bbox="107 383 401 440">○ Office of Mental Health Monitoring & Liaison <li data-bbox="107 1235 449 1292">○ Office of Health Services & Liaison 	<p data-bbox="489 228 1136 350">Dr. Williams reported that there were 108 deaths reviewed by the Mortality and Morbidity Committee during the Third Quarter of FY 2013. Of those 108 deaths, ten were referred to peer review committees for further review.</p> <p data-bbox="489 383 1136 472">Dr. Williams provided a summary of the activities performed by the Office of Mental Health Monitoring & Liaison (OMHM&L) during the Third Quarter of FY 2013:</p> <p data-bbox="489 505 1136 651">Administrative Segregation (Ad Seg) audits were conducted on 21 facilities. 3,889 offenders were observed, 954 of them were interviewed and two offenders were referred to the university providers for additional services. All 21 facilities were 100 percent compliant.</p> <p data-bbox="489 683 1136 862">Four inpatient mental health facilities were audited with respect to compelled medications: Clements, Jester IV, Montford and Skyview. All four facilities were 100 percent compliant for logging all incidents of compelled psychoactive medication and for documenting the required criteria in the medical record.</p> <p data-bbox="489 894 1136 1016">There were 24 intake facilities audited with respect to mental health evaluation within 14 days of identification. There were seven facilities that did not meet 80 percent compliance.</p> <p data-bbox="489 1049 1136 1203">Dr. Williams added the OMHM&L also reviews the mental health records of all pregnant offenders being considered for the Baby and Mother Bonding Initiative (BAMBI) Program. 11 offenders were reviewed and all 11 were allowed to participate.</p> <p data-bbox="489 1235 1136 1325">The Office of Health Services Liaison (HSL) conducts a random audit of 10 percent of EMR of offenders discharged from hospitals and infirmaries.</p> <p data-bbox="489 1357 1136 1438">Dr. Williams explained that each audit determines if vital signs were recorded on the day the offender left the discharge facility; if the receiving facility had medical</p>		

Agenda Topic / Presenter	Presentation	Discussion	Action
<p data-bbox="134 136 352 191">Medical Director's Updates (Cont.)</p> <ul style="list-style-type: none"> <li data-bbox="107 656 289 678">○ Accreditation <li data-bbox="107 745 464 768">○ Biomedical Research Projects <li data-bbox="107 1175 420 1230">● Texas Tech University Health Sciences Center <li data-bbox="155 1268 432 1291">- Denise DeShields, MD 	<p data-bbox="487 136 1134 375">services sufficient to meet the offender's current needs; if the medical record was reviewed by a health care member and referred (if applicable) to an appropriate medical provider as required by policy. Also, the audit determines if the offender required unscheduled medical care related to the admitting diagnosis within the first seven days after discharge and if discharge information was available in the offender's EMR within 24 hours of arriving at the unit.</p> <p data-bbox="487 412 1134 618">Of the 166 hospital discharges, 150 were from the UTMB Sector and 16 were from the TTUHSC sector. There were 24 deficiencies identified for UTMB and one identified for TTUHSC. There were 61 infirmity discharge audits conducted. 27 were from the UTMB sector and 34 were from the TTUHSC sector. There were eight deficiencies identified from UTMB and 14 for TTUHSC.</p> <p data-bbox="487 656 1134 711">Dr. Williams reported that there were ten units reaccredited by the American Correctional Association (ACA).</p> <p data-bbox="487 748 1134 833">Dr. Williams summarized pending research projects as reported by the Texas Department of Criminal Justice (TDCJ) Executive Services.</p> <p data-bbox="487 870 1134 925">The Correctional Institutions Division has 27 active research projects and seven pending.</p> <p data-bbox="487 963 1134 1047">Dr. Williams concluded his report stating that the Health Services Division has two active research projects and eight pending.</p> <p data-bbox="487 1084 1134 1140">Dr. de la Garza-Graham thanked Dr. Williams then called on Dr. DeShields to present the report for TTUHSC.</p> <p data-bbox="487 1177 1134 1261">Dr. DeShields reported that she had no additional information to report other than what was presented in their report.</p> <p data-bbox="487 1299 1134 1354">Dr. de la Garza-Graham thanked Dr. DeShields then called on Dr. Murray to present the report for UTMB.</p>		

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>Medical Director's Updates (Cont.)</p> <ul style="list-style-type: none"> • University of Texas Medical Branch - Owen Murray, DO 	<p>Dr. Murray provided an update on a plan for Hepatitis C Virus (HCV) treatment. Dr. Murray advised that the UTMB has been working with the TDCJ's Correctional Institutions Division's (CID) Director to determine facility choices that would work as sites for offender patients to receive HCV treatment. It was determined that treatment locations should be so that security can handle all custody levels. The Darrington Unit was chosen as it is a maximum security facility that can handle all custody levels and it is close to Hospital Galveston. The facility selection needs to be one that will meet the patients as well as TDCJ's needs to limit the amount of patient transfers.</p>	<p>Dr. de la Garza-Graham asked Dr. Murray if the plan was to bring as many offenders as they can into one location.</p> <p>Dr. Murray responded that when HIV patients were congregated at the Stiles Unit, the idea was that it would be easier to train staff, deliver medications and stay on top of some of the consequences of that disease. Dr. Murray went on to say that UTMB figured out quickly that having 1400-1500 patients in one location, places a great demand on security resources and the ability to deliver medication.</p> <p>The plan is to start out slowly at the Darrington Unit then grow the treatment program accordingly. The three medical directors will meet in October to discuss treatment costs and other operational issues.</p> <p>Dr. de la Garza-Graham asked if there would be some type of protocol sheet and parameter in place to use.</p> <p>Dr. Murray responded that they have this method in place. Dr. Murray noted that it is important to ensure that case managers are in place at these facilities to monitor the offenders' compliance. The medications must be given three times per day and at certain times. The patients must be directly observed taking the medication.</p> <p>Dr. de la Garza-Graham next asked Dr. Murray if he is referencing case managers that are already in the system or additional staff that will be hired?</p> <p>Dr. Murray clarified that the case manager positions will be new positions. Without this process in place, therapy may continue longer than it needs to for patients. Discontinuing</p>	

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>Medical Director's Updates (Cont.)</p>		<p>therapy when it is no longer needed will save the State money and pay for the program itself.</p> <p>Dr. Murray further noted that HCV management has been discussed with Jerry McGinty, Chief Financial Officer, TDCJ. The legislature will need to be informed that this will be a sizable request for funding increase. Dr. Murray further emphasized that a system needs to be in place for when patients are not successful on the HCV treatment plan, that treatment can be discontinued as soon as possible. There would be no reason to continue treatment for those who do not respond to the treatment because there</p> <p>would be no value as well as excessive cost that could be avoided.</p> <p>Dr. Raimer stated that it is important to use this interim period as a time to educate legislative members and staff in advance for the need of additional funding for the HCV treatment program. He suggested hosting a symposium in Austin.</p> <p>Dr. de la Garza-Graham stated this would be an excellent idea and asked Dr. Ramier how does he propose we approach it?</p> <p>Dr. Raimer stated that the medical directors will be laying this out with the standards of care and mainly getting the respective administrators and this Committee to schedule a symposium for the legislative members in advance of the next legislative session, so legislators are not caught by surprise. He noted concern that if legislators are not advised of this cost in advance, it could effect funding for other cost drivers such as equipment and job salaries that may be ignored, so that they need to understand that is not a one time adjustment.</p>	

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>Medical Director's Updates (Cont.)</p>		<p>Dr. Murray also noted that there were already inquiries about HCV testing policies. The numbers are going to grow and the agency is turning over 75,000 patients a year, with a new group of patients that are coming in that are at risk. There will be patients leaving the system that have had treatment while incarcerated, and potentially come back with a new case of HCV.</p> <p>Dr. de la Garza-Graham asked who is going to coordinate the symposium; as the next legislative session will be here before you know it.</p> <p>Ms. Lord stated that she had a suggestion in that the TBCJ policies and guidelines say that the opportunity for this committee to report should be offered at every meeting. She said she didn't know if it had been offered and rejected, but there has not been a Health Care Committee meeting for more than a year. She stated she was pleased that there would be a Health Care Committee meeting at the next TBCJ meeting. Ms. Lord further stated that there is always staff from legislative offices at the TBCJ meetings taking notes, so if a report could be given at every TBCJ meeting that would be a good start.</p> <p>Dr. Murray continued by stating they are willing to help out in any way. UTMB CMC has a virologist that handles the HCV treatment and can provide an informative lecture.</p> <p>Dr. de la Garza-Graham asked if we should get the virologist to go to the TBCJ meeting.</p> <p>Dr. Murray stated that in the past when HIV was poorly understood, an education program was developed.</p> <p>Dr. Murray further advised that financial projection models need to be established to make an assessment of how many patients will</p>	

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>Medical Director's Updates (Cont.)</p>		<p>be treated over the next decade and the potential cost. Dr. Murray agreed to coordinate with TTUHSC to provide the data.</p> <p>Dr. Ramier stated that the CMHCC has a different role of merely advising and is responsible for the Offender Health Care Plan; therefore these new rules for HCV treatment will need to be incorporated. Dr. Raimer recommended that the CMHCC hear from Dr. Murray first before anything is done by TDCJ, possibly by the spring meeting. Dr. Raimer reiterated that the LBB will need to know about the forthcoming expenses.</p> <p>Bryan Collier added that TDCJ staff provides regular briefings to legislative office staff. As this unfolds, they will certainly include this as a financial concern for the upcoming legislative session, and they plan to educate those offices as well.</p> <p>Dr. DeShields added that the treatment of HCV is already listed in the Offender Health Services Plan.</p> <p>Dr. de la Garza-Graham stated that with the cost increase, this is something that the legislative staff will need to know.</p> <p>Dr. Murray asked if the committee would like to have a 15-20 minute presentation on HCV covering knowledge content with cost projections. He suggested bringing a virologist and Dr. Stephanie Zepeda, Director of Pharmacy along with anyone that TTUHSC or TDCJ would like include.</p> <p>Dr. de la Garza-Graham suggested that the CMHCC committee review the presentation prior to being presented to the TBCJ.</p> <p>Dr. Murray noted that he will try to have the</p>	

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>Medical Director's Updates (Cont.)</p>		<p>presentation available for the December CMHCC meeting.</p> <p>Dr. Murray stated that there are no suggested changes to the Offender Health Services Plan by any of the three medical directors.</p> <p>Dr. de la Garza-Graham stated that it is strictly for review and does not need to be voted on unless the committee wants to.</p> <p>Dr. Murray further clarified that the only change would be the modification to the HCV treatment plan and implementation.</p>	
<p>VII. Review of Offender Health Services Plan</p>	<p>Dr. de la Garza- Graham stated that the Offender Health Services Plan is up for review only and does not need to be approved by the committee.</p> <p>Dr. de la Garza-Graham asked if anyone had anything to add.</p>		
<p>VIII. Public Comments</p>	<p>Dr. de la Garza-Graham then stated that the next agenda item is where the Committee provides an opportunity to receive public comments. Dr. de la Garza-Graham noted that there was no such request at this time.</p>		
<p>IX. Adjourn</p>	<p>Dr. de la Garza-Graham next noted that the next CMHCC meeting will be held on December 11, 2013 at 9:00 A.M.</p> <p>Dr. de la Garza-Graham asked if there were any other questions or comments. Hearing none, the meeting was adjourned at 9:53 A.M.</p>		

Consent Item

TDCJ Health Services
Monitoring Reports

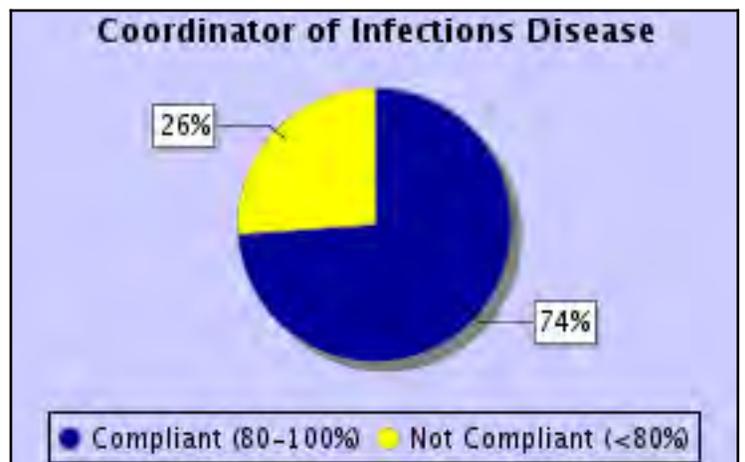
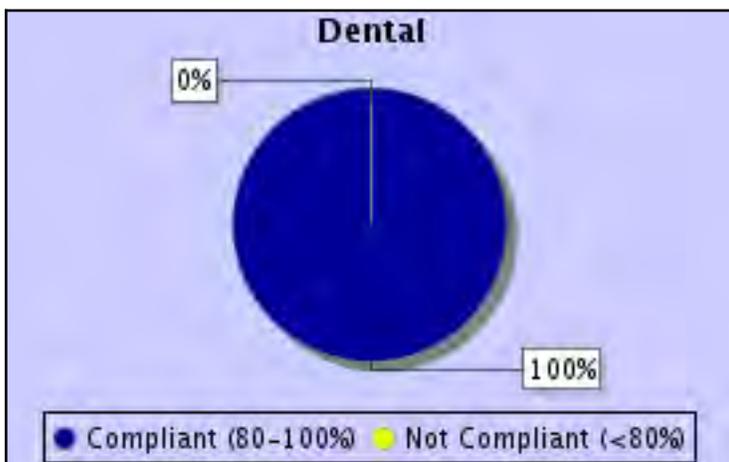
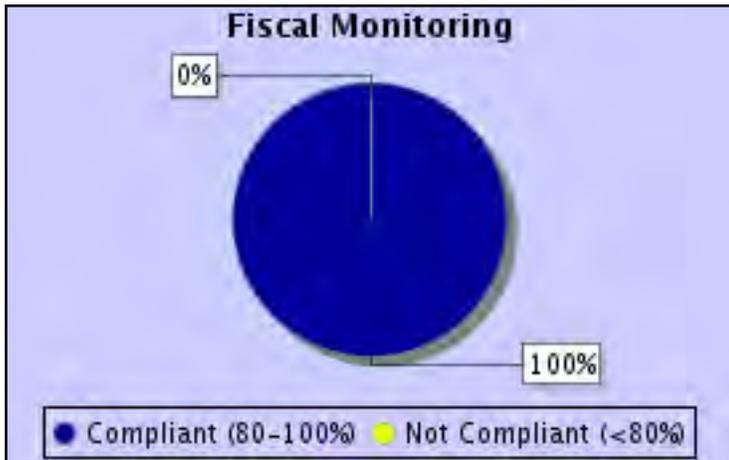
Rate of Compliance with Standards by Operational Categories
Fourth Quarter, Fiscal Year 2013
June - August 2013

Unit	Operations/ Administration			General Medical/Nursing			Coordinator of Infectious Disease			Dental			Mental Health			Fiscal		
	n	Items 80% or Greater Compliance		n	Items 80% or Greater Compliance		n	Items 80% or Greater Compliance		n	Items 80% or Greater Compliance		n	Items 80% or Greater Compliance		n	Items 80% or Greater Compliance	
Baten ISF	31	31	100%	15	11	73%	23	17	74%	2	2	100%	11	11	100%	4	4	100%
Bridgeport PPT	31	30	97%	15	9	60%	14	11	79%	8	6	75%	2	2	100%	NA	NA	NA
Fort Stockton	30	30	100%	15	10	67%	29	22	76%	12	12	100%	2	2	100%	4	4	100%
Holliday	34	34	100%	17	14	82%	29	20	69%	12	10	83%	18	18	100%	5	5	100%
Hutchins State Jail	34	32	94%	17	11	65%	33	24	73%	13	11	85%	18	18	100%	6	6	100%
Jordan	33	33	100%	15	13	87%	25	25	100%	12	12	100%	2	2	100%	4	4	100%
Luther	34	34	100%	21	20	95%	24	17	71%	12	12	100%	15	12	80%	6	6	100%
Lynaugh	33	33	100%	15	7	47%	21	12	57%	12	12	100%	15	13	87%	4	4	100%
Middleton	32	31	97%	16	13	81%	30	24	80%	12	10	83%	18	17	94%	6	6	100%

n = number of applicable items audited.

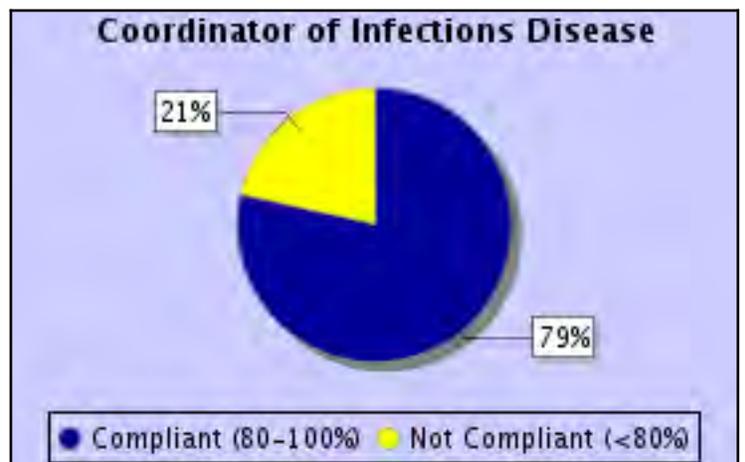
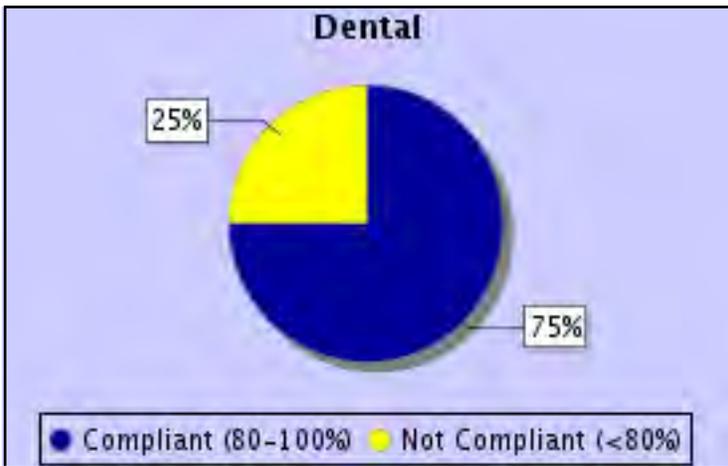
Compliance Rate By Operational Categories for BATEN INTERMEDIATE SANCTION FACILITY

July 09, 2013

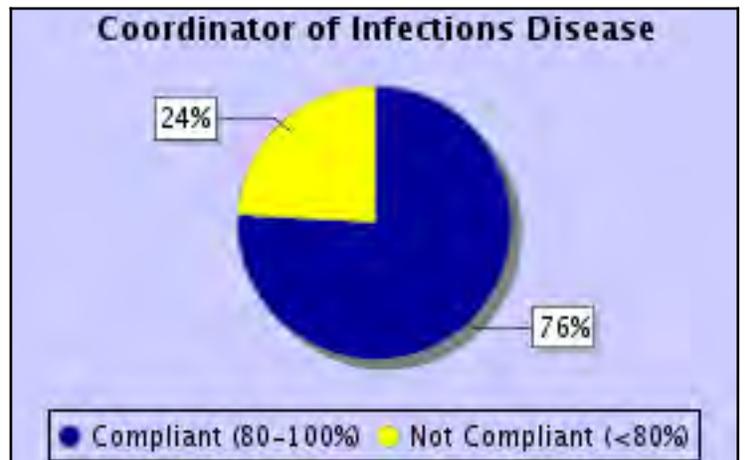


Compliance Rate By Operational Categories for
BRIDGEPORT PRE-PAROLE TRANSFER FACILITY

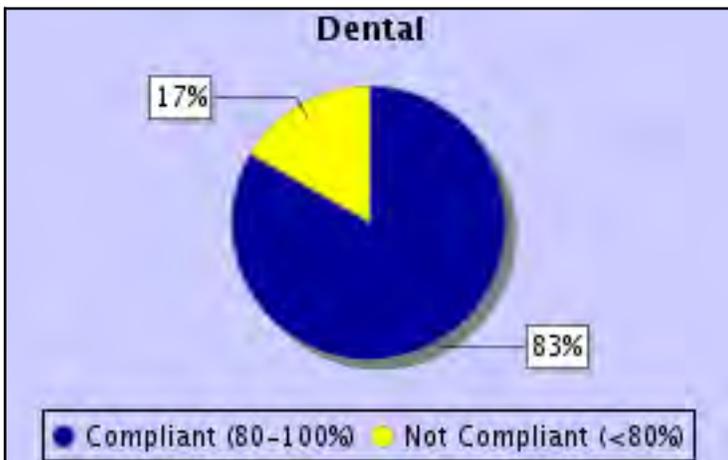
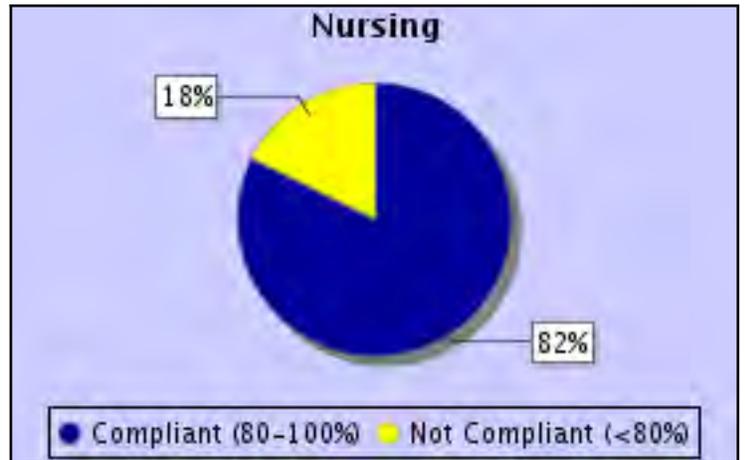
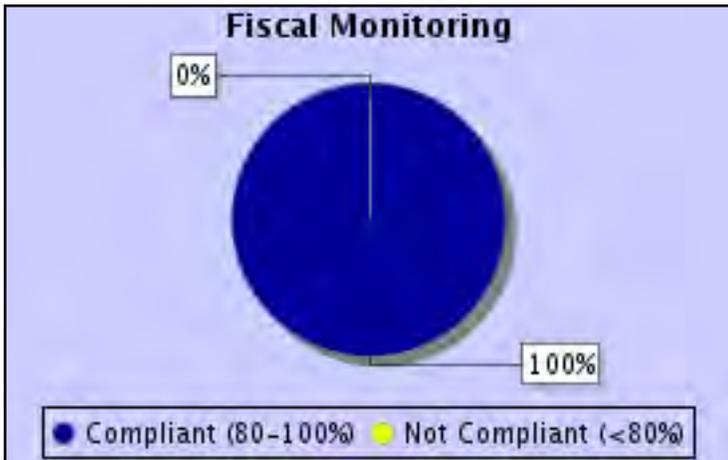
June 03, 2013



Compliance Rate By Operational Categories for
FORT STOCKTON FACILITY
July 30, 2013

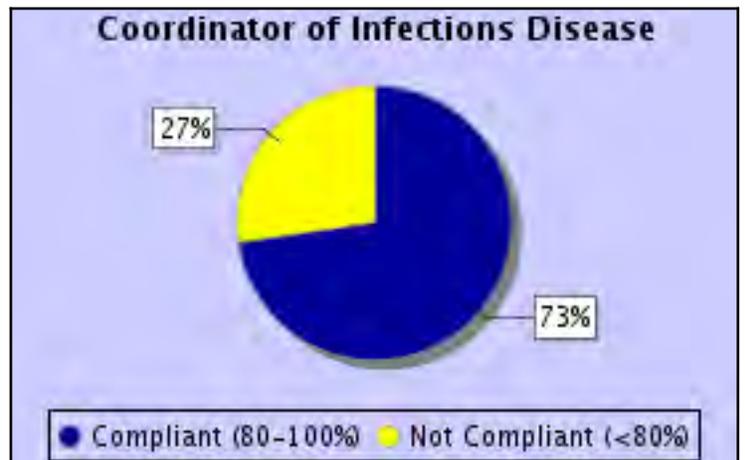
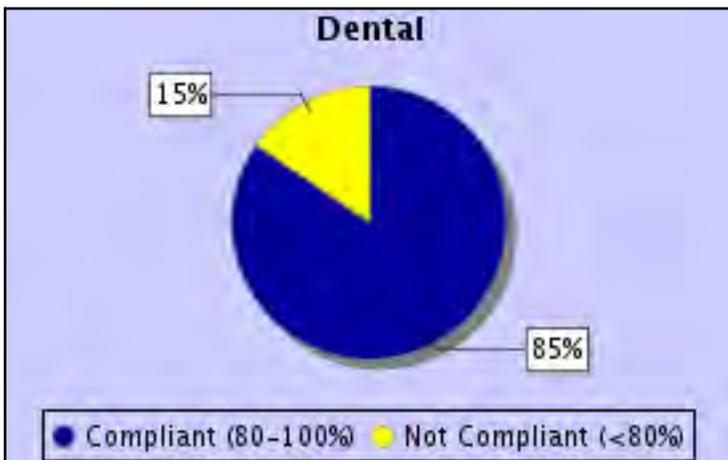
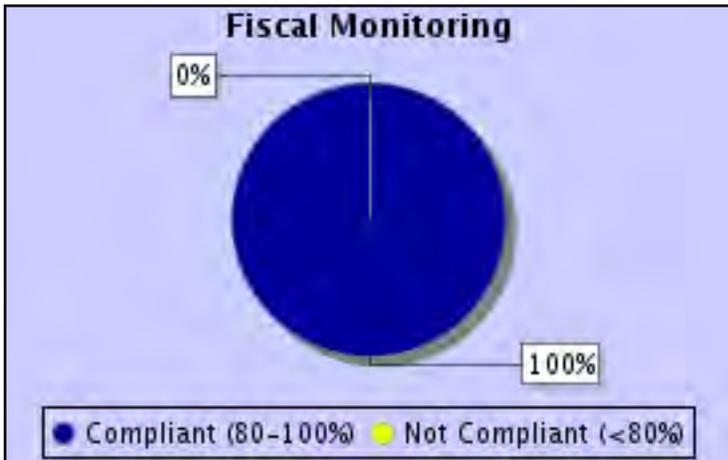
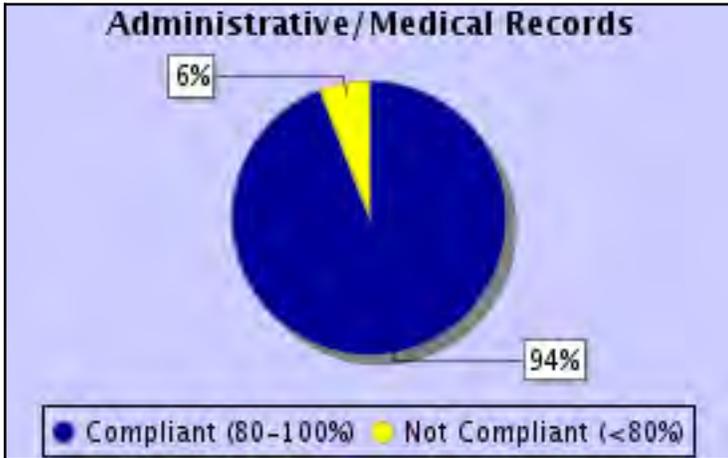


