

Agenda Topic / Presenter	Presentation	Discussion	Action
<p>II. Recognitions and Introductions (cont.) - Dr. Greenberg</p>	<p>Dr. Greenberg shared that he has served on and chaired the Governor’s EMS and Trauma Advisory Council. Dr. Greenberg concluded by stating he is looking forward to working on the committee.</p> <p>Dr. Greenberg announced that Dr. Ben Raimer has resigned from the CMHCC. Dr. Raimer, in his role as the University of Texas Medical Branch (UTMB) President, ad interim, has appointed Dr. Philip Keiser, Professor, Division of Infectious Diseases, Internal Medicine to serve on the committee as the physician representative for UTMB. Dr. Greenberg welcomed Dr. Keiser to the committee.</p> <p>Dr. Cynthia Jumper, VP Health Policy & Special Health Initiatives Texas Tech University Health Sciences Center (TTUHSC) Correctional Managed Care (CMC) recognized Mike Jones, Director of Nursing Services who retired June 12, 2020 with 30 years of service and Dr. Guillermo Garcia, Director of Psychiatry and Behavioral Health who is resigning effective June 30, 2020. Dr. Jumper introduced Dr. Shirley Marks who will assume the role of Director of Psychiatry and Behavioral Health effective July 1, 2020 and Dr. Melinda Schalow, Southern Regional Medical Director.</p> <p>Dr. Owen Murray, UTMB CMC Offender Care Services recognized Dr. Susan Morris, Medical Director of Telemedicine who retired May 30, 2020 with 25 years of service.</p> <p>Dr. Lannette Linthicum recognized Dr. Keiser for his ongoing public health and infectious disease consultation to the Joint Medical Directors during the COVID-19 pandemic.</p>		

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<p>III. Approval of Consent Items - Dr. Greenberg</p> <ul style="list-style-type: none"> - Approval of Excused Absences - Approval of CMHCC Meeting Minutes – December 4, 2019 - Approval of TDCJ Health Services Monitoring Report - University Medical Directors Reports <ul style="list-style-type: none"> - TTUHSC - UTMB - Summaries of CMHCC Joint Committee / Work Groups Activities 	<p>Dr. Greenberg next moved on to agenda item III approval of consent items.</p> <p>Dr. Greenberg stated that the following five consent items would be voted on as a single action:</p> <p>The first consent item was the approval of excused absences from the December 4, 2019 meeting – Dr. Ben Raimer and Erin Wyrick</p> <p>The second consent item was the approval of the CMHCC meeting minutes from the December 4, 2019 meeting. Dr. Greenberg asked if there were any corrections, deletions or comments. Hearing none, Dr. Greenberg moved on to the third consent item.</p> <p>The third consent item was the approval of the Fiscal Year 2020 First and Second Quarter Texas Department of Criminal Justice (TDCJ) Health Services Monitoring Report. There were no comments or discussion of these reports.</p> <p>The fourth consent item was the approval of the Fiscal Year 2020 First and Second Quarter University Medical Directors Report. There were no comments or discussion of these reports.</p> <p>The fifth consent item was the approval of the Fiscal Year 2020 First and Second Quarter summaries of the CMHCC Joint Committee/Work Groups Activities. There were no comments or discussion of these reports.</p> <p>Dr. Greenberg then called for a motion to approve the consent items.</p>		<p>Dr. Jumper made a motion to approve all consent items, and Dr. Jeffrey Beeson seconded the motion which prevailed by unanimous vote.</p>

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<p>III. Approval of Consent Items (cont.) - Dr. Greenberg</p> <p>IV. Update on Financial Reports - Rebecca Waltz</p>	<p>Dr. Greenberg next called on Ms. Rebecca Waltz to present the financial report.</p> <p>Ms. Waltz reported on statistics for the Second Quarter of Fiscal Year (FY) 2020, as submitted to the Legislative Budget Board (LBB). The report was submitted in accordance with the General Appropriations Act, Article V, Rider 43. Details of Ms. Waltz report may be found in Tab B in your CMHCC agenda book and are also posted on the CMHCC website.</p> <p>Ms. Waltz answered that prior years have been less. A spend-forward request has been prepared and submitted to the Governor's Office and the Legislative Budget Board that will allow funds from FY21 to be used to cover this anticipated FY20 shortfall. This will also let them know that moving forward into the next legislative session a supplement appropriation will be required.</p>	<p>Dr. Greenberg asked how the items in the Monitoring Report under Operational Review that show red or below the compliance threshold are addressed.</p> <p>Dr. Linthicum answered that within the Health Services Division is an Office of Health Services Monitoring. For any areas of non-compliance, the unit is required to submit a Corrective Action Plan (CAP) to this office to address those areas. The CAP is then staffed and either approved or disapproved. If approved, it is closed out. If it is not approved, it sent back to the unit for additional action until there is an acceptable CAP in place.</p> <p>Dr. Beeson asked about blank items in the monitoring report and whether this would indicate a zero for that field.</p> <p>Dr. Linthicum answered that may indicate no data and those items will be checked. In the future, that will be more clearly defined.</p> <p>Dr. Greenberg asked how the projected 100.7 million shortfall compares to previous shortfalls.</p>	

