BOARD OF MANAGERS
Finance Committee - Regular Meeting
Tuesday, November 17, 2026 at 11:30 AM

AGENDA

1. **WELCOME**

2. **ROLL CALL OF COMMITTEE MEMBERS**

___ Pamela Brower, Chair
___ Sylvia Tryon Oliver
___ Karen O'Connor Urban

3. **CALL TO ORDER, CONFIRMATION OF QUORUM, VERIFICATION OF MEETING POSTING, AND CLOSED MEETING NOTICE:**

A. Call to order.

B. Establish quorum.

C. Confirm posting of Meeting's public notice in accordance with Texas Open Meetings Act, Texas Government Code, Chapter 551.

D. Notice is hereby provided that the Committee may convene in closed meeting session(s) during this meeting to consider any agenda item, when permitted under the Texas Open Meetings Act, Texas Government Code Chapter 551.

4. **NOTICE REGARDING BUDGET.** The Hospital District's Fiscal Year 2027 Budget ("FY27 Budget") has been duly adopted by the Board and approved by the Commissioners Court. The Committee may discuss the FY27 Budget at this meeting. The adopted FY27 Budget and the required taxpayer impact statement for Fiscal Year 2027 are available for public review on the District's official website at: https://www.nchdcc.org.

5. **ANNOUNCEMENT ON DISCLOSURE OF CONFLICTS OF INTEREST**. Any Conflict of Interest, or Appearance of a Conflict of Interest, relating to items on this agenda shall be disclosed at this time. Members declaring such conflicts shall abstain from voting and are requested to refrain from discussion on the affected items. Any conflicts identified

later in the meeting must be disclosed immediately upon discovery.

6. **PUBLIC COMMENT** - This section provides the public an opportunity to address the Committee on any matter within its authority. In-person attendees wishing to comment on any agenda item or other subject within the Committee's jurisdiction must complete and submit the "Agenda Item Request to Speak" form, available at the entrance of the meeting room, no later than five (5) minutes before the meeting begins. Remote attendees participating by audio or video conference must verbally notify the presiding officer of their desire to comment when public comment is called. Comments are limited to three (3) minutes per speaker, except that commenters using a translator are allowed up to six (6) minutes. The presiding officer may, in his or her discretion, limit the number of speakers and/or the time allotted to each. By law, the Committee may act only on matters specifically listed on the agenda. Items raised that are not on the agenda will be referred to District staff for review, as appropriate. Materials submitted to the Committee during public comment will not be returned. Commenters intending to provide documents must bring at least ten (10) copies for distribution, clearly marked with the commenter's name and, if applicable, the relevant agenda item number.

7. **CONSENT AGENDA** - The Consent Agenda includes items that are routine, administrative in nature, and not requiring separate discussion. Any item that a Committee member requests to be considered individually shall, at the direction of the presiding officer, be removed from the Consent Agenda and placed on the Regular Agenda for separate discussion at the appropriate time. All remaining Consent Agenda items will be considered and voted upon together in a single vote:

A. Approve Finance Committee Regular Meeting minutes of October 27, 2026. 6

B. Discuss and recommend receipt of summary payment information on Nueces County health care disbursements for Fiscal Year 2026 year-to-date: 13

1. Salaries, benefits, and supplies at/for City of Corpus Christi/Nueces County Public Health District;

2. Emergency medical services provided in unincorporated areas of Nueces County;

3. Supplemental and jail diversion program funding for Nueces Center for Mental Health and Intellectual Disabilities;

4. Medical services provided at County correctional facilities:
   a. Nueces County Jail; and
   b. Nueces County Juvenile Detention Center;

5. Funding for alcohol and drug abuse treatment programs:
    a. Cenikor (Charlie's Place); and
    b. Council on Alcohol and Drug Abuse;
6. Funding for diabetes prevention and supporting programs; and

7. Public health grants.

C. Discuss and recommend receipt of imputed claims summaries on medical and hospital care furnished to the Nueces Aid Program population, prepared pursuant to the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement, for Fiscal Year 2027 year-to-date. 14

D. Discuss and recommend receipt of Fiscal Year 2027 year-to-date Specified Annual Percentage-related revenue reports; revenue receipts pursuant to CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement, Section 5.03. 15

E. Discuss and recommend receipt of Fiscal Year 2027 year-to-date statement detailing amounts deposited into and/or withdrawn from the Opioid Settlement Fund, including receipts from the Opioid Abatement Fund Council through the Texas Comptroller of Public Accounts in accordance with Texas Government Code §403.508(a)(2), and disbursements made solely for the remediation of opioid-related harms pursuant to 34 Texas Administrative Code §16.222. 16

F. Discuss and recommend receipt of statement of amounts deposited to and/or withdrawn from Local Provider Participation Fund for Fiscal Year 2027 year-to-date; deposits and withdrawals pursuant to Board of Managers Order authorizing participation in a health care provider participation program pursuant to Texas Health and Safety Code, Chapter 298C, as amended. 17

G. Discuss and recommend receipt of summary reports of cumulative actual intergovernmental transfers (IGTs) made in support of local and other healthcare providers participating in Medicaid directed, and supplemental payment programs sponsored by the Texas Health and Human Services Commission (HHSC), and receive estimates of provider payments resulting from the IGTs: 21

1. Directed Payment Programs - IGTs for HHSC's Medicaid managed care organization payments to healthcare providers that support overall Medicaid program goals and objectives:

a. Aligning Technology by Linking Interoperable Systems for Client Health Outcomes Program (ATLIS);
b. Comprehensive Hospital Increase Reimbursement Program (CHIRP);
c. Network Access Improvement Program (NAIP); and
d. Texas Incentives for Physicians and Professional Services (TIPPS); and

2. Supplemental Payment Programs - IGTs for HHSC Medicaid payments made to hospitals, separate from and in addition to base payments, for achieving certain goals or to support health care providers that see significant numbers of uninsured or persons without much money:
a. Disproportionate Share Hospital (DSH);
b. Graduate Medical Education (GME);
c. Hospital Augmented Reimbursement Program (HARP); and
d. Hospital Uncompensated Care (UC).

H. Nueces Aid Enrollment:
1. Discuss and recommend receipt of reports relating to Nueces Aid Program enrollment for month-ended October 31, 2026:
a. Referral Sources; 25
b. Total Persons and Households Enrolled; 27
c. Enrollment Summary; 28
d. Denials; 29
e. Application Processing Summary; and 30
f. Enrollment by Zip Code. 34

8. **REGULAR AGENDA** - The Regular Agenda consists of items that are non-routine, not administrative in nature, or otherwise require separate consideration. Each item listed under the Regular Agenda shall be addressed individually and, if action is required, voted upon separately.

A. Annual Audit:

1. Update on annual audit of the District's financial statements for the fiscal year ended September 30, 2026. ***(INFORMATION)*** 37

B. Administrator's Briefing:

1. Next scheduled regular Committee meeting (meeting's date, time, and location are subject to change):

a. Finance Committee: Tuesday, December 15, 2026, 11:30 AM in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-

A, Corpus Christi, Texas 78401.

9. **ADJOURN**

10. Public Notice Posting Receipt. 44

DRAFT

BOARD OF MANAGERS
NUECES COUNTY HOSPITAL DISTRICT
FINANCE MEETING
OCTOBER 27, 2026

The Nueces County Hospital District Board of Managers met at 11:30 a.m., October 27, 2026, in the NCHD Board Room at 555 N. Carancahua, Suite 950 – A Corpus Christi, Texas.

HOSPITAL DISTRICT REPRESENTATIVES:

Jonny F. Hipp	Administrator/CEO
Belinda Espinoza	Asst. Administrator, Admin. Services – via Zoom
Donna Littlefield	Director, Accounting & Finance
Mary Esther Guerra	Assistant County Attorney
John B. Martinez	General Counsel
Adam Robison	Legal Counsel
Melissa Quintanilla	Executive Assistant/Human Resources
Carmina Hernandez Moreno	Administrative Assistant

OTHERS PRESENT:

Dante Gonzalez	Mission of Mercy
Mark Hendrix	NC MHID – via Zoom
Phillip Jones	Meeder – via Zoom
Cindy Barrera	- via Zoom
read.ai meeting notes	- via Zoom

BOARD OF MANAGERS
FIANCE MEETING
MINUTES
OCTOBER 27, 2026

1. **WELCOME**

2. **ROLL CALL OF COMMITTEE MEMBERS**

_Y__ Pamela Brower, Chair
_Y__ Sylvia Tryon Oliver
_Y__ Karen O'Connor Urban

3. **CALL TO ORDER, CONFIRMATION OF QUORUM, VERIFICATION OF MEETING POSTING, AND CLOSED MEETING NOTICE:**

A. Call to order – Sylvia Tryon Oliver, Chair Pro Tem.
The meeting was called to order by Sylvia Tryon Oliver at 11:30 a.m.

B. Establish quorum – Sylvia Tryon Oliver, Chair Pro Tem.
A quorum was present with all members in attendance.
Two members in the room and one through Zoom.

Sylvia Tryon Oliver, Chair Pro Tem., - PRESENT
Karen O'Connor Urban, Member- PRESENT
Pamela Brower, Chair – PRESENT – via Zoom @ 11.33 a.m.

C. Confirm posting of Meeting's public notice in accordance with Texas Open Meetings Act, Texas Government Code, Chapter 551.

D. Notice is hereby provided that the Committee may convene in closed meeting session(s) during this meeting to consider any agenda item, when permitted under the Texas Open Meetings Act, Texas Government Code Chapter 551.

4. **NOTICE REGARDING BUDGET.** The Hospital District's Fiscal Year 2027 Budget ("FY27 Budget") has been duly adopted by the Board and approved by the Commissioners Court. The Committee may discuss the FY27 Budget at this meeting. The adopted FY27 Budget and the required taxpayer impact statement for Fiscal Year 2027 are available for public review on the District's official website at: https://www.nchdcc.org.

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No one to speak in Public Comment.

7. **CONSENT AGENDA** - The Consent Agenda includes items that are routine, administrative in nature, and not requiring separate discussion. Any item that a Committee member requests to be considered individually shall, at the direction of the presiding officer, be removed from the Consent Agenda and placed on the Regular Agenda for separate discussion at the appropriate time. All remaining Consent Agenda items will be considered and voted upon together in a single vote:

A. Approve Finance Committee Regular Meeting minutes of September 22, 2026.

B. Discuss and recommend receipt of summary payment information on Nueces County health care disbursements for Fiscal Year 2026 year-to-date:

1. Salaries, benefits, and supplies at/for City of Corpus Christi/Nueces County Public Health District;

2. Emergency medical services provided in unincorporated areas of Nueces County;

3. Supplemental and jail diversion program funding for Nueces Center for Mental Health and Intellectual Disabilities;

4. Medical services provided at County correctional facilities:
   a. Nueces County Jail; and
   b. Nueces County Juvenile Detention Center;

5. Funding for alcohol and drug abuse treatment programs:
   a. Cenikor (Charlie's Place); and

   b. Council on Alcohol and Drug Abuse;
6. Funding for diabetes prevention and supporting programs; and

7. Public health grants.

C. Discuss and recommend receipt of imputed claims summaries on medical and hospital care furnished to the Nueces Aid Program population, prepared pursuant to the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement, for Fiscal Year 2026 year-to-date.

D. Discuss and recommend receipt of fiscal year-to-date Specified Annual Percentage-related revenue reports; revenue receipts pursuant to CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement, Section 5.03.

E. Discuss and recommend receipt of fiscal year-to-date statement detailing amounts deposited into and/or withdrawn from the Opioid Settlement Fund, including receipts from the Opioid Abatement Fund Council through the Texas Comptroller of Public Accounts in accordance with Texas Government Code §403.508(a)(2), and disbursements made solely for the remediation of opioid-related harms pursuant to 34 Texas Administrative Code §16.222.

F. Discuss and recommend receipt of statement of amounts deposited to and/or withdrawn from Local Provider Participation Fund for fiscal year-to-date; deposits and withdrawals pursuant to Board of Managers Order authorizing participation in a health care provider participation program pursuant to Texas Health and Safety Code, Chapter 298C, as amended.