Compliance Rate By Operational Categories for
HOLLIDAY FACILITY
August 05, 2013

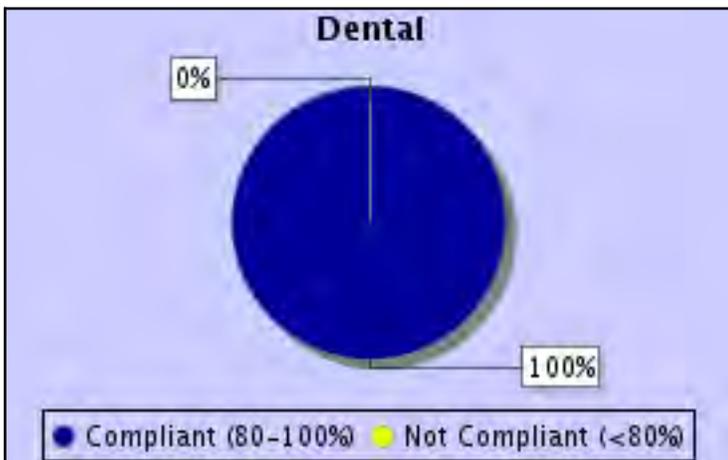
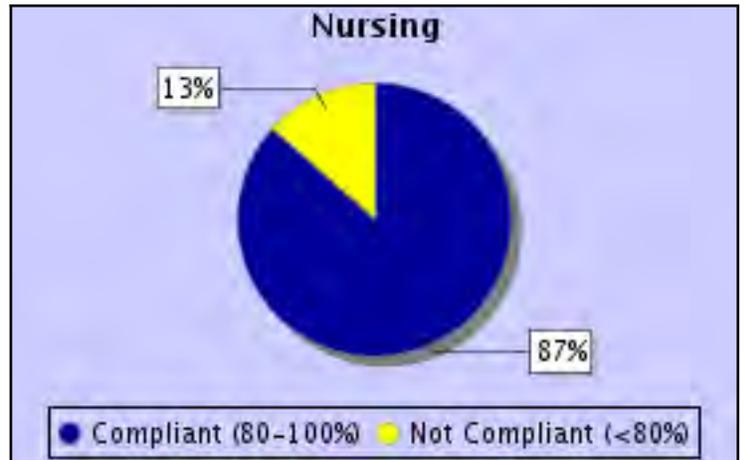


Compliance Rate By Operational Categories for HUTCHINS STATE JAIL FACILITY

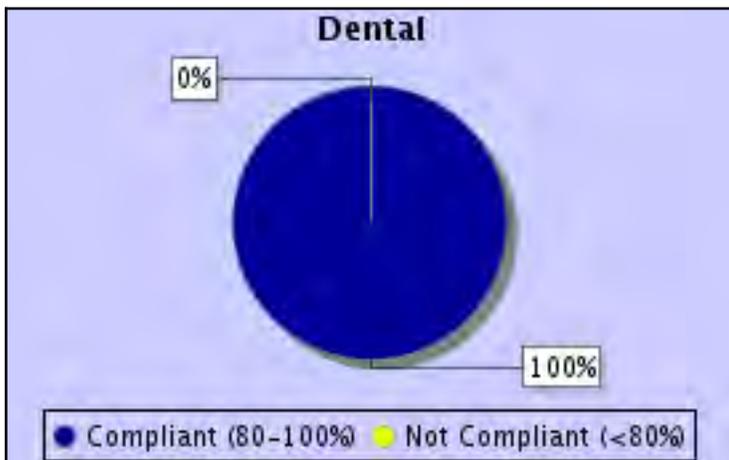
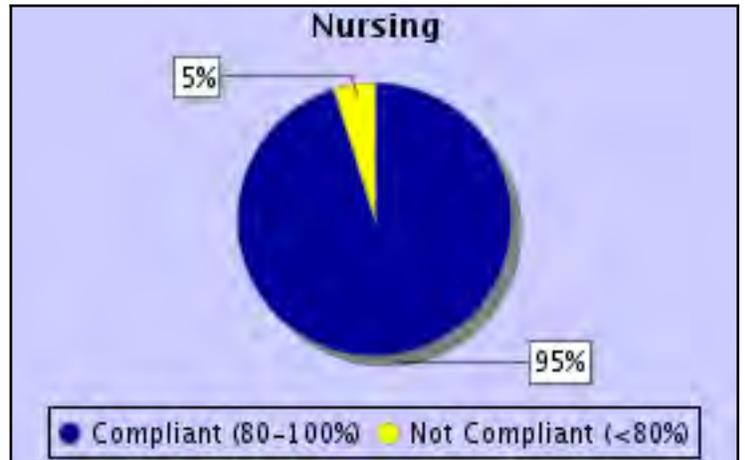
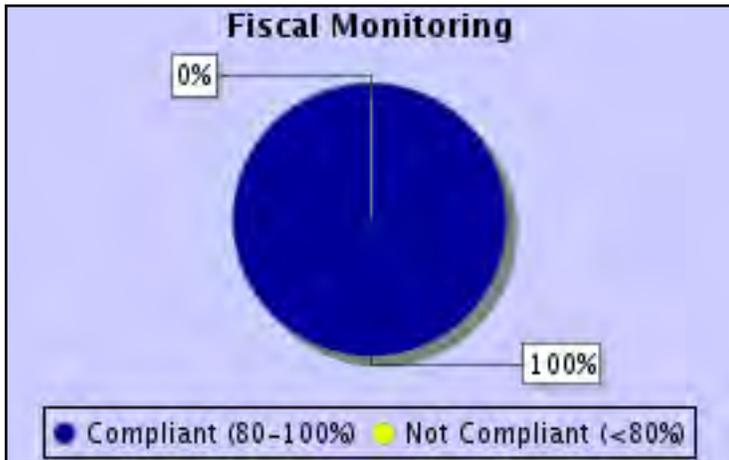
June 03, 2013



Compliance Rate By Operational Categories for
JORDAN FACILITY
July 09, 2013

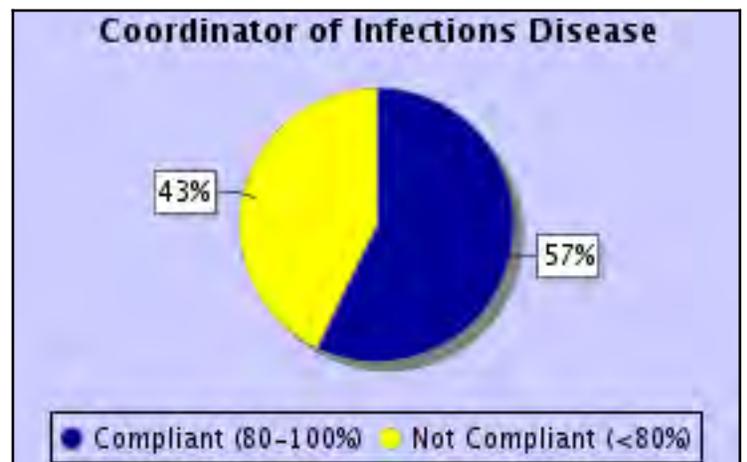
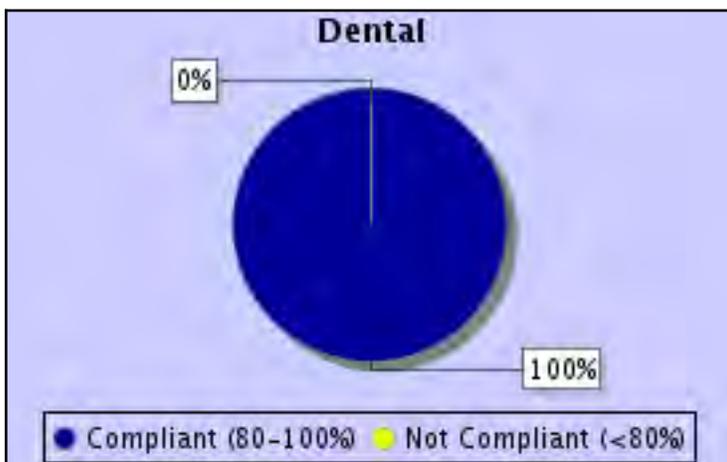
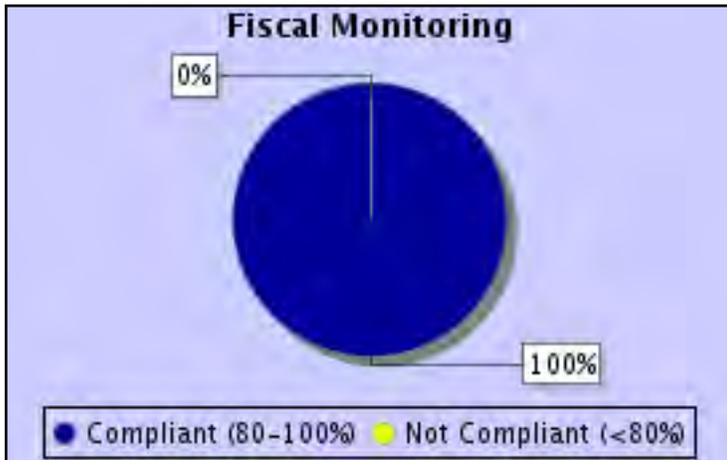
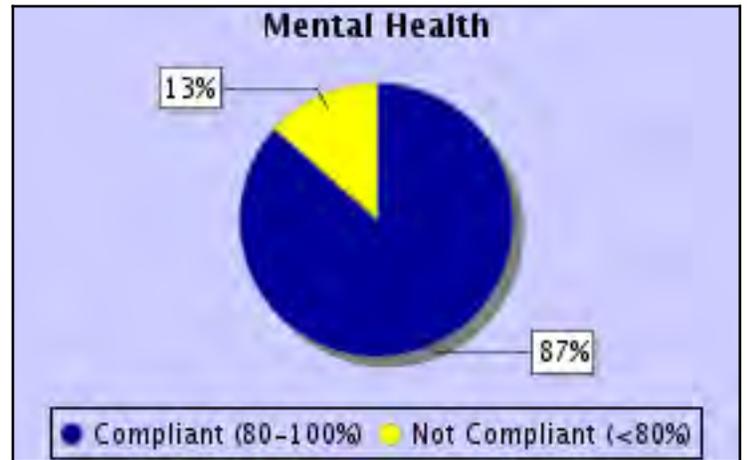


Compliance Rate By Operational Categories for
LUTHER FACILITY
July 01, 2013



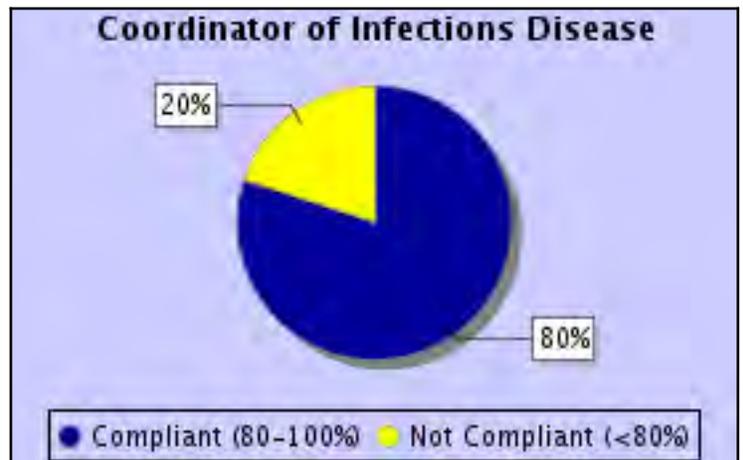
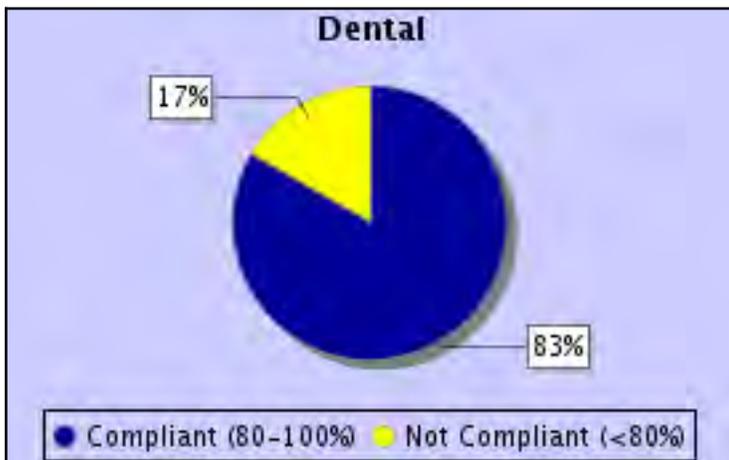
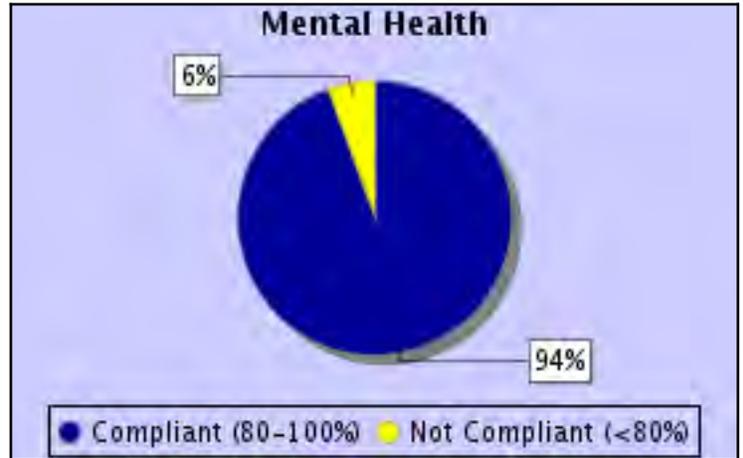
Compliance Rate By Operational Categories for LYNAUGH FACILITY

July 30, 2013



Compliance Rate By Operational Categories for MIDDLETON FACILITY

June 04, 2013



**Dental Quality of Care Audit
Urgent Care Report
For the Three Months Ended August 31, 2013**

Urgent Care Definition: Individuals, who in the dentist's professional judgment, require treatment for an acute oral or maxillofacial condition which may be accompanied by pain, infection, trauma, swelling or bleeding and is likely to worsen without immediate intervention. Individuals with this designation will receive definitive treatment within 14 days after a diagnosis is established by a dentist. Policy CMHC E-36.1

Facility	Charts Assessed by TDCJ as Urgent	Urgent Care Score *	Offenders receiving treatment but not within timeframe **	Offenders identified as needing definitive care***
Crain	10	100	0	0
Darrington	10	100	0	0
Formby	10	90	1	0
Hilltop	10	100	0	0
Hughes	10	80	2	0
Jester I	10	100	0	0
Jester III	10	100	0	0
Jester IV	10	100	0	0
Luther	10	100	0	0
Montford	10	90	1	0
Mountain View	10	100	0	0
Murray	10	100	0	0
Pack	10	100	0	0
Tulia	10	80	2	0
Vance	10	100	0	0
Wheeler	10	90	1	0
Woodman	10	100	0	0

* Urgent Care score is determined: $\frac{\text{\# of offenders that had symptoms and received definitive treatment with 14 days}}{\text{Total \# of offenders in audit}} = 100\%$

** A Corrective Action is required by TDCJ Health Services if the Urgent Care score is below 80%

*** A Corrective Action is required by TDCJ Health Services giving the date and description of definitive care.

PATIENT LIAISON AND STEP II GRIEVANCE STATISTICS QUALITY OF CARE/PERSONNEL REFERRALS AND ACTION REQUESTS

STEP II GRIEVANCE PROGRAM (GRV)													
Fiscal Year 2013	Total number of GRIEVANCE Correspondence Received Each Month	Total number of GRIEVANCE Correspondence Closed Each Month	Total number of Action Requests (Quality of Care, Personnel, and Process Issues)	Percent of Action Requests from Total # of GRIEVANCE Correspondence	Total number of Action Requests Referred to University of Texas Medical Branch- Correctional Managed Health Care			Total number of Action Requests Referred to Texas Tech University Health Sciences Center- Correctional Managed Health Care			Total number of Action Requests Referred to PRIVATE FACILITIES		
					Percent of Total Action Requests Referred	QOC *	QOC*	Percent of Total Action Requests Referred	QOC*	Percent of Total Action Requests Referred	QOC*		
June	482	440	129	29.32%								78	20.45%
July	627	509	105	20.63%	69	16.70%	16	18	3.93%	2	0	0.00%	0
August	589	464	134	28.88%	100	25.00%	16	18	3.88%	0	0	0.00%	0
Totals:	1,698	1,413	368	26.04%	247	20.59%	44	49	3.75%	4	1	0.14%	1

PATIENT LIAISON PROGRAM (PLP)													
Fiscal Year 2013	Total number of Patient Liaison Program Correspondence Received Each Month	Total number of Patient Liaison Program Correspondence Closed Each Month	Total number of Action Requests (Quality of Care, Personnel, and Process Issues)	Percent of Action Requests from Total number of Patient Liaison Program Correspondence	Total number of Action Requests Referred to University of Texas Medical Branch- Correctional Managed Health Care			Total number of Action Requests Referred to Texas Tech University Health Sciences Center- Correctional Managed Health Care			Total number of Action Requests Referred to PRIVATE FACILITIES		
					Percent of Total Action Requests Referred	QOC *	QOC*	Percent of Total Action Requests Referred	QOC*	Percent of Total Action Requests Referred	QOC*		
June	643	522	33	6.32%								19	5.75%
July	655	599	25	4.17%	22	3.84%	1	1	0.17%	0	1	0.17%	0
August	649	593	29	4.89%	22	4.72%	6	0	0.17%	1	0	0.00%	0
Totals:	1,947	1,714	87	5.08%	63	4.73%	18	4	0.29%	1	1	0.06%	0
GRAND TOTAL=	3,645	3,127	455	14.55%									

*QOC= Quality of Care

Texas Department of Criminal Justice
Office of Public Health
Monthly Activity Report

June 2013

Reportable Condition	Reports			
	2013 This Month	2012 Same Month	2013 Year to Date*	2012 Year to Date*
Chlamydia	7	3	30	22
Gonorrhea	2	2	9	9
Syphilis	75	73	503	421
Hepatitis A	0	0	0	0
Hepatitis B, acute	3	1	3	2
Hepatitis C, total and (acute [‡])	468	309	1700	1512
Human immunodeficiency virus (HIV) +, known at intake	215	178	1215	1237
HIV screens, intake	6810	5527	37644	35906
HIV +, intake	40	56	244	271
HIV screens, offender- and provider-requested	756	781	5074	5535
HIV +, offender- and provider-requested	2	2	2	8
HIV screens, pre-release	3682	4439	27920	29354
HIV +, pre-release	0	0	3	10
Acquired immune deficiency syndrome (AIDS)	5	6	33	18
Methicillin-resistant <i>Staph Aureus</i> (MRSA)	67	62	369	413
Methicillin-sensitive <i>Staph Aureus</i> (MSSA)	57	31	258	238
Occupational exposures of TDCJ staff	9	4	52	78
Occupational exposures of medical staff	3	2	14	15
HIV chemoprophylaxis initiation	4	2	12	17
Tuberculosis skin test (ie, PPD) +, intake	159	342	1629	2038
Tuberculosis skin test +, annual	30	35	260	305
Tuberculosis, known (ie, on tuberculosis medications) at intake	3	1	7	8
Tuberculosis, diagnosed at intake and attributed to county of origin (identified before 42 days of incarceration)	0	0	8	0
Tuberculosis, diagnosed during incarceration (identified after 42 days of incarceration)	5	3	20	12
Tuberculosis cases under management	16	20		
Peer education programs [¶]	0	1	101	100
Peer education educators [∞]	46	69	3,601	3,175
Peer education participants	4,326	5,453	35,801	37,976
Sexual assault in-service (sessions/units)	10/10	2/3	40/29	12/14
Sexual assault in-service participants	116	15	432	91
Alleged assaults and chart reviews	71	68	439	424
Bloodborne exposure labs drawn on offenders	15	10	98	86
New Sero-conversions d/t sexual assault ±	1	0	2	0

Texas Department of Criminal Justice
Office of Public Health
Monthly Activity Report

July 2013

Reportable Condition	Reports			
	2013 This Month	2012 Same Month	2013 Year to Date*	2012 Year to Date*
Chlamydia	4	5	34	27
Gonorrhea	2	2	11	11
Syphilis	76	103	578	524
Hepatitis A	0	0	0	0
Hepatitis B, acute	0	1	3	0
Hepatitis C, total and (acute [‡])	486	249	2,186	1,759
Human immunodeficiency virus (HIV) +, known at intake	187	194	1,402	1,431
HIV screens, intake	6,810	6,608	44,454	42,514
HIV +, intake	45	48	289	319
HIV screens, offender- and provider-requested	1,482	1,083	6,556	6,618
HIV +, offender- and provider-requested	1	1	3	9
HIV screens, pre-release	6,822	4,283	34,742	33,637
HIV +, pre-release	0	1	2	11
Acquired immune deficiency syndrome (AIDS)	7	8	40	26
Methicillin-resistant <i>Staph Aureus</i> (MRSA)	52	61	421	474
Methicillin-sensitive <i>Staph Aureus</i> (MSSA)	33	67	291	305
Occupational exposures of TDCJ staff	17	11	69	89
Occupational exposures of medical staff	2	1	16	16
HIV chemoprophylaxis initiation	1	0	13	17
Tuberculosis skin test (ie, PPD) +, intake	107	368	1,736	2,410
Tuberculosis skin test +, annual	**5	41	265	354
Tuberculosis, known (ie, on tuberculosis medications) at intake	4	1	7	9
Tuberculosis, diagnosed at intake and attributed to county of origin (identified before 42 days of incarceration)	0	0	4	0
Tuberculosis, diagnosed during incarceration (identified after 42 days of incarceration)	1	0	6	12
Tuberculosis cases under management	17	18		
Peer education programs [¶]	0	0	101	100
Peer education educators [∞]	25	14	3,626	3,189
Peer education participants	8,357	6,318	44,358	44,294
Sexual assault in-service (sessions/units)	1/1	0	41/30	12/14
Sexual assault in-service participants	2	0	434	91
Alleged assaults and chart reviews	81	67	520	491
Bloodborne exposure labs drawn on offenders	9	10	107	96
New Sero-conversions d/t sexual assault ±	0	0	2	0

** 1,341 TB Evaluations due to shortage of TB Serum.

18 reported for x-rays due to S/S of TB.

The numbers for TB Incarceration Codes 1, 2 and 3 have been incorrect from February 2013 to June 2013 due to a calculation error which has been corrected as of this report.

Texas Department of Criminal Justice
Office of Public Health
Monthly Activity Report

August 2013

Reportable Condition	Reports			
	2013 This Month	2012 Same Month	2013 Year to Date*	2012 Year to Date*
Chlamydia	4	3	38	30
Gonorrhea	2	1	13	12
Syphilis	61	98	639	622
Hepatitis A	0	1	0	1
Hepatitis B, acute	1	0	4	4
Hepatitis C, total and (acute [‡])	284	332	2470(0)	2091(1)
Human immunodeficiency virus (HIV) +, known at intake	187	193	1,589	1624
HIV screens, intake	6259	6224	50713	48738
HIV +, intake	47	44	336	363
HIV screens, offender- and provider-requested	777	1000	7333	7618
HIV +, offender- and provider-requested	2	2	5	11
HIV screens, pre-release	3320	4356	38062	37993
HIV +, pre-release	1	2	3	13
Acquired immune deficiency syndrome (AIDS)	3	10	43	36
Methicillin-resistant <i>Staph Aureus</i> (MRSA)	75	71	496	515
Methicillin-sensitive <i>Staph Aureus</i> (MSSA)	75	51	366	356
Occupational exposures of TDCJ staff	7	18	76	107
Occupational exposures of medical staff	4	7	20	23
HIV chemoprophylaxis initiation	3	5	16	22
Tuberculosis skin test (ie, PPD) +, intake	170	278	1843	2687
Tuberculosis skin test +, annual	1****	37	266	391
Tuberculosis, known (ie, on tuberculosis medications) at intake	2	1	9	10
Tuberculosis, diagnosed at intake and attributed to county of origin (identified before 42 days of incarceration)	0	0	4	0
Tuberculosis, diagnosed during incarceration (identified after 42 days of incarceration)	2	2	9	14
Tuberculosis cases under management	19	19		
Peer education programs [¶]	0	0	99	100
Peer education educators [∞]	35	27	3,626	3,216
Peer education participants	5,010	6,605	49,368	50,899
Sexual assault in-service (sessions/units)	14/13	0	55/43	12/14
Sexual assault in-service participants	246	0	680	91
Alleged assaults and chart reviews	80	63	600	554
Bloodborne exposure labs drawn on offenders	28	23	135	119
New Sero-conversions d/t sexual assault ±	0	0	2	0

****Tb evaluations this month - 5034

Evaluated for signs and symptoms this month - 6

Year to date - 6375

Year to date - 24

Health Services Liaison Utilization Review Hospital and Infirmiry Discharge Audit

During the Fourth Quarter of Fiscal Year 2013, ten percent of the UTMB and TTUHSC hospital and infirmiry discharges were audited. A total of 159 hospital discharge and 60 infirmiry discharge audits were conducted. This chart is a summary of the audits showing the number of cases with deficiencies and their percentage.