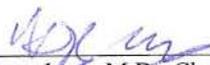
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<p>IV. Update on Financial Reports (cont.) - Ms. Waltz</p>	<p>Ms. Waltz answered yes, they are required to submit cost savings initiatives to the legislature. The universities continuously take measures to reduce costs.</p>	<p>Mr. Preston Johnson, Jr. asked if there are cost saving measures being looked at.</p> <p>Dr. Parker Hudson added that supplemental funding may be an issue with budgets in the state that they are currently in.</p> <p>Dr. John Burruss asked about the pressure on the universities. The care and therefore the costs are inescapable. The population is aging and the portion of those whose care is most costly is increasing.</p> <p>Dr. Murray answered that is all correct. Historically, the supplemental requests have been approved and the deficits covered. However, this amount does continue to grow. It is really during the last six months when the university has to assist with funding. This session will be a challenge with budgets as they are due to COVID-19. Cost saving initiatives are ongoing. The 340b program represents their largest cost savings to the state. Dr. Murray shared reducing staff would reduce service levels and they have still not recovered fully from the last reduction in force (RIF). They try to save by using technologies; using telemedicine; using the electronic health record; using reporting platforms to provide the best care and keep patients as healthy as possible.</p> <p>Dr. Jumper concurred with Dr. Murray.</p> <p>Dr. Linthicum shared that in May the Governor, Lt. Governor and the Speaker issued a letter to state agencies requesting a 5% reduction in their funding levels for the next biennium. TDCJ requested that an exemption be made for correctional managed health care.</p>	

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<p>VI. Medical Director's Updates (cont.)</p> <ul style="list-style-type: none"> - University of Texas Medical Branch - Dr. Owen Murray <p>VII. Pandemic Response</p> <ul style="list-style-type: none"> - Dr. Linthicum 	<p>Dr. Greenberg thanked Dr. Jumper and then called on Dr. Murray to present the report for UTMB.</p> <p>Dr. Murray stated that he had nothing further to report.</p> <p>Dr. Greenberg thanked Dr. Murray and then called on Dr. Linthicum to begin the presentation on the pandemic response.</p> <p>Dr. Linthicum stated her report would focus on the TDCJ pandemic response. Historically, and to give a timeline of some key events; In January, Dr. Olugbenga Ojo, Chief Medical Officer and Chief Physician Executive for Hospital Galveston (HG) sent out an email advising that the UTMB had created a corona virus task force in light of the virus in China and the confirmed cases in the USA. This task force included participants from the Centers for Disease Control and Prevention (CDC) and UTMB's emergency response team. In February, Dr. Ojo organized a meeting with the CMHCC Joint Medical Directors, Dr. Philip Keiser and Dr. Janak Patel to address coronavirus within the correctional managed health care program. In March, daily conference calls with the Department of State Health Services (DSHS) and Texas Division of Emergency Management (TDEM) began. Also, in March, Dr. Linthicum hosted a meeting that included representation from all divisions within TDCJ and the universities. At this meeting she presented a Pandemic Flu Plan and an extensive action list for the agency was created. Following this meeting, the TDCJ Executive Director put out a mandate for all divisions titled Procedures Implemented in Response to COVID-19. On March 16th, the TDCJ Command Center was activated and is still ongoing. Also, in March, meetings were held with the Correctional Institutions Division (CID) and the Manufacturing, Agribusiness and Logistics Division (MAL) to coordinate distribution of the personal protective equipment (PPE). Dr. Linthicum reported that due to previous experience with the H1N1 pandemic, a stockpile of PPE had been maintained. The first COVID-19 specific policy was formulated March 20th and currently, this policy is on its sixth revision. Collaboration has been ongoing with DSHS and Dr. Keiser.</p>		