G. Discuss and recommend receipt of summary reports of cumulative actual intergovernmental transfers (IGTs) made in support of local and other healthcare

providers participating in Medicaid directed, and supplemental payment programs sponsored by the Texas Health and Human Services Commission (HHSC), and receive estimates of provider payments resulting from the IGTs:

1. Directed Payment Programs - IGTs for HHSC's Medicaid managed care organization payments to healthcare providers that support overall Medicaid program goals and objectives:
   a. Aligning Technology by Linking Interoperable Systems for Client Health Outcomes Program (ATLIS);
   b. Comprehensive Hospital Increase Reimbursement Program (CHIRP);
   c. Network Access Improvement Program (NAIP); and

   d. Texas Incentives for Physicians and Professional Services (TIPPS); and

2. Supplemental Payment Programs - IGTs for HHSC Medicaid payments made to hospitals, separate from and in addition to base payments, for achieving certain goals or to support health care providers that see significant numbers of uninsured or persons without much money:
   a. Disproportionate Share Hospital (DSH);
   b. Graduate Medical Education (GME);
   c. Hospital Augmented Reimbursement Program (HARP); and
   d. Hospital Uncompensated Care (UC).

H. Nueces Aid Enrollment:
1. Discuss and recommend receipt of reports relating to Nueces Aid Program enrollment for month-ended September 30, 2026:
   a. Referral Sources;
   b. Total Persons and Households Enrolled;
   c. Enrollment Summary;
   d. Denials;
   e. Application Processing Summary; and
   f. Enrollment by Zip Code.

Consent Agenda Approved. Motion by Karen O'Connor Urban and seconded by Sylvia Tryon Oliver. MOTION CARRIED.

8. **REGULAR AGENDA** - The Regular Agenda consists of items that are non-routine, not administrative in nature, or otherwise require separate consideration. Each item listed under the Regular Agenda shall be addressed individually and, if action is required, voted upon separately.

A. Financial Statements:

1. Discuss and consider recommending approval of unaudited financial statements for the month and fiscal year-to-date ended September 30, 2026. ***(ACTION)***

Motion by Karen O'Connor Urban and seconded by Sylvia Tryon Oliver. MOTION CARRIED.

B. Investment Report:

1. Discuss and consider recommending receipt of Quarterly Investment Report and ratification of related investment transactions for fiscal quarter-ended September 30,

Phillp Jones from Meeder presented.

2026. ***(ACTION)***

Motion by Karen O'Connor Urban and seconded by Sylvia Tryon Oliver. MOTION CARRIED.

C. Annual Audit:

1. Update on progress of annual audit of the District's financial statements for the fiscal year ended September 30, 2026. ***(INFORMATION)***

D. Administrator's Briefing:

1. Next scheduled regular Committee meeting (meeting's date, time, and location are subject to change):

a. Finance Committee: Tuesday, November 17, 2026, 11:30 AM in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-A, Corpus Christi, Texas 78401.

9. ADJOURN

Motion to adjourn by Sylvia Tryon Oliver, Chair Pro Tem.
Meeting adjourned at 11:48 a.m.

Nueces County Hospital District
County Health Care Department Expenditures
Cash Disbursements Relating to
Fiscal Year 2026

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Fiscal YTD	Budget 2026	Balance
County Healthcare Services															
Health Dept - County	0.00	0.00	450,000.00	0.00	0.00	300,000.00	0.00	0.00	600,000.00	0.00	0.00	0.00	1,350,000.00	**1,800,000.00**	450,000.00
Mobile Medical Clinic	0.00	0.00	176.28	0.00	0.00	549.36	0.00	0.00	120.15	0.00	0.00	0.00	845.79	**60,000.00**	59,154.21
Emergency Medical Services	0.00	0.00	114,600.00	0.00	0.00	128,400.00	0.00	0.00	128,400.00	0.00	0.00	0.00	371,400.00	**650,000.00**	278,600.00
NC MHID - Fund Matching	0.00	0.00	242,280.00	0.00	0.00	242,280.00	0.00	0.00	242,280.00	0.00	0.00	242,280.00	969,120.00	**969,129.00**	9.00
NC MHID - Jail Programs	82,275.04	97,058.26	150,407.46	174,307.91	53,532.17	92,656.31	87,885.90	76,888.77	106,951.48	118,542.83	0.00	0.00	1,040,506.13	**1,500,000.00**	459,493.87
NC Juvenile Center	0.00	0.00	107,521.00	0.00	0.00	129,837.85	0.00	0.00	135,302.78	0.00	0.00	0.00	372,661.63	**474,000.00**	101,338.37
Nueces County Jail Infirmary Svcs	563,401.59	103,680.13	669,987.28	640,084.17	664,806.31	682,100.04	666,031.23	629,908.58	671,255.39	649,836.11	652,078.77	0.00	6,593,169.60	**8,532,015.00**	1,938,845.40
Cenikor	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60,000.00	0.00	0.00	60,000.00	**60,000.00**	0.00
Council on Alcohol & Drug Abuse	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50,000.00	0.00	0.00	50,000.00	**50,000.00**	0.00
Diabetes Program - County	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,215.27	0.00	0.00	0.00	12,215.27	**60,000.00**	47,784.73
HALO-Flight Funding	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,750.00	0.00	0.00	0.00	0.00	15,750.00	**15,750.00**	0.00
County Public Health Grants	85,000.00	0.00	0.00	65,000.00	0.00	0.00	0.00	0.00	0.00	0.00	92,619.25	0.00	242,619.25	**336,000.00**	93,380.75
Totals	730,676.63	200,738.39	1,734,972.02	879,392.08	718,338.48	1,575,823.56	753,917.13	722,547.35	1,896,525.07	878,378.94	744,698.02	242,280.00	11,078,287.67	**14,506,894.00**	3,428,606.33

Nueces County Hospital District
Imputed Claims Experience for Calendar Year 2026
As if Adjudicated January 1, 2026 through October 31, 2026

Service	Claims	Billed	Contract Amt.	Co Insurance	Net
ER	5,701	6,456,136	577,113	20,761	556,352
ASU	12	64,105	10,608	164	10,444
Clinic	5,838	3,285,230	1,040,848	60,300	980,548
Obs	19	24,116	5,646	243	5,402
OP	23,296	63,937,868	16,471,336	922,418	15,548,919
Subtotal	34,866	73,767,455	18,105,551	1,003,887	17,101,664
IP	846	99,425,592	3,887,934	25,965	3,861,969
SNF	-	-	-	-	-
RX	80,161	5,692,523	4,934,828	198,616	4,736,211
Physician	30,313	84,752,851	8,289,191	345,766	7,943,425
Total	146,186	263,638,421	35,217,503	1,574,234	33,643,269

NOTE:

The Revised and Restated Indigent Care Agreement was terminated effective September 30, 2012. After that date, the District no longer makes payment to CHRISTUS Spohn for providing health care services to the Nueces Aid Indigent population. Under the terms of the Membership Agreement amended and restated effective November 18, 2015, CHRISTUS Spohn has committed to continue to provide health care services to the Nueces Aid Indigent population and, and at the request of the District, continues to submit informational claims to the District to permit the District to monitor the volume of health care services furnished to the Nueces Aid Indigent population.

Nueces County Hospital District
Spohn Corporate Member Revenue Analysis
Fiscal Year 2027

Member Revenue % 11.0%

	October	November	December	January	February	March	April	May	June	July	August	September	Totals
Membership Revenue Deposits													
Week 1	3,004,830.46	1,452,048.75											4,456,879.21
Week 2	1,397,335.90												1,397,335.90
Week 3	1,702,184.82												1,702,184.82
Week 4	1,392,599.58												1,392,599.58
Week 5	1,267,134.12												1,267,134.12
Subtotal	8,764,084.88	1,452,048.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,216,133.63

Nueces County Hospital District
Opioid Settlement Fund Activity
Fiscal Year 2027

	October	November	December	January	February	March	April	May	June	July	August	September	Totals
Beginning Balance	3,316,966.78	3,327,933.54	3,327,933.54	3,327,933.54	3,327,933.54	3,327,933.54	3,327,933.54	3,327,933.54	3,327,933.54	3,327,933.54	3,327,933.54	3,327,933.54	3,316,966.78
Deposits													
Distributions													0.00
													0.00
Interest	10,966.76												10,966.76
Total Deposits	**10,966.76**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**10,966.76**
Programs													
Outpatient Substance Abuse													0.00
													0.00
													0.00
Total Expenditures	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**
													0.00
Ending Balance	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**	**3,327,933.54**

TEXAS

Local Governments with LPPFs by Managed Care Service Delivery Area

**City of Amarillo Hospital District within Potter/Randall Counties*

LUBBOCK
Service Delivery Area

MRSA WEST
Service Delivery Area

EL PASO
Service Delivery Area

TRAVIS
Service Delivery Area

BEXAR
Service Delivery Area

HIDALGO
Service Delivery Area

TARRANT
Service Delivery Area

DALLAS
Service Delivery Area

MRSA NORTHEAST
Service Delivery Area

MRSA CENTRAL
Service Delivery Area

JEFFERSON
Service Delivery Area

HARRIS
Service Delivery Area

NUECES
Service Delivery Area

Jurisdiction Operating a Local Provider Participation Fund

Northeast Healthcare Provider Participation District

TEXAS Health and Human Services

Map Prepared by: Texas Health and Human Services Commission.
Office of Data, Analytics and Performance. MRL.
January 15, 2025

Document Path: Z:\Mike_L\Local_Gov_w_LPPFs\Local_Gov_w_LPPFs_update_121323.aprx

Texas Local Provider Participation Fund (LPPF) Programs

Overview

The Texas Local Provider Participation Fund (LPPF) is a locally administered financing mechanism authorized under Texas law that permits counties, hospital districts, and certain multi-jurisdictional entities to impose mandatory assessments on participating hospitals. Funds collected through an LPPF are used to finance the non-federal share of Medicaid supplemental and directed payment programs, thereby leveraging federal matching funds. These supplemental and directed payment programs are established, administered, and overseen by the Texas Health and Human Services Commission.

Purpose

LPPFs exist to support Medicaid payments without relying on state general revenue or local property taxes. By pooling hospital assessments locally and transferring them to the state through intergovernmental transfers (IGTs), local governments enable hospitals to receive significantly higher Medicaid reimbursements.

How LPPFs Work

Hospitals within an authorized jurisdiction are assessed a uniform mandatory payment, typically based on net patient revenue. These payments are deposited into a segregated Local Provider Participation Fund. The local government then transfers funds to the Texas Health and Human Services Commission to serve as the non-federal share for Medicaid payments. Federal matching funds are drawn down and redistributed back to hospitals through approved Medicaid payment programs.

Programs Supported

LPPF-supported funds are commonly used for Medicaid supplemental and directed payment programs, including uncompensated care payments and uniform rate enhancements. These programs are designed to support hospitals that serve a large share of Medicaid and uninsured patients.

Benefits

LPPFs allow local dollars to leverage substantial federal Medicaid funding, strengthen the financial stability of safety-net hospitals, and avoid increasing property taxes. They provide local control over healthcare financing while supporting access to care.

Legal Framework

The Nueces County Hospital District's LPPF is authorized under Texas Health and Safety Code, Chapter 298C, and is implemented pursuant to approval by the Board of Managers of the associated Health Care Provider Participation Program. Funds

deposited into the LPPF are restricted to authorized health care–related purposes and may not be used to expand Medicaid eligibility. The program is subject to applicable federal oversight to ensure compliance with Medicaid financing requirements.

Policy Considerations

Key considerations include the financial impact of mandatory assessments on participating hospitals; the administrative and compliance complexity associated with operating an LPPF; and reliance on ongoing state legislative authority and federal policy. While many LPPFs are subject to statutory sunset provisions requiring periodic legislative renewal, the Nueces County Hospital District LPPF is not subject to a sunset provision.

Summary

LPPFs are a central component of Texas's Medicaid financing strategy, enabling local governments and hospitals to maximize federal Medicaid funding while maintaining local control and minimizing taxpayer impact.