Freeworld Hospital Discharges in Texas Tech Sector											
Month	Audits Performed	Vital Signs Not Recorded ¹ (Cases with Deficiencies)		Appropriate Receiving Facility ² (Cases with Deficiencies)		No Chain-In Done ³ (Cases with Deficiencies)		Unscheduled Care within 7 Days ⁴ (Cases with Deficiencies)		Lacked Documentation ⁵ (Cases with Deficiencies)	
June	6	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
July	6	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
August	7	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Total/Average		0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Freeworld Hospital Discharges in UTMB Sector											
Month	Audits Performed	Vital Signs Not Recorded ¹ (Cases with Deficiencies)		Appropriate Receiving Facility ² (Cases with Deficiencies)		No Chain-In Done ³ (Cases with Deficiencies)		Unscheduled Care within 7 Days ⁴ (Cases with Deficiencies)		Lacked Documentation ⁵ (Cases with Deficiencies)	
June	21	1	4.76%	0	0.00%	0	0.00%	0	0.00%	2	9.52%
July	20	1	5.00%	0	0.00%	0	0.00%	2	10.00%	0	0.00%
August	23	2	8.69%	0	0.00%	0	0.00%	1	4.34%	0	0.00%
Total/Average		4	6.15%	0	0.00%	0	0.00%	3	4.78%	2	3.17%
UTMB Hospital Galveston Discharges											
Month	Audits Performed	Vital Signs Not Recorded ¹ (Cases with Deficiencies)		Appropriate Receiving Facility ² (Cases with Deficiencies)		No Chain-In Done ³ (Cases with Deficiencies)		Unscheduled Care within 7 Days ⁴ (Cases with Deficiencies)		Lacked Documentation ⁵ (Cases with Deficiencies)	
June	29	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
July	23	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
August	24	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Total/Average		0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
GRAND TOTAL: Combined Hospital Discharges (Texas Tech Sector, UTMB Sector and Hospital Galveston)											
Month	Audits Performed	Vital Signs Not Recorded ¹ (Cases with Deficiencies)		Appropriate Receiving Facility ² (Cases with Deficiencies)		No Chain-In Done ³ (Cases with Deficiencies)		Unscheduled Care within 7 Days ⁴ (Cases with Deficiencies)		Lacked Documentation ⁵ (Cases with Deficiencies)	
June	56	1	1.59%	0	0.00%	0	0.00%	0	0.00%	2	3.17%
July	49	1	1.67%	0	0.00%	0	0.00%	2	3.33%	0	0.00%
August	54	2	3.70%	0	0.00%	0	0.00%	1	1.45%	0	0.00%
Total/Average		4	2.32%	0	0.00%	0	0.00%	3	1.59%	2	1.06%
Texas Tech Infirmiry Discharges											
Month	Audits Performed	Vital Signs Not Recorded ¹ (Cases with Deficiencies)		Appropriate Receiving Facility ² (Cases with Deficiencies)		No Chain-In Done ³ (Cases with Deficiencies)		Unscheduled Care within 7 Days ⁴ (Cases with Deficiencies)		Lacked Documentation ⁵ (Cases with Deficiencies)	
June	9	0	0.00%	0	0.00%	1	11.00%	0	0.00%	1	11.00%
July	12	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
August	13	1	7.69%	0	0.00%	1	7.69%	0	0.00%	0	0.00%
Total/Average		1	2.56%	0	0.00%	2	6.23%	0	0.00%	1	3.67%
UTMB Infirmiry Discharges											
Month	Audits Performed	Vital Signs Not Recorded ¹ (Cases with Deficiencies)		Appropriate Receiving Facility ² (Cases with Deficiencies)		No Chain-In Done ³ (Cases with Deficiencies)		Unscheduled Care within 7 Days ⁴ (Cases with Deficiencies)		Lacked Documentation ⁵ (Cases with Deficiencies)	
June	9	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
July	10	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
August	7	1	14.28%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Total/Average		0	4.76%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
GRAND TOTAL: Combined Infirmiry Discharges (Texas Tech and UTMB)											
Month	Audits Performed	Vital Signs Not Recorded ¹ (Cases with Deficiencies)		Appropriate Receiving Facility ² (Cases with Deficiencies)		No Chain-In Done ³ (Cases with Deficiencies)		Unscheduled Care within 7 Days ⁴ (Cases with Deficiencies)		Lacked Documentation ⁵ (Cases with Deficiencies)	
June	18	0	0.00%	0	0.00%	1	5.50%	0	0.00%	1	5.50%
July	22	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
August	20	2	10.99%	0	0.00%	1	3.85%	0	0.00%	0	0.00%
Total/Average		2	3.66%	0	0.00%	2	3.12%	0	0.00%	1	1.83%

Footnotes: 1. Vital signs were not recorded on the day the offender left the discharge facility. 2. Receiving facility did not have medical services available sufficient to meet the offender's current needs. 3. Chart not reviewed by a health care member and referred (if applicable) to an appropriate medical provider as required by policy. (Units not performing chain in were Clements and Robertson.) 4. The offender required unscheduled medical care related to the admitting diagnosis within the first seven days after discharge. 5. Discharge information was not available in the offender's electronic medical record within 24 hours of arriving at the unit.

**FIXED ASSETS CONTRACT MONITORING AUDIT
BY UNIT
FOURTH QUARTER, FISCAL YEAR 2013**

June 2013	Numbered Property On Inventory Report	Total Number of Deletions	Total Number of Transfers	Total Number of New Equipment
Bridgeport PPT	NA	NA	NA	NA
Hutchins State Jail	36	15	0	15
Middleton	59	0	1	2
Total	95	15	1	17

July 2013	Numbered Property On Inventory Report	Total Number of Deletions	Total Number of Transfers	Total Number of New Equipment
Baten ISF	11	0	0	0
Jordan	36	0	0	0
Luther	29	3	0	3
Total	76	3	0	3

August 2013	Numbered Property On Inventory Report	Total Number of Deletions	Total Number of Transfers	Total Number of New Equipment
Fort Stockton	15	0	1	2
Holliday	48	0	0	0
Lynaugh	57	0	0	9
Total	120	0	1	2

**CAPITAL ASSETS AUDIT
FISRT QUARTER, FISCAL YEAR 2013**

Audit Tools	June	July	August	Total
Total number of units audited	3	3	3	9
Total numbered property	95	76	120	291
Total number out of compliance	0	0	0	0
Total % out of compliance	0.00%	0.00%	0.00%	0.00%

**AMERICAN CORRECTIONAL ASSOCIATION
ACCREDITATION STATUS REPORT
Fourth Quarter FY-2013**

University of Texas Medical Branch

Unit	Audit Date	% Compliance	
		Mandatory	Non-Mandatory
Michael	June 3, 2013	100%	98.4
Dominguez	June 10, 2013	100%	99.3
Eastham	July 15, 2013	100%	97.2

Texas Tech University Health Science Center

Unit	Audit Date	% Compliance	
		Mandatory	Non-Mandatory
Robertson	June 24, 2013	100%	98.6
Sanchez	July 22, 2013	100%	98.2

The ACA Summer Conference was held in National Harbor, Maryland August 9-14, 2013. During this conference, the following units were awarded reaccreditation by the ACA Panel of Commissioners: Clemens, Scott, Duncan, Wallace/Ware, Garza East/West, Dalhart, Jester IV, Huntsville, Goree and Crain.

Executive Services
Active Monthly Academic Research Projects
Correctional Institutions Division

FY-2013 Fourth Quarter Report: June, July and August

Project Number: 459-R04

Researcher:
Kevin Knight

IRB Number:
S08-19

IRB Expiration Date:
03/23/2011

Research Began:
01/10/2005

Title of Research:
Criminal Justice Drug Abuse Treatment Studies (CJ-DATS) Targeted Intervention Components (TIC) for Correctional Re-Entry Programs.

Data Collection Began:
06/09/2005

Proponent:
Texas Christian University, Institute of Behavior Research

Data Collection End:
03/24/2009

Project Status:
Pending Final Product Review

Progress Report Due:
06/14/2013

Projected Completion:
12/31/2013

Project Number: 510-AR07

Researcher:
Chris Krebs

IRB Number:
11610

IRB Expiration Date:
03/05/2013

Research Began:
09/27/2006

Title of Research:
The 2007 National Inmate Survey

Data Collection Began:
04/16/2007

Proponent:
Bureau of Justice Statistics (BJS) , in cooperative agreement with RTI

Data Collection End:

Project Status:
Being Reviewed for Closure

Progress Report Due:
02/20/2013

Projected Completion:

"BJS may indeed be required by Congress to collect PREA data, but at this time, we have no knowledge of a planned study or what the format of the study would be."

Year 3 Data Collection Units, November 2011-April 2012: Byrd, Young, Clemens, Coffield, Dawson, Eastham, Gist, Gurney, Henley, Hodge, Holliday, Huntsville, Michael, Murray, Plane, Powledge, Stiles, Woodman .

Project Number: 514-AR07

Researcher:
Jennifer Skeem

IRB Number:
2005-4355

IRB Expiration Date:
03/19/2010

Research Began:
11/13/2006

Title of Research:
Outcomes for Probationers with Mental Illness

Data Collection Began:
11/13/2006

Data Collection End:
09/30/2009

Proponent:

University of California - Irvine; John D. and Catherine T. MacArthur

Project Status:
Formulating Results (Data Collection)

Progress Report Due:
02/28/2014

Projected Completion:
12/31/2013

Project Number: 524-AR07

Researcher:
Marilyn Armour

IRB Number:
2006-11-0095

IRB Expiration Date:
12/29/2015

Research Began:
01/05/2007

Title of Research:
Mechanisms of Action in Bridges to Life

Data Collection Began:
04/12/2007

Data Collection End:
07/24/2007

Proponent:

University of Texas-Austin

Project Status:
Data Analysis

Progress Report Due:
09/11/2013

Projected Completion:
01/06/2013

Project Number: 587-AR09

Researcher:
Marcus Boccaccini

IRB Number:
PHS-2009-04-

IRB Expiration Date:
06/20/2013

Research Began:
09/06/2009

Title of Research:
Item and Factor Level Examination of the Static-99, MnSOST-R, and PCL-R to Predict Recidivism

Data Collection Began:
10/13/2009

Data Collection End:
06/28/2012

Proponent:

Sam Houston State University

Project Status:
Data Analysis

Progress Report Due:
02/28/2014

Projected Completion:
12/31/2013

Project Number: 591-AR09

Researcher:
Wayne Lehman

IRB Number:
Sum08-13

IRB Expiration Date:
08/31/2012

Research Began:
05/20/2010

Title of Research:
"Sustainable HIV Risk Reduction Strategies for CJ Systems"

Data Collection Began:
06/29/2010

Data Collection End:
07/02/2011

Proponent:
Texas Christian University / NIDA

Project Status:
Data Analysis

Progress Report Due:
09/13/2013

Projected Completion:
05/31/2013

June 2010 - March 2011 Havins, Ney, Crain, Halbert

Project Number: 599-AR09

Researcher:
Julian Cano

IRB Number:
FWA#00002030

IRB Expiration Date:
11/15/2010

Research Began:
04/14/2010

Title of Research:
"Exploring The Theoretical Origins Of Male Sexual Deviance: What Are The Self-Regulatory And Sub-Group Differences Among A Sample Of Adult Incarcerated Sexual Offenders?"

Data Collection Began:
04/15/2010

Data Collection End:
06/30/2010

Proponent:
University of Texas - Austin

Project Status:
Formulating Results

Progress Report Due:
01/14/2014

Projected Completion:
12/31/2012

Project Number: 600-AR10

Researcher:
Marcus Boccaccini

IRB Number:
2010-06-005

IRB Expiration Date:
06/21/2011

Research Began:
07/15/2010

Title of Research:
Risk Scores Using Deidentified Offender Files

Data Collection Began:
07/20/2010

Data Collection End:
07/20/2010

Proponent:
Sam Houston State University

Project Status:
Pending Final Product Review

Progress Report Due:
03/31/2013

Projected Completion:
03/31/2013

Project Number: 591-AR09

Researcher:
Wayne Lehman

IRB Number:
Sum08-13

IRB Expiration Date:
08/31/2012

Research Began:
05/20/2010

Title of Research:
"Sustainable HIV Risk Reduction Strategies for CJ Systems"

Data Collection Began:
06/29/2010

Data Collection End:
07/02/2011

Proponent:
Texas Christian University / NIDA

Project Status:
Data Analysis

Progress Report Due:
09/13/2013

Projected Completion:
05/31/2013

June 2010 - March 2011 Havins, Ney, Crain, Halbert

Project Number: 599-AR09

Researcher:
Julian Cano

IRB Number:
FWA#00002030

IRB Expiration Date:
11/15/2010

Research Began:
04/14/2010

Title of Research:
"Exploring The Theoretical Origins Of Male Sexual Deviance: What Are The Self-Regulatory And Sub-Group Differences Among A Sample Of Adult Incarcerated Sexual Offenders?"

Data Collection Began:
04/15/2010

Data Collection End:
06/30/2010

Proponent:
University of Texas - Austin

Project Status:
Formulating Results

Progress Report Due:
01/14/2014

Projected Completion:
12/31/2012

Project Number: 600-AR10

Researcher:
Marcus Boccaccini

IRB Number:
2010-06-005

IRB Expiration Date:
06/21/2011

Research Began:
07/15/2010

Title of Research:
Risk Scores Using Deidentified Offender Files

Data Collection Began:
07/20/2010

Data Collection End:
07/20/2010

Proponent:
Sam Houston State University

Project Status:
Pending Final Product Review

Progress Report Due:
03/31/2013

Projected Completion:
03/31/2013

Project Number: 620-AR11

<u>Researcher:</u> Kelly Dial	<u>IRB Number:</u> #S 2011-1002	<u>IRB Expiration Date:</u> 07/10/2011	<u>Research Began:</u> 05/31/2011
<u>Title of Research:</u> Registered Sex Offenders' Expectations for Community Re-Entry			<u>Data Collection Began:</u> 06/20/2011
<u>Proponent:</u> University of Louisville / Messiah College			<u>Data Collection End:</u> 06/24/2011
<u>Project Status:</u> Pending Final Product Review		<u>Progress Report Due:</u> 09/14/2013	<u>Projected Completion:</u> 12/31/2012

June 2011: Crain, Hilltop, Mt. View, Murray, Woodman

Project Number: 622-AR11

<u>Researcher:</u> Andrew Wiegand	<u>IRB Number:</u> (no number)	<u>IRB Expiration Date:</u> 12/11/2013	<u>Research Began:</u> 07/14/2011
<u>Title of Research:</u> Evaluation of the Reintegration of Ex-Offenders (RExO) Project			<u>Data Collection Began:</u> 09/13/2011
<u>Proponent:</u> Social Policy Research Associates			<u>Data Collection End:</u> 05/31/2015
<u>Project Status:</u> Data Collection		<u>Progress Report Due:</u> 02/28/2014	<u>Projected Completion:</u> 12/31/2014

Project Number: 629-AR11

<u>Researcher:</u> Jurg Gerber	<u>IRB Number:</u> 2011-03-071	<u>IRB Expiration Date:</u> 05/06/2012	<u>Research Began:</u> 11/10/2011
<u>Title of Research:</u> Perception of Family and Community Support among Released Felons in the State of Texas			<u>Data Collection Began:</u> 12/15/2011
<u>Proponent:</u> Sam Houston State University			<u>Data Collection End:</u> 04/01/2012
<u>Project Status:</u> Data Analysis		<u>Progress Report Due:</u> 02/28/2014	<u>Projected Completion:</u> 12/31/2013

Project Number: 640-AR11

Researcher: Brenda Riley	IRB Number: 2011-08-025	IRB Expiration Date: 10/10/2012	Research Began: 11/10/2011
Title of Research: Predicting Institutional Misconduct that Results in Uses of Force in the Texas Department of Criminal Justice			Data Collection Began: 11/10/2011
Proponent: Sam Houston State University			Data Collection End: 11/10/2011
Project Status: Data Analysis	Progress Report Due: 02/28/2014		Projected Completion: 10/10/2012

Project Number: 643-AR11

Researcher: Chad Trulson	IRB Number: 11590	IRB Expiration Date: 12/31/2012	Research Began: 05/09/2012
Title of Research: The Institutional Experiences of Mentally Retarded Death Row Commutees			Data Collection Began: 05/09/2012
Proponent: University of North Texas			Data Collection End: 09/30/2012
Project Status: Pending Final Product Review	Progress Report Due: 09/11/2013		Projected Completion: 12/31/2012

Project Number: 647-AR11

Researcher: Scott Culhane	IRB Number: no number	IRB Expiration Date: 11/03/2012	Research Began: 05/16/2012
Title of Research: Factors Influencing Crime as Self-Reported by Serial Killers, Violent Offenders, Non-violent Offenders, and Students			Data Collection Began: 05/18/2012
Proponent: University of Wyoming's Department of Criminal Justice			Data Collection End: 11/03/2012
Project Status: Pending Final Product Review	Progress Report Due: 12/29/2013		Projected Completion: 11/30/2012

See Notes Tab

Project Number: 648-AR12

Researcher:
Meredith Dank

IRB Number:
08572-000-00

IRB Expiration Date:
02/07/2013

Research Began:
05/21/2012

Title of Research:
Estimating the Unlawful Commercial Sex Economy in the United States

Data Collection Began:
07/18/2012

Data Collection End:
09/07/2012

Proponent:
The Urban Institute, Justice Policy Center

Project Status:
Data Analysis

Progress Report Due:
03/07/2013

Projected Completion:
02/07/2013

Email sent on 8/22/13 to notify the Progress Report is due 8/30/13. Again on 9/4/13.

August 2012 - Beto, Coffield, Duncan, Ellis, Ferguson, Halbert, Hobby, Lychner, B. Moore, Polunsky, Stiles, Telford

Project Number: 656-AR12

Researcher:
Cassandra Atkin-Plunk

IRB Number:
2012-04-011

IRB Expiration Date:
09/07/2013

Research Began:
09/07/2012

Title of Research:
Examining the Impact of Adult Social Bonds on Inmates' Visitation and Recidivism

Data Collection Began:
10/31/2012

Data Collection End:
10/31/2012

Proponent:
Sam Houston State University

Project Status:
Data Analysis

Progress Report Due:
02/28/2014

Projected Completion:
03/01/2013

Email sent on 8/22/13 to notify the Progress Report is due 8/30/13

Project Number: 661-AR12

Researcher:
Byron Johnson

IRB Number:
Pending

IRB Expiration Date:

Research Began:
01/07/2013

Title of Research:
Assessing the Long-Term Effectiveness of Seminaries In Maximum Security Prisons: An In-Depth Study of the Louisiana State Penitentiary and Darrington Prison

Data Collection Began:
01/08/2013

Data Collection End:

Proponent:
Baylor University

Project Status:
Data Collection

Progress Report Due:
10/06/2013

Projected Completion:
08/31/2017

Email sent to OGC on 9/04/13 for approval / denial of revised proposal.

Project Number: 664-AR12

Researcher: Scott Walters **IRB Number:** 2011-125 **IRB Expiration Date:** 06/04/2014 **Research Began:** 05/22/2013

Title of Research: In-Person vs. Computer Interventions for Increasing Probation Compliance **Data Collection Began:** 05/22/2013

Data Collection End:

Proponent:
University of North Texas

Project Status: Data Collection **Progress Report Due:** 02/28/2014 **Projected Completion:**

As of 9/6/13, there are only two offenders to interview for the this project. The point of contact for Holliday and Gist Units have been provided.

Project Number: 666-AR12

Researcher: Jesus Amadeo **IRB Number:** **IRB Expiration Date:** **Research Began:** 12/28/2012

Title of Research: Enhanced Transitional Jobs Demonstration **Data Collection Began:** 12/28/2012

Data Collection End:

Proponent:
MDRC

Project Status: Data Collection **Progress Report Due:** **Projected Completion:** 12/31/2017

Project is external to TDCJ to provide data only. MOU dated 12/21/12. Project will run through 2017.

Project Number: 671-AR13

Researcher: Bridget Williamson **IRB Number:** 2013-01-4707 **IRB Expiration Date:** 02/13/2014 **Research Began:** 09/03/2013

Title of Research: Female Sex Offender Recidivism: Risk and Assessment **Data Collection Began:** 09/18/2013

Data Collection End:

Proponent:
Sam Houston State University

Project Status: Data Collection **Progress Report Due:** 11/30/2013 **Projected Completion:**

RL - Academic Longitudinal

Project Number: 103-RL01

Researcher: Holly Miller **IRB Number:** M20020807 **IRB Expiration Date:** 7/21/2006 **Research Began:** 11/1/2001

Title of Research: Psychopathy, Static Risk, and Dynamic Risk Among Sexual Offenders **Data Collection Began:** 12/1/2001

Proponent: Sam Houston State University **Data Collection End:** 2006

Project Status: Pending Manuscript **Progress Report Due:** 3/7/2013 **Projected Completion:** 7/21/2016

9/18/2013: Sent Researcher email requesting updated progress report.

Project Number: 202-RL02

Researcher: Kymn Kochanek **IRB Number:** 020502 **IRB Expiration Date:** 7/11/2012 **Research Began:** 5/1/2002

Title of Research: National Longitudinal Survey of Youth 1997 (for Bureau of Labor Statistics) **Data Collection Began:** 11/1/2002

Proponent: NORC - National Organization for Research at the University of Chicago **Data Collection End:** May 2012

Project Status: Data Collection (Round 15) **Progress Report Due:** 02/28/2014 **Projected Completion:**

For Quarterly Report: Add: 'N/A (Ongoing Project)' & 'N/A' under Data Collection End Date & Projected Completion Date (Round 15 Data Collection ended May 2012)

9/18/2013: Sent Researcher email requesting updated IRB.

Project Number: 221-RL02

Researcher: Kymn Kochanek **IRB Number:** 040202 **IRB Expiration Date:** 8/15/2011 **Research Began:** 6/6/2002

Title of Research: National Longitudinal Survey of Youth 1979 (for Bureau of Labor Statistics) **Data Collection Began:** 5/1/2002

Proponent: NORC at the University of Chicago **Data Collection End:** July 2013

Project Status: Data Analysis **Progress Report Due:** 08/13/2013 **Projected Completion:**

For Quarterly Report: Add: 'N/A (Ongoing Project)' & 'N/A' under Data Collection End Date & Projected Completion Date. For Data Collection field: "Round 25 Data Collection ended July 24, 2013"

9/18/2013: Sent Researcher email requesting updated progress report and IRB

Project Number: 434-RL04

Researcher:
Marilyn Armour

IRB Number:
2003-11-0076

IRB Expiration Date:
1/6/2014

Research Began:
3/10/2004

Title of Research:

Victim Offender Mediated Dialogue: Study of the Impact of a Victim-Oriented Intervention in Crimes of Severe Violence

Data Collection Began:
8/31/2004

Data Collection End:
3/1/2007

Proponent:

University of Texas- Austin

Project Status:

Data Analysis

Progress Report Due:

9/11/2013

Projected Completion:

12/31/2012

Project Number: 547-RL07

Researcher:
Robert Morgan

IRB Number:
501024

IRB Expiration Date:
5/31/2009

Research Began:
6/11/2008

Title of Research:

Re-Entry: Dynamic Risk Assessment

Data Collection Began:
6/11/2008

Data Collection End:
10/23/2008

Proponent:

Texas Tech University

Project Status:

Pending Final Product Review

Progress Report Due:

3/1/2013

Projected Completion:

10/31/2012

Executive Services
Pending Monthly Academic Research Projects
Correctional Institutions Division

FY-2013 Fourth Quarter Report: June, July and August

Project Number: 660-AR12

Researcher:

Holly Foster

IRB Number:

2012-0251

Application Received:

10/5/2012

Completed Application:

10/5/2012

Title of Research:

Incarcerated Mothers in the USA and Australia

Peer Panel Schedule:

11/27/2012,02/27/2013,

04/02/2013

Proponent:

Texas A & M University, College Station

Panel Recommendations:

Project Status:

Pending Division & OGC Review

Detail:

11/29/12 Approved with conditions, requesting clarification from the researcher. Based on the researcher's response (on 2/27) RPD approved. 4/3/13 Mr. Stephens did not concur due to demands on resources such as staff time and space. Researcher is considering a mailed survey. 9/9/13: Sent revised proposal to Mr. Upshaw for review.

Project Number: 662-AR12

Researcher:

Ephrem Fernandez

IRB Number:

Contingent upon TDCJ approval

Application Received:

11/12/2012

Completed Application:

Pending IRB

Title of Research:

Anger Treatment Outcome Evaluation

Peer Panel Schedule:

1/10/2013

Proponent:

University of Texas at San Antonio

Panel Recommendations:

Project Status:

Pending Peer Panel 2nd Review

Detail:

Proposal Denied on 1/31/13. Email from 3/25/13 - Parole is expecting a Revised Proposal.

Project Number: 669-AR13

Researcher:

Chad Trulson

IRB Number:

Application Received:

2/7/2013

Completed Application:

Pending IRB

Title of Research:

Criminal Behavior and Criminal Prosecutions in the TDCJ

Peer Panel Schedule:

4/17/2013

Proponent:

University of North Texas

Panel Recommendations:

Project Status:

Detail: 4/17/13 Sent to OIG for Pending Peer Panel Review

Project Number: 670-AR13

Researcher:

Andrew Day

IRB Number:

HEAG-H 140_2011

Application Received:

2/25/2013

Completed Application:

3/19/2013

Title of Research:

Older Prisoners: A Human Rights Perspective

Peer Panel Schedule:

Proponent:

Deakin University, Australia

Panel Recommendations:

Project Status:

Pending OIG

Detail: OIG Can not clear due to international location. 09/10/13 trying to provide Agency response to Survey Questions.

Project Number: 676-AR13

Researcher:

Candace Johnson

IRB Number:

101104

Application Received:

2/26/2013

Completed Application:

3/28/2013

Title of Research:

Reintegration of Ex-Offenders Random Assignment Evaluation (RExO) - 2

Peer Panel Schedule:

5/09/2013

Proponent:

Panel Recommendations:

Project Status:

Pending Review of Researcher's Response to Conditions

Detail: Coordinated w/ External Research #622 AR11. Emailed Researcher on 8/21/13 requesting the names of 72 offenders; so they may be screened before project approval - per Mr. Upshaw.

