



Travis County Commissioners Court Agenda Request

Meeting Date: January 30, 2013

Prepared By/Phone Number: Juanita Jackson 854-4467

Elected/Appointed Official/Dept. Head: Sherri E. Fleming,
County Executive for Health and Human Services and Veterans Service

Commissioners Court Sponsor: Judge Samuel T. Biscoe

AGENDA LANGUAGE:

Receive Update from Central Health on the Community Care Collaborative Overview.

BACKGROUND/SUMMARY OF REQUEST AND ATTACHMENTS:

(See attached PowerPoint)

STAFF RECOMMENDATIONS:

ISSUES AND OPPORTUNITIES:

(See attached PowerPoint)

FISCAL IMPACT AND SOURCE OF FUNDING:

None.

REQUIRED AUTHORIZATIONS:

Mary Etta Gerhardt, Assistant County Attorney
Deece Eckstein, Coordinator of Intergovernmental Relations

AGENDA REQUEST DEADLINE: All agenda requests and supporting materials must be submitted as a pdf to Cheryl Aker in the County Judge's office, Cheryl.Aker@co.travis.tx.us by Tuesdays at 5:00 p.m. for the next week's meeting.



CENTRAL HEALTH

Community Care Collaborative Overview

Transforming the local Healthcare System

Work Session Presentation to the Travis County Commissioners Court

Patricia A. Young Brown, Central Health, President & CEO

Greg Hartman, Seton Medical Center Austin & UMCB, President & CEO

David Evans, ATCIC, Executive Director

Thursday, January 31, 2013



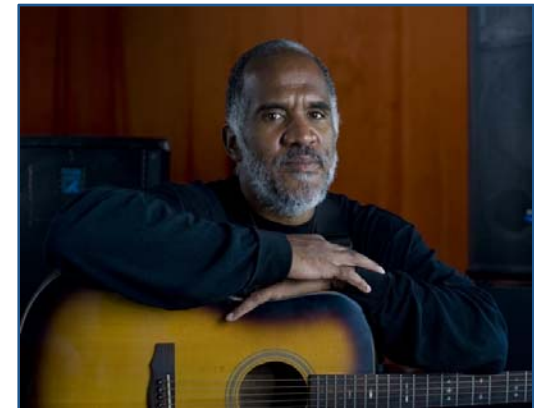
The Uninsured

More than 200,000 residents in Travis County are uninsured.



Approximately 25% of residents ages 18-64 are uninsured.

Approximately 21.3% of residents ages 0-65 are uninsured.





The Problems

1. The delivery system is fragmented and overwhelmed.
2. The public safety net hospital is aging and outmoded.
3. A severe shortage of doctors and other providers.



A Broken Model

Our current service delivery model is outdated and inefficient. Taxpayer dollars pay for services provided through a patchwork, fee-for-service system, without much coordination, public accountability or easily accessible performance data.

As healthcare needs and costs have increased, this old model has become economically unsustainable.



Our Innovative Solution

- The **Community Care Collaboration (CCC)** is a multi-institutional, multi-provider system of healthcare envisioned to provide a coordinated continuum of services to a defined patient population.
- It will manage the care of Travis County residents who are uninsured, living at or below 200 percent of the Federal Poverty Level, and who qualify for services.
- In total, approximately **50,000 individuals** will be cared for through the CCC.



The Community Care Collaborative

- The overarching goal of the Community Care Collaborative (CCC) is to provide high quality, cost effective, patient centered care that improves health outcomes through expanded care coordination, expanded types of care, and expanded patient management.
- The CCC is made possible by the Section 1115 Medicaid Transformation Waiver. If the Waiver is not extended beyond the initial 5-year program, the CCC will continue to function as the nexus of healthcare for Travis County.



Transparency and Accountability

- The CCC is designed to increase public information and transparency with regard to how public funds (local and federal) are spent on healthcare for the uninsured and underinsured in Travis County.
- The Central Health Board of Managers will continue to provide the policy direction and fiscal accountability for the local tax dollars that will fund healthcare services.



The New Model

- Under the CCC as proposed, the Board of Managers and the public be able to track costs per contract and by services provided.
- Because of the increased connectivity of the system and better alignment of incentives to prevent hospitalizations and unneeded emergency department care, the reporting information produced by the system will be much more robust and thus better utilized by the partners to coordinate care and manage cost.



1115 Waiver

Main Ideas and Concepts

The waiver is a 5-year program that has two main objectives:

1. Continue to provide supplemental federal funding to Texas hospitals for Medicaid patients (Uncompensated Care).
2. Transform & improve the healthcare delivery system for everyone (Delivery System Reform).

We are now in year two of the waiver, which is a transition year. Most changes to the healthcare delivery system will occur in the second through the fifth years of the waiver.



RHP 7 Overview

Texas – 20 RHPs

- \$17.5 billion in Uncompensated Care (UC) funds available
- \$11.4 billion in Delivery System Reform Incentive Payments (DSRIP) available

RHP 7

- Six counties including Bastrop, Caldwell, Fayette, Hays, Lee, and Travis
- RHP 7 Plan consists of both UC and DSRIP

** Central Health provides the local match (intergovernmental transfer or IGT) for all hospitals in Travis County*



Region 7 RHP Plan DSRIP Totals

Available

- \$689 million in total DSRIP valuation available
 - DY 1 = \$30 million – Preliminary Funding
 - DY2-5 = \$659 million – Performance Based

Actual

- 68 projects
- \$637 million valuation
- 9 Performing providers
 - 5 Hospitals (including CCC)
 - 3 local mental health departments (LMHAs)
 - 1 local health department (LHD)



Community Care Collaborative DSRIP Projects

14 total projects

- **3 “infrastructure” projects**
 - Connection and standardization among safety net providers
- **11 care delivery projects**
 - Expand access to primary, specialty and dental services
 - Access to appropriate care & treatment for chronic conditions
 - Sexual health



CCC DSRIP Project Categories

- Patient Centered Medical Home Model
- Disease Management Registry
- Chronic Disease Management Protocols
- Expanded Hours at Community Clinics
- Mobile Clinics to Underserved Areas
- Dental Care Expansion
- Musculoskeletal Care in Community Clinics
- Gastroenterology Care Expansion
- Pulmonology in Community Clinics
- Integrated Behavioral Health for Diabetics
- Telepsychiatry in Community Clinics
- STD/HIV Screening & Treatment
- Adolescent & Young Adult Pregnancy Prevention
- Community Paramedic Navigator Project



Every DSRIP Project

- Will impact all patients in Safety Net System – CCC, Medicaid, Uninsured, Others
- Has process measures & improvement measures, and outcome measures
- Payment based on performance; outcomes must be achieved



CENTRAL HEALTH

Information, Questions, Comments

Thank you!

www.CentralHealth.net