



Community Care COLLABORATIVE

Board of Directors

Meeting

Tuesday, November 19, 2013

2:00 p.m.

Central Health Administrative Offices

1111 E. Cesar Chavez St.

Austin, Texas 78702

AGENDA*

I. Call to Order and Record of Attendance

II. Public Comments

III. General Business

A. Consent Agenda

All matters listed under the Consent Agenda will be considered by the Board of Directors to be routine and will be enacted by one motion. There will be no separate discussion of these items unless members of the Board request specific items to be moved from the Consent Agenda to the Regular Agenda for discussion prior to the time the Board of Directors votes on the motion to adopt the Consent Agenda.

1. Approve minutes from the October 22, 2013 CCC Board of Directors meeting.

B. Regular Agenda

1. Discuss and take appropriate action on the CCC Strategic Plan.
2. Receive a presentation on Demonstration Year 2 (DY2) CCC Delivery System Reform Incentive Payment (DSRIP) Project reporting.

3. Receive a presentation on the Request for Application process for DY3 CCC DSRIP project implementation contracts.
4. Discuss and take appropriate action on DY3 CCC DSRIP project implementation contract template.
5. Discuss and take appropriate action on an agreement for DSRIP project consulting services for the Community Care Collaborative.

IV. Closed Session

V. Closing

**The Board of Directors may take items in an order that differs from the posted order.*

The Board of Directors may consider any matter posted on the agenda in a closed session if there are issues that require consideration in a closed session and the Board announces that the item will be considered during a closed session.

Consecutive interpretation services from Spanish to English are available during Citizens Communication or when public comment is invited. Please notify the front desk on arrival if services are needed.

Los servicios de interpretación consecutiva del español al inglés están disponibles para la comunicación de los ciudadanos o cuando se invita al público a hacer comentarios. Si necesita estos servicios, al llegar sírvase notificarle al personal de la recepción.



Community Care
COLLABORATIVE

Board of Directors Meeting

November 19, 2013

AGENDA Item III-A-1

Approve minutes from the October 22, 2013
CCC Board of Directors meeting.

NO BACKUP



Community Care
COLLABORATIVE

Board of Directors Meeting

November 19, 2013

AGENDA Item III-B-1

Discuss and take appropriate action on the
CCC Strategic Plan.

Community Care Collaborative Strategic Plan

CCC Board of Directors

NOVEMBER 19, 2013



Agenda



- Strategic Planning Process
- Present remaining CCC Strategic Plan elements for approval:
 - Incorporation of prior feedback
 - Strategies
 - Long Term Measures
- Discussion
- Next Steps

Request to CCC Board



Approval of the CCC Strategic Plan

(with expectation that feedback provided today will be incorporated)

- Elements presented previously – vision, mission, values, foundational elements and goal statements
- Feedback on and approval of strategies
- Feedback on and approval of proposed measures

Strategic Plan Process



• Feedback from CCC Board

- Revised plan to incorporate academic medicine and collaboration

• Strategy Development

- Dissected goal statements to ensure all components addressed
- Strategic plan workgroup developed preliminary strategies
- Vetted with larger group including Central Health/Seton/ATCIC
- Presented to and received approval from Advisory Committee

• Measure Development

- Revised process to focus on long term first
- Reviewed existing established measures and DSRIP measures
- Strategic Plan workgroup developed preliminary set of measures
- Vetted with larger group including Central Health/Seton/ATCIC
- Presented to and received approval from Advisory Committee

Foundational Elements



1. Person-Centered & Population Health Focused
2. Clinical Integration & Care Coordination
3. Continuous Quality Improvement & Innovation
4. Health Information Technology & Continuity of Information
5. Sustainability, Accountability & Collaboration
(Academic Medicine, Clinical Providers, & Support Services)

Strategies



- Questions?
- Feedback on proposed strategies?
- Anything missing?
- Any considerations to inform the development of the activities/work plan to achieve the strategies?

Measures



- Questions?
- Feedback on proposed strategies?
- Anything missing?
- Any considerations to inform the development of the targets, measurement intervals or methods for measurement?

