

Ten Essential Central Health Facts From UT-Dell Medical School Documents

- 1. Central Health has given Dell Medical \$105 million** in Travis County taxpayer funds the last 3 years. It intends to give them \$35 million this fiscal year and every year into perpetuity.
- 2. CH and Dell's affiliation agreement has no substantive medical utilization and performance record requirements**, therefore the public has little idea how its taxes have been spent. See UT Austin, CH and CCC Affiliation Agreement (July 2014), pp. 31-35
- 3. From Dell payroll records, since there are little utilization records, we know that much of CH funds go to Dell services unrelated to health care. CH tax dollars fund 83.6% of Dell's salaries and compensation, even though it has many missions unrelated to health care for the poor. These CH's funds pay for almost all Dell's of business affairs, development, communications, admissions, Dean's Office, and administrative personnel at the medical school.** See charts attached as Exhibits 1, 2 and 3. Lewis, Report 2/8/2017.
- 4. Dell own financial records indicate that Dell uses CH tax dollars as a slush fund to pay for all compensation not paid for by other sources**, whether the services paid for relate to health care or not: "Assumes all compensation will be charged to Central Health less amounts received for Clinical and Research activity." Exhibit 4.
- 5. After extensive Public Information Act requests, Dell can document +publicly that it has spent or has projected to spend on health care only \$ 2.9 million.** Exhibit 5: Orthopedic Pilot Project (\$1,571,470); Exhibit 6: Urology Expansion (\$387,951); Exhibit 7: Premature Births (\$906,818, for 2016-2018). Dell also has a Women's Health Project but has produced no documents as to its projected or actual costs.
- 6. Going forward in the next 2 fiscal years, Dell intends to spend \$94.2 million of CH funds on undefined "Care Transformation/Care Delivery."** Of this total \$32. 6 million is allocated to "Community Health Infrastructure Development", and \$61.6 million to "Start-up Costs to launch Clinical Services." Exhibit 8.
- 7. This \$94.2 million will go to "transform the delivery of care to the community," not just poor people.** This is clear from Dell's many statements and its \$15.2 million in transformative health care modeling and re-design projects, which are not limited to services to the poor. Exhibit 9.
- 8. CH is funding Dell without any known allocation in the next 2-years health care modeling, transformation, and health care services for non-poor.** In short, CH is funding infrastructure disproportionately to the percentage used by CH's eligible population, the poor. It is subsidizing Dell.
- 9. Dell apparently intends to own the transformative modeling, infrastructure, and other proprietary intellectual property funded by CH taxpayers.** There is no known agreement providing CH ownership rights. Dell aims to license and sell this proprietary without any financial benefit to taxpayers.
- 10. Dell also intends to charge CH patients 1.3 times the cost of providing the direct services.** Exhibit 10. This is after Dell takes ownership of the proprietary modeling and hasg CH pay its disproportionate share for clinical transformation and start-up costs.