# # #

01/28/2026

Nueces County Hospital District
Nueces LPPF Activity
Fiscal Year 2027

	October	November	December	January	February	March	April	May	June	July	August	September	Totals
Beginning Balance	80,433,702.70	92,455,031.72	92,455,031.72	92,455,031.72	92,455,031.72	92,455,031.72	92,455,031.72	92,455,031.72	92,455,031.72	92,455,031.72	92,455,031.72	92,455,031.72	80,433,702.70
Deposits													
Christus Spohn	11,724,090.00												11,724,090.00
CCMC													0.00
CC Rehab													0.00
Driscoll													0.00
PAM Specialty													0.00
PAM Rehab													0.00
Oceans Behavioral													0.00
Subtotal	11,724,090.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,724,090.00
Interest	297,239.02												297,239.02
Transfers In													0.00
Total Deposits	**12,021,329.02**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**12,021,329.02**
Inter-Governmental Transfers													
UC													0.00
DSRIP													0.00
CHIRP													0.00
TIPPS													0.00
DSH													0.00
HARP													0.00
GME													0.00
ATLIS													0.00
Total IGT's	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**
Transfers Out												(150,000.00)	(150,000.00)
Bank Fees													0.00
Ending Balance	**92,455,031.72**	**92,455,031.72**	**92,455,031.72**	**92,455,031.72**	**92,455,031.72**	**92,455,031.72**	**92,455,031.72**	**92,455,031.72**	**92,455,031.72**	**92,455,031.72**	**92,455,031.72**	**92,305,031.72**	**92,305,031.72**

Texas HHSC Medicaid Supplemental and Directed Payment Programs

Texas Medicaid is a partnership between the state and federal governments that provides health coverage to low-income families, older adults, and people with disabilities. The federal government shares in the cost of the program by matching state Medicaid spending, and providers are paid for the care they deliver to Medicaid patients. Federal rules allow states to determine how providers are paid, and Medicaid payments generally fall into three categories: base payments, supplemental payments, and directed payments. Base Payments are made for specific services (e.g., surgery, x-rays, diagnostic tests) provided to persons with Medicaid. These payments can be made through a fee-for-service (FFS) method or through a managed care service delivery system.

1. **Supplemental Payment Programs.** Supplemental Payments are Medicaid payments that supplement base reimbursement and provide additional funding to selected providers, including hospitals. Payments may be made as lump sums or structured to support quality goals, graduate medical education, or providers that serve large numbers of uninsured or low-income patients, such as rural and safety-net providers.

    A. Key Programs:
        1) **Disproportionate Share Hospital (DSH)**: These payments provide additional funding to hospitals that serve a large share of Medicaid and low-income patients. DSH payments help offset uncompensated care costs for Medicaid and uninsured patients and are capped at a hospital's allowable uncompensated costs. Eligible providers: Hospitals serving a high proportion of Medicaid or indigent patients.
        2) **Uncompensated Care (UC):** This Program was initially created to support Texas's expansion of Medicaid managed care while preserving supplemental payments to hospitals. UC payments help reduce uncompensated costs for qualifying medical services provided to uninsured individuals under a provider's charity care policy and must meet the federal definition of "medical assistance." Eligible providers: Public and private hospitals, public ambulance providers, government dental providers, and physician practice groups.
        3) **Graduate Medical Education (GME)**: These supplemental payments support medical residency training at teaching hospitals, which face higher costs related to resident compensation, increased testing, and the care of more complex patients. Eligible providers: State-owned teaching hospitals and government-operated teaching hospitals.
        4) **Hospital Augmented Reimbursement Program (HARP)**: Provides Medicaid payments to hospitals for inpatient and

outpatient services provided to Texas Medicaid patients under the fee-for-service model, serving as a financial transition for former DSRIP providers and helping offset the cost of delivering Medicaid services.

5) ****Aligning Technology by Linking Interoperable Systems for Client Health Outcomes (ATLIS): To** enhance electronic health information exchange among Medicaid Managed Care Organizations (MCOs) to improve client health outcomes and advance alternative payment models.
6) ***Public Health Providers-Charity Care Program (PHP-CCP):** Reimburses qualifying providers for the cost of delivering certain health care services that are not reimbursed by another source. Health care services include behavioral health services, immunizations, public health services, and other preventative services. Eligible providers: Publicly owned and operated community mental health clinics, local behavioral health authorities or local mental health authorities, local health departments, and Public Health Districts.
7) ***Ambulance Services Supplemental Payment Program:** Program for publicly owned ground emergency ambulance providers participating in Medicaid fee-for-service that provides additional payments aligned with average commercial insurance rates for the same services.

2. **Directed Payment Programs.** State-guided Medicaid managed care spending to support delivery system reform and improved performance by requiring Medicaid managed care organizations to make certain payments to providers, either through capitation rate adjustments or separate payment arrangements.

   A. Key Programs:
      1) **Comprehensive Hospital Increase Reimbursement Program (CHIRP)**: Provides enhanced Medicaid payments for inpatient and outpatient services delivered to STAR and STAR+PLUS enrollees. Eligible providers include: (1) hospital-based rural health clinics (RHCs), including non-state government-owned and private RHCs, and (2) free-standing RHCs.
      2) **Network Access Improvement Program (NAIP)**: Pass-through payment program aimed at strengthening access to effective primary care for Medicaid recipients by incentivizing health-related institutions and public hospitals to provide high-quality, coordinated, and continuous care.
      3) **Rural Access to Primary and Preventive Services (RAPPS)**: Provides incentives for rural health clinics (RHCs) to deliver primary and preventive care to STAR, STAR+PLUS, and STAR Kids

enrollees in rural areas of the state. Eligible providers include (1) hospital-based RHCs, including non-state government-owned and private RHCs, and (2) free-standing RHCs.

4) **The Texas Incentives for Physicians and Professional Services (TIPPS)**: Provides enhanced Medicaid payments for health care services delivered by eligible physician groups to STAR, STAR+PLUS, and STAR Kids enrollees. Eligible providers include: (1) health-related institution (HRI) physician groups; (2) physician groups affiliated with hospitals receiving indirect medical education (IME) funding; and (3) other physician groups.
5) ***The Directed Payment Program for Behavioral Health Services (DPP BHS)**: Enhances access to behavioral health services, care coordination, and care transitions for STAR, STAR+PLUS, and STAR Kids enrollees. Eligible providers include Community Mental Health Centers (CMHCs) and Local Behavioral Health Authorities (LBHAs) with Certified Community Behavioral Health Clinic (CCBHC) certification.
6) ***Quality Incentive Payment Program (QIPP)**: A performance-based payment program that incentivizes nursing facilities to improve care quality and foster innovation.

* NCHD does not participate in this Program.
** HHSC terminated this program for the state fiscal year 2026.

01/28/2026

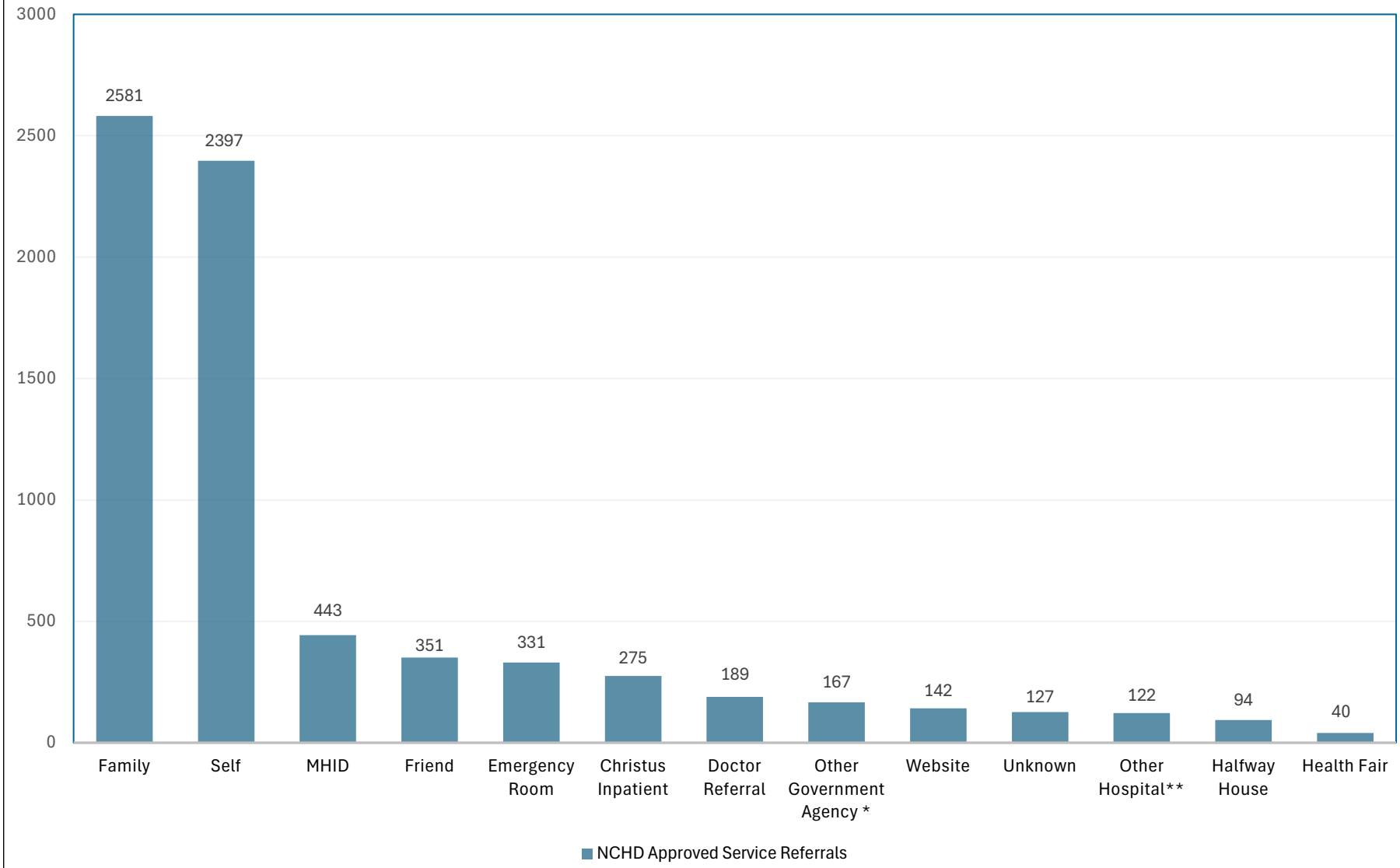
Nueces County Hospital District
Medicaid Payment Programs/Directed Payment Programs
Estimated Provider Payments & IGT History
FY2012 to Present

Provider	DSRIP	UC	DSH	UHRIP	NAIP	CHIRP	TIPPS	GME	HARP	ATLIS	TOTALS	
Christus Spohn - Corpus Christi	393,023,597	675,251,723	273,264,075	54,617,146	180,224,793	166,774,230	3,631,000	11,988,586	33,135,453	4,729,455	**1,796,640,058**	39%
Christus Spohn Rural (Alice/Beeville/Kleberg)	48,398,858	244,842,364	0	14,571,054	0	32,111,589	0	0	872,324	5,998,487	**346,794,676**	8%
Corpus Christi Medical Center	121,850,134	203,781,319	0	47,168,955	0	219,205,565	0	9,652,366	14,766,291	23,359,490	**639,784,120**	14%
Driscoll Childrens Hospital	314,822,705	40,518,980	0	0	0	1,084,250,462	3,650,435	26,804,632	160,612,868	41,040,138	**1,671,700,219**	37%
Detar Hospital	24,949,804	47,723,156	0	15,076,184	0	0	0	0	0	0	**87,749,145**	2%
North Bay General Hospital	0	0	0	503,238	0	0	0	0	0	0	**503,238**	0%
South Texas Surgical Hospital	0	0	0	889,769	0	0	0	0	0	0	**889,769**	0%
Corpus Chrisit Rehab Hospital	0	0	0	286,797	0	0	0	0	0	734,825	**1,021,622**	0%
PAM Specialty Hospital	0	0	0	1,330	0	0	0	0	0	1,948,682	**1,950,012**	0%
PAM Rehab Hospital	0	0	0	141,201	0	1,480,848	0	0	0	1,812,337	**3,434,386**	0%
Zoom Rehabilitation Inc.	0	0	0	0	0	0	0	0	0	173,631	**173,631**	0%
Oceans Behavioral Hospital	0	0	0	0	0	53,995	0	0	0	1,273,186	**1,327,181**	0%
Nueces County Health Dept	21,809,410	0	0	0	0	0	0	0	0	0	**21,809,410**	0%
TOTALS	**924,854,508**	**1,212,117,542**	**273,264,075**	**133,255,675**	**180,224,793**	**1,503,876,688**	**7,281,435**	**48,445,584**	**209,386,936**	**81,070,230**	**4,573,777,466**	100%

* Estimated Receipts for Entities (IGT + FMAP), Subject to HHSC Review and Administrative Fees