Next Steps



- **11/19:** Present final plan to the CCC Board for approval
- Incorporate feedback from the CCC Board
- **12/11:** Present plan to CH Board for approval
- Develop activities and annual plan of work
- Develop additional measurement information
 - short/mid term process and outcome metrics/measures
 - Establish measurement tools, targets and intervals





Board of Directors Meeting

November 19, 2013

AGENDA Item III-B-2

Receive a presentation on Demonstration Year 2 (DY2)
CCC Delivery System Reform Incentive Payment (DSRIP)
Project reporting.

CCC DSRIP Project	% DY2 Metrics Met	DY2 Value (includes Cat3)	DY2 Submission Notes
Disease Mgmt Registry	100%	\$6,524,086	
Expanded Hours	100%	\$5,076,363	
Mobile Health Clinics	100%	\$1,449,118	
Expanded Dental	100%	\$4,307,992	
Gastroenterology	100%	\$2,672,067	Neither specialty project approved yet; expect notice by Thanksgiving– we understand from HHSC that projects are likely to be approved. We were able to report our activity, and if projects are approved we will be eligible for payment.
Pulmonology	100%	\$3,795,437	
Telepsychiatry	100%	\$3,429,621	
PCMH Model	100%	\$6,013,030	
CDM Protocols	100%	\$5,219,486	Valuation reduction under appeal; expect decision by Thanksgiving. \$5.2m represents lower, CMS-imposed value. Proposed DY2 value: \$6.2m.
IBH for Diabetes	100%	\$3,249,154	
STD Screen & Treat	100%	\$1,108,131	
Pregnancy Planning	100%	\$1,535,651	
Paramedic Navigation	100%	\$2,197,750	
System Navigation	ineligible		Replacement for ortho project, just sent to CMS for review. All DY2 milestones met; if approved in early 2014, these can be reported in April. Value: \$4,296,471
CenteringPregnancy	n/a		No DY2 activities for this three-year project, not yet formally submitted to HHSC (due Dec 20 th).
Total DY2 DSRIP Project Funds, Categories 1-3: \$46,577,886			*CCC also reported its ability – ie, UMCB's – to report on Cat 4 population health measures. \$2,709,579 will be earned with this submission.

CCC DSRIP Project	DY3 Status	DY3 Value (includes Cat3)	DY3 Status Notes
Disease Mgmt Registry		\$6,524,086	
Expanded Hours		\$5,076,363	
Mobile Health Clinics		\$1,449,118	
Expanded Dental		\$4,307,992	
Gastroenterology		\$3,795,437	Not yet approved. Expect to hear by Thanksgiving.
Pulmonology		\$3,429,155	Not yet approved. Expect to hear by Thanksgiving.
Telepsychiatry		\$2,672,068	
PCMH Model		\$6,013,030	
CDM Protocols		\$6,249,001	Final valuation not yet approved. Expect to hear by Thanksgiving.
IBH for Diabetes		\$3,249,155	
STD Screen & Treat		\$1,110,834	
Pregnancy Planning		\$1,539,397	
Paramedic Navigation		\$2,203,112	
System Navigation		\$4,296,471	Not yet approved. Expect to hear by early 2014.
CenteringPregnancy		\$741,825	Not yet submitted: due to HHSC December 8 th .
Total DY3 DSRIP Valuation, Categories 1-3: \$52,657,044		DY3 Category 4 Value: \$ 5,768,409	



Community Care
COLLABORATIVE

Board of Directors Meeting

November 19, 2013

AGENDA Item III-B-3

Receive a presentation on the Request for Application process for DY3 CCC DSRIP project implementation contracts.