Project Number: 678-AR13

Application Received:

7/18/2013

Researcher:

Amber Garcia

IRB Number:

13-05-000

Completed Application:

7/18/2013

Title of Research:

Sexism & Sex Offenders: Where Do Gender Stereotypes Fit In?

Peer Panel Schedule:

8/21/2013

Proponent:

Argosy University

Panel Recommendations:

Project Status:

Pending Division Review

Detail: Sent to Parole Division for review/approval 8/21/13

Project Number: 680-AR13

Application Received:

8/19/2013

Researcher:

Dionne Peniston

IRB Number:

IRB pending TDCJ approval

Completed Application:

8/19/2013

Title of Research:

Incarceration and Father-Absence: An Exploration of Fatherhood after Prison

Peer Panel Schedule:

9/3/2013

Proponent:

University of Texas - Dallas

Panel Recommendations:

Project Status:

Pending Division Review

Detail: Interview current Parolees who are fathers of dependent children.

Executive Services
Active Monthly Medical Research Projects
Health Services Division
FY-2013 Fourth Quarter Report: June, July and August

Project Number: 623-RM11

Researcher:
Maurice Willis

IRB Number:
10-191

IRB Expiration Date:
12/14/2013

Research Began:
11/23/2011

Title of Research:

E1208: A Phase III randomized, Double-Blind Trial of
Chemoembolization with or without Sorafenib in Unresectable
Hepatocellular Carcinoma (HCC) in Patients with and without
Vascular Invasion

Data Collection Began:
11/23/2011

Data Collection End:

Proponent:

University of Texas Medical Branch at Galveston

Project Status:
Data Collection

Progress Report Due:
02/28/2014

Projected Completion:
Will depend on enrollment

Executive Services
Pending Monthly Medical Research Projects
Health Services Division

FY-2013 Fourth Quarter Report: June, July and August

Project Number: 615-RM10

Application Received:

04/29/2011

Researcher

John Petersen

IRB Number:

11-069

Title of Research:

Serum Markers of Hepatocellular Cancer

Completed Application:

04/28/2011

Proponent:

University of Texas -Galveston / Correctional Managed Health Care

Peer Panel Schedule:

05/27/2011, 06/05/2011

Project Status:

Pending Peer Panel 3rd Review

01/05/2012

University Medical Director Review Sent:

01/04/2012

Panel Recommendations:

Recommended revisions,

Revised, resubmitted

06/06/2011

University Medical Director Approval:

01/05/2012

Project Number: 633-RM11

Application Received:

06/17/2011

Researcher

Robert Morgan

IRB Number:

502838

Title of Research:

Thinking Patterns of Mentally Disordered Offenders

Completed Application:

06/23/2011

Proponent:

Texas Tech University Department of Psychology

Peer Panel Schedule:

11/22/2011, 01/17/2012,

02/15/2012

Project Status:

Pending Peer Panel 3rd Review

University Medical Director Review Sent:

07/7/2011

Panel Recommendations:

University Medical Director Approval:

11/15/2011

Project Number: 635-RM11

Application Received:
07/06/2011

Researcher
Bryan Schneider

IRB Number:
11-101

Title of Research:
Lactulose compliance levels among patients admitted to a prison system hospital with a hepatic diagnosis

Completed Application:
07/08/2011

Proponent:
University of Texas -Galveston / Correctional Managed Health Care

Peer Panel Schedule:
02/06/2012

Project Status:
Pending Peer Panel

Panel Recommendations:

University Medical Director Review Sent:
07/19/2011

University Medical Director Approval:
08/31/2011

Project Number: 658-RM12

Application Received:
08/28/2012

Researcher
Robert Morgan

IRB Number:
L12-103

Title of Research:
Comparing Telehealth and Face-to-Face Interview Modalities In Referring Offenders with Mental Illness to Treatment

Completed Application:
08/28/2012

Proponent:
Texas Tech University

Peer Panel Schedule:
01/29/2013

Project Status:
Pending Peer Panel Approval

Panel Recommendations:

University Medical Director Review Sent:
8/29/2012

University Medical Director Approval:
01/28/2013

Project Number: 663-RM12

Application Received:

11/12/2012

Researcher

Luca

Cicalese

IRB Number:

12-145

Completed Application:

11/12/2012

Title of Research:

Collection of Human Samples (Liver, Intestine, Blood, Urine, And Feces) and Hepatocellular Carcinoma (HCC) and Other Liver Diseases

Proponent:

University of Texas Medical Branch at Galveston

Peer Panel Schedule:

01/23/2013

Project Status:

Pending Peer Panel Approval

Panel Recommendations:

University Medical Director Review Sent:

01/18/2013

University Medical Director Approval:

01/22/2013

4th Quarter FY 2013
TDCJ Office of Mental Health Monitoring & Liaison
Administrative Segregation

Date	Unit	Observed	Interviewed	Referred	Requests Fwd	911 Tool	ATC 4	ATC 5	ATC6
06/05/2013	Pack	14	14	0	0	100	100	100	100
06/05-06/06/2013	Hughes	440	127	1	7	100	100	100	100
06/12/-06/13-2013	Michael	451	298	1	8	100	100	100	100
06/26-06/27/2013	Estelle ECB	457	218	0	5	100	100	100	100
07/10-11/13	Smith	236	86	0	7	100	100	100	100
07/17/2013	Lychner	16	16	0	1	100	100	100	100
07/17-18/13	Stiles	468	143	8	1	100	100	100	100
07/23/2013	Gist	17	17	0	0	100	100	100	100
07/24-25/13	Telford	486	74	0	5	100	100	100	100
07/30/2013	Clemens	9	9	0	0	100	100	100	100
08/07-08/13	Ferguson	301	183	0	6	100	100	100	100
08/14-15/13	Coffield	627	331	0	8	100	100	100	100
08/20/2013	Bartlett	17	17	3	1	100	100	100	100
08/21/2013	Travis	10	10	0	2	100	100	100	100
08/21-22/13	Robertson	458	297	0	9	100	100	100	100
08/22/2013	Formby	24	24	0	0	100	100	100	100
08/28-29/13	Eastham	300	197	0	12	100	100	100	100
Grand Total	17 units	4,331	2,061	11	72	100	100	100	100

* As of the August 2013 report, the number of offenders interviewed will reflect the total number of offenders interviewed, instead of reflecting only the caseload offenders interviewed.

INTAKE MENTAL HEALTH EVALUATION (MHE) AUDIT

Conducted in 4th Quarter 2013

Period Audited—June, July & August 2013

FACILITY	Charts Reviewed	Charts Requiring MHE (1)	MHE's completed within 14 days (at Intake Unit)	Charts Excluded (2)	MHE Audit Score
Bartlett State Jail	51	49	45	2	92%
Baten ISF	48	22	2	26	10%
Bradshaw State Jail	45	43	19	2	44%
Byrd Unit	42	38	36	4	95%
Dominguez State Jail	60	59	58	1	98%
Formby State Jail	21	19	16	2	84%
Garza Transfer Facility	60	49	41	11	84%
Gist State Jail	39	38	35	1	92%
Glossbrenner SAFPF	16	16	16	0	100%
Gurney Transfer Facility	60	51	38	9	75%
Halbert SAFPF	41	41	40	0	98%
Holliday Transfer Facility	60	57	57	3	98%
Hutchins State Jail	60	56	47	4	84%
Jester I SAFPF	50	50	50	0	100%
Johnston SAFPF	31	31	25	0	81%
Kyle SAFPF	0	0	0	0	N/A
Lindsey State Jail	35	33	28	2	85%
Lychner State Jail	60	59	59	1	100%
Middleton Transfer Facility	60	59	55	1	93%
Plane State Jail	60	58	53	2	91%
Sanchez State Jail	22	19	10	3	53%
Sayle SAFPF	24	23	18	1	78%
Travis State Jail	37	35	35	2	100%
Woodman State Jail	60	56	46	4	82%
GRAND TOTAL	1,042	961	829	81	86%

1. Offenders entering TDCJ who are identified during the Intake Mental Health Screening/Appraisal process as having a history of treatment for mental illness, currently receiving mental health treatment, history of self-injurious behavior or current symptoms/complaints of symptoms of mental illness will have a Mental Health Evaluation (MHE) completed by a Qualified Mental Health Professional (QMHP) within 14 days of identification.
2. Charts are excluded from the sample of charts requiring a MHE if the offender was transferred from the intake unit before 14 days with the MHE not completed.

Corrective Action required of all units scoring below 80% is to **prepare a Detailed Written Plan and to retrain with TDCJ Health Services Division.** Units scoring between 80 to 89% were required to provide documentation of an in-service. Any offender identified as requiring a MHE on the day of audit was entered into the Mental Health Quality of Care Concerns Database and an action request was made that relevant offender receive the evaluation.

COMPELLED PSYCHOACTIVE MEDICATION AUDIT

4th Quarter 2013

Audit Period—June 2013-August 2013

UNIT	Audit Month	Criteria for Compelled Meds Documented in Medical Record ¹				
		Reviewed	Applicable	Compliant	Score	Corrective Action
Montford	June 2013	4	4	4	100	N/A
Clements	June 2013	0	0	0	N/A	None Administered
Skyview	June 2013	5	5	5	100	N/A
Jester IV	June 2013	5	5	5	100	N/A

Montford	July 2013	4	4	4	100	N/A
Clements	July 2013	0	0	0	N/A	None Administered
Skyview	July 2013	5	5	5	100	N/A
Jester IV	July 2013	5	5	5	100	N/A

Montford	August 2013	6	6	6	100	N/A
Clements	August 2013	0	0	0	N/A	None Administered
Skyview	August 2013	11	11	11	100	N/A
Jester IV	August 2013	3	3	3	100	N/A

1. Documentation supports that psychoactive medication was compelled because the patient refused to voluntarily comply and failure to take the medication would have resulted in: 1. Emergency - imminent likelihood of serious harm to the patient and/or to others, or 2. Non-emergency – likelihood of continued suffering from severe and abnormal mental, emotional and physical distress or deterioration of the patient’s ability to function independently. Corrective Action was required of all units scoring below 100%.

Consent Item

University Medical Director's Report

The University of Texas Medical Branch



**Correctional Health Care
MEDICAL DIRECTOR'S REPORT**

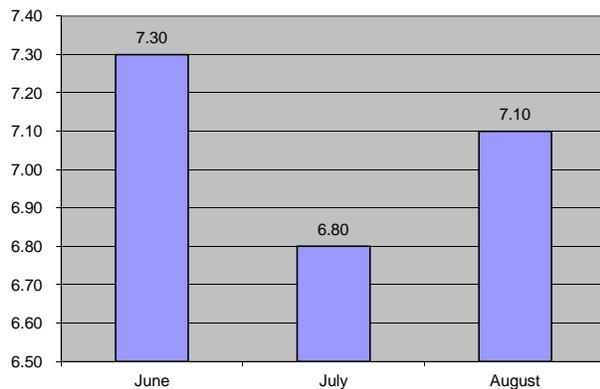
**FOURTH QUARTER
FY 2013**

Medical Director's Report (Page 2):

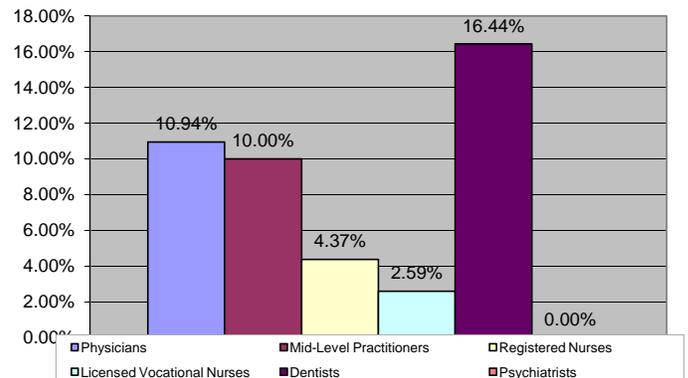
	June	July	August	Qtly Average
Medical Inpatient Facilities				
Average Daily Census	71.80	73.90	73.50	73.07
Number of Admissions	297.00	336.00	321.00	318.00
Average Length of Stay	7.30	6.80	7.10	7.07
Number of Clinic Visits	4,377.00	4,226.00	4,342.00	4,315.00
Mental Health Inpatient Facilities				
Average Daily Census	1,008.27	1,034.87	1,055.67	1,032.94
PAMIO/MROP Census	700.10	700.03	699.65	699.93
Telemedicine Consults	8,416	9,732	8,478	8,875.33

Health Care Staffing	Average This Quarter			Percent Vacant
	Filled	Vacant	Total	
Physicians	57.00	7.00	64.00	10.94%
Mid-Level Practitioners	117.00	13.00	130.00	10.00%
Registered Nurses	219.00	10.00	229.00	4.37%
Licensed Vocational Nurses	527.00	14.00	541.00	2.59%
Dentists	61.00	12.00	73.00	16.44%
Psychiatrists	19.00	0.00	19.00	0.00%

Average Length of Stay



Staffing Vacancy Rates



Consent Item

University Medical Director's Report

Texas Tech University
Health Sciences Center

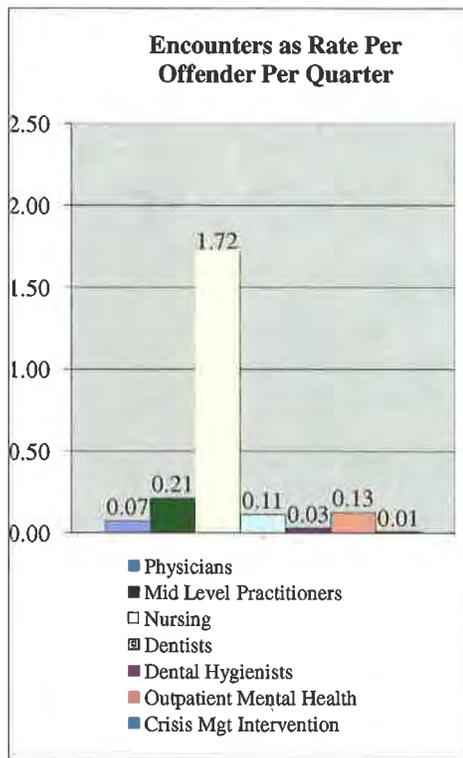


**Correctional Managed Health Care
MEDICAL DIRECTOR'S REPORT**

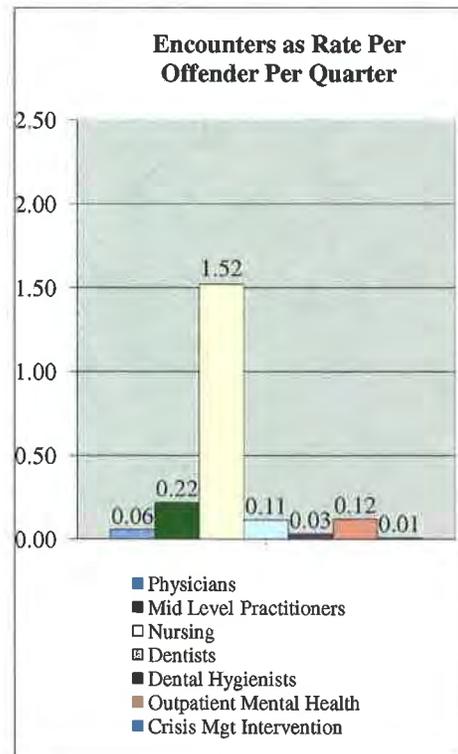
**FOURTH QUARTER
FY 2013**

Medical Director's Report:

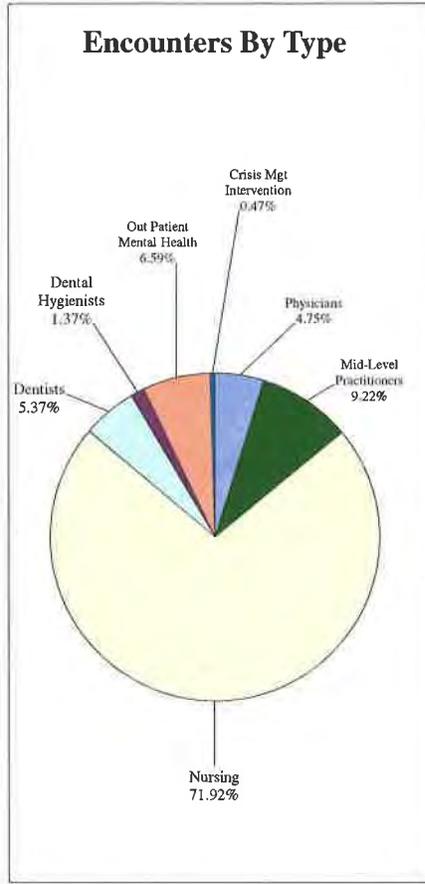
	June		July		August		Quarterly Average	
<i>Average Population</i>	30,558.04		31,012.01		31,234.21		30,934.75	
<i>Medical Encounters</i>	Number	Offender	Number	Offender	Number	Offender	Number	Offender
Physicians	1,419	0.046	1,885	0.061	1,823	0.058	1,709	0.055
Mid-Level Practitioners	5,711	0.187	7,444	0.240	7,059	0.226	6,738	0.218
Nursing	43,350	1.419	51,238	1.652	46,488	1.488	47,025	1.520
Sub-Total	50,480	1.652	60,567	1.953	55,370	1.773	55,472	1.793
<i>Dental Encounters</i>								
Dentists	3,042	0.100	3,552	0.115	4,003	0.128	3,532	0.114
Dental Hygienists	778	0.025	1,092	0.035	999	0.032	956	0.031
Sub-Total	3,820	0.125	4,644	0.150	5,002	0.160	4,489	0.145
<i>Mental Health Encounters</i>								
Outpatient mental health visits	3,497	0.114	3,759	0.121	3,793	0.121	3,683	0.119
Crisis Mgt. Interventions	233	0.008	280	0.009	254	0.008	256	0.008
Sub-Total	3,730	0.122	4,039	0.130	4,047	0.130	3,939	0.127
<i>Total Encounters</i>	58,030	1.899	69,250	2.233	64,419	2.062	63,900	2.066



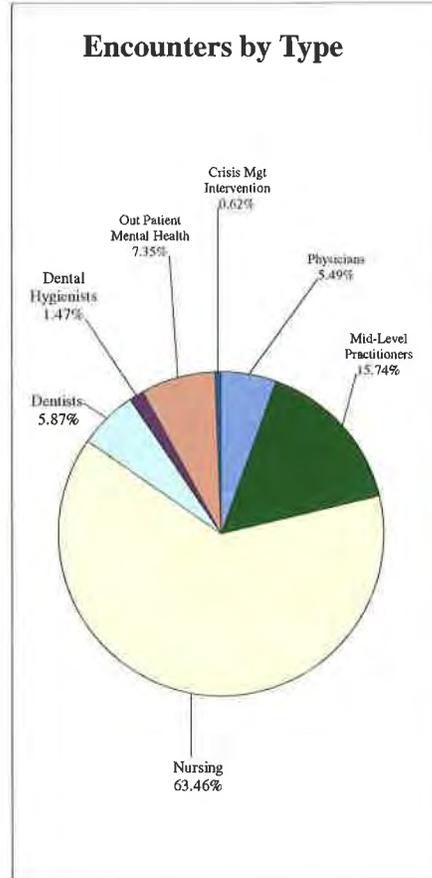
3rd Quarter 2013



4th Quarter 2013



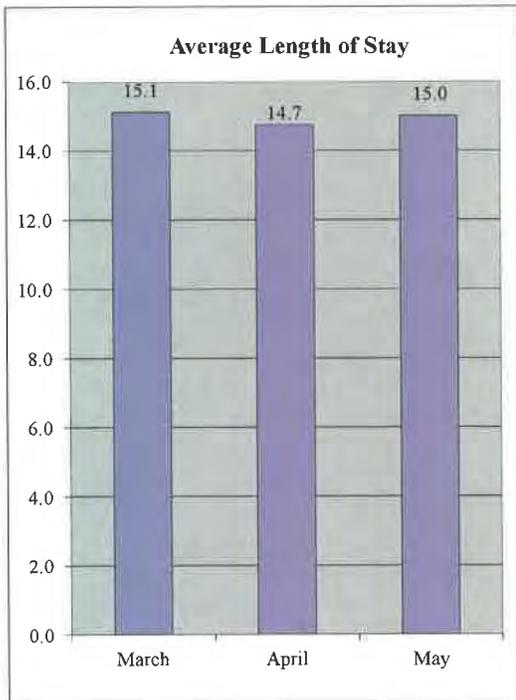
3rd Quarter 2013



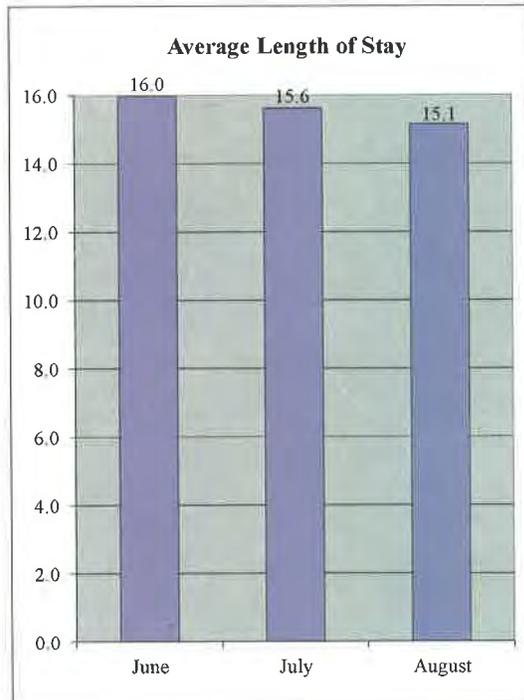
4th Quarter 2013

Medical Director's Report (page 2):

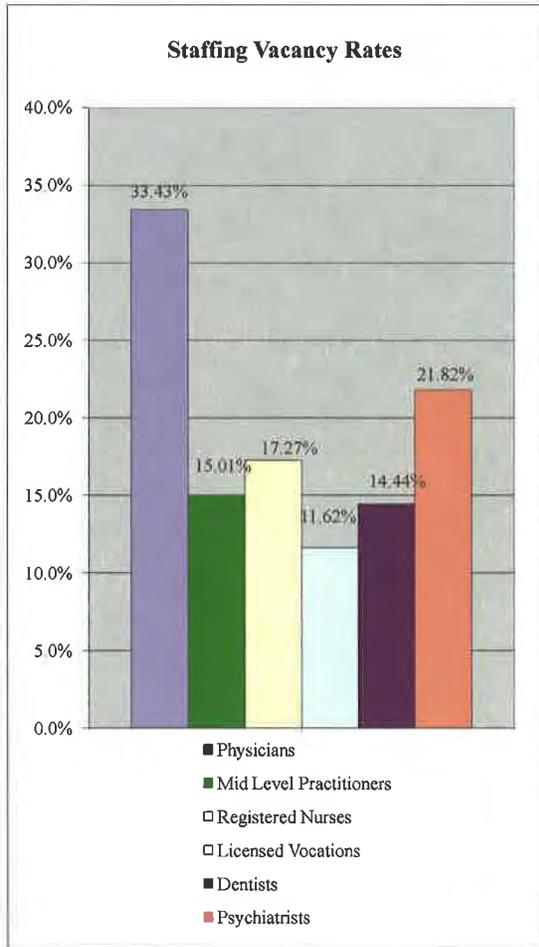
	June	July	August	Quarterly Average
<i>Medical Inpatient Facilities</i>				
Average Daily Census	116.04	129.97	116.53	120.85
Number of Admissions	172	209	208	196.33
Average Length of Stay	15.97	15.62	15.14	15.58
Number of Clinic Visits	394	429	422	415.00
<i>Mental Health Inpatient Facilities</i>				
Average Daily Census	439	452	463	451.33
PAMIO/MROP Census	356	372	400	376.00
<i>Specialty Referrals Completed</i>	843	902	1065	936.67
<i>Telemedicine Consults</i>	881	732	1051	888.00
Average This Quarter				Percent Vacant
<i>Health Care Staffing</i>	Filled	Vacant	Total	
Physicians	15.24	4.82	20.06	24.03%
Mid-Level Practitioners	32.83	4	36.83	10.86%
Registered Nurses	131.82	19.47	151.29	12.87%
Licensed Vocational Nurses	271.02	32.98	304	10.85%
Dentists	16.3	2.75	19.05	14.44%
Psychiatrists	6.39	1.83	8.22	22.26%



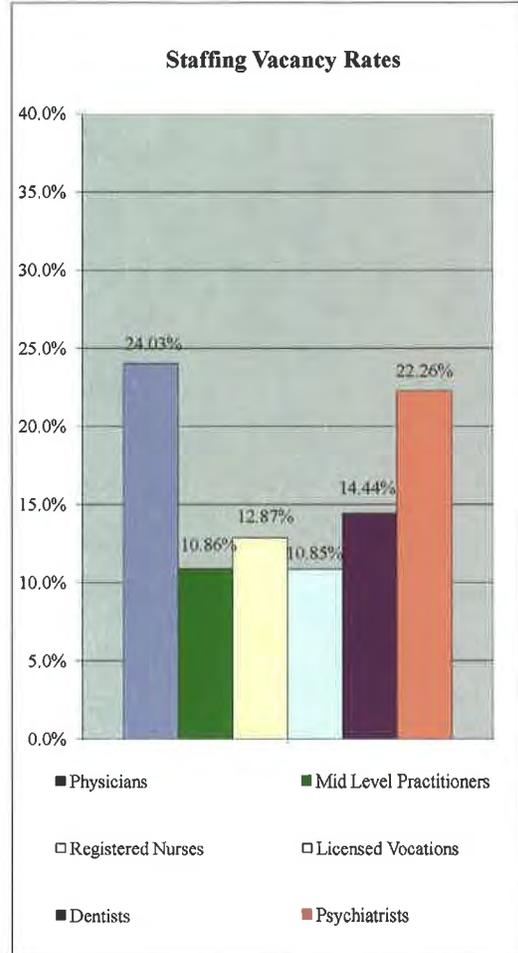
3rd Quarter 2013



4th Quarter 2013



3rd Quarter 2013



4th Quarter 2013

Consent Item

Summary of CMHCC Joint Committee/
Work Group Activities

**Correctional Managed Health Care
Joint Committee/Work Group Activity Summary
For December 2013 CMHCC Meeting**

The CMHCC, through its overall management strategy, utilizes a number of standing and ad hoc joint committees and work groups to examine, review and monitor specific functional areas. The key characteristic of these committees and work groups is that they are comprised of representatives of each of the partner agencies. They provide opportunities for coordination of functional activities across the state. Many of these committees and work groups are designed to insure communication and coordination of various aspects of the statewide health care delivery system. These committees work to develop policies and procedures, review specific evaluation and/or monitoring data, and amend practices in order to increase the effectiveness and efficiency of the program.