IGT Source	DSRIP	UC	DSH	UHRIP	NAIP	CHIRP	TIPPS	GME	HARP	ATLIS	TOTALS
Nueces County Hospital District	338,074,018	393,219,500	96,250,465	58,389,165	71,156,623	177,013,892	0	13,306,303	77,574,950	20,731,634	**1,245,716,551**
Nueces LPPF	27,902,997	81,186,131	7,478,253	0	0	413,336,502	2,412,214	4,715,212	5,852,488	11,733,795	**554,617,591**
TOTALS	**365,977,014**	**474,405,631**	**103,728,718**	**58,389,165**	**71,156,623**	**590,350,393**	**2,412,214**	**18,021,515**	**83,427,437**	**32,465,429**	**1,800,334,142**

Nueces County Hospital District
Enrollment Referral Source
YTD 2026



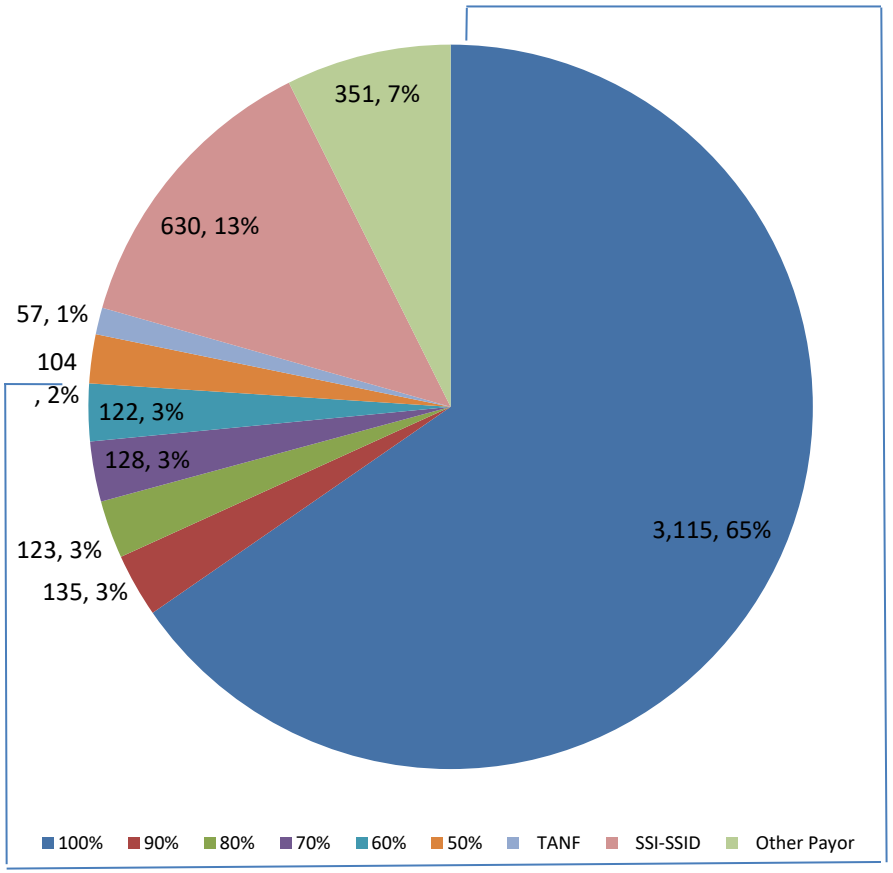
Nueces County Hospital District													
Application Referral Sources Calendar Year 2026													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD 2026
Applications Approved	772	686	741	748	628	695	754	766	729	762			7281
Referral Source													
Family	296	261	263	265	214	240	256	286	245	255			2581
Self	242	242	286	246	230	233	241	241	226	210			2397
MHID	50	22	36	40	42	45	39	52	44	73			443
Friend	39	39	32	41	22	47	39	34	25	33			351
Emergency Room	34	32	22	23	33	36	46	37	27	41			331
Christus Inpatient	27	19	21	34	25	28	28	25	32	36			275
Doctor Referral	19	22	12	13	17	8	28	30	21	19			189
Other Government Agency *	16	8	15	22	9	17	20	15	19	26			167
Website	6	4	16	17	10	11	16	13	17	32			142
Unknown	8	15	12	16	3	8	11	14	30	10			127
Other Hospital**	15	9	10	13	12	8	15	10	19	11			122
Halfway House	15	7	11	11	7	8	9	8	10	8			94
Health Fair	3	4	4	4	3	2	4	0	10	6			40
Medicaid Office	1	2	1	3	1	3	1	1	4	0			17
TWC	1	0	0	0	0	0	1	0	0	0			2
Non Profits	0	0	0	0	0	0	0	0	0	2			2
MD Anderson	0	0	0	0	0	1	0	0	0	0			1
Workmans Comp	0	0	0	0	0	0	0	0	0	0			0
NAACP	0	0	0	0	0	0	0	0	0	0			0
*-Includes Nueces County Jail Referrals.													
**-Includes Non-Christus Hospitals.													

October 2026

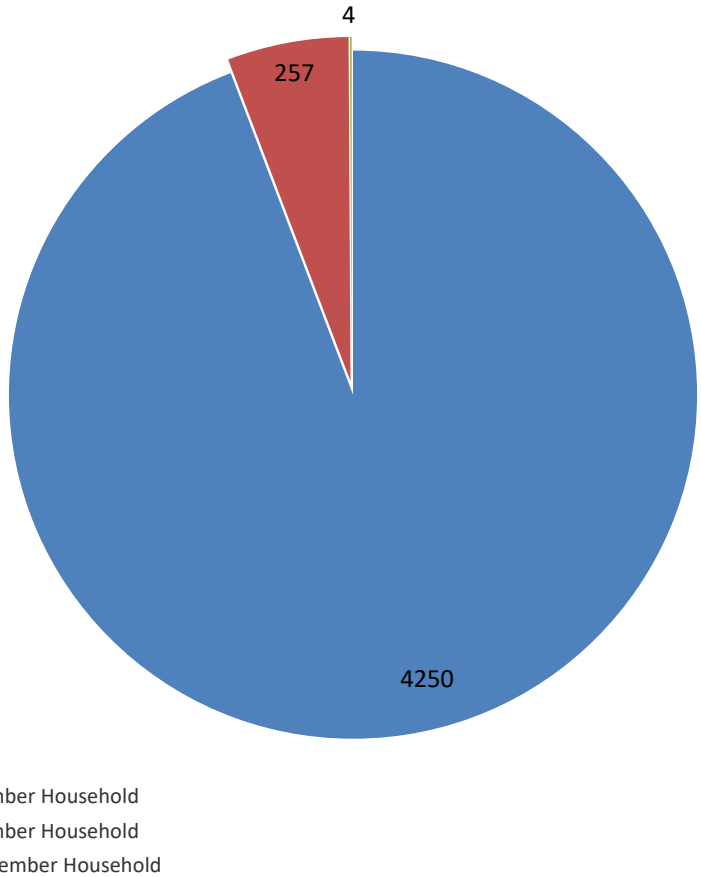
Nueces Aid Program Enrollment

Total Enrolled: 4,765

Total recipients – Other Payer Coverage: 1,038



Total Households 4,511



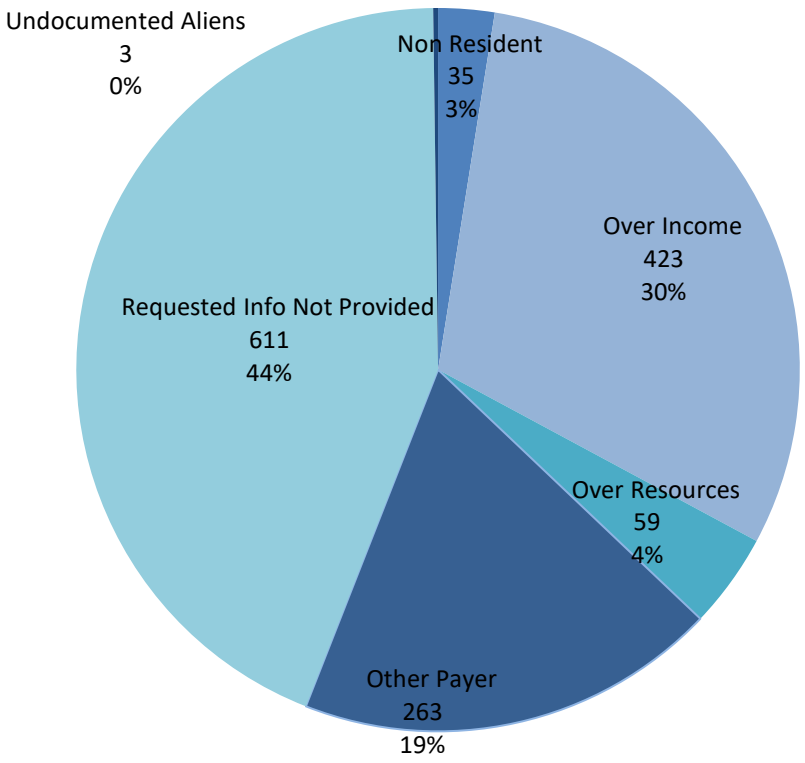
Nueces Aid Program
Enrollment Summary Calendar Year 2026

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD 2026 Average	Comments
TOTAL RECIPIENTS	4,521	4,512	4,510	4,570	4,540	4,610	4,652	4,648	4,690	4,765			4,602	
NUECES AID - All Service Levels														The percentage for each plan option is calculated by dividing
100%	2,926	2,948	2,967	3,034	3,001	3,037	3,054	3,057	3,081	3,115			3,022	the number for each option
%	64.7%	65.3%	65.8%	66.4%	66.1%	65.9%	65.6%	65.8%	65.7%	65.4%			65.7%	by the number of total recipients.
90%	135	131	123	118	117	128	133	128	127	135			128	
%	3.0%	3%	3%	3%	3%	3%	3%	3%	3%	3%			2.8%	
80%	114	117	120	118	117	118	118	113	114	123			117	
%	2.5%	2.6%	2.7%	2.6%	2.6%	2.6%	2.5%	2.4%	2.4%	2.6%			2.5%	
70%	115	113	113	112	111	117	114	115	121	128			116	
%	2.5%	2.5%	2.5%	2.5%	2.4%	2.5%	2.5%	2.5%	2.6%	2.7%			2.5%	
60%	88	93	104	110	104	120	127	125	120	122			111	
%	1.9%	2.1%	2.3%	2.4%	2.3%	2.6%	2.7%	2.7%	2.6%	2.6%			2.4%	
50%	88	94	84	98	101	98	97	95	98	104			96	
%	1.9%	2.1%	1.9%	2.1%	2.2%	2.1%	2.1%	2.0%	2.1%	2.2%			2.1%	
TANF	65	54	68	52	54	57	60	61	50	57			58	These individuals are eligible
%	1.4%	1.2%	1.5%	1.1%	1.2%	1.2%	1.3%	1.3%	1.1%	1.2%			1.3%	for NCHD assistance if denied assistance by other
SSI-SSID	657	631	599	595	598	583	596	613	624	630			613	payer.
%	14.5%	14.0%	13.3%	13.0%	13.2%	12.6%	12.8%	13.2%	13.3%	13.2%			13.3%	
Other Payor	333	331	332	333	337	352	353	341	355	351			342	
%	7.4%	7.3%	7.4%	7.3%	7.4%	7.6%	7.6%	7.3%	7.6%	7.4%			7.4%	
TOTAL NUECES AID	4,521	4,512	4,510	4,570	4,540	4,610	4,652	4,648	4,690	4,765			4,602	
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%			100.0%	
HOUSEHOLDS BY SIZE														
1 Member Household	4,048	4,032	4,013	4,066	4,042	4,101	4,146	4,129	4171	4250			4,100	The percentage for each size
%	94.4%	94.3%	94.1%	94.1%	94.2%	94.1%	94.2%	94.1%	94.1%	94.2%			94.2%	household is calculated by dividing the number of each
2 Member Household	234	237	246	250	247	254	252	258	258	257			249	member household by the
%	5.5%	5.5%	5.8%	5.8%	5.8%	5.8%	5.7%	5.9%	5.8%	5.7%			5.7%	total number of households.
>=3 Member Household	5	5	4	3	3	2	2	3	3	4			3	
%	0.1%	0.1%	0.1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.1%			0.1%	
TOTAL HOUSEHOLDS	4,287	4,274	4,263	4,319	4,292	4,357	4,400	4,390	4,432	4,511			4,353	