Request for Application (RFA) Process, DY3 DSRIP Implementation Contracts

CCC Advisory Committee

NOVEMBER 19 2013



CCC DSRIP RFA Process



Principles of:

- Transparency
- Opportunity

Balanced against:

- Urgency
- Achievement

Activity To Date



- Stakeholder Meeting
 - August 9 2013
 - Reviewed all CCC Projects
 - Over 20 stakeholder groups attended
- Statement of Interest Forms
 - 14 received
 - Clinical and Support service organizations

DY3 Implementation Contracts



Included in RFA

Expanded Hours

Telepsychiatry

Dental

Pulmonology

Integrated Behavioral Health for DM

Released after Approval/ Modification

Mobile Clinics

CenteringPregnancy

Carrying Over DY2 Contractors

Gastroenterology

Pregnancy Prevention

STI testing

Paramedic Navigation

Incorporated into all Contracts

Chronic Disease Protocols

PCMH Implementation

Disease Management Registry

IDS Navigation

RFA Document



- Outlines philosophy of CCC and DSRIP Goals
- Pay for:
 - Infrastructure
 - Process
 - Encounter/Patient Milestones
 - Reporting
 - Outcomes
- Requirement to participate in infrastructure projects
- Includes budget template, scoring matrix

Application Requirements



- Applicants must have Texas Provider Identifier (TPI)
- Application required for each proposed site & project
 - Capacity & budget for each proposed location
- Applicants detail project management approach
 - Philosophy and resources
- Quarterly line item budget with narrative
- Impact on any other CCC contracts
- Review any subcontractors with CCC

Proposed Dates

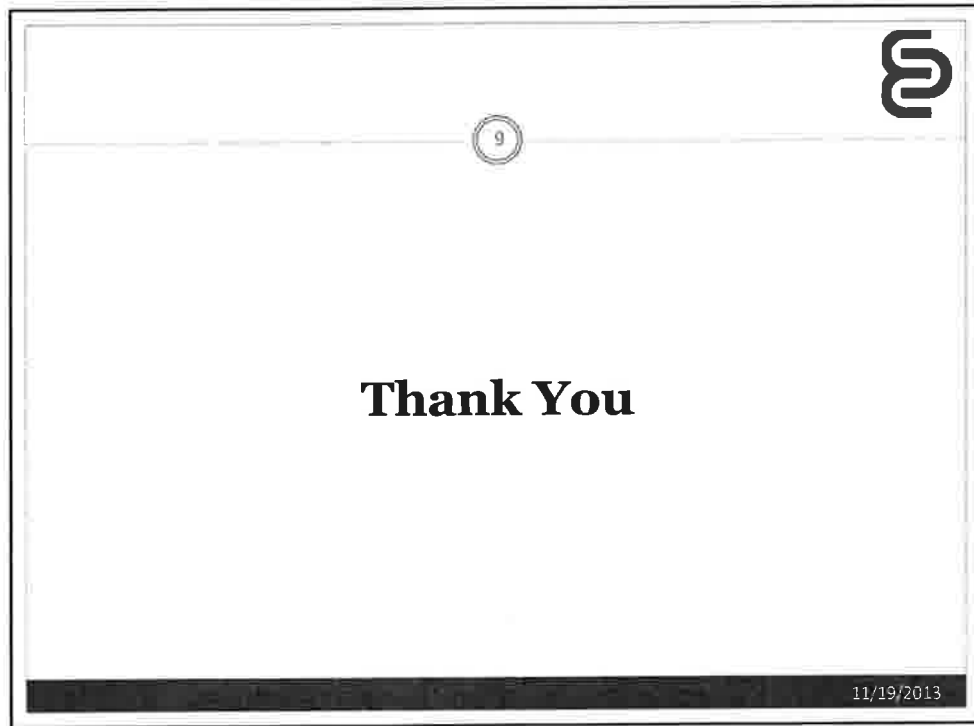


- Release date: Monday November 25
- Questions due: Wednesday December 4
- Answers available: Monday December 9
- Applications due: Monday December 16
- Notice of Award: Monday January 3
- Contract Negotiations Begin: Monday January 6

Questions? Comments?



Community Care
COLLABORATIVE





Community Care
COLLABORATIVE

Board of Directors Meeting

November 19, 2013

AGENDA Item III-B-4

Discuss and take appropriate action on DY3 CCC DSRIP
project implementation contract template.