Many of these committees or work groups are considered to be medical review committees allowed under Chapter 161, Subchapter D of the Texas Health and Safety code and their proceedings are considered to be confidential and not subject to disclosure under the law.

This summary is intended to provide the CMHCC with a high level overview of the ongoing work activities of these workgroups.

Workgroup activity covered in this report includes:

- System Leadership Council
- Joint Policy and Procedure Committee
- Joint Pharmacy and Therapeutics Committee
- Joint Infection Control Committee
- Joint Dental Work Group
- Joint Mortality and Morbidity Committee
- Joint Nursing Work Group

System Leadership Council

Chair: Dr. Lannette Linthicum

Purpose: Charged with routine oversight of the CMHCC Quality Improvement Plan, including the monitoring of statewide access to care and quality of care indicators.

Meeting Date: November 14, 2013

Key Activities:

(1) Approval of Minutes

Reports from Champions/Discipline Directors:

- A. Access to Care-Dental Services
- B. Access to Care-Mental Health Services
- C. Access to Care-Nursing Services
- D. Access to Care-Medical Staff
- E. Sick Call Request Verification Audit-SCRVA
- F. FY2013 SLC Indicators
 - 1. Dental: Total Open Reminders with Delay > 180 Days
 - 2. Mental Health: Vital Signs Prior to Transfer to Crisis Management
 - 3. Nursing: Refusal of Treatment (ROT)
 - 4. Inpatient Physical Therapy
 - 5. Missed Appointments (No Shows)

Standing Issues

- A. New SLC Indicators
- B. CMHCC Updates

Miscellaneous/Open for Discussion Participants:

- A. Chronic Disease Audit Update
- D. ATC Accuracy Evaluation
- E. Nurse Protocol Audits
- F. QI/QM Nurse Site Visit Audits

Adjournment**Joint Policy and Procedure Committee**

Co-Chair: Dr. Robert Williams, TDCJ Health Services Division

Co-Chair: Dr. Glenda Adams (Interim), UTMB

Purpose: Charged with the annual review of each statewide policy statement applicable to the correctional managed health care program.

Meeting Date: October 10, 2013

Sub Committee Updates:

- A. Release of Information – Phyllis McWhorter
- B. Advanced Practice Nurse/ Physician Assistant Protocols (E-43.1) – Dr. Kathryn Buskirk
- C. Heat Stress (D-27.2) – Dr. Kathryn Buskirk
- D. Follow-up Meeting for History of Sexual Victimization or Predation (New committee to be formed)

Old Business:

None

New Business:

The Following Policies Were Reviewed:

A-09.1; A-10.1, A-11.1; A-11.2; A-12.1; A-12.2, A-13.1; C-24.1; C-25.1; D-30.1; D-30.2;
E-36.7; E-42.2; E-42.3; E-43.1; E-43.2, E-44.1; E-44.2; F-50.1; G-55.1; G-56.1; G-57.1; G-59.2;
G-59.3; H-64.1; H-65.1; I-66.2; I-66.3; I-67.1; I-70.2; I-71.2; I-72.1

The Following Policies Were Submitted for Changes and Updates:

- A-08.4 Attachment A, Guidelines for Completing the Health Summary for Classification Form
- A-08.10 Referral to the Program for Aggressive Mentally Ill Offender (PAMIO) PAMIO
- A-08.10 Attachment A, PAMIO Psychiatric Center Admission Referral Application
- A-08.9 Referral to the Chronic Mentally Ill Program – Inpatient Treatment Tract
- A-08.9 Attachment A, Admission Referral Application to Clements Unit Psychiatric Step Down
- A-11.2 Pronouncement of Death by Licensed Nurses
- C-19.1 Continuing Education/Staff Development
- C-23.2 Supervising Medical Assistants Performing Tasks Delegated By Physicians
- C-24.1 Staffing Levels
- C-25.1 Orientation Training for Health Services Staff
- D-27.2 Heat Stress
- D-27.2 Attachment A, Drugs Associated With Heat Stress
- D-27.2 Attachment B, Comorbidities That May Affect Heat Tolerance
- D-27.2 Attachment C, Heat-Related Illness Reporting Form
- E-32.1 Receiving, Transfer and Continuity of Care Screening
- E-35.1 Mental Health Appraisal for Incoming Offenders
- E-43.1 Advances Practice Nurse/ Physician Assistant Protocols
- E-43.1 Attachment A, Sample Prescriptive Authority Agreement
- E-43.1 Attachment B, Alternative Physician Supervision Log (New)
- G-51.11 Treatment of Offenders with Gender Disorder
- E-36.7 Dental Clinic Operations Reporting
- E-36.7 Attachment A (NEW), Private Non-EMR Facilities Dental Clinic Operations Monthly Report Form
- E-42.2 Missed Clinic Appointments
- E-43.2 Drug Therapy Management By A Pharmacist
- E-44.1 Continuity of Care
- F-47.1 Therapeutic Diets
- G-51.13 Medical Holds (New)
- G-52.2 Admission to the Chronic Mentally Ill (CMI) Outpatient Sheltered Housing
- G-52.2 Attachment A, Chronically Mentally Ill, Outpatient Sheltered Housing Referral (New)
- G-53.3 Management of Offender Hunger-Strikes
- G-55.1 Pregnant Offenders
- G-56.1 Alcohol or Other Drug Dependent Offenders
- G-57.1 Sexual Assault

- H-60.2 Inpatient Health Records
- I-66.1 Medical Therapeutic Restraints
- I-66.2 Therapeutic Restraint of Mental Health Patients
- I-66.3 Psychiatric Inpatient Seclusion
- I-67.1 Compelled Psychoactive Medication for Mental Illness
- I-70.1 Informed Consent

Adjournment

- Next Meeting Date is January 9, 2014.

Joint Pharmacy and Therapeutics Committee

Chair: Dr. Susan Morris

Purpose: Charged with the review, monitoring and evaluation of pharmacy practices and procedures, formulary management and development of disease management guidelines.

Meeting Date: September 12, 2013

Key Activities:

Approval of Minutes from July 11, 2013 Meeting

Reports from Subcommittees:

- A. DMG Triage – Dr. Sandmann
- B. HIV - Dr. Sandmann
- C. Psychiatry - Dr. Koranek
- D. Thyroid – Dr. Agrawal

Monthly Reports

- A. Adverse Drug Reaction Reports (None)
- B. Pharmacy Clinical Activity Report
- C. Drug Recalls (None Reported)
- D. Non-formulary Deferral Reports
 - 1. UTMB Sector (July - August 2013)
 - 2. Texas Tech Sector (June - July 2013)
- E. Utilization Reports (YTD through July 2013)
 - 1. HIV Utilization
 - 2. Hepatitis C Utilization
 - 3. Hepatitis B Utilization
 - 4. Psychotropic Utilization
- F. Policy Review Schedule

Old Business

- A. Hepatitis C Disease Management Guideline
- B. Review of Hepatitis C Protease Inhibitor Bid
- C. Quarterly Medication Error Report (3rd Quarter FY 13) – Texas Tech

New Business

- A. New P & T Chair – Dr. Susan Morris – UTMB Region 1 Medical Director
- B. New UTMB Physician Member – Dr. Jane Moultrie- UTMB Region 3 Medical Director
- C. Review of Ex-Officio Members
- D. Action Request
 - 1. Convert Entecavir (Baraclude®) from Prior Authorization to Non-formulary Agent
 - 2. Floor Stock Addition Request - Levenox®
 - 3. Update of Approved Emergency Medical Services Medications
 - 4. Review of Sunscreen SPF Protection
 - 5. Formulary Addition of Human Papillomavirus (HPV)Vaccine -Gardasil®
 - 6. Switch from Brand Ziagen® to Generic Abacavir
- E. Drug Category Review
 - 1. Electrolyte, Caloric, Water Balance & Vitamins
 - 2. Endocrinology Review
- F. Medication Usage Evaluation
 - 1. Benztropine
 - 2. Ibuprofen
- G. FDA Medication Safety Advisories
- H. Manufacturer Shortages and Discontinuations
- I. Policy and Procedure Revisions
 - 1. Pharmacy and Therapeutics Committee (05-05)
 - 2. Non-formulary Drugs (05-10)
 - 3. Additions to the TDCJ Medication Formulary (05-15)
 - 4. Prescribing and Ordering Medications (10-05)
 - 5. Automatic Stop Orders for Drugs (10-10)
 - 6. Investigational Drugs within TDCJ (10-20)
 - 7. Medications Restricted to Specific Protocols for Use (10-25)
 - 8. Ordering Floor Stock Medication (10-30)
 - 9. Ordering Warehouse Medication (10-35)
 - 10. Administration and Distribution of Patient Medications (40-10)
 - 11. Keep-On-Person (KOP) Medication Distribution Program (50-05)

Adjournment

Joint Infection Control Committee

Co-Chair: Dr. Carol Coglianese
Co-Chair: Chris Black-Edwards, RN, BSN

Purpose: Charged with the review, monitoring and evaluation of infection control policies and preventive health programs.

Meeting Date: October 10, 2013

Key Activities:

Reviewed and Approved Minutes from Previous Meeting

Public Health Update

- A. Connie Adams, LVN – HIV
- B. Latasha Hill, LVN – Occupational Exposure, MRSA & MSSA
- C. Anthony Turner – Syphilis
- D. Mary Parker - Tuberculosis
- E. Charma Blount, RN – Sexual Assault Nurse Examiner
- F. Dianna Langley – Peer Education

Old Business

- A. B-14.41- Barber/ Beauty Shop Personnel (Health and Hygiene)

New Business

- A. Proposed Calendar Year 2014
- B. B-14.17 Vancomycin – Resistant Enterococcus (VRE)
- C. B-14.1 Infection Control Program
- D. B-14-5 Occupational Exposure Counseling and Testing for TDCJ and Correctional Managed Health Care Employees
- E. B-14.07 Immunization
- F. B14.14 Varicella (Chickenpox) and Herpes Zoster (Shingles)
- G. Other

Policies Under Review

- A. B-14.27 Bloodborne Pathogen Exposure Control Plan
- B. B-14.31 Personal Protective Equipment and Other Protective Supplies
- C. B-14.40 Infection Control in Dental Clinics and Dental Laboratories
Dental Services Manual: B-14.1 Infection Control in Dental Clinics and Dental Laboratories
- D. B-14.42 Food Handlers
- E. B-14.51 Influenza – Like Illness (ILI)
- F. B-15.1 Environmental Inspection
- G. B-16.1 Kitchen Sanitation and Food Handlers
- H. B-17.1 Ectoparasite Control

Adjourn

- Next Meeting – February 13, 2014
- Policies to be reviewed are B-14.2 through B-14.10

Joint Dental Work Group

Chair: Dr. Brian Tucker

Purpose: Charged with the review, monitoring and evaluation of dental policies and practices.

Meeting Date: November 13, 2013

Systems Director Meeting

- Review of Minutes
- TDCJ Health Services Director, Dr. Manual Hirsch
- Western Sector Dental Services Director, TTUHSC, Dr. Brian Tucker
- Eastern Sector Dental Services Directors, UTMB-CMC, Dr. Billy Horton
- Dental Utilization Quality Review Committee, Chairperson: Dr. Scott Reinecke

UTMB – CMC Director’s Meeting

- Dental Hygiene Manager, Ms. Pam Myers
- Policy Review: Section E – Policies E-36.5 and E-36.7
- Correctional Dental Services (CDS) Demo Webinar, Dr. Smallwood
- Post Webinar Discussion of CDS
- Eastern Sector Dental Services
 - Region 1, Dr. Scott Reinecke
 - Region 2, Dr. John Beason
 - Region 3, Dr. Joseph Sheringo
- Adjourn

Joint Mortality and Morbidity Committee

Co-Chair: Dr. Glenda Adams

Co-Chair: Dr. Robert Williams

Key Activities:

Review and discussion of reports on offender deaths and determinations as to the need for peer review.

Purpose:

- Charged with the ongoing review of morbidity and mortality data, including review of each offender death.

For the Three Months Ended November 30, 2013

- There were 97 deaths reviewed by the Mortality and Morbidity Committee during the months of September, October and November 2013. Of those 97 deaths, 13 were referred to peer review committees.

Joint Nursing Work Group

Chair: Mike Jones, RN, BSN

Purpose: Charged with the review, monitoring and evaluation of nursing policies and practices.

Meeting Date: October 9, 2013

- A. Minutes from July 10, 2013 Meeting
- B. HSN-1 -Justin Robison
- C. HSM-13. Nurse Signature Line - Gary Eubank
- D. Hepatitis C Pilot Update - Gary Eubank
- E. Update UTMB CID Symposium – Gary Eubank
- F. Do Not Gas List – Mike Jones
- G. Barber Screening – Mike Jones
- H. Medication list on PHD Form – Mike Jones
- I. Nail Clippings in Medical – Mike Jones
- J. Cell Side Triage – Assessment – Mike Jones
- K. Cold Weather Training. AD-10.64 – (D-27.2. Heat Stress) Mike Jones
- L. A-11.2. Pronouncement of Death by Licensed Nurses – Mike Jones
- M. C-19.1. Continuing Education/Staff Development – Mike Jones
- N. Communication with CID Nursing Staff – Gary Eubank
- O. Next meeting – January 8, 2014

Adjourn

Financial Report on Correctional Managed Health Care



Quarterly Report FY2013 Fourth Quarter

September 2012 – August 2013

Fourth Quarter Financial Report on Correctional Managed Health Care

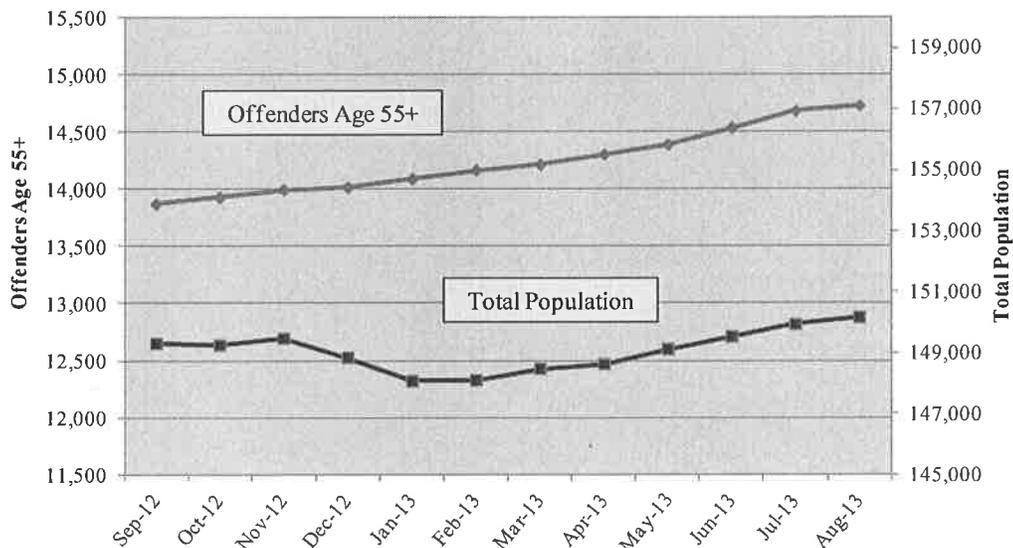
Overview

- Report submitted in accordance with the FY2012-13 General Appropriations Act, Article V, Rider 55, 82nd Legislature, Regular Session 2011
- FY2013 TDCJ Appropriations allocated to Correctional Managed Health Care:
 - \$244.3M Unit and Psychiatric Care, Strategy C.1.7
 - \$137.2M Hospital and Clinical Care, Strategy C.1.8
 - \$53.4M Pharmacy Care, Strategy C.1.9

Population

- Overall offender service population has decreased 2.0% from FY2012
 - Average daily census 152,048 for FY2012 compared to 149,072 for FY2013 through 4th quarter
- Offenders aged 55 or older population increased 4.2% from FY2012
 - Average daily census 13,670 for FY2012 compared to 14,243 for FY2013 through 4th quarter
 - While comprising about 9.6% of the overall service population, offenders age 55 and over account for 39.1% of the hospitalization costs received to date.
- Mental health caseloads:
 - FY2013 average number of psychiatric inpatients through 4th quarter: 1,771
 - FY2013 average number of psychiatric outpatients through 4th quarter: 19,182

CMHC Service Population



Health Care Costs

- Total expenses through 4th quarter, FY2013: \$513.9M
- Unit and Psychiatric Care expenses represent the majority of total health care costs
 - \$291.7M, 56.7% of total expenses
- Hospital and Clinical Care - \$174.0M, 33.9% of total
- Pharmacy Services - \$48.2M, 9.4% of total
 - HIV related drugs: 47.6% of total drug costs
 - Psychiatric drugs: 7.0% of total drug costs
 - Hepatitis C drug therapies: 4.5% of total drug costs
- Cost per offender per day, FY2013 through 4th quarter: \$9.45
 - 5.4% increase compared to FY2012 cost per day of \$8.90
 - 3.6% decrease compared to FY2011 cost per day of \$9.73

Comparison of Total Health Care Costs

	FY 09	FY 10	FY 11	FY 12	4-Year Average	FYTD 13 1st Qtr	FYTD 13 2nd Qtr	FYTD 13 3rd Qtr	FYTD 13 4th Qtr
Population									
UTMB	119,952	120,177	121,417	120,557	120,526	118,040	118,008	118,153	118,359
TTUHSC	30,616	31,048	31,419	31,491	31,144	31,296	30,821	30,640	30,713
Total	150,568	151,225	152,836	152,048	151,670	149,336	148,829	148,793	149,072
Expenses									
UTMB	\$423,338,812	\$435,710,000	\$432,371,801	\$397,606,713	\$422,256,832	\$99,296,587	\$201,255,861	\$307,328,082	\$415,579,990
TTUHSC	\$100,980,726	\$109,767,882	\$110,272,668	\$97,426,964	\$104,612,060	\$23,566,280	\$48,071,452	\$73,193,369	\$98,335,680
Total	\$524,319,538	\$545,477,882	\$542,644,469	\$495,033,677	\$526,868,892	\$122,862,867	\$249,327,313	\$380,521,451	\$513,915,670
Cost/Day									
UTMB	\$9.67	\$9.93	\$9.76	\$9.01	\$9.60	\$9.24	\$9.42	\$9.53	\$9.62
TTUHSC	\$9.04	\$9.69	\$9.62	\$8.45	\$9.20	\$8.27	\$8.62	\$8.75	\$8.77
Total	\$9.54	\$9.88	\$9.73	\$8.90	\$9.51	\$9.04	\$9.26	\$9.37	\$9.45

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Financial Report on Offender Health Care, pursuant to Agency Rider 55
Fourth Quarter, FY2013

<u>Method of Finance</u>	<u>TTUHSC</u>	<u>UTMB</u>	<u>Total</u>
C.1.7. Unit & Psychiatric Care			
TDCJ Appropriation	\$ 54,370,960	\$ 187,505,218	\$ 241,876,178
State Reimbursement Benefits	\$ 6,572,090	\$ 39,230,281	\$ 45,802,371
Other Misc Revenue	\$ 1,850	\$ 90,985	\$ 92,835
C.1.7. Total Method of Finance	\$ 60,944,900	\$ 226,826,484	\$ 287,771,384
C.1.8. Hospital & Clinical Care			
TDCJ Appropriation	\$ 25,291,922	\$ 110,016,884	\$ 135,308,806
State Reimbursement Benefits	\$ 1,558,638	\$ -	\$ 1,558,638
Other Misc Revenue	\$ -	\$ 3,788,159	\$ 3,788,159
C.1.8. Total Method of Finance	\$ 26,850,560	\$ 113,805,043	\$ 140,655,603
C.1.9. Managed Health Care - Pharmacy			
TDCJ Appropriation	\$ 10,481,280	\$ 41,018,720	\$ 51,500,000
State Reimbursement Benefits	\$ 59,134	\$ 1,801,283	\$ 1,860,417
Other Misc Revenue	\$ 6,155	\$ 277,850	\$ 284,005
C.1.9. Total Method of Finance	\$ 10,546,569	\$ 43,097,853	\$ 53,644,422
TOTAL METHOD OF FINANCE	\$ 98,342,029	\$ 383,729,380	\$ 482,071,409

<u>Method of Finance Summary</u>	<u>TTUHSC</u>	<u>UTMB</u>	<u>Total</u>
TDCJ Appropriation	\$ 90,144,162	\$ 338,540,822	\$ 428,684,984
State Reimbursement Benefits	\$ 8,189,862	\$ 41,031,564	\$ 49,221,426
Other Misc Revenue	\$ 8,005	\$ 4,156,994	\$ 4,164,999
TOTAL METHOD OF FINANCE	\$ 98,342,029	\$ 383,729,380	\$ 482,071,409

<u>Expenditures</u>	<u>TTUHSC</u>	<u>UTMB</u>	<u>Total</u>
C.1.7. Unit & Psychiatric Care	\$ 58,706,291	\$ 233,001,110	\$ 291,707,401
C.1.8. Hospital & Clinical Care	\$ 28,704,217	\$ 145,285,030	\$ 173,989,247
C.1.9. Managed Health Care - Pharmacy	\$ 10,925,172	\$ 37,293,851	\$ 48,219,023
TOTAL EXPENDITURES	\$ 98,335,680	\$ 415,579,991	\$ 513,915,671

DIFFERENCE	\$ 6,349	\$ (31,850,611)	\$ (31,844,262)
OFFENDER HEALTH CARE FEES	\$ -	\$ 2,437,079	\$ 2,437,079
OTHER APPROVED FUNDING SOURCES	\$ (6,349)	\$ 29,413,532	\$ 29,407,183
NET DIFFERENCE	\$ -	\$ -	\$ -

Expenditures above do not include UTMB final FY2013 Hospital Cost Reconciliation to be completed by UTMB during FY2014.

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Financial Report on Offender Health Care, pursuant to Agency Rider 55
Fourth Quarter, FY2013

C.1.7. UNIT & PSYCHIATRIC CARE			
	<u>TTUHSC</u>	<u>UTMB</u>	<u>Total</u>
Method of Finance:			
TDCJ Appropriation	\$ 54,370,960	\$ 187,505,218	\$ 241,876,178
State Reimbursement Benefits	\$ 6,572,090	\$ 39,230,281	\$ 45,802,371
Other Misc Revenue	\$ 1,850	\$ 90,985	\$ 92,835
TOTAL METHOD OF FINANCE	\$ 60,944,900	\$ 226,826,484	\$ 287,771,384
Expenditures:			
Unit Care			
Salaries	\$ 17,932,483	\$ 128,947,796	\$ 146,880,279
Benefits	\$ 4,582,679	\$ 39,287,618	\$ 43,870,297
Other Operating Expenses	\$ 2,576,069	\$ 18,700,780	\$ 21,276,849
Professional Services	\$ 1,996,419	\$ -	\$ 1,996,419
Contracted Units/Services	\$ 15,727,710	\$ -	\$ 15,727,710
Travel	\$ 121,816	\$ 901,786	\$ 1,023,602
Electronic Medicine	\$ 407,139	\$ -	\$ 407,139
Capitalized Equipment	\$ 501,829	\$ 1,176,279	\$ 1,678,108
Subtotal, Unit Care	\$ 43,846,144	\$ 189,014,259	\$ 232,860,403
Psychiatric Care			
Salaries	\$ 10,135,854	\$ 23,354,243	\$ 33,490,097
Benefits	\$ 2,557,095	\$ 5,814,926	\$ 8,372,021
Other Operating Expenses	\$ 146,164	\$ 378,520	\$ 524,684
Professional Services	\$ 260,127	\$ -	\$ 260,127
Contracted Units/Services	\$ -	\$ -	\$ -
Travel	\$ 12,367	\$ 81,580	\$ 93,947
Subtotal, Psychiatric Care	\$ 13,111,607	\$ 29,629,269	\$ 42,740,876
Indirect Expenditures (Shared Services)	\$ 1,748,540	\$ 14,357,582	\$ 16,106,122
TOTAL EXPENDITURES	\$ 58,706,291	\$ 233,001,110	\$ 291,707,401
DIFFERENCE	\$ 2,238,609	\$ (6,174,626)	\$ (3,936,017)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Financial Report on Offender Health Care, pursuant to Agency Rider 55
Fourth Quarter, FY2013

C.1.8. HOSPITAL & CLINICAL CARE			
Method of Finance	<u>TTUHSC</u>	<u>UTMB</u>	<u>Total</u>
TDCJ Appropriation	\$ 25,291,922	\$ 110,016,884	\$ 135,308,806
State Reimbursement Benefits	\$ 1,558,638	\$ -	\$ 1,558,638
Other Misc Revenue	\$ -	\$ 3,788,159	\$ 3,788,159
TOTAL METHOD OF FINANCE	\$ 26,850,560	\$ 113,805,043	\$ 140,655,603
Expenditures:			
Hospital and Clinical Care			
University Professional Services	\$ 942,262	\$ 17,279,470	\$ 18,221,732
Freeworld Provider Services	\$ 15,604,205	\$ 32,602,425	\$ 48,206,630
TTUHSC Western Regional Medical Facility & UTMB Hospital Galveston Hospital Services	\$ 11,139,133	\$ 86,851,363	\$ 97,990,496
Estimated IBNR	\$ 19,888	\$ 8,551,772	\$ 8,571,660
Subtotal, Hospital & Clinical Care	\$ 27,705,488	\$ 145,285,030	\$ 172,990,518
Indirect Expenditures (Shared Services)	\$ 998,729	\$ -	\$ 998,729
TOTAL EXPENDITURES	\$ 28,704,217	\$ 145,285,030	\$ 173,989,247
DIFFERENCE	\$ (1,853,657)	\$ (31,479,987)	\$ (33,333,644)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Financial Report on Offender Health Care, pursuant to Agency Rider 55
Fourth Quarter, FY2013

C.1.9. MANAGED HEALTH CARE - PHARMACY			
Method of Finance	<u>TTUHSC</u>	<u>UTMB</u>	<u>Total</u>
TDCJ Appropriation	\$ 10,481,280	\$ 41,018,720	\$ 51,500,000
State Reimbursement Benefits	\$ 59,134	\$ 1,801,283	\$ 1,860,417
Other Misc Revenue	\$ 6,155	\$ 277,850	\$ 284,005
TOTAL METHOD OF FINANCE	\$ 10,546,569	\$ 43,097,853	\$ 53,644,422
Expenditures:			
Managed Health Care - Pharmacy			
Salaries	\$ 1,841,836	\$ 5,767,716	\$ 7,609,552
Benefits	\$ 65,966	\$ 1,863,918	\$ 1,929,884
Other Operating Expenses	\$ 256,986	\$ 1,484,748	\$ 1,741,734
Pharmaceutical Purchases	\$ 8,340,829	\$ 28,151,661	\$ 36,492,490
Travel	\$ 11,778	\$ 25,808	\$ 37,586
Subtotal, Managed Health Care - Pharmacy Expenditures	\$ 10,517,395	\$ 37,293,851	\$ 47,811,246
Indirect Expenditures (Shared Services)	\$ 407,777	\$ -	\$ 407,777
TOTAL EXPENDITURES	\$ 10,925,172	\$ 37,293,851	\$ 48,219,023
DIFFERENCE	\$ (378,603)	\$ 5,804,002	\$ 5,425,399

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Financial Report on Offender Health Care, pursuant to Agency Rider 55
Fourth Quarter, FY2013

Key Population Indicators

	<u>1st Quarter</u>	<u>2nd Quarter</u>	<u>3rd Quarter</u>	<u>June</u>	<u>July</u>	<u>August</u>	<u>4th Quarter</u>	<u>FY2013 YTD</u>
Average Service Population								
UTMB Service Population	118,046	117,992	118,459	118,973	118,915	118,927	118,938	118,359
TTUHSC Service Population	31,296	30,345	30,275	30,558	31,012	31,234	30,935	30,713
Average Service Population	149,342	148,337	148,734	149,531	149,927	150,161	149,873	149,072
Population Age 55 and Over								
UTMB Population	11,532	11,724	11,904	12,118	12,200	12,268	12,195	11,839
TTUHSC Population	2,399	2,366	2,397	2,418	2,482	2,460	2,453	2,404
Population Age 55 and Over	13,931	14,090	14,301	14,536	14,682	14,728	14,648	14,243
HIV Population	2,246	2,211	2,231	2,238	2,237	2,229	2,235	2,231
Medical Inpatient Average Daily Census								
UTMB-Hospital Galveston	69	70	75	74	77	75	75	72
UTMB Freeworld Hospitals	26	23	29	28	33	33	31	27
TTUHSC Freeworld Hospitals	10	10	6	7	4	6	6	8
Medical Inpatient Average Daily Census	105	103	110	109	114	114	112	107
Medical Outpatient Visits								
UTMB Specialty Clinics and ER Visits	3,909	4,286	5,463	5,112	5,085	5,165	5,121	4,695
TTUHSC Freeworld Outpatient and ER Visits	695	1,077	1,151	1,304	1,145	1,974	1,474	1,099
Medical Outpatient Visits	4,604	5,363	6,614	6,416	6,230	7,139	6,595	5,794
Mental Health Inpatient Average Census								
UTMB Psychiatric Inpatient	1,015	1,038	1,025	1,030	1,035	1,056	1,040	1,029
TTUHSC Psychiatric Inpatient	720	684	739	795	824	863	827	742
Mental Health Inpatient Average Census	1,735	1,722	1,764	1,825	1,859	1,919	1,867	1,771
Mental Health Outpatient Average Census								
UTMB Psychiatric Outpatient	15,222	14,698	16,403	15,341	16,298	15,229	15,623	15,486
TTUHSC Psychiatric Outpatient	3,843	3,398	3,862	3,497	3,759	3,793	3,683	3,696
Mental Health Outpatient Average Census	19,065	18,096	20,265	18,838	20,057	19,022	19,306	19,182

Amounts may differ from previous report, due to updates received from the university provider.