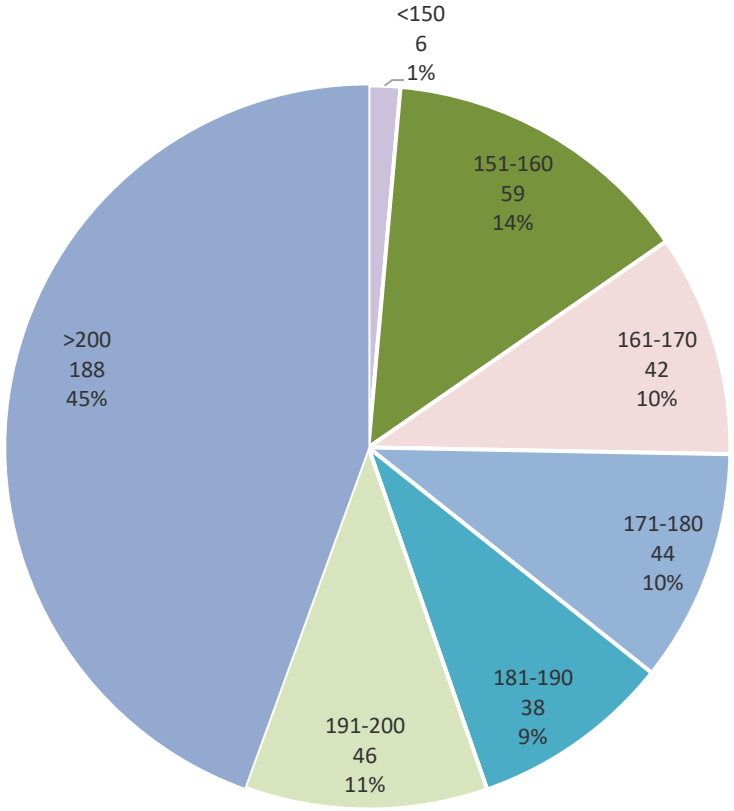
NUECES AID DENIALS

Calendar Year 2026: January - October

Denial Reasons



Comparison of Over Income Case to 2026 HHS Poverty Guidelines



Nueces Aid Program
Application Processing Summary Calendar Year 2026

2026	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD	Comments
TOTAL APPLICATIONS	914	801	888	864	774	813	912	930	875	904	0	0	8,675	
Approved	772	686	741	748	628	695	754	766	729	762			7,281	
%	84.5%	85.6%	83.4%	86.6%	81.1%	85.5%	82.7%	82.4%	83.3%	84.3%	0.0%	0.0%	83.9%	
Denied	142	115	147	116	146	118	158	164	146	142			1,394	
%	15.5%	14.4%	16.6%	13.4%	18.9%	14.5%	17.3%	17.6%	16.7%	15.7%	0.0%	0.0%	16.1%	Since FY 1999, the denial rate is based on all deniced individuals in the household.
APPROVALS BY PLAN TYPE														
NUECES AID - All Service Levels														
100%	522	468	509	538	442	477	515	542	496	541			5,050	
%	67.6%	68.2%	68.7%	71.9%	70.4%	68.6%	68.3%	70.8%	68.0%	71.0%			69%	The percentage of approvals by plan option is alculated by deviding the number for each plan option by the total numbers of approved applications.
90%	22	21	17	16	15	27	29	17	17	22			203	
%	2.8%	3.1%	2.3%	2.1%	2.4%	3.9%	3.8%	2.2%	2.3%	2.9%			2.8%	
80%	30	24	27	18	12	12	22	23	25	23			216	
%	3.9%	3.5%	3.6%	2.4%	1.9%	1.7%	2.9%	3.0%	3.4%	3.0%			3.0%	
70%	15	18	18	20	19	23	12	21	21	17			184	
%	1.9%	3%	2.4%	2.7%	3.0%	3.3%	1.6%	2.7%	2.9%	2.2%			2.5%	
60%	20	19	18	18	10	32	24	14	15	19			189	
%	2.6%	2.8%	2.4%	2.4%	1.6%	4.6%	3.2%	1.8%	2.1%	2.5%			2.6%	
50%	20	19	16	18	16	11	19	15	18	16			168	
%	2.6%	2.8%	2.2%	2.4%	2.5%	1.6%	2.5%	2.0%	2.5%	2.1%			2.3%	
TANF	14	12	17	13	18	15	16	11	10	20			146	
%	2%	1.7%	2.3%	1.7%	2.9%	2.2%	2.1%	1.4%	1.4%	2.6%			2%	
SSI-SSID	62	59	59	52	55	44	65	68	59	54			577	
%	8%	8.6%	8.0%	7.0%	8.8%	6.3%	8.6%	8.9%	8.1%	7.1%			8%	
Other Payor	67	46	60	55	41	54	52	55	68	50			548	
%	9%	6.7%	8.1%	7.4%	6.5%	7.8%	6.9%	7.2%	9.3%	6.6%			8%	
TOTAL	772	686	741	748	628	695	754	766	729	762	0	0	7,378	
%	100%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%			101.3%	
PENDING APPLICATIONS														
Pending Documentation	92	95	95	106	69	103	117	102	117	73			97	The YTD number for incomplete applications is the average of the monthly incomplete applications.

Nueces Aid Program
Application Processing Summary Calendar Year 2026

2026	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD	Comments
NCHD DENIALS - Reasons for Denials														
Non Resident	0	2	4	3	3	7	4	5	3	4			35	
%	0.0%	1.7%	2.7%	2.6%	2.1%	5.9%	2.5%	3.0%	2.1%	2.8%			2.5%	
Over Income	40	28	42	37	45	41	43	57	42	48			423	
%	28.2%	24.3%	28.6%	31.9%	30.8%	34.7%	27.2%	34.8%	28.8%	33.8%			30.3%	
Over Resources	7	7	10	2	7	3	8	5	3	7			59	
%	4.9%	6.1%	6.8%	1.7%	4.8%	2.5%	5.1%	3.0%	2.1%	4.9%			4.2%	
Other Payer	35	30	26	13	24	15	29	24	39	28			263	
%	24.6%	26.1%	17.7%	11.2%	16.4%	12.7%	18.4%	14.6%	26.7%	19.7%			18.9%	The percentage for each denial reason is calculated by dividing the number of individuals for each rason by the total number of individuals denied.
Requested Info Not Provided	60	48	64	61	67	52	74	71	59	55			611	
%	42.3%	41.7%	43.5%	52.6%	45.9%	44.1%	46.8%	43.3%	40.4%	38.7%			43.8%	
Undocumented Aliens	0	0	1	0	0	0	0	2	0	0			3	
%	0.0%	0.0%	0.7%	0.0%	0.0%	0.0%	0.0%	1.2%	0.0%	0.0%			0.2%	
TOTAL DENIALS	142	115	147	116	146	118	158	164	146	142	0	0	1,394	
HOUSEHOLDS BY SIZE - APPROVED														
1 Member Household	686	608	641	677	564	603	667	679	644	689			6,458	
%	94.0%	94.0%	92.8%	95.0%	94.5%	92.9%	93.8%	93.9%	93.7%	94.8%			93.9%	The percentage for each size household is calcualted by dividing the number of hoseholds in the category by the total number of approved households. Any households pending other payers are not included.
2 Member Household	43	39	50	34	32	46	43	43	42	36			408	
%	5.9%	6.0%	7.2%	4.8%	5.4%	7.1%	6.0%	5.9%	6.1%	5.0%			5.9%	
3 or > Member Household	1	0	0	2	1	0	1	1	1	2			9	
%	0.1%	0.0%	0.0%	0.3%	0.2%	0.0%	0.1%	0.1%	0.1%	0.3%			0.1%	
TOTAL HOUSEHOLDS APPROVED	730	647	691	713	597	649	711	723	687	727			6,875	
HOUSEHOLDS BY SIZE - DENIED														
1 Member Household	115	97	115	91	116	93	124	128	115	105			1099	
%	88.5%	92%	86%	87%	87%	87%	88%	87%	88%	82%			87.2%	The denial percentage for each size household is calcualted by dividing the number for each household size by the total number of denied households. Any households pending other payors are not included.
2 Member Household	13	8	17	12	14	11	17	17	13	15			137	
%	10.0%	7.5%	12.8%	11.4%	10.5%	10.3%	12.1%	11.6%	10.0%	11.7%			10.9%	
3 or > Member Household	2	1	1	2	3	3	0	2	2	8			24	
%	1.5%	0.9%	0.8%	1.9%	2.3%	2.8%	0.0%	1.4%	1.5%	6.3%			1.9%	
TOTAL HOUSEHOLDS DENIED	130	106	133	105	133	107	141	147	130	128			1,260	

NCHD
Eligibility History

2020	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	CY Total	Avg	
NCHD	4,963	4,955	4,903	4,731	5,132	4,698	4,198	3,660	3,260	3,604	3,752	3,868	51,724	4,310	-14%
Pend	1,268	1,243	1,218	1,141	1,187	1,106	1,043	968	861	899	923	945	12,802	1,067	-18%
Total	6,231	6,198	6,121	5,872	6,319	5,804	5,241	4,628	4,121	4,503	4,675	4,813	64,526	5,377	-15%
% of PY	95%	96%	96%	93%	101%	93%	83%	73%	65%	70%	75%	79%	85%	85%	
2021	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	CY Total	Avg	
NCHD	3,806	3,678	3,567	3,521	3,667	3,852	3,953	4,080	4,142	4,091	3,948	3,863	46,168	3,847	-11%
Pend	932	921	922	964	981	1,014	1,052	1,028	1,039	1,060	1,070	1,076	12,059	1,005	-6%
Total	4,738	4,599	4,489	4,485	4,648	4,866	5,005	5,108	5,181	5,151	5,018	4,939	58,227	4,852	-10%
% of PY	76%	74%	73%	76%	74%	84%	95%	110%	126%	114%	107%	103%	90%	90%	
2022	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	CY Total	Avg	
NCHD	3,781	3,711	3,738	3,755	3,805	3,869	3,910	3,945	4,042	3,987	3,884	3,785	46,212	3,851	0%
Pend	1,093	1,061	1,110	1,113	1,144	1,150	1,147	1,183	1,191	1,191	1,181	1,171	13,735	1,145	14%
Total	4,874	4,772	4,848	4,868	4,949	5,019	5,057	5,128	5,233	5,178	5,065	4,956	59,947	4,996	3%
% of PY	103%	104%	108%	109%	106%	103%	101%	100%	101%	101%	101%	100%	103%	103%	
2023	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	CY Total	Avg	
NCHD	3,767	3,186	3,727	3,611	3,614	3,599	3,565	3,548	3,566	3,598	3,613	3,545	42,939	3,578	-7%
Pend	1,145	1,677	1,148	1,157	1,173	1,161	1,177	1,181	1,183	1,185	1,186	1,166	14,539	1,212	6%
Total	4,912	4,863	4,875	4,768	4,787	4,760	4,742	4,729	4,749	4,783	4,799	4,711	57,478	4,790	-4%
% of PY	101%	102%	101%	98%	97%	95%	94%	92%	91%	92%	95%	95%	96%	96%	
2024	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	CY Total	Avg	
NCHD	3,523	3,573	3,563	3,596	3,605	3,597	3,643	3,650	3,629	3,646	3,546	3,464	43,035	3,586	0%
Pend	1,161	1,185	1,175	1,171	1,177	1,157	1,180	1,182	1,177	1,183	1,159	1,121	14,028	1,169	-4%
Total	4,684	4,758	4,738	4,767	4,782	4,754	4,823	4,832	4,806	4,829	4,705	4,585	57,063	4,755	-1%
% of PY	95%	98%	97%	100%	100%	100%	102%	102%	101%	101%	98%	97%	99%	99%	
2025	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	CY Total	Avg	
NCHD	3,494	3,407	3,380	3,397	3,375	3,424	3,461	3,463	3,489	3,526	3,459	3,435	41,310	3,443	-4%
Pend	1,113	1,106	1,129	1,147	1,140	1,141	1,135	1,103	1,100	1,098	1,049	1,048	13,309	1,109	-5%
Total	4,607	4,513	4,509	4,544	4,515	4,565	4,596	4,566	4,589	4,624	4,508	4,483	54,619	4,552	-4%
% of PY	98%	95%	95%	95%	94%	96%	95%	94%	95%	96%	96%	98%	96%	96%	
2026	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	CY Total	Avg	
NCHD	3,466	3,496	3,511	3,590	3,551	3,618	3,643	3,633	3,661	3,727			35,896	3,590	4%
Pend	1,055	1,016	999	980	989	992	1,009	1,015	1,029	1,038			10,122	1,012	-9%
Total	4,521	4,512	4,510	4,570	4,540	4,610	4,652	4,648	4,690	4,765	-	-	46,018	4,602	1%
% of PY	98%	100%	100%	101%	101%	101%	101%	102%	102%	103%	0%	0%	84%	101%	

