

COVER PAGE FOR GRANT PROPOSAL



**The Susan G. Komen
Breast Cancer Foundation
North Texas Affiliate**

**Request for Funding
for Breast Health and/or Breast Cancer Project**

PROJECT DIRECTOR & TITLE Belsy Koruthu, RNC, NP

INSTITUTE Collin County Health Care Services

ADDRESS 825 N. McDonald

McKinney, TX 75069

PHONE (972) 548-5503

FAX (972) 548-5550

EMAIL pmorris@co.collin.tx.us

TITLE OF PROJECT Breast Screening Program

TOTAL AMOUNT REQUESTED \$111,753.00

GRANT PERIOD 04/01/2010 to 03/31/2011

SIGNATURE & TITLE OF
APPROVING PERSONNEL (OTHER THAN
PROGRAM DIRECTOR)

DATE 12/15/09

NAME & TITLE OF APPROVING
INSTITUTIONAL PERSONNEL (TYPED) Judge Keith Self

PLEASE CHECK TYPE OF APPLICATION: EDUCATION SCREENING
 TREATMENT CRAFT

**Applications Must Be Received on or before December 18,
2009, 5:00 pm (Photocopies of this form are acceptable)**

ABSTRACT PAGE

PROJECT DIRECTOR Belsy Koruthu, RNC, NP

ORGANIZATION/INSTITUTION Collin County Health Care Services

BCCCP PROVIDER? YES NO

TARGET POPULATION Collin County

Abstract

In the space below, please provide a short abstract, not to exceed 200 words, written in lay terms for release to the general public should this application be chosen for funding.

COLLIN COUNTY HEALTH CARE SERVICES WILL OFFER A BREAST SCREENING PROGRAM FOR LOW-INCOME, UNINSURED AND AT-RISK WOMEN AND MEN. THIS PROGRAM IS FREE AND IT WILL SERVE COLLIN COUNTY RESIDENTS ONLY. WOMEN AGE 50 AND ABOVE WHO FALL WITHIN THE CRITERIA STATED ABOVE CAN UTILIZE THE SERVICES.

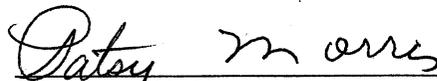
THE PROGRAM HAS SERVED THOUSANDS OF CLIENTS SINCE 2001. NOT ONLY DOES IT OFFER FREE BREAST EXAMS AND MAMMOGRAMS, BUT EACH PERSON RECEIVES EDUCATION ABOUT BREAST CANCER. THE PROJECT DIRECTOR, ALONG WITH HER CLINICAL ASSISTANT, ATTENDS HEALTH FAIRS IN THE COMMUNITY AS WELL AS ATTENDS MINORITY CHURCHES TO DISTRIBUTE PAMPHLETS AND BROCHURES. THE NEED FOR THIS SERVICE CONTINUES TO GROW AS POVERTY LEVELS CONTINUE TO INCREASE.

THE PROGRAM IS FUNDED PRIMARILY BY THE NORTH TEXAS AFFILIATE OF THE SUSAN G. KOMEN FOR THE CURE. THE PROJECT DIRECTOR WILL DOCUMENT EACH ACTIVITY THAT IS PERFORMED BY STAFF IN THIS PROGRAM, AND THIS INFORMATION WILL BE SUBMITTED AS PART OF THE SIX MONTH AND FINAL REPORTS.

Permission to publish:

Permission is hereby granted to the Susan G. Komen Breast Cancer Foundation, Inc. to publish the above abstract should this application be selected for funding.

SIGNATURE


November 23, 2009

DATE

NAME (TYPED)

Patsy Morris

PHONE NUMBER

972-548-5503



COLLIN COUNTY

Health Care Services
 825 N. McDonald Street
 Suite 130
 McKinney, Texas 75069
www.collincountytx.gov
 972 548-5532/fax 972 548-5550

NORTH TEXAS AFFILIATE OF THE SUSAN G. KOMEN BREAST CANCER FOUNDATION

BACKGROUND

On September 20, 1939, Commissioners Court established the first city/county/state health department. In September 1985 the entity became one which is now known as Collin County Health Care Services.