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Financial Report on Offender Health Care, pursuant to Agency Rider 55
Fourth Quarter, FY2013

CORRECTIONAL HEALTH CARE COMMITTEE	
<u>Method of Finance</u>	<u>Total</u>
C.1.7. Unit & Psychiatric Care	
TDCJ Appropriation	\$ 477,722
Other Misc Revenue	\$ 47
C.1.7. Total Method of Finance	\$ 477,769
TOTAL METHOD OF FINANCE	\$ 477,769

<u>Expenditures</u>	<u>Total</u>
C.1.7. Unit & Psychiatric Care	
Salaries and Wages	\$ 359,024
Operating Expenses	\$ 118,745
TOTAL EXPENDITURES	\$ 477,769

DIFFERENCE	\$ -
-------------------	-------------

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Financial Report on Offender Health Care, pursuant to Agency Rider 55
Fourth Quarter, FY2013

Texas Tech University Health Science Center					
STRATEGY	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	Total TTUHSC
REVENUE:					
TDCJ Appropriation	\$ 22,474,299	\$ 22,227,327	\$ 22,721,268	\$ 22,721,268	\$ 90,144,162
State Reimbursement Benefits	\$ 1,962,872	\$ 2,057,680	\$ 2,175,470	\$ 1,993,840	\$ 8,189,862
Other Misc Revenue	\$ 445	\$ 430	\$ 563	\$ 6,567	\$ 8,005
TOTAL REVENUES	\$ 24,437,616	\$ 24,285,437	\$ 24,897,301	\$ 24,721,675	\$ 98,342,029

C.1.7. UNIT & PSYCHIATRIC CARE					
EXPENDITURES:					
Unit Care Expenditures					
Salaries	\$ 4,513,852	\$ 4,468,672	\$ 4,580,720	\$ 4,369,239	\$ 17,932,483
Benefits	\$ 1,089,333	\$ 1,158,498	\$ 1,215,688	\$ 1,119,160	\$ 4,582,679
Other Operating Expenses	\$ 292,310	\$ 515,780	\$ 559,716	\$ 1,208,263	\$ 2,576,069
Professional Services	\$ 569,806	\$ 547,376	\$ 585,064	\$ 294,173	\$ 1,996,419
Contracted Units/Services	\$ 3,921,617	\$ 4,114,086	\$ 3,726,670	\$ 3,965,337	\$ 15,727,710
Travel	\$ 20,086	\$ 25,922	\$ 29,622	\$ 46,186	\$ 121,816
Electronic Medicine	\$ 58,341	\$ 21,305	\$ 16,720	\$ 310,773	\$ 407,139
Capitalized Equipment	\$ -	\$ 11,746	\$ 451,848	\$ 38,235	\$ 501,829
Estimated IBNR	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal, Unit Care Expenditures	\$ 10,465,345	\$ 10,863,385	\$ 11,166,048	\$ 11,351,366	\$ 43,846,144
Psychiatric Care Expenditures					
Salaries	\$ 2,476,580	\$ 2,564,745	\$ 2,658,182	\$ 2,436,347	\$ 10,135,854
Benefits	\$ 609,276	\$ 646,967	\$ 686,123	\$ 614,729	\$ 2,557,095
Other Operating Expenses	\$ 9,677	\$ 37,846	\$ 23,708	\$ 74,933	\$ 146,164
Professional Services	\$ 52,031	\$ 60,084	\$ 65,780	\$ 82,232	\$ 260,127
Travel	\$ 1,389	\$ 2,654	\$ 1,889	\$ 6,435	\$ 12,367
Estimated IBNR	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal, Psychiatric Care Expenditures	\$ 3,148,953	\$ 3,312,296	\$ 3,435,682	\$ 3,214,676	\$ 13,111,607
Total Expenditures, Unit & Psychiatric Care	\$ 13,614,298	\$ 14,175,681	\$ 14,601,730	\$ 14,566,042	\$ 56,957,751

C.1.8. HOSPITAL & CLINICAL CARE					
EXPENDITURES:					
University Professional Services	\$ 250,000	\$ 169,091	\$ 286,874	\$ 236,297	\$ 942,262
Freeworld Provider Services	\$ 2,957,793	\$ 4,119,200	\$ 4,056,640	\$ 4,470,572	\$ 15,604,205
TTUHSC Western Regional Medical Facility & UTMB Hospital Galveston Hospital Services	\$ 2,618,898	\$ 2,637,544	\$ 2,830,900	\$ 3,051,791	\$ 11,139,133
Estimated IBNR	\$ 929,707	\$ 31,434	\$ (89,620)	\$ (851,633)	\$ 19,888
Total Expenditures, Hospital & Clinical Care	\$ 6,756,398	\$ 6,957,269	\$ 7,084,794	\$ 6,907,027	\$ 27,705,488

C.1.9. MANAGED HEALTH CARE PHARMACY					
EXPENDITURES:					
Salaries	\$ 453,803	\$ 460,681	\$ 464,705	\$ 462,647	\$ 1,841,836
Benefits	\$ 16,463	\$ 16,827	\$ 16,992	\$ 15,684	\$ 65,966
Other Operating Expenses	\$ 65,992	\$ 69,597	\$ 64,550	\$ 56,847	\$ 256,986
Pharmaceutical Purchases	\$ 1,869,804	\$ 2,046,400	\$ 2,092,471	\$ 2,332,154	\$ 8,340,829
Travel	\$ 3,546	\$ 1,131	\$ 2,916	\$ 4,185	\$ 11,778
Estimated IBNR	\$ -	\$ -	\$ -	\$ -	\$ -
Total Expenditures, Managed Health Care Pharmacy	\$ 2,409,608	\$ 2,594,636	\$ 2,641,634	\$ 2,871,517	\$ 10,517,395

Indirect Expenditures (Shared Services)	\$ 785,976	\$ 777,586	\$ 793,759	\$ 797,725	\$ 3,155,046
--	-------------------	-------------------	-------------------	-------------------	---------------------

TOTAL EXPENDITURES	\$ 23,566,280	\$ 24,505,172	\$ 25,121,917	\$ 25,142,311	\$ 98,335,680
---------------------------	----------------------	----------------------	----------------------	----------------------	----------------------

DIFFERENCE	\$ 871,336	\$ (219,735)	\$ (224,616)	\$ (420,636)	\$ 6,349
-------------------	-------------------	---------------------	---------------------	---------------------	-----------------

OFFENDER HEALTH CARE FEES	\$ -				
----------------------------------	-------------	-------------	-------------	-------------	-------------

OTHER APPROVED FUNDING SOURCES	\$ (871,336)	\$ 219,735	\$ 224,616	\$ 420,636	\$ (6,349)
---------------------------------------	---------------------	-------------------	-------------------	-------------------	-------------------

NET DIFFERENCE	\$ -				
-----------------------	-------------	-------------	-------------	-------------	-------------

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Financial Report on Offender Health Care, pursuant to Agency Rider 55
Fourth Quarter, FY2013

University of Texas Medical Branch					
STRATEGY	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	Total UTMB
REVENUE:					
TDCJ Appropriation	\$ 84,354,660	\$ 83,427,687	\$ 85,281,636	\$ 85,476,839	\$ 338,540,822
State Reimbursement Benefits	\$ 9,985,804	\$ 10,318,304	\$ 10,797,029	\$ 9,930,427	\$ 41,031,564
Other Misc Revenue	\$ 148,716	\$ 58,314	\$ 73,184	\$ 3,876,780	\$ 4,156,994
TOTAL REVENUES	\$ 94,489,180	\$ 93,804,305	\$ 96,151,849	\$ 99,284,046	\$ 383,729,380

C.1.7. UNIT & PSYCHIATRIC CARE					
EXPENDITURES:					
Unit Care Expenditures					
Salaries	\$ 32,027,186	\$ 31,511,070	\$ 32,784,445	\$ 32,625,095	\$ 128,947,796
Benefits	\$ 9,534,643	\$ 10,074,500	\$ 9,987,001	\$ 9,691,474	\$ 39,287,618
Other Operating Expenses	\$ 4,701,996	\$ 4,097,823	\$ 5,176,460	\$ 4,724,501	\$ 18,700,780
Professional Services	\$ -	\$ -	\$ -	\$ -	\$ -
Contracted Units/Services	\$ -	\$ -	\$ -	\$ -	\$ -
Travel	\$ 191,281	\$ 221,885	\$ 205,902	\$ 282,718	\$ 901,786
Electronic Medicine	\$ -	\$ -	\$ -	\$ -	\$ -
Capitalized Equipment	\$ 27,155	\$ 95,088	\$ 397,531	\$ 656,505	\$ 1,176,279
Estimated IBNR	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal, Unit Care Expenditures	\$ 46,482,261	\$ 46,000,366	\$ 48,551,339	\$ 47,980,293	\$ 189,014,259
Psychiatric Care Expenditures					
Salaries	\$ 5,558,811	\$ 5,920,104	\$ 5,959,884	\$ 5,915,444	\$ 23,354,243
Benefits	\$ 1,357,584	\$ 1,548,033	\$ 1,472,590	\$ 1,436,719	\$ 5,814,926
Other Operating Expenses	\$ 162,499	\$ 84,921	\$ 66,420	\$ 64,680	\$ 378,520
Professional Services	\$ -	\$ -	\$ -	\$ -	\$ -
Travel	\$ 19,010	\$ 19,141	\$ 12,651	\$ 30,778	\$ 81,580
Estimated IBNR	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal, Psychiatric Care Expenditures	\$ 7,097,904	\$ 7,572,199	\$ 7,511,545	\$ 7,447,621	\$ 29,629,269
Total Expenditures, Unit & Psychiatric Care	\$ 53,580,165	\$ 53,572,565	\$ 56,062,884	\$ 55,427,914	\$ 218,643,528

C.1.8. HOSPITAL & CLINICAL CARE					
EXPENDITURES:					
University Professional Services	\$ 4,099,363	\$ 4,557,704	\$ 4,261,817	\$ 4,360,586	\$ 17,279,470
Freeworld Provider Services	\$ 3,708,057	\$ 8,880,670	\$ 9,110,774	\$ 10,902,924	\$ 32,602,425
TTUHSC Western Regional Medical Facility & UTMB Hospital Galveston Hospital Services	\$ 21,004,426	\$ 22,978,314	\$ 20,280,527	\$ 22,588,096	\$ 86,851,363
Estimated IBNR	\$ 5,342,902	\$ (210,669)	\$ 1,538,085	\$ 1,881,454	\$ 8,551,772
Total Expenditures, Hospital & Clinical Care	\$ 34,154,748	\$ 36,206,019	\$ 35,191,203	\$ 39,733,060	\$ 145,285,030

C.1.9. MANAGED HEALTH CARE PHARMACY					
EXPENDITURES:					
Salaries	\$ 1,391,241	\$ 1,421,482	\$ 1,480,651	\$ 1,474,342	\$ 5,767,716
Benefits	\$ 460,879	\$ 471,780	\$ 465,850	\$ 465,409	\$ 1,863,918
Other Operating Expenses	\$ 319,962	\$ -	\$ 667,849	\$ 496,937	\$ 1,484,748
Pharmaceutical Purchases	\$ 6,955,005	\$ 7,400,233	\$ 7,183,231	\$ 6,613,192	\$ 28,151,661
Travel	\$ 8,090	\$ 5,974	\$ 5,619	\$ 6,125	\$ 25,808
Estimated IBNR	\$ -	\$ -	\$ -	\$ -	\$ -
Total Expenditures, Managed Health Care Pharmacy	\$ 9,135,177	\$ 9,299,469	\$ 9,803,200	\$ 9,056,005	\$ 37,293,851

Indirect Expenditures (Shared Services)	\$ 2,426,497	\$ 2,881,220	\$ 5,014,934	\$ 4,034,931	\$ 14,357,582
--	---------------------	---------------------	---------------------	---------------------	----------------------

TOTAL EXPENDITURES	\$ 99,296,587	\$ 101,959,273	\$ 106,072,221	\$ 108,251,910	\$ 415,579,991
---------------------------	----------------------	-----------------------	-----------------------	-----------------------	-----------------------

DIFFERENCE	\$ (4,807,407)	\$ (8,154,968)	\$ (9,920,372)	\$ (8,967,864)	\$ (31,850,811)
-------------------	-----------------------	-----------------------	-----------------------	-----------------------	------------------------

OFFENDER HEALTH CARE FEES	\$ 2,437,079	\$ -	\$ -	\$ -	\$ 2,437,079
----------------------------------	---------------------	-------------	-------------	-------------	---------------------

OTHER APPROVED FUNDING SOURCES	\$ 2,370,328	\$ 8,154,968	\$ 9,920,372	\$ 8,967,864	\$ 29,413,532
---------------------------------------	---------------------	---------------------	---------------------	---------------------	----------------------

NET DIFFERENCE	\$ -				
-----------------------	-------------	-------------	-------------	-------------	-------------

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Financial Report on Offender Health Care, pursuant to Agency Rider 55
Fourth Quarter, FY2013

Combined Total					
STRATEGY	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	Combined Total
REVENUE:					
TDCJ Appropriation	\$ 106,828,959	\$ 105,655,014	\$ 108,002,904	\$ 108,198,107	\$ 428,684,984
State Reimbursement Benefits	\$ 11,948,676	\$ 12,375,984	\$ 12,972,499	\$ 11,924,267	\$ 49,221,426
Other Misc Revenue	\$ 149,161	\$ 58,744	\$ 73,747	\$ 3,883,347	\$ 4,164,999
TOTAL REVENUES	\$ 118,926,796	\$ 118,089,742	\$ 121,049,150	\$ 124,005,721	\$ 482,071,409

C.1.7. UNIT & PSYCHIATRIC CARE					
EXPENDITURES:					
Unit Care Expenditures					
Salaries	\$ 36,541,038	\$ 35,979,742	\$ 37,365,165	\$ 36,994,334	\$ 146,880,279
Benefits	\$ 10,623,976	\$ 11,232,998	\$ 11,202,689	\$ 10,810,634	\$ 43,870,297
Other Operating Expenses	\$ 4,994,306	\$ 4,613,603	\$ 5,736,176	\$ 5,932,764	\$ 21,276,849
Professional Services	\$ 569,806	\$ 547,376	\$ 585,064	\$ 294,173	\$ 1,996,419
Contracted Units/Services	\$ 3,921,617	\$ 4,114,086	\$ 3,726,670	\$ 3,965,337	\$ 15,727,710
Travel	\$ 211,367	\$ 247,807	\$ 235,524	\$ 328,904	\$ 1,023,602
Electronic Medicine	\$ 58,341	\$ 21,305	\$ 16,720	\$ 310,773	\$ 407,139
Capitalized Equipment	\$ 27,155	\$ 106,834	\$ 849,379	\$ 694,740	\$ 1,678,108
Estimated IBNR	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal, Unit Care Expenditures	\$ 56,947,606	\$ 56,863,751	\$ 59,717,387	\$ 59,331,659	\$ 232,860,403
Psychiatric Care Expenditures					
Salaries	\$ 8,035,391	\$ 8,484,849	\$ 8,618,066	\$ 8,351,791	\$ 33,490,097
Benefits	\$ 1,966,860	\$ 2,195,000	\$ 2,158,713	\$ 2,051,448	\$ 8,372,021
Other Operating Expenses	\$ 172,176	\$ 122,767	\$ 90,128	\$ 139,613	\$ 524,684
Professional Services	\$ 52,031	\$ 60,084	\$ 65,780	\$ 82,232	\$ 260,127
Travel	\$ 20,399	\$ 21,795	\$ 14,540	\$ 37,213	\$ 93,947
Estimated IBNR	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal, Psychiatric Care Expenditures	\$ 10,246,857	\$ 10,884,495	\$ 10,947,227	\$ 10,662,297	\$ 42,740,876
Total Expenditures, Unit & Psychiatric Care	\$ 67,194,463	\$ 67,748,246	\$ 70,664,614	\$ 69,993,956	\$ 275,601,279

C.1.8. HOSPITAL & CLINICAL CARE					
EXPENDITURES:					
University Professional Services	\$ 4,349,363	\$ 4,726,795	\$ 4,548,691	\$ 4,596,883	\$ 18,221,732
Freeworld Provider Services	\$ 6,665,850	\$ 12,999,870	\$ 13,167,414	\$ 15,373,496	\$ 48,206,630
TTUHSC Western Regional Medical Facility & UTMB Hospital Galveston Hospital Services	\$ 23,623,324	\$ 25,615,858	\$ 23,111,427	\$ 25,639,887	\$ 97,990,496
Estimated IBNR	\$ 6,272,609	\$ (179,235)	\$ 1,448,465	\$ 1,029,821	\$ 8,571,660
Total Expenditures, Hospital & Clinical Care	\$ 40,911,146	\$ 43,163,288	\$ 42,275,997	\$ 46,640,087	\$ 172,990,518

C.1.9. MANAGED HEALTH CARE PHARMACY					
EXPENDITURES:					
Salaries	\$ 1,845,044	\$ 1,882,163	\$ 1,945,356	\$ 1,936,989	\$ 7,609,552
Benefits	\$ 477,342	\$ 488,607	\$ 482,842	\$ 481,093	\$ 1,929,884
Other Operating Expenses	\$ 385,954	\$ 69,597	\$ 732,399	\$ 553,784	\$ 1,741,734
Pharmaceutical Purchases	\$ 8,824,809	\$ 9,446,633	\$ 9,275,702	\$ 8,945,346	\$ 36,492,490
Travel	\$ 11,636	\$ 7,105	\$ 8,535	\$ 10,310	\$ 37,586
Estimated IBNR	\$ -	\$ -	\$ -	\$ -	\$ -
Total Expenditures, Managed Health Care Pharmacy	\$ 11,544,785	\$ 11,894,105	\$ 12,444,834	\$ 11,927,522	\$ 47,811,246

Indirect Expenditures (Shared Services)	\$ 3,212,473	\$ 3,658,806	\$ 5,808,693	\$ 4,832,656	\$ 17,512,628
--	---------------------	---------------------	---------------------	---------------------	----------------------

TOTAL EXPENDITURES	\$ 122,862,867	\$ 126,464,445	\$ 131,194,138	\$ 133,394,221	\$ 513,915,671
---------------------------	-----------------------	-----------------------	-----------------------	-----------------------	-----------------------

DIFFERENCE	\$ (3,936,071)	\$ (8,374,703)	\$ (10,144,988)	\$ (9,388,500)	\$ (31,844,262)
-------------------	-----------------------	-----------------------	------------------------	-----------------------	------------------------

OFFENDER HEALTH CARE FEES	\$ 2,437,079	\$ -	\$ -	\$ -	\$ 2,437,079
----------------------------------	---------------------	-------------	-------------	-------------	---------------------

OTHER APPROVED FUNDING SOURCES	\$ 1,498,992	\$ 8,374,703	\$ 10,144,988	\$ 9,388,500	\$ 29,407,183
---------------------------------------	---------------------	---------------------	----------------------	---------------------	----------------------

NET DIFFERENCE	\$ -				
-----------------------	-------------	-------------	-------------	-------------	-------------

**Summary of Critical Correctional Health Care Personnel Vacancies
Prepared for the Correctional Managed Health Care Committee**

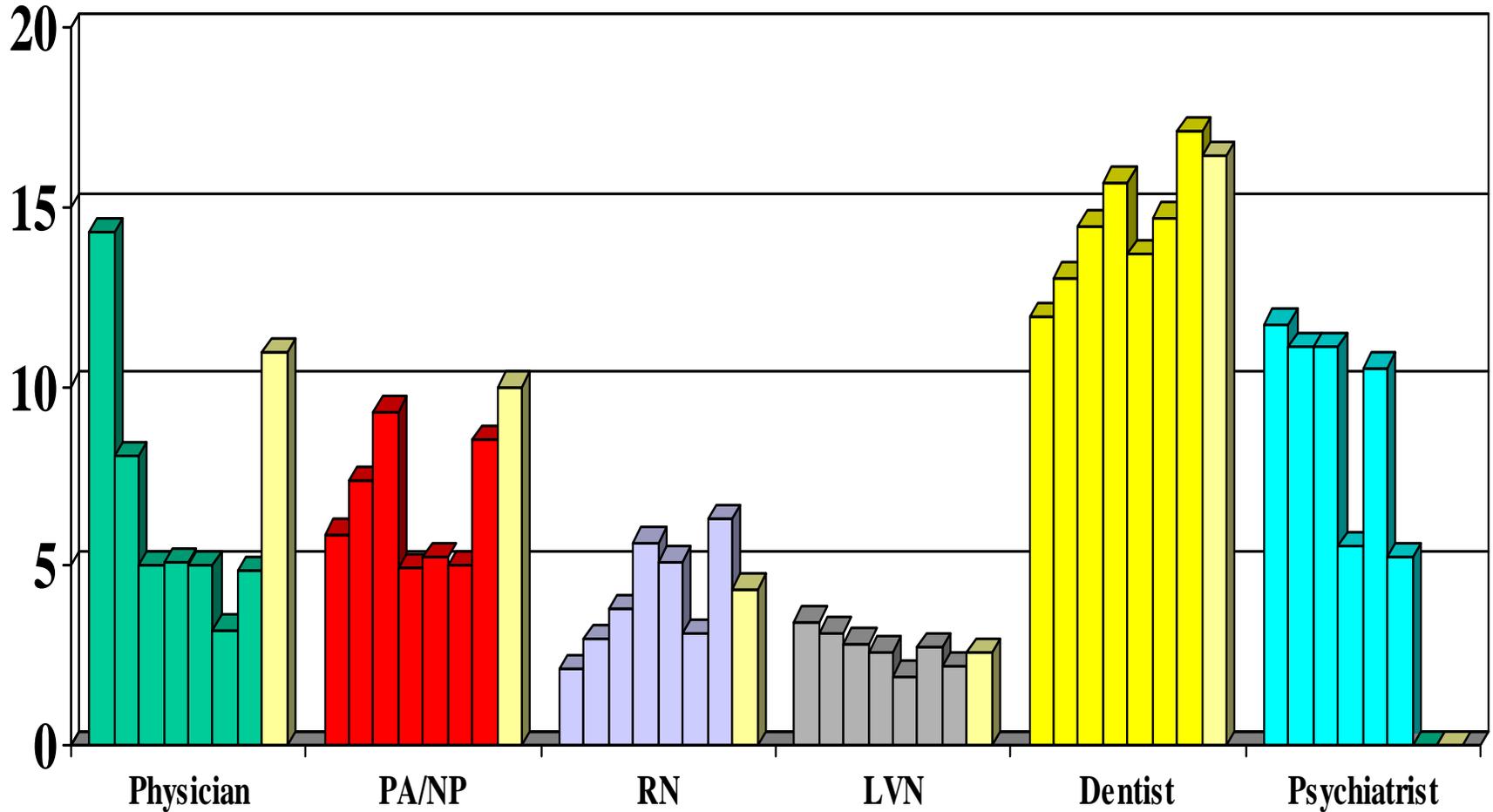
As of November 2013

Title of Position	CMHCC Partner Agency	Vacant Since (mm/yyyy)	Actions Taken to Fill Position
Manager III-Office of Professional Standards	TDCJ	08/09/13	DM pending approval
Investigator III-Office of Professional Standards (HS)	TDCJ	08/23/13	Interviewed 11/13/13; pending applicant selection
Nurse II-Utilization Review	TDCJ	09/15/13	DM pending approval
Administrative Asst IV-Grievance Coordinator	TDCJ	10/15/13	Posted and closed 11/12/13; reviewing applications for interview
Investigator II-Patient Liaison Program Jester IV Unit	TDCJ	11/01/13	Interviewed 10/25/13; subsequent vacancy selection pending clearance
Information Specialist IV-Health Services	TDCJ	11/01/13	Posted 11/13/13, Closed 11/22/13
Program Supervisor V-Health Services	TDCJ	11/01/13	Posted 11/13/13; Closed 11/22/13
LVN III-Office of Professional Standards	TDCJ	11/30/13	Request to fill in process.
Investigator II-Patient Liaison Program Montford Unit	TDCJ	11/30/13	Request to fill in process.
PAMIO Medical Director	TTUHSC	02/2009	Continued advertisement in local and national publications; Expanded Recruiting Agency utilization
Medical Director	TTUHSC	07/2012	Continued advertisement in local and national publications; Expanded Recruiting Agency utilization
Physician I-III	UTMB	01/01/2013	Local and National Advertising, TAFP, NCCHC Conferences, and Agency contacts
Mid Level Practitioners (PA and FNP)	UTMB	01/01/2013	Local and National Advertising, Career Fairs, TAPA and TNP Conferences, Intern programs.
Dentists	UTMB	01/01/2013	Local and National Advertising, Star of the South Conference
Sr. Medical Director	UTMB	06/01/2013	NCCHC Conference, ACA Conference, TAFP Conference, National and Local Advertising, Agency contacts