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<p>VII. Pandemic Response (cont.) - Dr. Linthicum</p>	<p>Dr. Linthicum stated that originally the state guidelines for testing had to be followed. In March, the UTMB requested deviation from these testing guidelines to conduct focused testing of targeted vulnerable populations. This request for deviation from the state guidelines was made to and approved by DSHS.</p> <p>Dr. Linthicum reported shortly after the UTMB began targeted testing, Bryan Collier, TDCJ Executive Director was advised that adequate supplies were available through TDEM for mass testing. Mass testing began on May 11th and as of June 15th 107,684 offenders had been tested with 7,445 positive results. 54 parolees in residential facilities have been tested, with 54 positive results. For employees tested the numbers are; TDCJ 30,769 tested with 970 positive; 6 Board of Pardons and Paroles with 2 positive; 14 Windham School District with 2 positive; 465 UTMB with 78 positive; 121 TTUHSC with 27 positive and 172 other contract staff and community facilities with 37 positive.</p> <p>Dr. Linthicum shared that as of June 15th 4 staff members and 74 offenders are hospitalized due to COVID-19 and 8 employees have died. As of June 16th 93 offender deaths are presumed to be COVID-19 related.</p> <p>Dr. Linthicum reported that as of June 15th there are 18,653 offenders on medical restriction. 18,452 are on preventative medical restriction due to positive case. These offenders will be removed from restriction within 14 days from their potential exposure provided that they remain symptom free. 201 are on preventative medical restriction due to exposure to suspected cases with results pending. These offenders will be removed from restriction as negative test results are received. There are 31 units currently on lockdown due to COVID-19 positive offenders or employees.</p> <p>Dr. Linthicum reported that the agency continues to receive additional PPE from TDEM.</p>		

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VII. Pandemic Response (cont.) - Dr. Linthicum	<p>Dr. Linthicum reported that CMC established family member hotlines in the TDCJ Health Services Patient Liaison Program for third parties and UTMB and TTUHSC for family members. These hotlines are specifically for COVID-19. They are all staffed by registered nurses. In addition to these call-in lines, the Chaplaincy Program and others assigned to the Rehabilitations Programs Division have made over 68,000 calls to family members of offenders whose units are on lockdown. The TDCJ is also hosting family member and advocacy group conference calls weekly.</p> <p>Dr. Greenberg thanked Dr. Linthicum and called on Dr. Murray to present the pandemic response for the UTMB.</p>		
VII. Pandemic Response - Dr. Murray	<p>Dr. Murray stated he would like to avoid duplicating information already provided by Dr. Linthicum. He shared that workloads have increased for both security and health care staff. For offenders in medical restriction and isolation, temperatures must be taken, and rounding must be conducted. Dr. Murray stated HG has played a pivotal role in the pandemic response. Dr. Murray introduced Dr. Olugbenga Ojo and invited him to provide highlights regarding Hospital Galveston's pandemic response.</p>		
VII. Pandemic Response - Dr. Olugbenga Ojo	<p>Dr. Ojo began by explaining that Hospital Galveston is the only freestanding prison hospital in the nation, it is unique. Dr. Ojo reported that to date there have been 341 admissions and 210 discharges. There are 50 patients today hospitalized with COVID-19 related issues, 15 of those are in intensive care and 11 of those 15 are on mechanical ventilation. In May, Remdesivir antiviral agent was approved for use by the FDA and 27 patients have received this treatment and 25 patients have received convalescent plasma therapy. The COVID-19 patient population have had longer length of stay. The length of stay (LOS) ranges between 10 to 58 days.</p> <p>Dr. Ojo stated offsite numbers are low to mid-twenties currently. Outpatient face-to-face encounters have been significantly reduced. Patients are being seen instead through telemedicine.</p>		

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	<p>Dr. Greenberg thanked everyone for their attendance and adjourned the meeting. Dr. Greenberg announced that the next CMHCC meeting is scheduled for September 16, 2020 in Dallas, Texas.</p> <p>The meeting was adjourned at 11:37 a.m.</p>		



 Robert D. Greenberg, M.D., Chairperson
 Correctional Managed Health Care Committee

Date 9/17/2020