Collin County's Health Care mission is to protect and promote the health of the people of Collin County. This is done through various programs that are offered. For the past 2-3 years, the number of clients in all clinics has increased drastically. The clinic statistics for FY2009 are listed below.

Services	# Clients Served	Office V	Home Visits	Shots Admin
Immunizations	15,997	-----	-----	28,568
TB	2152 dup.	2152	4,185	
WIC Program	11,900	4,000	-----	-----
Indigent Program	304 Undup	2878 PrimaCare Visits	-----	-----
STD Clinic	1,093	1,093	-----	-----
Hepatitis B Prev. Program	1,030 Babies, Mothers & Contacts	-----	-----	-----
Substance Abuse	2,990	2,990	-----	-----
Epi & Surveillance	2,576 Reports 1,327 Confirmed & Probable	-----	-----	-----
Employee Health	2,261	2,261	-----	-----

Komen	322	279 (1 st six Months + 43 Follow-up	279	-----
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Health Care Services recently received a Best Practice Award from NACO, (National Association of Counties). It was for the county's Indigent Health Care Program, for drastically reducing money spent for Emergency room visits by contracting with a private clinic to provide routine medical care to qualified, indigent residents at a fraction of the costs of past years. The program also freed up money for hospitalizations and treatment of serious medical illnesses, while providing extended office hours and locations for regular doctor visits through the private provider. This has always been one of the county's goals – their innovative, creative and efficient use of tax dollars to carry out local government programs and functions. Other county's goals are related to quality assurance and increased access to care.

In fulfilling the county's mission, to protect and promote the health of the people of Collin County, Health Care Services in 2001 applied for a grant through Susan G. Komen in an attempt to make a difference for the women who needed a place to go for mammograms.

The program, once it was publicized and because it was so desperately needed, has exceeded its expectations. Before Collin County's breast screening program, no providers offered free mammograms for impoverished Collin County residents. The number of screenings has grown significantly over the last three years due to the high rate of unemployment and lack of health insurance. Listed below are some statistics for the program's activities since inception.

Year	Brochures	Ed. Provided	# Breast Exams	# Screenings
2001	300 distributed	96	96	86
2002	500 distributed	250	101	98
2003	1500 distributed	250	230	216
2004	1700 distributed	265	220	214
2005/06	2000 distributed	298	207	207
2006/07	1400 distributed	442	255	255
2007/08	1300 distributed	375	325	325
2008/09	1100	406	365+ 41 Follow-up	326

	distributed			
2009/10	1000 distributed	322	279 (1 st six months) + 43 follow-up	279

STATEMENT OF NEED/PROBLEM

Population to be served

Collin County has outpaced Texas and the nation in population growth over the last few years. It continues to be one of the fastest growing counties in the United States. Below are some statistics taken from U. S. Census for 1990 and 2000 and American Community Survey Estimates for 2006 and 2008.

	1990	2000	2006	2008*	%Change 1990- 2008	%Change 2006- 2008
Collin County	264,036	491,675	698,851	762,010	188.6%	9.0%
Texas	16,986,510	20,851,820	23,507,783	24,326,974	43.2%	3.5%

Current growth patterns suggest that our state and region will continue to experience significant population increases. As the population increases across the region, the area becomes increasingly diverse.

The Asian population showed the most growth in Collin County between 1990 and 2003. During this time period, the Asian population increased 600%. The Hispanic population increased by 280% and the African American population increased by 231%. In 2003 one out of every six Collin County residents were foreign born.

If current trends continue, Hispanics will become the largest single demographic group in Collin County by the year 2040.

The rising cost of insurance has placed health care beyond the reach of many low and moderate-income families. The high number and percent of people without health insurance coverage is of critical concern.

GOALS AND OBJECTIVES /TIMELINES & EVALUATION

One of Collin County’s goals is to reduce breast cancer mortality among women age 50+ in Collin County. A second goal is to detect breast cancer in early stage before it starts to cause symptoms. See chart below.