University Vacancy Rate Report
by Quarter FY 2012 – 2013

University of Texas Medical Branch

UTMB Vacancy Rates (%) by Quarter FY2012 – FY2013



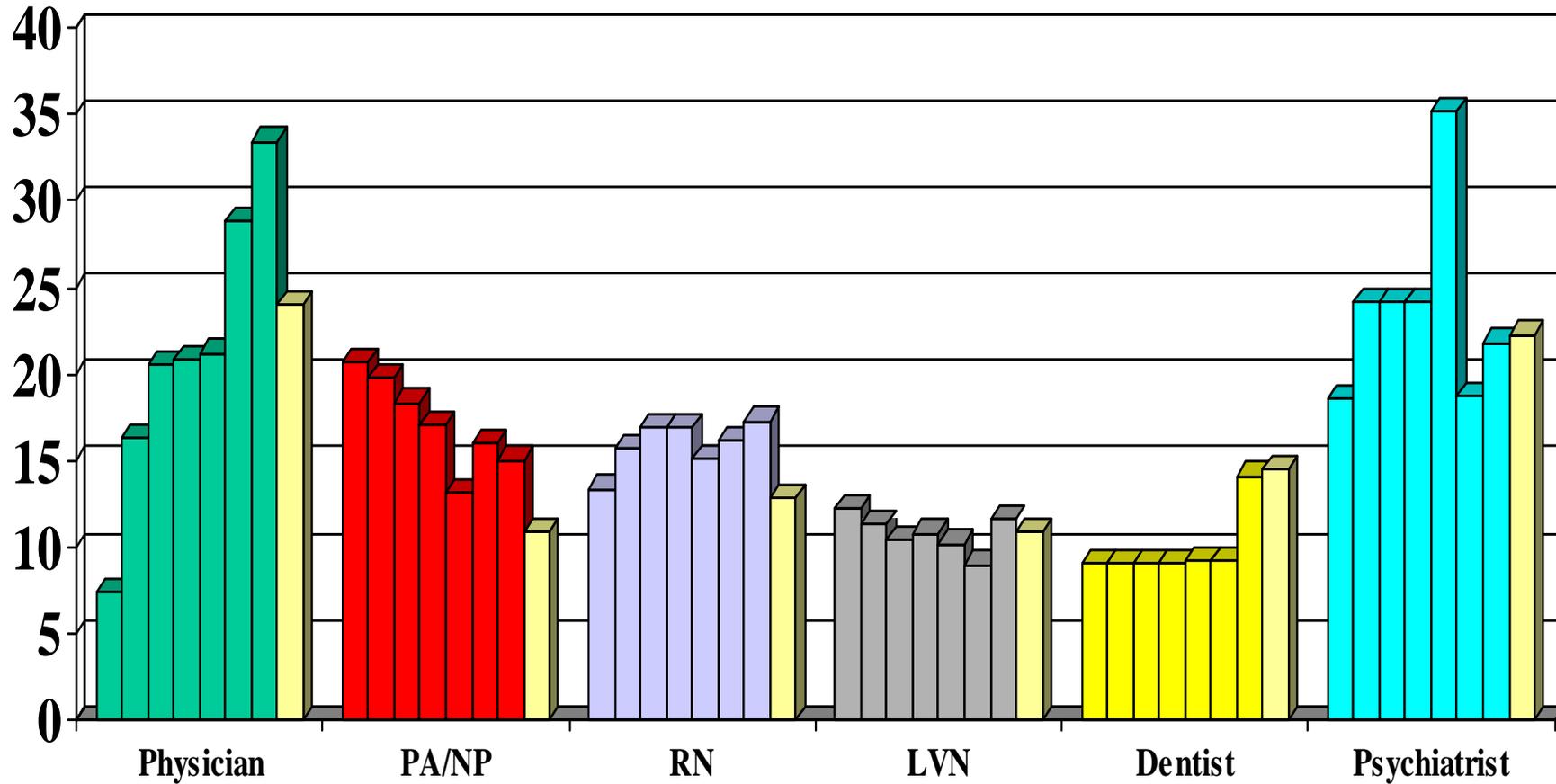
*Correctional Managed
Health Care*



University Vacancy Rate Report
by Quarter FY 2012 – 2013

Texas Tech University
Health Sciences Center

TTUHSC Vacancy Rates (%) by Quarter FY 2012 – FY 2013



*Correctional Managed
Health Care*





**TEXAS DEPARTMENT OF
CRIMINAL JUSTICE**

***HEALTH SERVICES DIVISION
MEDICAL DIRECTORS' REPORT***

Fourth Quarter FY-2013

Lannette Linthicum, MD, CCHP-A, FACP

TDCJ Medical Directors' Report

Office of Health Services Monitoring (OHSM)

Operational Review Audit (ORA)

- During the Fourth Quarter of FY-2013 (June, July, and August 2013), **nine** Operational Review Audits (ORAs) were conducted at the following facilities: Baten Intermediate Sanction Facility (ISF) Bridgeport Pre- Parole (PPT), Fort Stockton, Holliday, Hutchins State Jail, Jordan, Luther, Lynaugh, and Middleton.
- During the Fourth Quarter of FY-2013, **eight** ORAs were closed for the following facilities: Bridgeport Pre-Parole Transfer, Clements, Ferguson, Gist State Jail, Lindsey State Jail, Middleton, Neal, and West Texas (ISF).
- The following is a summary of the six items found to be most frequently less than 80% compliant in the **nine** Operational Review Audits conducted in the Fourth Quarter of FY-2013:
 1. Item **5.070** requires offenders to have their medical record reviewed and a physical examination completed within the required time frame of placement in administrative segregation, prehearing detention, or isolation. Seven of the nine facilities were not in compliance with this requirement. The seven facilities out of compliance were: Baten ISF, Fort Stockton, Holliday, Hutchins State Jail, Jordan, Lynaugh, and Middleton. Corrective actions were requested from the seven facilities. At the time of this report, two facilities have returned their corrective action plan: Hutchins State Jail and Middleton. Five facilities are preparing facility-specific corrective actions to ensure future compliance: Baten ISF, Fort Stockton, Holliday, Jordan, and Lynaugh.
 2. Item **6.370** requires the influenza vaccine be offered annually to offenders with certain chronic diseases*, all offenders 50 years of age or older, and pregnant females after the first trimester. Vaccinations are to be documented on the Abstract of Immunizations Form (HSM-2) when administered. If the vaccination is refused, refusal should be documented with a signed Refusal of Treatment Form (HSM-82). Seven of the nine facilities were not in compliance with this requirement. The seven facilities out of compliance were: Baten ISF, Bridgeport PPT, Fort Stockton, Hutchins State Jail, Luther, Lynaugh, and Middleton. Corrective actions were requested from the seven facilities. At the time of this report, three facilities have returned their corrective action plan: Bridgeport PPT, Hutchins State Jail, and Middleton. Four facilities are preparing facility-specific corrective actions to ensure future compliance: Baten ISF, Fort Stockton, Luther, and Lynaugh.

**Diseases for which influenza vaccine is indicated: heart disease, moderate to severe asthma, Chronic Obstructive Pulmonary Disease (COPD), Diabetes, immunocompromised conditions such as Human Immunodeficiency Virus (HIV) infection, most cancers, end-stage renal disease and sickle cell disease.*
 3. Item **5.111** requires intra-system medical transfers returning to the facility to have HSN-1 Nursing Incoming Chain Reviews (Sections III and IV) completed within the required time frame of the offender's arrival. Six of the nine facilities were not in compliance with this requirement. The six facilities out of compliance were: Baten ISF, Bridgeport PPT, Fort Stockton, Jordan, Lynaugh, and Middleton. Corrective actions were requested from the six facilities. At the time of this report, two facilities have returned their corrective action plan: Bridgeport PPT, and Middleton. Four facilities are preparing facility-specific corrective actions to ensure future compliance: Baten ISF, Fort Stockton, Jordan, and Lynaugh.
 4. Item **6.040** requires offenders receiving anti-tuberculosis medication at the facility have a Tuberculosis Patient Monitoring Record (HSM-19) completed. Five of the nine facilities were not in compliance with this requirement. The five facilities out of compliance were: Fort Stockton, Hutchins State Jail, Luther, Lynaugh, and Middleton. Corrective actions were requested from the five facilities. At the time of this report, two facilities have returned their corrective action plan:

Operational Review Audit (Continued)

- Hutchins State Jail and Middleton. Three facilities are preparing facility-specific corrective actions to ensure future compliance: Fort Stockton, Luther, and Lynaugh.
5. Item **6.340** requires an Aspartateaminotransferase (AST) Platelet Ratio Index (APRI) be calculated at least annually for offenders diagnosed with Hepatitis C Virus. Five of the nine facilities were not in compliance with this requirement. The five facilities out of compliance were: Baten ISF, Fort Stockton, Holliday, Hutchins State Jail, and Lynaugh. Corrective actions were requested from the five facilities. At the time of this report, one facility has returned their corrective action plan: Hutchins State Jail. Four facilities are preparing facility-specific corrective actions to ensure future compliance: Baten ISF, Fort Stockton, Holliday, and Lynaugh.
 6. Item **6.351** requires Hepatitis C Virus infected patients that do not have documented contraindication for antiviral therapy with an Aspartateaminotransferase (AST) Platelet Ratio Index (APRI) score greater than 0.42 or with abnormal liver function (Prothrombin Time, Total Bilirubin, or Albumin) be referred to the designated physician or clinic, or appropriately treated according to Correctional Managed Health Care (CMHC) Hepatitis C Evaluation and Treatment Pathway. Five of the nine facilities were not in compliance with this requirement. The five facilities out of compliance were: Bridgeport PPT, Fort Stockton, Holliday, Hutchins State Jail, and Lynaugh. Corrective actions were requested from the five facilities. At the time of this report, two facilities have returned their corrective action plan: Bridgeport PPT, and Hutchins State Jail. Three facilities are preparing facility-specific corrective actions to ensure future compliance: Fort Stockton, Holliday, and Lynaugh.

Capital Assets Monitoring

The Fixed Assets Contract Monitoring officer audited the same **nine** units listed above for operational review audits during the Fourth Quarter of FY-2013. These audits are conducted to monitor compliance with the Health Services Policy and State Property Accounting (SPA) policy regarding inventory procedures. **All nine** units were within the required compliance range.

Dental Quality Review Audit

During the fourth quarter of FY-2013 (June, July, and August 2013), Dental Quality Review audits were conducted at the following seventeen facilities: Crain, Darrington, Formby, Hilltop, Hughes, Jester I, Jester III, Jester IV, Luther, Montford, Mountain View, Murray, Pack, Tulia, Vance, Wheeler, and Woodman. The following is a summary of the items found to be most frequently below 80 percent.

- **Item 2** assesses if charts of incoming (Chain-in) intra-system offender transfers are reviewed by the facility dental department within seven days of arrival. The following facility was out of compliance: Pack (54%). The Corrective Action Plan has been received from the Pack facility.
- **Item 20** assesses if the Ending Priority on the Comprehensive Treatment Plan (CTP) is consistent with the objective findings and assessment. The six facilities out of compliance were: Darrington (79%), Jester IV (0%), Mountain View (79%), Hughes (71%), Montford (50%), and Luther (71%). Corrective Action Requests are pending for the following three facilities: Mountain View, Montford, and Luther.
- **Item 23** assesses if radiographs for dental extractions are of diagnostic quality. The following facility was out of compliance: Montford (75%). Corrective Action Request is pending for the Montford facility.

Dental Quality Review Audit (Continued)

- **Item 31** assesses if the air-conditioner/air exchange is adequate for the treatment area. The following facility was out of compliance: Hilltop (0%). Corrective Action Request is pending for the Hilltop facility.

Grievances and Patient Liaison Correspondence

During the Fourth Quarter of FY-2013 (June, July, and August 2013), the Patient Liaison Program and the Step II Medical Grievance Program received **3,645** correspondences: The PLP received **1,947** correspondences and Step II Medical Grievance received **1,698 grievances**. There were **455** Action Requests generated by the Patient Liaison and the Step II Medical Grievance Programs.

The University of Texas Medical Branch (UTMB) and Texas Tech University Health Sciences Center (TTUHSC) *overall* combined percentage of sustained offender medical grievances closed in the Fourth Quarter FY -2013 for the Step II medical grievances was **eight** percent for the Fourth Quarter of FY-2013. Performance measure expectation is **six** percent or less (Article IX, Correctional Managed Health Care contract). The percentage of sustained Step II medical grievances from UTMB was **10** percent and **six** percent for TTUHSC for the Fourth Quarter of FY-2013

Action Requests are generated to address Quality of Care issues, (i.e., clinical decisions, complaints about medical personnel and staff practice issues). Action Requests are also generated to address access to care and policy and documentation issues.

Quality Improvement (QI) Access to Care Audit

Units with an average composite score of 80 percent or above in each discipline will be audited one time per fiscal year. Those with average composite scores less than 80 percent in a discipline(s) or less than a two year history of scores will have that discipline(s) audited quarterly.

During the Fourth Quarter of FY-2013 (June, July, and August 2013), the Patient Liaison Program nurses and investigators performed 44 Sick Call Request Verification audits on 42 facilities. At some units, Expansion Cell Block areas were counted as a separate audit.

The SCRVA examines and verifies the facility methodology for reporting Access to Care. A random sample of Sick Call Requests was also audited by the Office of Professional Standards (OPS) staff. A total of 351 indicators were reviewed at the **42 facilities and six of the indicators fell below the 80 percent** compliance threshold representing one percent. The discipline composite score (medical/nursing, dental, and mental health) is an overall assessment of compliance with the sick call process of the 42 facilities audited. There were **5** units with one or more discipline composite scores below 80. Corrective action has been requested from these facilities. At each unit, OPS staff continued educating the medical staff.

Office of Public Health

- The Public Health Program monitors cases of infectious diseases in newly incarcerated offenders as well as new cases that occur in the offenders within the TDCJ population. The data is reported by the facilities for 11 infectious conditions including Syphilis, Hepatitis C Virus (HCV), Human Immunodeficiency Virus (HIV), and Tuberculosis (TB) as well as the data for occupational exposures to bloodborne pathogens. Year-to-date figures for a disease may differ from the monthly reports totals due to late reporting or to a determination that some previously reported cases fail to meet the criteria to be considered new cases.

Office of Public Health (Continued)

There were 501 cases of Hepatitis C identified for the Fourth Quarter FY-2013, compared to 703 case identified during the Third Quarter. The reporting mechanism for HIV tests was changed effective February 1, 2010. HIV tests are now to be classified as belonging to one of four categories: intake, offender-requested, provider-requested, or pre-release. HIV test became mandatory at intake in July 2007. However, offenders who are already known to be HIV positive are not required to be retested at intake. Instead, they are offered laboratory testing to assess the severity of their infections. HIV testing became mandatory for pre-release in September 2005 (HB43). Pre-release testing generally occurs during the last six months of incarceration. Two categories of offenders do not require pre-release testing: those already known to be HIV positive and those whose intake test were drawn within six months of an offender's release date. During the Fourth Quarter FY-2013, 24,728 offenders had intake tests, and **132** are newly identified as having HIV infections. For the Third Quarter FY-2013, 18,207 offenders had intake tests and 125 were HIV positive. During the Fourth Quarter FY-2013, **13,824** offenders had pre-release tests; one was HIV positive compared to **none** in the Third Quarter FY-2013. **15** new AIDS cases were identified during the Fourth Quarter FY-2013, compared to **16** new AIDS cases in the Third Quarter FY-2013.

- **212 cases of suspected Syphilis** were reported in the Fourth Quarter FY-2013, compared to **271** in the Third Quarter in FY-2013. **15 required treatment or retreatment** compared to **20** in the Fourth Quarter FY-2013. Syphilis can take months to identify, these figures represent an overestimation of actual number of cases. Some of the suspected cases will later be reclassified as resolved prior infections.
- **194 Methicillin-Resistant Staphylococcus Aureus (MRSA)** cases were reported for the Fourth Quarter FY-2013, compared to **189** during the Third Quarter of FY-2013. **165** Methicillin-Sensitive Staphylococcus Aureus (MSSA) cases were reported for the Fourth Quarter of FY-2013 compared to **130** for the Third Quarter of FY-2013. Numbers of both MRSA and MSSA have been decreasing for the last few years.
- There was an average of **17 Tuberculosis (TB) cases** under management for the Fourth Quarter FY-2013, compared to an average of **18 (TB) cases** for the Third Quarter of FY-2013. Although TB numbers often fluctuate significantly from year to year, there has been a slight decrease in the numbers of offenders with TB.
- In FY-2006, the Office of Public Health began reporting the activities of the Sexual Assault Nurse Examiner (SANE) Coordinator. This position collaborates with the Safe Prisons Program and is trained and certified as a SANE. Although the SANE Coordinator does not teach the SANE Curriculum because of restrictions imposed by the State Attorney General's Office, this person provides inservice training to facility staff in the performance of medical examination, evidence collection and documentation, and use of the sexual assault kits. During the Fourth Quarter FY-2013, **25** training sessions were held and **364** medical and mental health staff received training. This position also audits the documentation and services provided by medical personnel for each sexual assault reported. There have been **232** chart reviews of alleged sexual assaults performed for the Fourth Quarter FY-2013. There were no deficiencies found this quarter. **52** bloodborne exposure baseline labs were drawn on exposed offenders. To date, one offender has tested positive for HIV in baseline labs routinely obtained after the report of sexual assault. This is a new HIV positive case, but the seroconversion is not attributed to this reported incident of sexual assault.
- During the Fourth Quarter FY-2013, **seven** units received a two day training and **one** unit received a four day training which included the Wall Talk Training. As of the close of the quarter, **101 of the 111 facilities** housing Correctional Institutions Division and State Jail offenders had active peer education programs. During the Fourth Quarter FY-2013, **106 offenders trained** to become peer educators. This is a **decrease** from the Third Quarter FY-2013. During the Fourth Quarter FY-2013, **17,693** offenders attended classes presented by educators. This is a **decrease** from the Third Quarter FY-2013(i.e. **20,414**).

Mortality and Morbidity

There were **95** deaths reviewed by the Mortality and Morbidity Committee during the months of June, July, and August 2013. Of those 95 deaths, **12** were referred to peer review committees.

A referral to a peer review committee does not necessarily indicate that substandard care was provided. It is a request for the Correctional Managed Health Care providers to review the case through their respective quality assurance processes. Referrals may also be made to address systemic issues to improve the delivery of health care.

Peer Review Committee	Number of Cases Referred
Provider & Nursing Peer Review	2
Provider Peer Review	5
Nursing Peer Review	4
Mental Health	1
Total	12

Office of Mental Health Services Monitoring & Liaison

The following is a summary of the activities performed by the Office of Mental Health Monitoring & Liaison (OMHM&L) during the Fourth Quarter of FY-2013:

- The OMHM&L monitors all Administrative Segregation (Ad Seg) facilities within the TDCJ Correctional Institutions Division and State Jails once every six months. During the fourth quarter of FY-2013, **17** Ad Seg facilities were audited including: Bartlett, Clemens, Coffield, Eastham, Estelle, Ferguson, Formby, Gist, Hughes, Lychner, Michael, Pack, Robertson, Smith, Stiles, Telford and Travis. The OMHM&L auditors observed 4,331 offenders, interviewed 2,061 offenders, and referred 13 offenders to the university providers for further evaluation. Access to Care (ATC) 4 (i.e. timely triage) met **100** percent compliance for the 17 facilities. ATC 5 (i.e. documentation Chief Complaint from Sick Call Requests) met **100** percent compliance for the 17 facilities that received Sick Call Requests from offenders in Ad Seg. All 17 facilities were **100** percent compliant for ATC 6 (i.e. timely provider visit after referral from triage).
- The OMHM&L monitors all instances of administration of compelled psychoactive medication to offenders to ensure that all instances are appropriately logged and documented. During the fourth quarter FY-2013, a total of **48** instances of compelled psychoactive medication administration occurred. 14 instances occurred at the Montford unit, 21 instances occurred at the Skyview unit, and 13 instances occurred at the Jester IV unit. All 3 facilities were **100** percent compliant with required criteria for logging and documentation of compelled psychoactive medication.
- The Intake Mental Health Evaluation audit conducted by the OMHM&L is designed to provide reasonable assurance that those offenders identified as having a potential mental health need receive a Mental Health Evaluation within 14 days of identification. **23** of the 24 intake facilities identified incoming offenders in need of a Mental Health Evaluation. **17** facilities met or **exceeded 80% percent compliance** for completing Mental Health Evaluations within 14 days of identified need: Bartlett, Byrd, Dominguez, Formby, Garza, Gist, Glossbrenner, Halbert, Holliday, Hutchins, Jester, Johnston, Lindsey, Lychner, Middleton, Plane, Travis, and Woodman. Five facilities earned **compliance scores of 79% or lower**: Sayle (78%), Gurney (75%), Sanchez (53%), Bradshaw (44%) and Baten (10%).
- The OMHM&L reviewed the mental health records of **11** pregnant offenders being considered for the Baby and Mother Bonding Initiative (BAMBI) and determined that none of them exhibited mental health issues that precluded their participation in BAMBI.

Office of Health Services Liaison

- The Office of Health Services Liaison (HSL) conducts a random audit of 10 percent of electronic medical records (EMR) of offenders discharged from hospitals and infirmaries in the Texas Tech University Health Science Center (TTUHSC) and the University of Texas Medical Branch (UTMB) sectors. In the Fourth Quarter of FY-2013, **HSL conducted 159 hospital and 60 infirmary discharge audits.**
- Each audit determines if vital signs were recorded on the day the offender left the discharge facility; if the receiving facility had medical services sufficient to meet the offender's current needs; if the medical record was reviewed by a health care member and referred (if applicable) to an appropriate medical provider as required by policy; if the offender required unscheduled medical care related to the admitting diagnosis within the first seven days after discharge and if discharge information was available in the offender's electronic medical record within 24 hours of arriving at the unit.
- Of the 159 hospital discharge audits conducted, **140** were from the UTMB Sector and **19** were from the TTUHSC sector. There were **9** deficiencies identified for UTMB and none identified for TTUHSC. Of the **60** infirmary discharge audits conducted **26** were from the UTMB sector and **34** were from the TTUHSC sector. There were **1** deficiencies identified from UTMB and **4** for TTUHSC.

Accreditation

The American Correctional Association Summer Conference was held in National Harbor, Maryland August 9-14, 2013. During this conference, the following units were awarded Reaccreditation by the ACA Panel of Commissioners: Clemens, Scott, Duncan, Wallace/Ware, Garza East/West, Dalhart, Jester IV, Huntsville, Goree and Crain.

Biomedical Research Projects

The following is a summary of current and pending research projects as reported by the Texas Department of Criminal Justice (TDCJ) Executive Services:

- Correctional Institutions Division Active Monthly Research Projects – 28,
- Correctional Institutions Division Pending Monthly Research Projects – 7,
- Health Services Division Active Monthly Medical Research Projects – 1, and
- Health Services Division Pending Medical Research Projects – 5.

Novel Therapies for Cancer

Olugbenga Ojo, M.D.