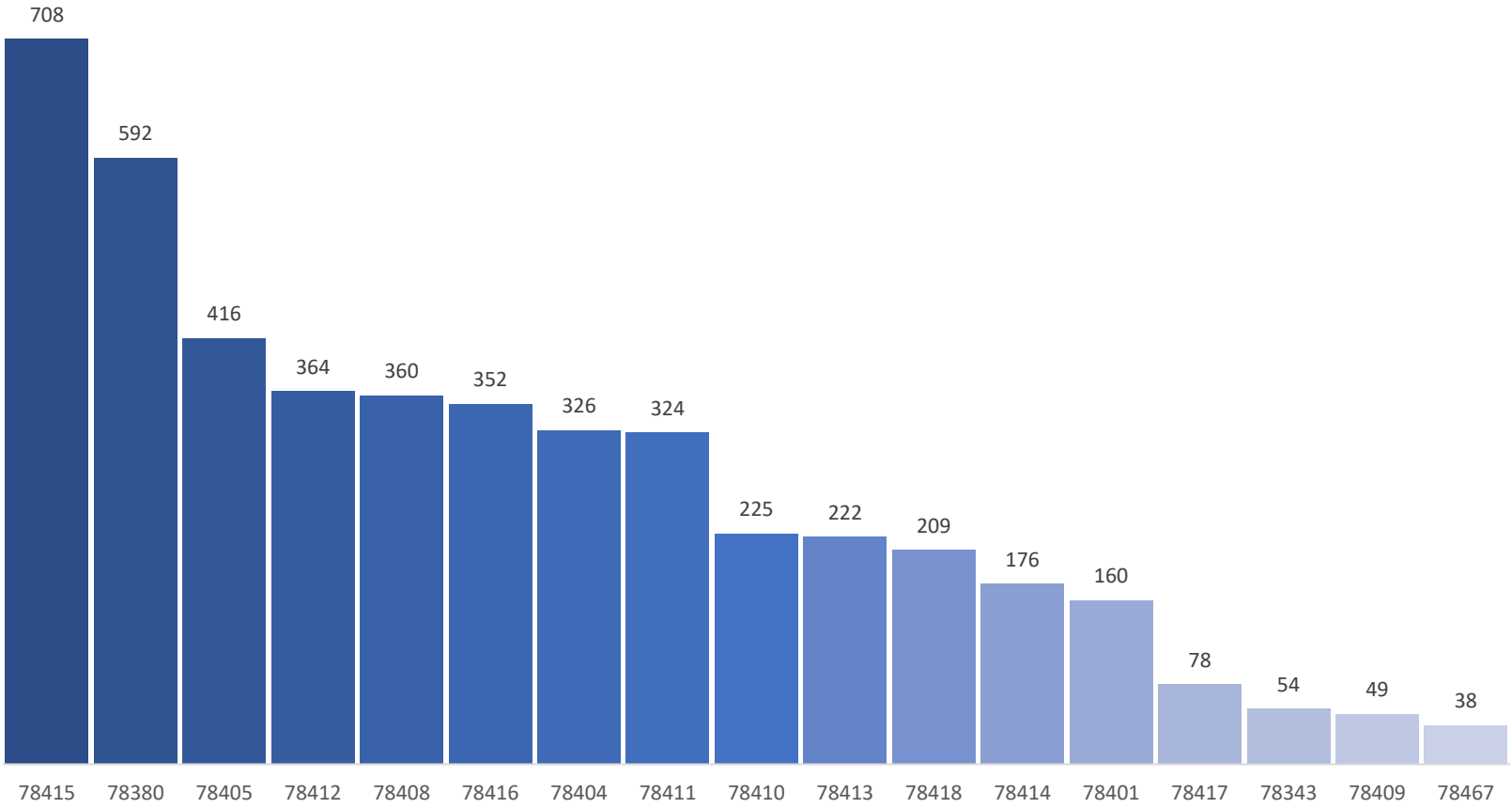
Nueces County Hospital District

Annual Comparative Enrollment Report
Calendar Year 2026

	Enrollment			Increase/(Decrease)	
Month	**2026**	**2025**		**%**	**Enrollees**
Jan	4,521	4,607		-1.87%	-86
Feb	4,512	4,513		-0.02%	-1
Mar	4,510	4,509		0.02%	1
Apr	4,570	4,544		0.57%	26
May	4,540	4,515		0.55%	25
June	4,610	4,565		0.99%	45
Jul	4,652	4,596		1.22%	56
Aug	4,648	4,566		1.80%	82
Sep	4,690	4,589		2.20%	101
Oct	4,765	4,624		3.05%	141
Nov					
Dec					

Nueces County Hospital District

Enrollment by Zipcode as of October 2026

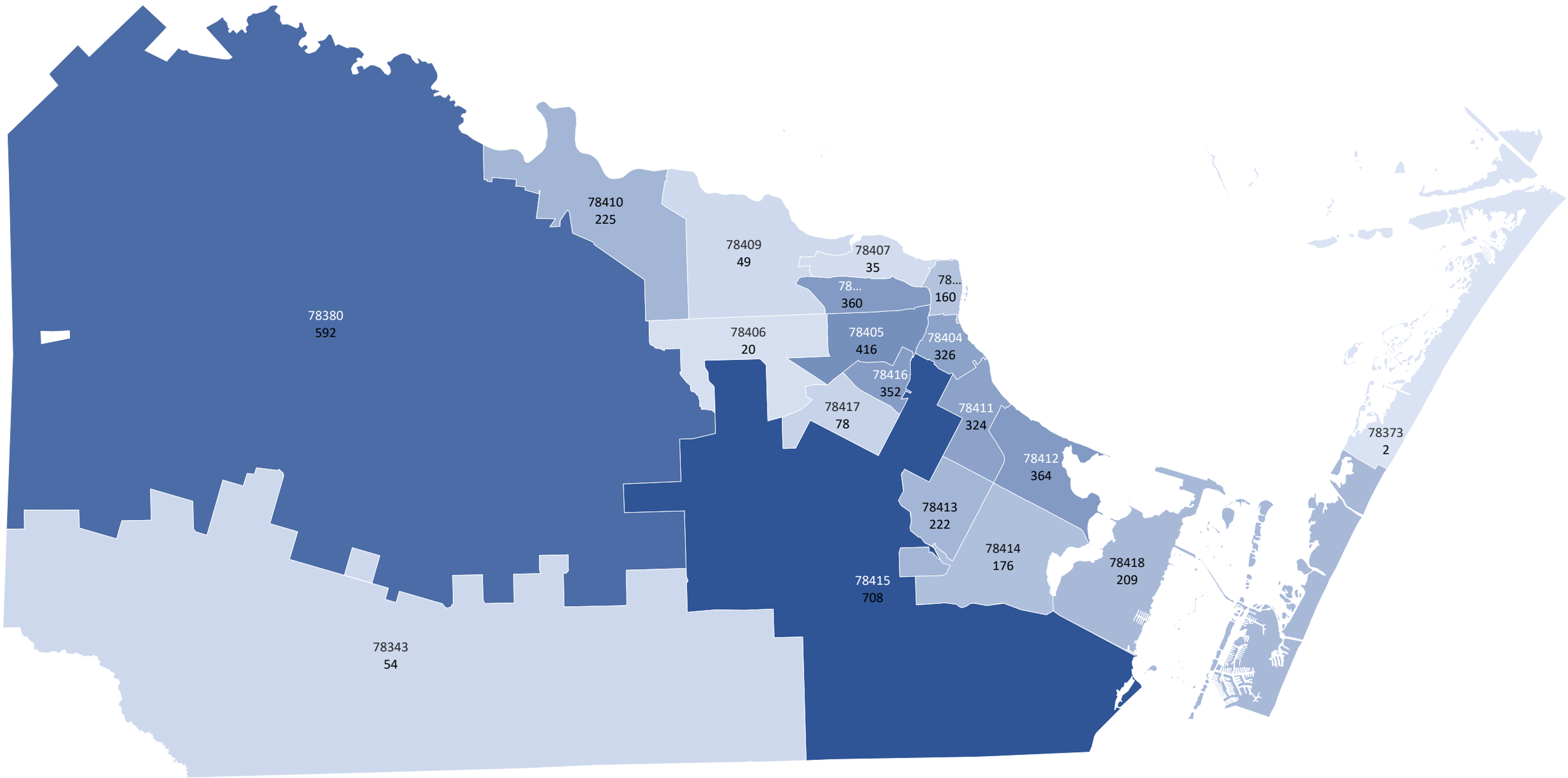


Nueces County Hospital District
Enrollment by Zip Code
As of 10/31/2026

Zip Code	Description	Members	% to Total
78415	CC:FM 665 to CR 61 to County Line to Weber & Crosstown	708	15%
78380	Robstown	592	12%
78405	CC:19th to Port Ave to Agnes, includes HPG	416	9%
78412	CC:Airline to Hwy 358 to Ennis Joslin to Ocean Drive	364	8%
78408	CC:Hwy 358 to Lipan Between I-37 & Agnes	360	8%
78416	CC:Hwy 358 to Old Brownsville to Tarlton to Weber, includes Molina	352	7%
78404	CC:Six Points	326	7%
78411	CC:Ocean Drive to So Staples to Hwy 358 to Weber to Kostoryz	324	7%
78410	CC:Annaville and Calallen	225	5%
78413	CC:Weber to Holly rd to So Staples to Oso Pkwy	222	5%
78418	CC:Flour Bluff	209	4%
78414	CC:So Staples to Holly Rd to Cayo Del Oso to Oso Creek	176	4%
78401	CC:Downtown and Cargo Docks	160	3%
78417	CC:Old Brownsville to Ayers to Saratoga	78	2%
78343	Bishop + FM 665 to CR 107 W to CR 57E	54	1%
78409	CC:Hwy 44 to Up River Rd to Rand Morgan E to Hwy 358	49	1%
78467	CC: Leopard St Between S. Staples and Sam Rankin	38	1%
	Subtotal	4,653	98%
	Total	4,766	

Nueces County Hospital District

Enrollment Map



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UHY LLP
4101 S Alameda Street
Corpus Christi, TX 78411
(361) 887-8916
uhy-us.com

September 16, 2026

Mr. Jonny Hipp
Nueces County Hospital District
555 N. Carancahua, Suite 950-A
Corpus Christi, TX 78401

We are pleased to confirm our understanding of the services we are to provide Nueces County Hospital District, a component unit of Nueces County, Texas, for the year ended September 30, 2026.

Audit Scope and Objectives

We will audit the financial statements of the governmental activities, and the aggregate remaining fund information, and the disclosures, which collectively comprise the basic financial statements of Nueces County Hospital District as of and for the year ended September 30, 2026. Accounting standards generally accepted in the United States of America (GAAP) provide for certain required supplementary information (RSI), such as management's discussion and analysis (MD&A), to supplement Nueces County Hospital District's basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. As part of our engagement, we will apply certain limited procedures to Nueces County Hospital District's RSI in accordance with auditing standards generally accepted in the United States of America (GAAS). These limited procedures will consist of inquiries of management regarding the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We will not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient appropriate evidence to express an opinion or provide any assurance. The following RSI is required by GAAP and will be subjected to certain limited procedures, but will not be audited:

1) Management's Discussion and Analysis

The objectives of our audit are to obtain reasonable assurance as to whether the financial statements as a whole are free from material misstatement, whether due to fraud or error; issue an auditor's report that includes our opinion about whether your financial statements are fairly presented, in all material respects, in conformity with GAAP; and report on the fairness of the supplementary information referred to in the second paragraph when considered in relation to the financial statements as a whole. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. Misstatements, including omissions, can arise from fraud or error and are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment of a reasonable user made based on the financial statements.

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Auditor's Responsibilities for the Audit of the Financial Statements

We will conduct our audit in accordance with GAAS and will include tests of your accounting records and other procedures we consider necessary to enable us to express such opinions. As part of an audit in accordance with GAAS, we exercise professional judgment and maintain professional skepticism throughout the audit.

We will evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management. We will also evaluate the overall presentation of the financial statements, including the disclosures, and determine whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation. We will plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement, whether from (1) errors, (2) fraudulent financial reporting, (3) misappropriation of assets, or (4) violations of laws or governmental regulations that are attributable to the government or to acts by management or employees acting on behalf of the government.