Goals	Objectives	Activities	Timelines	Evaluation Methods and Techniques
Goal 1 Reduce breast cancer mortality among women age 40+ in Collin County	Objective 1 Clinic Appointments	Provide one-on-one education to 90% women 50+ who have appointments in the Breast Screening Clinic	Schedule appointments daily M-F, 7-4	Project Director will document activities on daily basis
		Provide free breast exams to 425 women age 50+	Complete by 3/31/2011	Project Director will document on a daily basis the number of Komen activities
		Offer free mammograms to 425 women age 50+	Complete by 3/31/2011	Project Director will document information on the women referred for mammogram
		Implement a client reminder system to call women 50+ who are clients of CCHCS to remind them of their mammogram appt.	Mail reminder cards monthly to those women who are eligible for their annual appointments	Project Director will document the number of cards mailed each month.
Goal 2 Find breast cancer in early stage before it starts to cause symptoms	Case management	Refer clients who have an abnormal mammogram to Bridge – Follow-up with the appointment	Send 2 certified letters to client regarding information about the Bridge appointment	Project Director will document each referral and all activities related to each one and maintain copies of correspondence

ACTIVITIES AND TIMELINE

See chart above.

COLLABORATION

Collin County Health Care refers all clients to Presbyterian Hospital of Allen for a mammogram. The hospital has been a partner for a number of years, and they have offered special prices for screening mammograms, diagnostic mammograms and ultrasounds. The hospital has made it possible Health Care to serve more clients each year in an effort to screen for early breast cancer.

Bridge Breast Center is also a very important partner with CCHCS. Bridge offers treatment for those women who are diagnosed with cancer.

EVALUATION PLAN

The Project Director will document each activity that is accomplished through the program. All information will be recorded and submitted in six months and final reports. It is a known fact that fewer women in the United States are dying from breast cancer, and because there have been many women in Collin County's program who have been diagnosed with cancer, the results have been successful through early detection and treatment.

The outcomes for the activities listed above will lead to the following changes in action or behavior and health improvement as a whole.

- Women will have breast cancer screenings
- Women will have follow-up care for breast abnormalities
- It will increase awareness of screening services
- It will increase awareness of breast cancer signs and symptoms
- Women will understand the benefits of screening

ORGANIZATIONAL CAPACITY

Collin County Health Care Services has completed nine years of administering a breast screening program. The staff are devoted, well trained, and very compassionate about the fight against breast cancer. Since the program is so well established and with the increase in unemployment and with the continued immigration of persons to the community, the demand for the services will only escalate.

Project Director

The Health Department's nurse practitioner, Betsy Koruthu, RNC, NP, has served as the Project Director for the last three years. Betsy is an extremely compassionate person who

enjoys working with the low-income, uninsured, under-insured women and men as well in the different ethnicity groups.

Belsy has over 25 years of experience as a licensed RN and 10 years as a Women's Health Care Nurse Practitioner, both in hospital and private collaborative practice. She has a good working relationship with the staff at the Women's Diagnostic Center of the hospital where we refer our clients for mammograms. Belsy gives 100%+ dedication, attentiveness and enthusiasm to all the clients she sees through the program. No complaints exist regarding her professionalism or work ethics. She remains very excited about the program. Each year she has exceeded the original goal and thus far, she has completed (1st six months) a total of 279 exams and referred for mammograms. Forty one of those were six months follow-up which were not included in our six months report. The follow-ups were due to radiology reports of abnormalities. Our original goal was to complete 400 mammograms for the year (FY09-10). We will exceed that goal; however, we may need to stop the program early if we deplete the funds before the end of the grant period.

Belsy spends approximately 60-70% of her time for clients in this program. Each breast exam visit takes 25-30 minutes. The visit includes education/teaching, an exam, and scheduling an appointment before the client leaves the office.

Belsy is involved in Health Fairs in the community. She enjoys teaching and demonstrating the correct techniques by using the breast models. She is very devoted to the fight against breast cancer.