NO BACKUP



Board of Directors Meeting

November 19, 2013

AGENDA Item III-B-5

Discuss and take appropriate action on an agreement for DSRIP project consulting services for the Community Care Collaborative.

Community Care Collaborative

Proposed Contract – COPE Health Solutions, Inc

CCC Board of Directors

NOVEMBER 19, 2013



COPE Health Solutions, Inc.



- Non-profit corporation
- Established in 1995 by UCLA student volunteers with a common goal to make a difference in the community
- Initial goal was to provide health education to the under-privileged and un-insured in Los Angeles County
- California 1115 Waiver experience
- Texas 1115 Waiver experience in Region 10
- Central Health – 1115 Waiver in DY2

DSRIP Project Timelines and Valuation



- DY 2 Valuation - \$54.6 million (all projects)
- DY 3 Valuation - \$58.3 million (includes new DSRIP 3 year project)

DY 2 Recap



- Reported on 13 CCC Projects:
 - 11 approved (1 still in valuation review: Chronic Disease Mgmt Protocols)
 - 2 awaiting CMS approval (GI, Pulmonology)
 - No report for Patient Navigation Project (headed to CMS for review)
- 13 projects & 28 associated outcomes = 62 items of supporting documentation
- 100% of milestones achieved in each Category
- \$49.28 m in valuation (local + federal)

DY 3 Proposed Contract Scope of Services



- **Project Management of DSRIP projects**
 - Monitor DSRIP project execution
 - Quality assurance for DSRIP deliverables
 - Regulatory compliance reviews and assistance
 - Performance Improvement Oversight
 - Identify and mitigate performance gaps
 - Training and oversight including promotion of advanced performance improvement methodologies
- **Information Technology**
 - Interim CCC CIO/CTO
 - Technical support and functional requirements analysis on the overall CCC HIT vision, including DSRIP projects
 - Align and integrate technology strategies with clinical and operational needs

Terms of Contract



- **Contract Period Covered – DY3**
 - November 1, 2013 – October 31, 2014
- **Proposed Contract Value - \$4,575,078**
 - Base Amount - \$3,718,390
 - Performance Incentives - \$437,458
 - Contingency - \$419,230

Cost of Services



DSRIP Project Management	\$2,466,665
Information Technology	<u>\$1,251,725</u>
Contract Base Total	\$3,718,390
Incentives	\$ 437,458
Contingency	<u>\$ 419,230</u>
Total	<u>\$4,575,078</u>

Performance Incentive Details



- DY 2
 - 95% DSRIP Revenue - \$182,274
 - 98% DSRIP Revenue - \$ 72,910
 - Total Incentives DY2 - \$255,184
- DY3
 - 95% DSRIP Revenue - \$109,364
 - 98% DSRIP Revenue - \$ 72,910
 - Total Incentives DY3 - \$182,274
- Total Incentives - \$437,458

CCC Budget – FY14



Sources

Estimated DSRIP Revenue	49,152,105
Estimated Payments for Indigent Healthcare:	
Seton (1)	60,000,000
Central Health (1)	15,200,000
Operations Contingency	10,518,916
Total Sources	<u>134,871,021</u>

Uses

Healthcare Delivery	73,283,490
DSRIP Project Costs	21,587,531
Permitted Investments - UT	35,000,000
Emergency Reserve	5,000,000
Total Uses	<u>134,871,021</u>

Ending Balance 0

(1) Final contributions will be subject to provisions of the Master Agreement, which requires the parties to collaborate to adequately fund the CCC, but leaves the amount of funding up to each parties' discretion. Each member contribution could be more or less than the estimate, depending upon a variety of factors.

CCC Budget Recap



- Total DSRIP Project Budget - \$21.6 million
 - DSRIP Projects Provider Services - \$10.8 million
 - Health Information Technology - \$8.0 million
 - Project management - \$2.8 million

Staff Recommendation:

Approve a contract with COPE Health Solutions for DSRIP project management and Information Technology consulting for an amount not to exceed \$4,575,078

Funding:

FY 14 Community Care Collaborative Budget – DSRIP Project Costs