Because of the inherent limitations of an audit, combined with the inherent limitations of internal control, and because we will not perform a detailed examination of all transactions, there is an unavoidable risk that some material misstatements may not be detected by us, even though the audit is properly planned and performed in accordance with GAAS. In addition, an audit is not designed to detect immaterial misstatements or violations of laws or governmental regulations that do not have a direct and material effect on the financial statements. However, we will inform the appropriate level of management of any material errors, fraudulent financial reporting, or misappropriation of assets that comes to our attention. We will also inform the appropriate level of management of any violations of laws or governmental regulations that come to our attention, unless clearly inconsequential. Our responsibility as auditors is limited to the period covered by our audit and does not extend to any later periods for which we are not engaged as auditors.

We will also conclude, based on the audit evidence obtained, whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the government's ability to continue as a going concern for a reasonable period of time.

Our procedures will include tests of documentary evidence supporting the transactions recorded in the accounts, tests of the physical existence of inventories, and direct confirmation of receivables and certain assets and liabilities by correspondence with selected customers, creditors, and financial institutions. We will also request written representations from your attorneys as part of our engagement.

We may, from time to time and depending on the circumstances, use third-party service providers in serving your account. We may share confidential information about you with these service providers but remain committed to maintaining the confidentiality and security of your information. Accordingly, we maintain internal policies, procedures, and safeguards to protect the confidentiality of your personal information. In addition, we will secure confidentiality agreements with all service providers to maintain the confidentiality of your information and we will take reasonable precautions to determine that they have appropriate procedures in place to prevent the unauthorized release of your confidential information to others. In the event that we are unable to secure an appropriate confidentiality agreement, you will be asked to provide your consent prior to the sharing of your confidential information with the third-party service provider. Furthermore, we will remain responsible for the work provided by any such third-party service providers.

Our audit of the financial statements does not relieve you of your responsibilities.

Audit Procedures—Internal Control

We will obtain an understanding of the government and its environment, including the system of internal control, sufficient to identify and assess the risks of material misstatement of the financial statements, whether due to error or fraud, and to design and perform audit procedures responsive to those risks and obtain evidence that is sufficient and appropriate to provide a basis for our opinions. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentation, or the override of internal control. An audit is not designed to provide assurance on internal control or to identify deficiencies in internal control. Accordingly, we will express no such opinion. However, during the audit, we will communicate to management and those charged with governance internal control related matters that are required to be communicated under AICPA professional standards.

We have identified the following significant risks of material misstatement as part of our audit planning:

According to GAAS, significant risks include management override of controls, and GAAS presumes that revenue recognition is a significant risk. Accordingly, we have considered these as significant risks.

Audit Procedures—Compliance

As part of obtaining reasonable assurance about whether the financial statements are free of material misstatement, we will perform tests of Nueces County Hospital District's compliance with the provisions of applicable laws, regulations, contracts, and agreements. However, the objective of our audit will not be to provide an opinion on overall compliance and we will not express such an opinion.

Responsibilities of Management for the Financial Statements

Our audit will be conducted on the basis that you acknowledge and understand your responsibility for designing, implementing, and maintaining internal controls relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error, including monitoring ongoing activities; for the selection and application of accounting principles; and for the preparation and fair presentation of the financial statements in conformity with accounting principles generally accepted in the United States of America with the oversight of those charged with governance.

Management is responsible for making drafts of financial statements, all financial records, and related information available to us; for the accuracy and completeness of that information (including information from outside of the general and subsidiary ledgers); and for the evaluation of whether there are any conditions or events, considered in the aggregate, that raise substantial doubt about the government's ability to continue as a going concern for the 12 months after the financial statement date or shortly thereafter (for example, within an additional three months if currently known). You are also responsible for providing us with (1) access to all information of which you are aware that is relevant to the preparation and fair presentation of the financial statements, such as records, documentation, identification of all related parties and all related-party relationships and transactions, and other matters; (2) additional information that we may request for the purpose of the audit; and (3) unrestricted access to persons within the government from whom we determine it necessary to obtain audit evidence. At the conclusion of our audit, we will require certain written representations from you about the financial statements and related matters.

Your responsibilities include adjusting the financial statements to correct material misstatements and confirming to us in the management representation letter that the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the latest period presented are immaterial, both individually and in the aggregate, to the financial statements of each opinion unit taken as a whole.

You are responsible for the design and implementation of programs and controls to prevent and detect fraud, and for informing us about all known or suspected fraud affecting the government involving (1) management, (2) employees who have significant roles in internal control, and (3) others where the fraud could have a material effect on the financial statements. Your responsibilities include informing us of your knowledge of any allegations of fraud or suspected fraud affecting the government received in communications from employees, former employees, grantors, regulators, or others. In addition, you are responsible for identifying and ensuring that the government complies with applicable laws and regulations.

You are responsible for the preparation of the supplementary information in conformity with accounting principles generally accepted in the United States of America (GAAP). You agree to include our report on the supplementary information in any document that contains, and indicates that we have reported on, the supplementary information. You also agree to [include the audited financial statements with any presentation of the supplementary information that includes our report thereon OR make the audited financial statements readily available to users of the supplementary information no later than the date the supplementary information is issued with our report thereon]. Your responsibilities include acknowledging to us in the representation letter that (1) you are responsible for presentation of the supplementary information in accordance with GAAP; (2) you believe the supplementary information, including its form and content, is fairly presented in accordance with GAAP; (3) the methods of measurement or presentation have not changed from those used in the prior period (or, if they have changed, the reasons for such changes); and (4) you have disclosed to us any significant assumptions or interpretations underlying the measurement or presentation of the supplementary information.

UHY will perform nonattest services in accordance with applicable professional standards. UHY, in its sole professional judgment, reserves the right to refuse to perform any procedure or take any action that could be construed as making management decisions or assuming management responsibilities, including determining account coding and approving journal entries. The Company must make all decisions with regard to nonattest services.

Other Services

We will also prepare the financial statements of Nueces County Hospital District in conformity with accounting principles generally accepted in the United States of America based on information provided by you.

We will perform the services in accordance with applicable professional standards. The other services are limited to the financial statement services previously defined. We, in our sole professional judgment, reserve the right to refuse to perform any procedure or take any action that could be construed as assuming management responsibilities.

You agree to assume all management responsibilities for the financial statement preparation services and any other nonattest services we provide; oversee the services by designating an individual, preferably from senior management, with suitable skill, knowledge, and/or experience; evaluate the adequacy and results of the services; and accept responsibility for them.

Engagement Administration, Fees, and Other

We understand that your employees will prepare all cash, accounts receivable, and other confirmations we request and will locate any document selected by us for testing.

The audit documentation for this engagement is the property of UHY LLP and constitutes confidential information. However, we may be requested to make certain audit documentation available pursuant to authority given to it by law or regulation. In the event UHY LLP is requested pursuant to subpoena or other legal process to produce its documents relating to this engagement in judicial or administrative proceedings to which UHY LLP is not a party, the Company shall reimburse UHY LLP at standard billing rates for its professional time and expenses, including reasonable attorney's fees incurred in responding to such requests.

Caitlin Chupe is the engagement partner and is responsible for supervising the engagement and signing the report or authorizing another individual to sign it. We expect to begin our audit in November 2026 and to issue our reports no later than January 2027.

"UHY" is the brand name under which UHY LLP and UHY Advisors, Inc. ("UHY Advisors") provide professional services. The two firms operate as separate legal entities in an alternative practice structure. UHY LLP is a licensed independent CPA firm that performs attest services. UHY Advisors, Inc. provides tax and business consulting services through subsidiary entities. UHY LLP has a contractual arrangement with UHY Advisors and its various subsidiaries pursuant to which UHY Advisors provides UHY LLP with services for which licensure as a CPA is not required. In order to avoid duplication of efforts arising out of this arrangement, we request that you consent to our sharing with UHY Advisors and UHY Advisors sharing with UHY LLP the information that may be obtained from you during the course of our engagement. Unless you indicate otherwise, your acceptance of the terms of this engagement shall be understood by us as your consent to make disclosures to UHY Advisors of confidential information that we may obtain in the course of our engagement.

UHY Advisors, Inc. and UHY LLP are U.S. members of Urbach Hacker Young International Limited (UHY International), a UK company, and form part of the international UHY network of legally independent accounting and consulting firms. Any services described herein are provided by UHY Advisors, Inc. and/or UHY LLP (as the case may be) and not by UHY International or any other member firm of UHY International. Neither UHY International nor any member of UHY International has any liability for services provided by other members.

In today's technological environment, businesses and individuals are continuously interacting through e-mail. This often involves sending data, documents and other information, including sensitive tax and financial information. Although convenient, a business or individual that chooses to exchange such information via e-mail should ensure that their e-mail server and the information stored in their system are secure. By providing your financial information to us for the preparation of your financial statement, you authorize us to send information to you (or to other authorized recipients) via the e-mail addresses that you provide. The firm is not responsible for any transmission problems or the failure of you or any authorized recipient of the information to receive the file containing the information or maintaining the confidentiality of any information transmitted via e-mail or in the possession of you or any authorized recipient.

This engagement letter and all services rendered hereunder shall be governed, construed, and enforced by the laws of the State of Texas, without the need to resort to principles of conflicts of laws. Texas law shall apply to any legal or equitable proceeding that shall be instituted in any way arising out of this engagement letter, any obligations contained or allegedly contained herein, and all services rendered touching or relating in any way to the obligations of this engagement letter. All parties to this engagement consent to the exclusive jurisdiction of the federal and state courts located in Texas and, more particularly, the state court located in District Court of Nueces County, Texas and the federal court located in the Southern District of Texas.

We estimate that our fees for these services will be $30,500. You will also be billed for travel and other out-of-pocket costs such as report production, typing, postage, etc. Our standard hourly rates vary according to the degree of responsibility involved and the experience level of the personnel assigned to your engagement. If significant additional time is necessary, we will keep you informed of any problems we encounter and our fees will be adjusted accordingly. Our invoices for these fees will be rendered each month as work progresses and are payable on presentation. In accordance with our firm policies, work may be suspended if your account becomes overdue and will not be resumed until your account is paid in full. If we elect to terminate our services for nonpayment, you will be obligated to compensate us for all time expended and to reimburse us for all out-of-pocket expenditures through the date of termination.

Our fee will be based on normal hourly rates. The fee estimate is based on anticipated cooperation from your personnel and the assumption that unexpected circumstances will not be encountered during the engagement. If significant additional time is necessary, we will keep you informed of any problems we encounter and our fees will be adjusted accordingly. Our invoices for these fees will be rendered each month as work progresses and are payable on presentation. In accordance with our firm policies, work may be suspended if your account becomes overdue and will not be resumed until your account is paid in full. If we elect to terminate our services for nonpayment, you will be obligated to compensate us for all time expended and to reimburse us for all out-of-pocket expenditures through the date of termination.

From time to time both during and after the conclusion of our engagement, we may be required to respond to subpoenas or other requests for documents, testimony or court appearances, or to otherwise take actions under compulsion of law or legal process, relating to you and/or the work we have undertaken for you as identified and described herein. In any such instance, you will be and remain responsible to compensate us for our time expended, and to reimburse us for our costs and disbursements (including attorney's fees) incurred, in complying with any such legal requirements, all in the manner described in the preceding engagement letter paragraph that addresses billing and payment.

If circumstances occur related to the condition of your records, the availability of sufficient, appropriate audit evidence, or the existences of a significant risk of material misstatement of the financial statements caused by error, fraudulent financial reporting, or misappropriation of assets, which in our professional judgment prevent us from completing the audit or forming an opinion on the financial statements, we retain the right to take any course of action permitted by professional standards, including declining to express an opinion or issue a report, or withdrawing from the engagement.

Independence rules require us to obtain written documentation related to certain non-attest services. At your request, during the year, we may perform services for you including, but not limited to, consulting services, bookkeeping services, payroll services, tax services, profit-sharing plan services, preparation of financial statements, etc. By your signature below, you acknowledge that you are responsible for management decisions and functions. That responsibility includes designating qualified individuals with the necessary expertise to be responsible and accountable for overseeing all the services we perform, as well as evaluating the adequacy and results of the services performed. You are responsible for establishing and maintaining internal controls, including monitoring ongoing activities.

Reporting

We will issue a written report upon completion of our audit of Nueces County Hospital District's financial statements. Our report will be addressed to the Board of Managers of Nueces County Hospital District. Circumstances may arise in which our report may differ from its expected form and content based on the results of our audit. Depending on the nature of these circumstances, it may be necessary for us to modify our opinions, add a separate section, or add an emphasis-of-matter or other-matter paragraph to our auditor's report, or if necessary, withdraw from this engagement. If our opinions are other than unmodified, we will discuss the reasons with you in advance. If, for any reason, we are unable to complete the audit or are unable to form or have not formed opinions, we may decline to express opinions or withdraw from this engagement.