SUSTAINABILITY

Collin County Health Care supports the program with its in-kind contributions. The salaries and fringes for staff time allocated to enhance/promote Komen activities are Project Director, Secretary, and Coordinator. There are other personnel in the department who support the program as well. The salaries and fringes are as follows:

- The Secretary handles the screening for eligibility and sets up the appointment. She spends approximately 10% (\$4,104) and it is not allocated to Komen budget.
- The Project Director's salary and fringes are also in-kind. She is approximately 75% allocated to Komen activities for a total of \$89,358.00.
- The Health Care Coordinator writes the grant, submits reports, screens bills and audits them for payment. She spends approximately 5% (\$4,518) on Komen activities. This is also an in-kind contribution.

BUDGET JUSTIFICATION/SALARIES

CNA

Dora Fajardo has worked for the county approximately 19 years as a certified medical assistant. She works in the Komen clinic with Belsy approximately 80% of the time. The nurse assistant supports the Project Director getting the patient's history, reports from hospitals and radiology, setting up appointment with hospital for mammograms, contacting Bridge, etc. She spends approximately 80% of her time on Komen activities. Health Care will allocate 40 % to the Komen Budget (\$17,822 + fringes \$4,990). The remainder 40% will be inkind (17,822 + fringes \$4,990).

Fringes

The county contributes twenty eight percent (28%) of salary for fringe benefits.

Consultant Costs

None

Supplies

Supplies budgeted for the breast health program include the list below. All supplies will be used as handouts at the Brunch table and the Race for the Cure. Also, they will be available for clients coming into the office for their appointments.

Literature Pamphlet Rack	\$235.00
Self-Exam Breast Cards – Spanish/English	160.00
How to Perform Breast Self Exam Chart	17.00
Embroidered SGK for Cure Ribbon 400	<u>140.00</u>

Total: 552.00

Equipment

None

Travel

Collin County Health Care estimates that approximately 500 miles for travel expenses will be needed for outreach. The current reimbursement rate for travel is \$.55 for a total of \$275.00.

Patient Care Costs

A total of \$79,000 has been budgeted to cover the cost of outpatient care for mammograms, regular screenings plus diagnostics. The Project Director estimates that she will be able to complete 425 breast exams and mammograms for the intended group of clients.

Other

There are additional costs for radiology reports. An estimate of 425 mammograms @\$80 ea. = \$34,000.00.

ATTACHMENTS

- Information regarding Key Personnel
- Proof of Non-Profit Status
- Proof of Insurance

Media Plan

Collin County's Public Information Officer will send out a Press Release announcing the award. This will be done within 1 week after the award. Also, it will be announced in Commissioner's Court the first meeting after the Brunch presentation.



North Texas Affiliate

P.O. Box 261730, Plano, Texas 75026-1730

972-378-4808, Helpline 1-877 GO KOMEN

www.komennorthtexas.org

Budget Template

	Requested from Komen	From Other Sources	Total Required
Salaries	17,822.00	76,547.00	\$94,369.00
Fringe (Benefits, Taxes)	4,990.00	21,433.00	\$26,423.00
Consultant Costs	0.00	0.00	\$0.00
Supplies	552.00	0.00	\$552.00
Equipment			
(not to exceed \$5,000)	0.00	0.00	\$0.00
Travel	275.00		\$275.00
Patient Care Costs			
Screening	39,000.00	0.00	\$39,000.00
Diagnostics	40,000.00	0.00	\$40,000.00
Treatment	0.00	0.00	\$0.00
Sub-contracts	0.00	0.00	\$0.00
Other (itemize below)			
Radiology	34,000.00	0.00	\$34,000.00
			\$0.00
			\$0.00
			\$0.00
Subtotal - Direct Costs	102,639.00	97,980.00	\$200,619.00
Indirect Costs			
(not to exceed 15% of direct costs)	9,114.00		\$9,114.00
Total	\$111,753.00	97,980.00	\$209,733.00