Chief Medical Officer/Chief Physician Executive

TDCJ Hospital & Clinics

Associate Professor of Medicine

Department of Internal Medicine

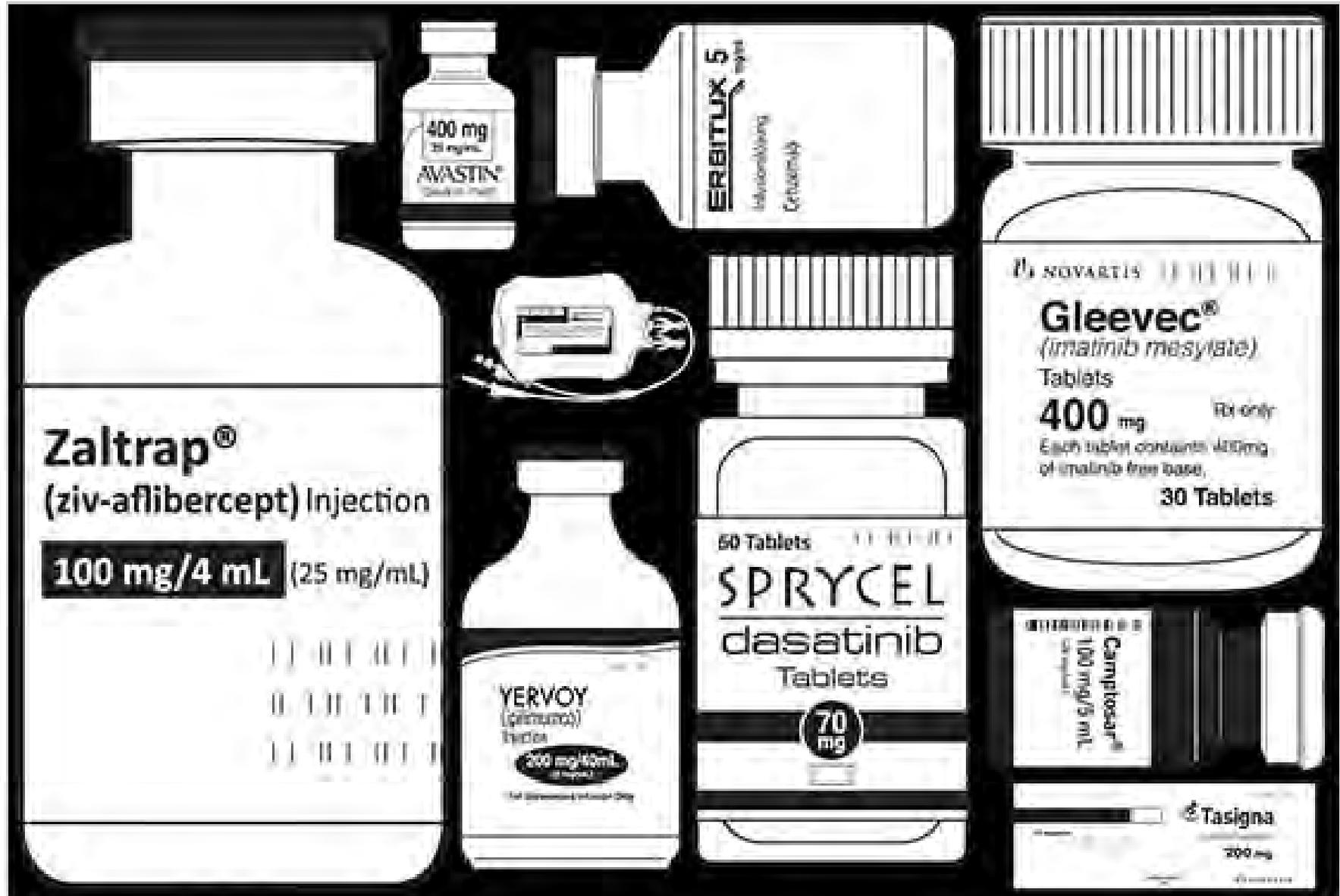
Avi B. Markowitz, M.D., F.A.C.P.

Bill and Louise Bauer Distinguished Chair in Cancer Research

Professor and Chief, Division of Hematology/Oncology

Associate Director for Experimental Therapeutics and Department Head,
Office of Oncology Clinical Trials, UTMB Comprehensive Cancer Center

Novel Therapies for Cancer

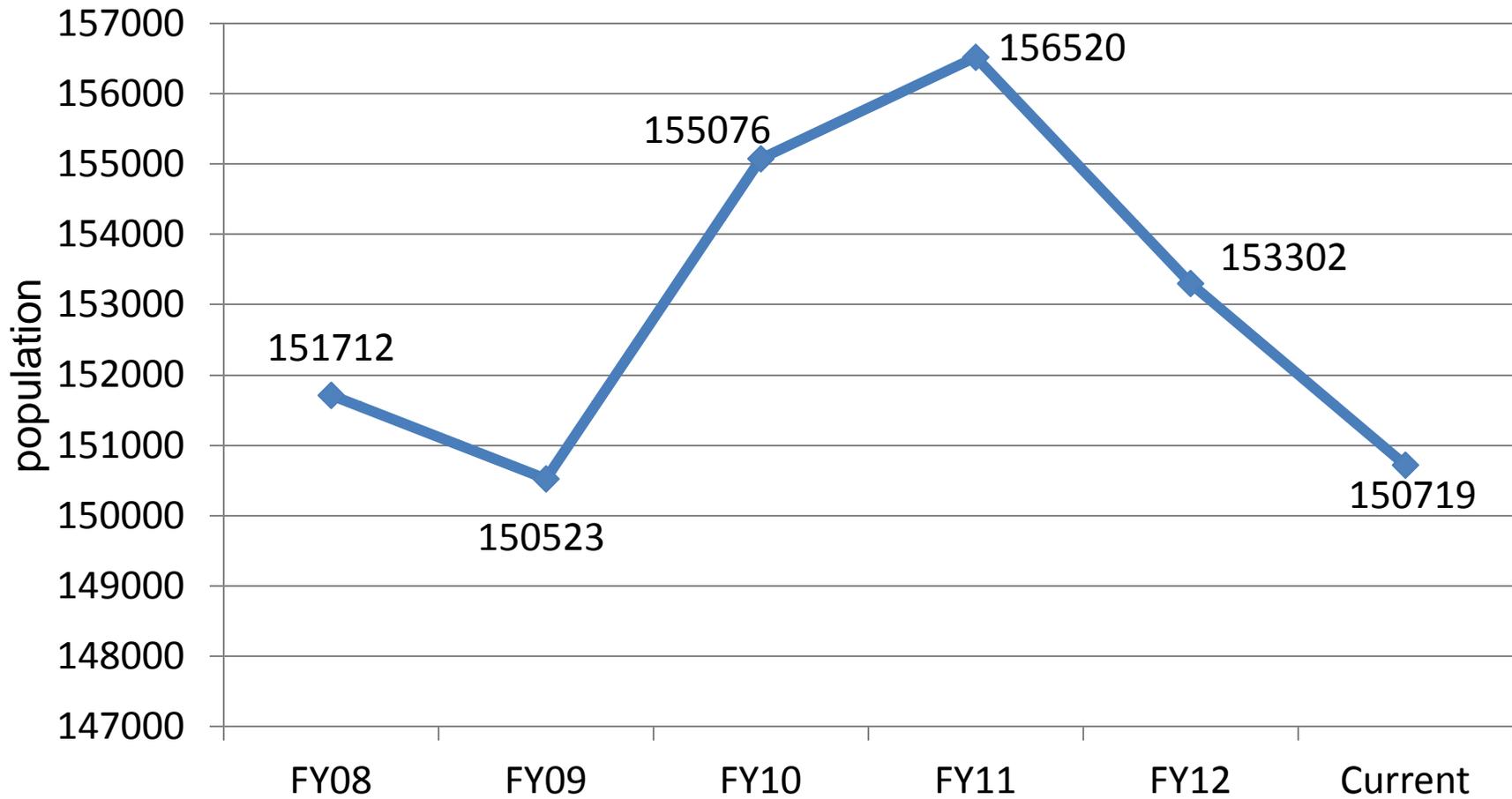


Novel Therapies for Cancer

- 1 in 3 Americans will be diagnosed with Cancer.
- In USA, sales of anticancer drugs second only to drugs for heart disease.
- Annual direct cost for cancer care projected to rise from \$104 billion in 2006 to over \$173 billion in 2020.
- NCI projects cost of treating 29 most common CA will rise by 27% in 2020.
- 55% of all CA diagnosed in 55 and older.

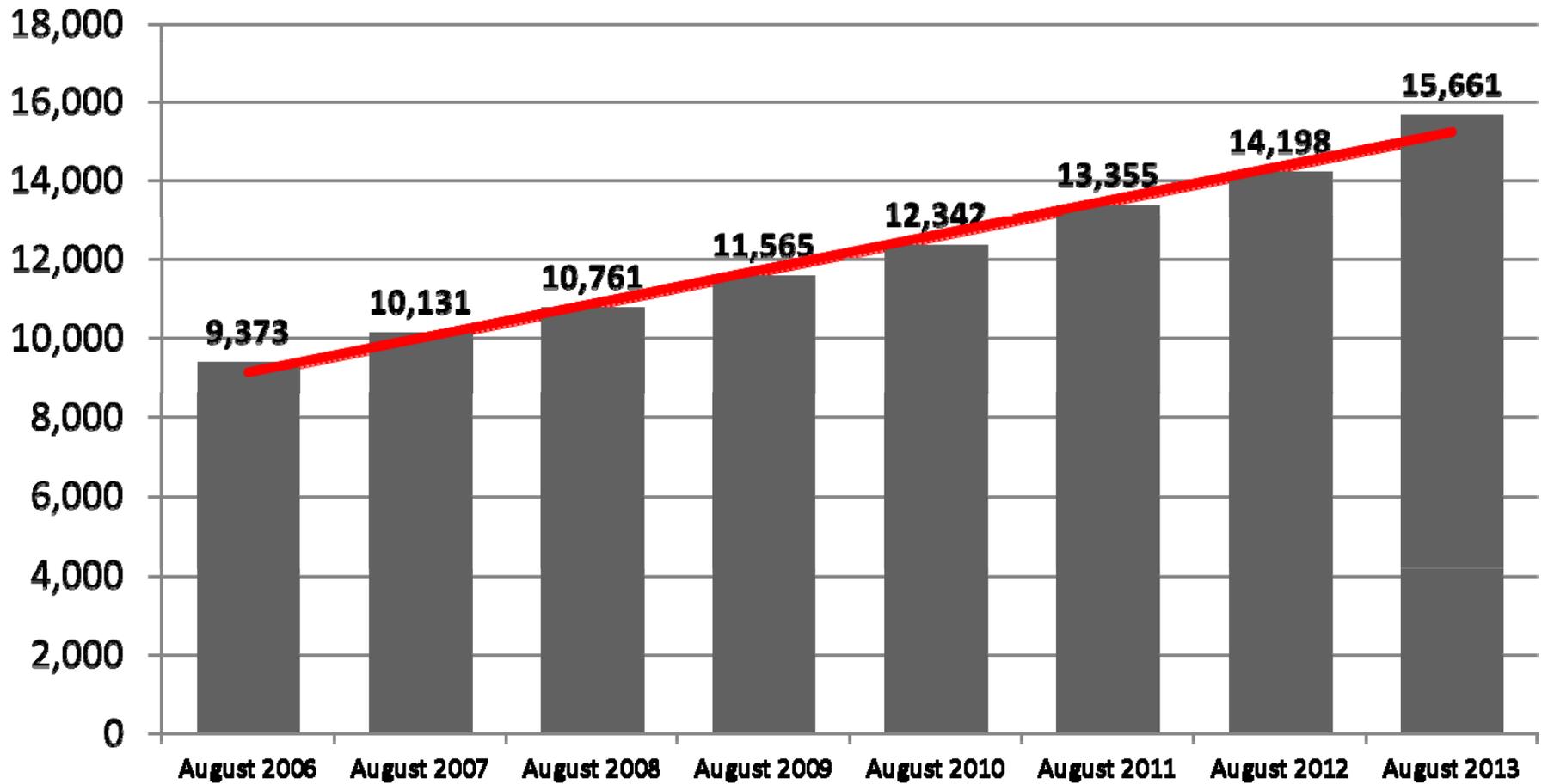
Novel Therapies for Cancer

TDCJ Population by Fiscal Year



Novel Therapies for Cancer

Offender Population Age 55 and Older

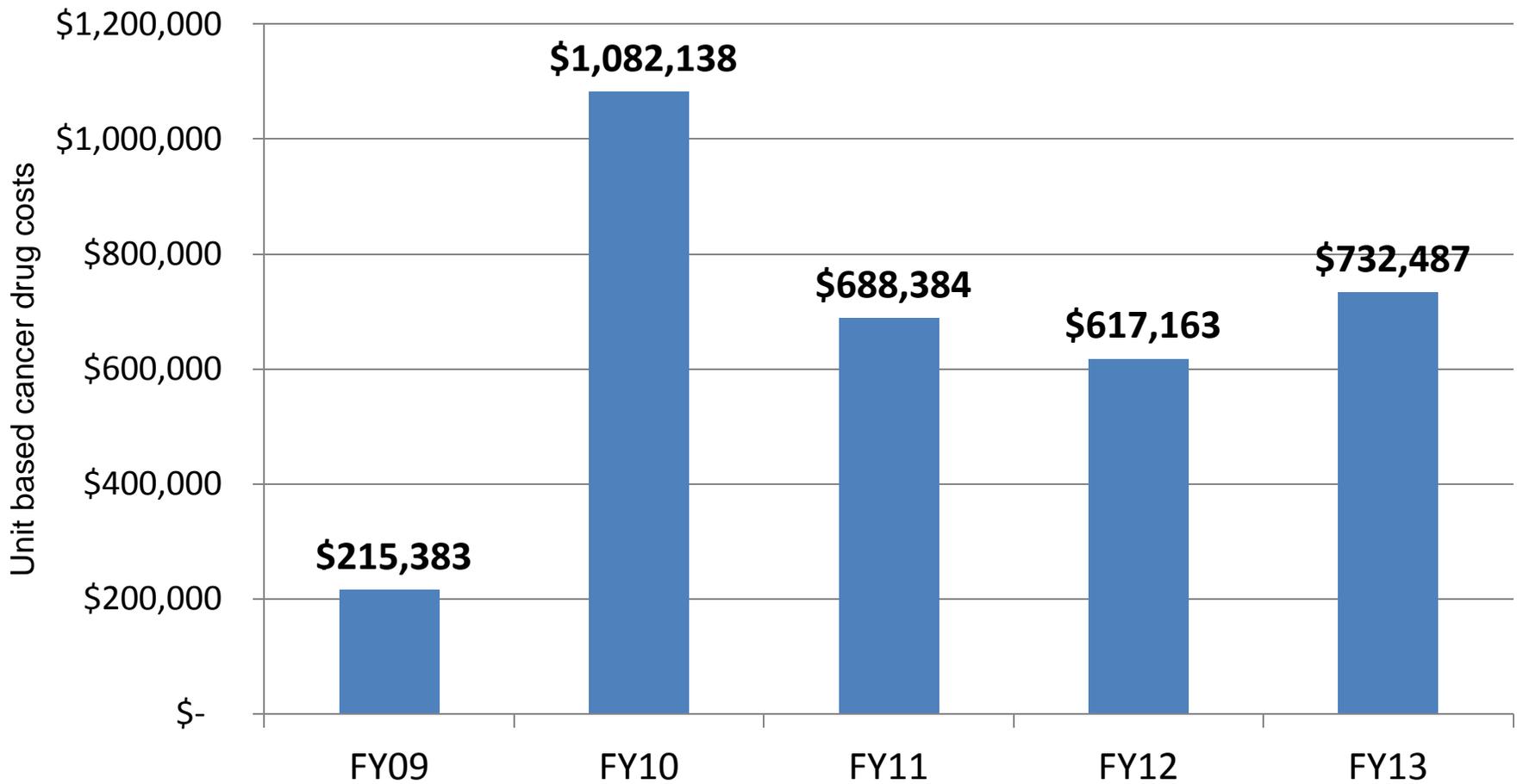


TDCJ Cancer Cases by Year 2009-2013(annualized)

Year	Colon	Pancreas	Liver	Lung	Breast	Prostate	Hodgkin Lymphoma	Non-Hodgkin Lymphoma	Leukemia	Female Repro
2009	55	5	25	43	19	67	10	50	21	17
2010	62	6	21	42	13	72	17	42	28	14
2011	64	7	42	66	13	116	12	48	30	6
2012	73	5	34	56	8	100	11	40	25	14
2013	79	7	33	44	7	91	19	43	25	15

Novel Therapies for Cancer

UTMB CMC Oncology Drug Cost by Fiscal Year



Novel Therapies for Cancer

UTMB CMC Oncology Drug Cost by Fiscal Year

DRUG	Patients 2009	Patients 2010	Patients 2011	Patients 2012	Patients 2013 YTD	Estimated Monthly Cost Non-PHS	Estimated Monthly Cost PHS
ABIRATERONE (ZYTIGA)	0	0	2	2	4	\$ 6,495.00	\$
BEXAROTENE (TARGRETIN) *	0	0	2	0	0	\$ 15,967.00	\$ 3,485.00
CAPECITABINE (XELODA) *	2	0	3	5	1	\$ 3,157.00	\$
DASATINIB (SPRYCEL)	0	0	1	1	1	\$ 8,398.00	\$ 26.10
ERLOTINIB (TARCEVA)	1	0	0	1	1	\$ 5,464.00	\$ 2,278.00
EVEROLIMUS (AFINITOR)	0	1	1	1	1	\$ 8,317.00	\$ 1,045.00
IMATINIB (GLEEVEC)	11	20	17	13	12	\$ 6,622.00	\$ 4,031.00
LENALIDOMIDE (REVLIMID)	0	1	1	0	0	\$ 8,176.00	\$ 1,337.00
LEUPROLIDE (LUPRON)	18	40	26	28	15	\$ 2,723.00	\$ 7,097.00
NILOTANIB (TASIGNA)	1	3	3	2	4	\$ 8,290.00	\$ 358.00
PAZOPANIB (VOTRIENT)	0	0	0	1	1	\$ 7,130.00	\$ 4,056.00
REGORAFENIB (STIVARGA)	0	0	0	0	1	\$	\$ 4,276.00
SORAFENIB (NEXAVAR)	6	9	5	5	8	\$ 11,781.00	\$ 7,079.00
SUNITINIB (SUTENT)	0	0	1	1	0	\$	\$
TEMOZOLOMIDE (TEMODAR)						10,735.00	4,263.00
†	4	3	3	2	4	\$ 13,465 / \$ 4,266	\$ 6,602 / \$ 1,594
THALIDOMIDE (THALOMID)	2	0	0	4	3	\$ 8,336.00	\$ 350.00
TRETINOIN (VESANOID) †	1	1	1	0	0	\$ 5,086 / \$ 2,543	\$ 3,105 / \$ 1,553
VORINOSTAT (ZOLINZA)	0	0	1	0	0	\$	\$
						10,453.00	10,453.00

Novel Therapies for Cancer

UTMB CMC Oncology Drug Costs by Fiscal Year

DRUG	2009	2010	2011	2012	2013
ABIRATERONE (ZYTIGA)	\$0.00	\$0.00	\$13,750.00	\$38,885.55	\$53,080.79
ANASTROZOLE (ARIMIDEX)	\$1,299.48	\$3,796.27	\$1,061.12	\$251.80	\$316.50
BEXAROTENE (TARGRETIN)	\$0.00	\$0.00	\$5,246.56	\$2,472.17	\$0.00
BICALUTAMIDE (CASODEX)	\$7,480.13	\$5,280.79	\$242.38	\$52.01	\$171.00
CAPECITABINE (XELODA)	\$1,975.22	\$0.00	\$177.84	\$2,654.54	\$512.38
CHLORAMBUCIL (LEUKERAN)	\$549.39	\$0.00	\$0.00	\$0.00	\$0.00
CYCLOPHOSPHAMIDE (CYTOXAN)	\$387.11	\$125.55	\$0.00	\$597.78	\$167.40
DASATINIB (SPRYCEL)	\$0.00	\$0.00	\$0.00	\$114,881.57	\$208,458.29
ERLOTINIB (TARCEVA)	\$1,652.99	\$0.00	\$0.00	\$0.00	\$1,243.48
EVEROLIMUS (AFINITOR)	\$0.00	\$0.00	\$40,645.95	\$43,994.89	\$40,088.17
EXEMESTANE (AROMASIN)	\$326.53	\$1,132.81	\$421.99	\$0.00	\$0.00
FLUTAMIDE (EULEXIN)	\$238.11	\$532.58	\$228.71	\$0.00	\$0.00
IMATINIB (GLEEVEC)	\$124,568.85	\$331,408.99	\$298,199.99	\$240,849.06	\$157,119.62
LENALIDOMIDE (REVLIMID)	\$0.00	*	*	\$0.00	\$0.00
LETROZOLE (FEMARA)	\$921.44	\$3,551.67	\$2,117.94	\$176.20	\$314.44
LEUPROLIDE (LUPRON)	\$9,904.41	\$26,681.38	\$21,588.98	\$20,629.20	\$11,008.74
MERCAPTOPYRINE (PURINTHOL)	\$0.00	\$217.48	\$342.02	\$126.86	\$663.15
NILOTINIB (TASIGNA)	\$0.00	\$437,404.61	\$166,696.98	\$75,677.85	\$90,015.20
PAZOPANIB (VOTRIENT)	\$0.00	\$0.00	\$0.00	\$4,324.00	\$59,121.65
REGORAFENIB (STIVARGA)	\$0.00	\$0.00	\$0.00	\$0.00	\$7,069.79
SORAFENIB (NEXAVAR)	\$55,385.77	\$172,009.54	\$65,989.79	\$18,569.40	\$86,648.28
SUNITINIB (SUTENT)	\$0.00	\$0.00	\$9,012.37	\$18,383.83	\$0.00
TAMOXIFEN (NOLVADEX)	\$158.35	\$674.31	\$431.21	\$411.63	\$265.75
TEMOZOLOMIDE (TEMODAR)	\$2,197.20	\$59,897.82	\$10,560.91	\$24,096.70	\$16,213.03
THALIDOMIDE (THALOMID) †	\$8,338.48	\$0.00	\$0.00	\$807.86	\$9.52
TRETINOIN (VESANOID)	\$0.00	\$39,424.23	\$51,669.93	\$0.00	\$0.00
VORINOSTAT (ZOLINZA)	\$0.00	\$0.00	\$0.00	\$9,320.75	\$0.00
TOTAL	\$215,383.46	\$1,082,138.03	\$688,384.68	\$617,163.64	\$732,487.18

Novel Therapies for Cancer

New High Cost Oncology Treatment Options

Cancer Type	1 st line treatment Brand (generic)/Approval date WAC pricing	2 nd line treatment	3 rd line treatment
Prostate cancer - metastatic castration resistant	Zytiga (abiraterone) 4/2011 \$6837	Xtandi (enzalutamide) 8/2012 \$7890 Jevtana (cabazitaxel) 6/2010 \$8660	
Colorectal cancer – metastatic	Erbitux (cetuximab) 7/2012 \$12227 Vectibix (panitumumab) 9/2006 \$9265	Zaltrap (ziv-aflibercept) with FOLFIRI	Stivarga (Regorafenib) 9/2012 \$9818
Lung cancer – metastatic	Tarceva (erlotinib) 5/2013 \$5752 Xalkori (crizotinib) 8/2011 \$10871 Gilotrif (afatinib) 7/2013 \$5550		
Breast cancer – metastatic, HER2+	Perjeta (pertuzumab) 6/2012 \$4076	Kadcyla (T-DM1: ado-trastuzumab emtasine) 2/2013 \$7212	

Novel Therapies for Cancer

New High Cost Oncology Treatment Options

Cancer Type	1st line treatment Brand (generic)/Approval date WAC pricing	2nd line treatment	3rd line treatment
Hodgkin lymphoma relapsed/refractory	ABVD BEACOPP Stanford V	ESHAP, DHAP, ICE, GEM-X HDC + autologous transplant	Adcetris (brentuximab) 8/2011 \$15087
Non-Hodgkin lymphoma	Treanda (bendamustine) 10/2008- \$4100 + Rituxan (rituximab)	Treanda (bendamustine) 10/2008- \$4100 + R HDC + transplant Imbruvica (ibrutinib)- 11/13	
Leukemias (Acute)	Gleevec (imatinib) for Philadelphia chromosome+ 10/2006 \$6790 Sprycel (dasatinib) for Philadelphia chromosome+ 7/2010 \$8839 Transplant after 1st complete remission or after relapse/refractory disease (Median cost \$105,300 within 100 days after HSCT, \$128,800 within 1 year, in 2004 dollars) ¹		
Chronic lymphocytic leukemia	Treanda (bendamustine) 3/2008- \$4100 Gazyva (Obinutuzumab) + chlorambucil- 10/13	HDC + transplant	
Chronic myelogenous leukemia	Gleevec (imatinib) 4/2003 \$6790 Sprycel (dasatinib) 10/2010 \$8839 Tasigna (nilotinib) 6/2010	Bosulif (bosutinib) 9/2012 \$8181 Iclusig (ponatinib) 12/2012 \$9580 HDC + transplant	Synribo (omacetaxine) 10/2012 \$23380 HDC + transplant

Novel Therapies for Cancer

New High Cost Oncology Treatment Options

Cancer Type	1st line treatment Brand (generic)/Approval date WAC pricing	2nd line treatment	3rd line treatment
Liver cancer - unresectable	Nexavar (sorafenib) 12/2005 \$9791		
Renal cell carcinoma – advanced disease	Sutent (sunitinib) 1/2006 \$11300 Votrient (pazopanib) 10/2009 \$7130 Torisel (temsirolimus) 5/2007 \$5508	Afinitor (everolimus) 3/2009 \$8317 Inlyta (axitinib) 1/2012 \$9172	
Melanoma – metastatic	Yervoy (ipilimumab) 3/2011 \$31370 Zelboraf (vemurafenib) 8/2011 \$5425		
Multiple myeloma	Velcade (bortezomib) 6/2008 \$6176 Revlimid (lenalidomide) 6/2006 \$8931		
Myelodysplastic syndrome	Revlimid (lenalidomide) 12/2005 \$11745		

Novel Therapies for Cancer

Brentuximab vedotin (Adcetris)

	Outpatient cost	Inpatient cost	WAC
Vial Cost (50mg/vial)	\$3354.77	\$4822.81	\$4822.81
Cost/Dose = 100mg (2 vials)	\$6709.54	\$9645.62	\$9645.62
Total costs (x 16 cycles)	\$107,352.64	\$154,329.92	\$154,329.92

Other Indications for Transplant

- Relapsed acute leukemia.
- Non-Hodgkin lymphoma
- Hodgkin lymphoma.
- Relapsed chronic leukemia.
- Multiple myeloma.
- Myelodysplasia.

Novel Therapies for Cancer

Transplant Costs

MODALITY	ESTIMATES
OUTPATIENT/EVALUATION	\$7,500.00
STEM CELL + 30 DAY HOSPITALIZATION	\$319,350.00
MEDICATIONS	\$151,706.00 (six months)
TOTAL	\$478,556.00

Novel Therapies for Cancer

Candidates Within Six Months

TDCJ #	Diagnosis
1061138	Acute Lymphoblastic Leukemia
1820960	Acute Myelogenous Leukemia
613816	Acute Myelogenous Leukemia
1866551	Acute Myelogenous Leukemia
1645093	Acute Lymphoblastic Leukemia