For the purposes of this engagement letter (and other letters of correspondence), transmitted copies (reproduced documents that are transmitted via photocopy, facsimile or process that accurately transmits the original) are considered documents equivalent to original documents. Signatures transmitted and received via facsimile, .pdf format, e-mail, or an electronic signature platform will be treated for all purposes of this engagement letter (and other letters of correspondence) as original signatures and will be deemed valid, binding and enforceable by and against all parties.

We appreciate the opportunity to be of service to you and believe this letter accurately summarizes the significant terms of our engagement. If you have any questions, please let us know. If you agree with the terms of our engagement as described in this letter, please sign the attached copy and return it to us.

Sincerely,

UHY LLP

RESPONSE:
This letter correctly sets forth the understanding of
Nueces County Hospital District

Signature:_____

Title:_____

Kara Sands
Nueces County Clerk
901 Leopard St #201
Corpus Christi, TX 78401

Main: (361)888-0580

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Date: 11/10/2026
Time: 01:52PM
By: Tim O
Station: CLERK01
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1	Public Notice	PBN	2026000580	7	$0.00	

Order Total (1) $0.00

Seq	Payment Method	Transaction Id	Comment	Total
1				$0.00

Total Payments (1) $0.00

Change Due $0.00

NUECES COUNTY HOSPITAL DISTRICT

For more information about the County Clerk's office and to search property records online, please visit http://www.nuecesco.com/county-services/county-clerk

VG-12-2026-2026000580

Nueces County
Kara Sands
Nueces County Clerk

Instrument Number: 2026000580

Public Notice

PUBLIC NOTICES

Recorded On: November 10, 2026 01:52 PM

Number of Pages: 7

" Examined and Charged as Follows: "

Total Recording: $0.00

STATE OF TEXAS
Nueces County
I hereby certify that this Instrument was filed in the File Number sequence on the date/time printed hereon, and was duly recorded in the Official Records of Nueces County, Texas

Kara Sands
Nueces County Clerk
Nueces County, TX

Kara Sands

********** THIS PAGE IS PART OF THE INSTRUMENT **********
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CLERK OF THE COUNTY COURT
NUECES COUNTY, TEXAS

Nueces County Hospital District

NOTICE OF PUBLIC MEETING

BOARD OF MANAGERS

Finance Committee - Regular Meeting
Tuesday, November 17, 2026 at 11:30 AM

Location:
Board of Managers Meeting Room, 555 N. Carancahua Street, Room 950-A, Corpus Christi, Texas 78401

The Nueces County Hospital District ("NCHD") Board of Managers or a Committee thereof as specified above will hold a meeting on the date and at the time and location shown above. The agenda item(s) for the meeting are set forth on the accompanying page(s). Agenda item(s) are not necessarily considered in the order listed.

The specified NCHD Board of Managers meeting will be held in-person and via videoconference call. Public participation will be available in-person as well as via videoconference call as allowed under the Texas Open Meetings Act ("Act"). It is the intent that a quorum of the Board of Managers or Committee as required for the specified meeting will be physically present at the meeting location posted in this meeting notice. It is also the intent that the Board member presiding over the meeting be physically present for the specified meeting at the meeting location posted in this meeting notice. Any member of the Board of Managers participating by videoconference call will be visible and audible to the public whenever the member is speaking; Board member participation by audio-only is not permitted. Any member of the public wishing to observe or participate in the meeting via videoconference call may do so through the videoconference call meeting Internet link shown on this meeting notice below and via NCHD's BoardBook meeting management system at https://meetings.boardbook.org/Public/Organization/1886.

The Act defines a "videoconference call" as a communication conducted between two or more persons in which one or more of the participants communicate with the other participants through duplex audio and video signals transmitted over a telephone network, a data network, or the Internet. NCHD will use Zoom to conduct the meeting via videoconference call; Zoom is a cloud-based communications platform that allows users to connect with video, audio, phone, and chat. Using Zoom requires an Internet connection and a supported device.

The agenda for this meeting and its supporting materials are available at: https://meetings.boardbook.org/Public/Organization/1886.

The Meeting may be attended in-person or via videoconference call:

Videoconference Call:
Click the link below or copy and paste the link into a supported web browser address bar.
https://nchdcc-org.zoom.us/j/5746765992?pwd=T2RVWFBpZGJYdHYyQmp1VUdZeUc3Zz09
Meeting ID: **574 676 5992**
Passcode: **195957**

Telephone:
Dial any telephone number below and enter the Meeting ID and Passcode above if required.

One tap mobile:
+13462487799,,5746765992# US (Houston)
+16699006833,,5746765992# US (San Jose)

Dial by your location (United States):
+1 346 248 7799 (Houston)
+1 719 359 4580
+1 253 205 0468
+1 253 215 8782 (Tacoma)
+1 669 444 9171
+1 669 900 6833 (San Jose)
+1 929 205 6099 (New York)
+1 301 715 8592 (Washington DC)
+1 305 224 1968
+1 309 205 3325
+1 312 626 6799 (Chicago)
+1 360 209 5623
+1 386 347 5053
+1 507 473 4847
+1 564 217 2000
+1 646 931 3860
+1 689 278 1000

Find your local number: https://nchdcc-org.zoom.us/u/kbKxLl8Eq4

Nueces County Hospital District

BOARD OF MANAGERS
Finance Committee - Regular Meeting
Tuesday, November 17, 2026 at 11:30 AM

AGENDA

1. **WELCOME**

2. **ROLL CALL OF COMMITTEE MEMBERS**

___ Pamela Brower, Chair
___ Sylvia Tryon Oliver
___ Karen O'Connor Urban

3. **CALL TO ORDER, CONFIRMATION OF QUORUM, VERIFICATION OF MEETING POSTING, AND CLOSED MEETING NOTICE:**

A. Call to order.

B. Establish quorum.

C. Confirm posting of Meeting's public notice in accordance with Texas Open Meetings Act, Texas Government Code, Chapter 551.

D. Notice is hereby provided that the Committee may convene in closed meeting session(s) during this meeting to consider any agenda item, when permitted under the Texas Open Meetings Act, Texas Government Code Chapter 551.

4. **NOTICE REGARDING BUDGET.** The Hospital District's Fiscal Year 2027 Budget ("FY27 Budget") has been duly adopted by the Board and approved by the Commissioners Court. The Committee may discuss the FY27 Budget at this meeting. The adopted FY27 Budget and the required taxpayer impact statement for Fiscal Year 2027 are available for public review on the District's official website at: https://www.nchdcc.org.

5. **ANNOUNCEMENT ON DISCLOSURE OF CONFLICTS OF INTEREST.** Any Conflict of Interest, or Appearance of a Conflict of Interest, relating to items on this agenda shall be disclosed at this time. Members declaring such conflicts shall abstain from voting and are requested to refrain from discussion on the affected items. Any conflicts identified

later in the meeting must be disclosed immediately upon discovery.

6. **PUBLIC COMMENT** - This section provides the public an opportunity to address the Committee on any matter within its authority. In-person attendees wishing to comment on any agenda item or other subject within the Committee's jurisdiction must complete and submit the "Agenda Item Request to Speak" form, available at the entrance of the meeting room, no later than five (5) minutes before the meeting begins. Remote attendees participating by audio or video conference must verbally notify the presiding officer of their desire to comment when public comment is called. Comments are limited to three (3) minutes per speaker, except that commenters using a translator are allowed up to six (6) minutes. The presiding officer may, in his or her discretion, limit the number of speakers and/or the time allotted to each. By law, the Committee may act only on matters specifically listed on the agenda. Items raised that are not on the agenda will be referred to District staff for review, as appropriate. Materials submitted to the Committee during public comment will not be returned. Commenters intending to provide documents must bring at least ten (10) copies for distribution, clearly marked with the commenter's name and, if applicable, the relevant agenda item number.

7. **CONSENT AGENDA** - The Consent Agenda includes items that are routine, administrative in nature, and not requiring separate discussion. Any item that a Committee member requests to be considered individually shall, at the direction of the presiding officer, be removed from the Consent Agenda and placed on the Regular Agenda for separate discussion at the appropriate time. All remaining Consent Agenda items will be considered and voted upon together in a single vote:

A. Approve Finance Committee Regular Meeting minutes of October 27, 2026.

B. Discuss and recommend receipt of summary payment information on Nueces County health care disbursements for Fiscal Year 2026 year-to-date:

1. Salaries, benefits, and supplies at/for City of Corpus Christi/Nueces County Public Health District;

2. Emergency medical services provided in unincorporated areas of Nueces County;

3. Supplemental and jail diversion program funding for Nueces Center for Mental Health and Intellectual Disabilities;

4. Medical services provided at County correctional facilities:
   a. Nueces County Jail; and
   b. Nueces County Juvenile Detention Center;

5. Funding for alcohol and drug abuse treatment programs:

a. Cenikor (Charlie's Place); and
b. Council on Alcohol and Drug Abuse;

6. Funding for diabetes prevention and supporting programs; and

7. Public health grants.

C. Discuss and recommend receipt of imputed claims summaries on medical and hospital care furnished to the Nueces Aid Program population, prepared pursuant to the CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement, for Fiscal Year 2027 year-to-date.

D. Discuss and recommend receipt of Fiscal Year 2027 year-to-date Specified Annual Percentage-related revenue reports; revenue receipts pursuant to CHRISTUS Spohn Health System Corporation Amended and Restated Membership Agreement, Section 5.03.

E. Discuss and recommend receipt of Fiscal Year 2027 year-to-date statement detailing amounts deposited into and/or withdrawn from the Opioid Settlement Fund, including receipts from the Opioid Abatement Fund Council through the Texas Comptroller of Public Accounts in accordance with Texas Government Code §403.508(a)(2), and disbursements made solely for the remediation of opioid-related harms pursuant to 34 Texas Administrative Code §16.222.

F. Discuss and recommend receipt of statement of amounts deposited to and/or withdrawn from Local Provider Participation Fund for Fiscal Year 2027 year-to-date; deposits and withdrawals pursuant to Board of Managers Order authorizing participation in a health care provider participation program pursuant to Texas Health and Safety Code, Chapter 298C, as amended.

G. Discuss and recommend receipt of summary reports of cumulative actual intergovernmental transfers (IGTs) made in support of local and other healthcare providers participating in Medicaid directed, and supplemental payment programs sponsored by the Texas Health and Human Services Commission (HHSC), and receive estimates of provider payments resulting from the IGTs:

1. Directed Payment Programs - IGTs for HHSC's Medicaid managed care organization payments to healthcare providers that support overall Medicaid program goals and objectives:
   a. Aligning Technology by Linking Interoperable Systems for Client Health Outcomes Program (ATLIS);
   b. Comprehensive Hospital Increase Reimbursement Program (CHIRP);
   c. Network Access Improvement Program (NAIP); and

d. Texas Incentives for Physicians and Professional Services (TIPPS); and

2. Supplemental Payment Programs - IGTs for HHSC Medicaid payments made to hospitals, separate from and in addition to base payments, for achieving certain goals or to support health care providers that see significant numbers of uninsured or persons without much money:

a. Disproportionate Share Hospital (DSH);
b. Graduate Medical Education (GME);
c. Hospital Augmented Reimbursement Program (HARP); and
d. Hospital Uncompensated Care (UC).

H. Nueces Aid Enrollment:

1. Discuss and recommend receipt of reports relating to Nueces Aid Program enrollment for month-ended October 31, 2026:

a. Referral Sources;
b. Total Persons and Households Enrolled;
c. Enrollment Summary;
d. Denials;
e. Application Processing Summary; and
f. Enrollment by Zip Code.

8. **REGULAR AGENDA** - The Regular Agenda consists of items that are non-routine, not administrative in nature, or otherwise require separate consideration. Each item listed under the Regular Agenda shall be addressed individually and, if action is required, voted upon separately.

A. Annual Audit:

1. Update on annual audit of the District's financial statements for the fiscal year ended September 30, 2026. ***(INFORMATION)***

B. Administrator's Briefing:

1. Next scheduled regular Committee meeting (meeting's date, time, and location are subject to change):

a. Finance Committee: Tuesday, December 15, 2026, 11:30 AM in NCHD Board of Managers Meeting Room at 555 North Carancahua Street, Room 950-A, Corpus Christi, Texas 78401.

9. **ADJOURN**

10. Public Notice Posting Receipt.