BIOSKETCH FORM

Koruthu, Belsy, RNC, NP
 PROJECT DIRECTOR *(Last Name, First, Middle)*

SEE ATTACHED

Biographical Information			
Information should be submitted for the project director and other personnel included in budget request. Please use a separate form for each person.			
NAME BELSY KORUTHU		TITLE RNC, NP	
EDUCATION <i>(Begin with baccalaureate or initial professional education, such as nursing, include postdoctoral training)</i>			
INSTITUTION <i>(Indicate Location)</i>	DEGREE	YEAR CONFERRED	FIELD OF STUDY
<p>PROFESSIONAL EXPERIENCE: Please list, in chronological order, concluding with present position, previous employment, experience and honors. List, in chronological order, the titles, authors and complete references to all publications during the past three years and to representative earlier publications pertinent to this application.</p> <p>Do Not Exceed Two Pages</p>			

Belsy Koruthu RNC, NP

Objective

Women's Health Care Nurse Practitioner

25 years of experience as a licensed RN and 10 years as a Women's Health Care Nurse Practitioner, both in hospital and private collaborative practice, mostly in OB-GYN settings with additional experience in pediatrics, medical, surgical, telemetry and infertility surgery unit.

Recognized for initiative, self-direction, and ability to accurately perform multiple tasks. Deeply committed to exceptional and compassionate patient care.

Work experience

2006 Sept. to present *Collin County Health Services* McKinney, Texas

Women's Healthcare Nurse Practitioner

- Perform Well Woman exams for employees
- Perform breast exams and coordinate care for Komen grant patients
- Manage STD clinic and implement patient treatment according to CDC guidelines

2005 July to 2006 Sept. *Presbyterian Hospital of Allen* Allen, Texas

Staff RN/Preceptor, Education

1998 to 2005 June *North Texas OB/GYN Associates* Plano, Texas
(associated with Dr. Kathleen Varadi)

Women's Health Care Nurse Practitioner

- Obtains complete medical history data from patients. Performs physical examination in Obstetrics, Gynecology and Family Planning.
- Implements client management and triage based on nursing process, following written policies, standing orders, and protocols.
- Provides medical/psychosocial counseling regarding prenatal, postpartum care, family planning methods, medications, self-breast exam, mammograms, health maintenance, and STDs.
- Follow-up on clients with abnormal laboratory findings and sonograms.
- Document problems, referrals, and outcome.
- See doctor's patients in addition to regular schedule when she is called for emergencies
- Acted as a clinical resource for other nurses and medical personnel.
- Participated in clinical trials and research

1996 to 1998 *Associated with Dr. Walter Evans II MD* Dallas, Texas

Women's Health Care Nurse Practitioner and Clinical Supervisor

- (same job duties as above)
- Acted as a clinical instructor and supervisor for medical assistants and nurses. OSHA coordinator and maintained its records

1994 to 1996 *U.T.S.W. Medical Center at Dallas (@ Lake June Clinic)*
Dallas, Texas

Women's Health Care Nurse Practitioner

- (same job duties as above)
- Acted as clinical instructor and preceptor for graduate NP and PA students
- Worked in the STD Fast Track Clinic in Dallas as NP

1986 to 1994 *Presbyterian Hospital of Dallas* Dallas, Texas

Pediatric Nurse

- Worked as charge nurse with infants and children. Responsible for patient assignments, admissions, primary care, teaching, and discharge planning. Skilled in starting peripheral and midline IV's.
- Resource nurse for night shift
- Pediatric Journal club founder & member
- Peer Review Committee member
- Staff Development Committee member
- CPR Instructor 1991-1995
- PACLS certified 1990-1994

1985 to 1986

GYN Surgery & High Risk OB

- Responsible for patient assignments, admissions, primary care, and discharge planning.
- QA coordinator
- IV's, blood transfusions, and other fluid maintenance therapy

Education

1994 to 1996
University of Texas Southwestern Medical Center Dallas, Texas

Women's Health Care Advanced Nurse Practitioner

1977 to 1980
L.T. College of Nursing- SNTD Women's University Bombay, India
Bachelors in Nursing

Accreditations

Texas RN License # 505872 Exp: 12/31/07
Women's Health Care Advanced Practice Nurse ID # 505872
Prescriptive Authority Reg. # 00778
NCC (NAACOG) Certification- Exp. 12/31/07
IUD Insertion Certification- December 1995
ACLS Certification- November 2007
Chemotherapy Administration Certification- May 2005

Biographical Information

Information should be submitted for the project director and other personnel included in budget request. Please use a separate form for each person.

NAME: Fajardo, Dora

TITLE: CNA (Certified Nurse Aide)

EDUCATION

(Begin with baccalaureate or initial professional education, such as nursing, include postdoctoral training)

INSTITUTION (Indicate Location)	DEGREE	YEAR CONFERRED	FIELD OF STUDY
National Institute (El Salvador, C. America)	High School	1964	EDUCATION
National Nursing School (El Salvador, C. America)	Nursing	1968	PROFESSIONAL
MISD-Adult Education	GED	1983	EDUCATION
Texas Dept. of Human Svcs.	CNA Certification	1985	HEALTH
West Park Med. Ctr.	MHT Certification	1986	HEALTH
West Park Med. Ctr.	Phlebotomy Certification	1986	HEALTH

PROFESSIONAL EXPERIENCE: Please list, in chronological order, concluding with present position, previous employment, experience and honors. List, in chronological order, the titles, authors and complete references to all publications during the past three years and to representative earlier publications pertinent to this application.

Do Not Exceed Two Pages

1. West Park & North Texas Medical Center = January, 1985- January, 1993
 -CNA, MHT, Phlebotomist working in Med. & Surgical floor, Psych. floor, and Eating Disorder unit.
2. Collin County Health Department = February, 1990- present
 -Assisting doctors and nurses in all clinics.
3. Optima Home Health Company = February, 1994- February, 1996
 -Home Health Aide

OCT 21 1983

Clerk R.
Corporations Section

ARTICLES OF INCORPORATION
OF
COLLIN COUNTY HEALTH CARE FOUNDATION

We, the undersigned natural persons, at least two of whom are citizens of the State of Texas and who are of the age of eighteen years or more, acting as incorporators of a corporation under the Texas Non-Profit Corporation Act, do hereby adopt the following Articles of Incorporation for such corporation:

ARTICLE ONE

NAME

The name of the corporation is Collin County Health Care Foundation.

ARTICLE TWO

NONPROFIT CORPORATION

The corporation is a nonprofit corporation.

ARTICLE THREE

DURATION

The period of its duration is perpetual.

ARTICLE FOUR

PURPOSE

(1) The corporation is organized exclusively for the benefit of Collin County, Texas, to receive and maintain a fund or funds of real or personal property, or both, and, subject to the limitations set forth in this article, to assist Collin County in providing for indigent care and for the health care of its citizens and for other public, educational and charitable purposes as qualify the corporation as an exempt organization under Section 501(c)(3) of the Internal Revenue Code of 1954, as now in force or afterwards amended.

(2) The Board of Trustees may receive and accept property, whether real, personal, or mixed, by way of gift, bequest or devise, from any person, firm, trust, corporation, or governmental unit, to be held, administered, and disposed of in accordance with and pursuant to the provisions of these articles; but no gift, bequest or devise of any such property shall be received or accepted if it is conditioned or limited in such manner as would require disposition of the income or its principal to any person or organization other than "exempt organizations" for other than "charitable purposes" within the meaning of those terms as used in Section 501(c)(3) of the Internal Revenue Code of 1954, as now in force or afterwards amended, or as would in the opinion of the Board of Trustees, jeopardize the federal income tax exemption of this corporation pursuant to Section 501(c)(3) of the Internal Revenue Code of 1954, as now in force or afterwards amended.

(3) The principal and income of all property received and accepted by the Board of Trustees to be administered under these articles may be held and invested for the corporation in such manner as the Board shall determine, and the Board may make payments or distributions from income or principal, or both, to or for the use or benefit of Collin County, Texas, in such manner as the Board shall determine to be proper under these articles or in such manner as the Board is directed by the Collin County Commissioners' Court.

(4) No part of the net earnings of the corporation shall inure to the benefit of or be distributable to its trustees or officers or other private persons, except that the corporation may pay reasonable compensation for services rendered and may make

payments and distributions in furtherance of the purposes set forth in paragraph 1 hereof. No substantial part of the activities of the corporation shall be the carrying on of propazanda, or otherwise attempting to influence legislation, and the corporation shall not participate in or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office.

(5) Notwithstanding any other provision of these articles, the corporation shall not carry on any activities or make any payments or distributions not permitted to be carried on or made (a) by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1954 and its Regulations, as now in force or afterwards amended, or (b) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code of 1954, as now in force or afterwards amended.

(6) Upon the dissolution of the Corporation, the Board of Trustees shall, after paying or making provision for the payment of all of the liabilities of the corporation, distribute all the assets of the corporation to Collin County, Texas, to be used exclusively for public and charitable purposes within the meaning of those terms as used in Section 501(c)(3) of the Internal Revenue Code and its Regulations, as now in force or afterwards amended.

ARTICLE FIVE

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is Collin County Courthouse, 210 South McDonald, McKinney, Texas, and the name of its initial registered agent at such address is William J. Roberts.

ARTICLE SIX

BOARD OF TRUSTEES

The number of trustees constituting the initial Board of Trustees of the corporation is five, and the names and addresses of the persons who are to serve as the initial trustees are:

<u>NAME</u>	<u>ADDRESS</u>
William J. Roberts	210 South McDonald, McKinney, Texas
Howard Thornton	210 South McDonald, McKinney, Texas
Jerry Hoagland	210 South McDonald, McKinney, Texas
Wallace Webb	210 South McDonald, McKinney, Texas
Richard E. May	210 South McDonald, McKinney, Texas

The trustees shall consist of the membership of the Commissioners' Court of Collin County, Texas. Trustees shall serve a term concurrent with that which they serve as a member of the Commissioners' Court of Collin County. A vacancy on the Board of Trustees shall be filled only upon the qualification of a successor member of the Commissioners' Court of Collin County.

ARTICLE SEVEN

MEMBERS

This corporation has no members.

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/23/09

PRODUCER Wells Fargo Ins Services USA, Inc. 5956 Sherry Lane Suite 2000 Dallas, TX 75225-6531 214 365-9150	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.												
INSURED Collin County Government 2300 Bloomdale Road, Suite 4117 McKinney, TX 75071	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">INSURERS AFFORDING COVERAGE</td> <td style="width:30%;">NAIC #</td> </tr> <tr> <td>INSURER A: OneBeacon America Ins Co</td> <td>20621</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: OneBeacon America Ins Co	20621	INSURER B:		INSURER C:		INSURER D:		INSURER E:	
INSURERS AFFORDING COVERAGE	NAIC #												
INSURER A: OneBeacon America Ins Co	20621												
INSURER B:													
INSURER C:													
INSURER D:													
INSURER E:													

COVERAGES

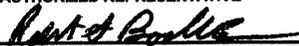
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	X	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR SIR: \$50,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	791000239	10/01/09	10/01/10	EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$Excluded PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$1,000,000 PRODUCTS - COMP/OP AGG \$1,000,000 Cov A BI/PD 1,000,000
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
Komen Affiliate is listed as Additional Insured where required by written contract.

CERTIFICATE HOLDER

CANCELLATION

Collin County Health Care Services 825 N. McDonald Mc Kinney, TX 75069	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
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IMPORTANT

If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

1TPLX77F

DATE (MM/DD/YYYY)

11/24/2009

PRODUCER
 MCGRIFF, SEIBELS & WILLIAMS OF TEXAS, INC.
 5080 Spectrum Dr., Suite 900E
 Addison, TX 75001
 (469) 232-2100

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

NAIC #

INSURED
 Collin County
 2300 Bloomdale Road, Suite 4117
 McKinney, TX 75071
 USA

INSURER A: Star Insurance Company
 INSURER B:
 INSURER C:
 INSURER D:
 INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> SIR - \$1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	CP0513593	10/01/2009	10/01/2010	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 All Limits of Liability are subject to a Single Policy Aggregate of \$4,000,000.
 The Certificate Holder is included as an Additional Insured as required by written contract subject to policy terms, conditions and exclusions.

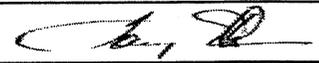
CERTIFICATE HOLDER

Koman Affiliate
 825 N. McDonald Street
 McKinney, TX 75069

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



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