



Board of Directors

Meeting

Tuesday, December 15, 2015

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 September 29, 2015 CCC Board of Directors meeting.

B. Regular Agenda

1. Receive a report on CCC Financial statements for November 2015.
2. Receive a CCC Delivery System Reform Incentive Payment (DSRIP) Projects update.
3. Receive a report on the implementation of the 2016 CCC budget and IDS development plan.

4. Discuss and take appropriate action on the 2016 CCC Board of Directors proposed meeting dates.

IV. Closed Session

1. Discuss and take appropriate action on CCC personnel matters.

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.

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Board of Directors Meeting

December 15, 2015

CONSENT AGENDA ITEM

- A.1. Approve minutes from the September 29, 2015
CCC Board of Directors meeting.



Board of Directors

Meeting

Tuesday, September 29, 2015

2:00 p.m.

Central Health Administrative Offices

1111 E. Cesar Chavez St.

Austin, Texas 78702

Meeting Minutes

I. Call to Order and Record of Attendance

On Tuesday, September 29, 2015, a public meeting of the CCC Board of Directors was called to order at 2:17 p.m. in the Board Room at Central Health Administrative Offices located at 1111 E. Cesar Chavez St, Austin, Texas 78702. Chairperson Patricia A. Young Brown and Vice-Chairperson Greg Hartman were both present. The secretary for the meeting was Michelle Vassar.

Clerk's Notes:

Secretary Vassar took record of attendance.

Directors Present:

Chairperson Patricia A. Young Brown, Vice-Chairperson Greg Hartman, Christie Garbe, Larry Wallace, Willie Lopez (Proxy for Tim LaFrey), and Ellen Richards [Proxy for David Evans (Non-Voting Advisory Board Member)]

Officers Present:

John Stephens (Executive Director) and Michelle Vassar (Secretary)

Other Attendees Present:

Randy Floyd (General Counsel)

II. Public Comments

Clerk's Notes:

None.

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 August 11, 2015 CCC Board of Directors meeting.

Clerk's Notes:

Vice-Chairperson Hartman moved that the Board approve Consent Agenda item A(1). Director Wallace seconded the motion. The motion was passed on the following vote:

Director Patricia A. Young Brown (Chairperson)	For
Director Greg Hartman (Vice-Chairperson)	For
Director Christie Garbe	For
Director Larry Wallace	For
Director Willie Lopez (Proxy)	For

B. Regular Agenda

1. Receive a Community Care Collaborative Delivery System Reform Incentive Payment (DSRIP) Projects update.

Clerk's Notes:

Ms. Sarah Cook, Central Health Medicaid Waiver Director, gave an update on the Delivery System Reform Incentive Payment (DSRIP) Projects, including Demonstration Year ("DY") 4 reporting and progress. She reported on the DY4 Quantifiable Patient Impact ("QPI") milestones, presenting both the current status and a projection of future performance through the end of DY4. She also reported on the amount of effort required to achieve DY4 milestones and to improve performance in DY5. She reported that CommUnityCare, as the largest contracted provider, was the primary force behind meeting or exceeding DY3 targets. Ms. Cook further reported that she anticipates drawing down 99% of available DY4 funds, totalling \$61 million. She explained that these DSRIP projects would provide an infrastructure for the Integrated Delivery System (IDS). She also discussed the System Navigation project, which focuses on reducing Brackenridge Emergency Department (ED) utilization by Medical Access Program (MAP) patients by scheduling their primary care appointments within 72 hours of discharge. Ms. Cook reported on the DSRIP team's work with Front Steps and Austin Resource Center for the Homeless (ARCH) to expand primary clinic hours and to improve the 911 response system by navigating patients into the ARCH primary care clinic.

Ms. Cook mentioned that several of the project milestones would be reported after October 1, 2015. She explained that the DSRIP projects have promoted collaboration between data analysts from Lone Star Circle of Care, People's Community Clinic, and CommUnityCare clinics to encouraged the development of methods to measure health outcomes for the patient population moving forward.

Director Wallace commented that the Board consider messaging the impressive progress of the DSRIP projects to those in the community at large.

2. Discuss and take appropriate action on the Community Care Collaborative's Fiscal Year 2016 Budget.

Clerk's Notes:

Mr. Jeff Knodel, CCC's Chief Financial Officer, presented the CCC's Fiscal Year (FY) 2016 budget and began by highlighting the CCC's FY 2015 accomplishments. The two focus areas for FY 2016 include Delivery System Reform Incentive Payment (DSRIP) project performance for Demonstration Year 5 (DY5) and Integrated Delivery System (IDS) plan implementation. Mr. Knodel stated that in DY3, the CCC successfully drew down 99.5% of all available funds for its DSRIP projects, and in DY4 he estimated the CCC will draw down 99% of all available funds. Mr. Knodel also estimated the total funds available for DY5 at \$67 million, of which 40% represent Category 3 outcomes. Mr. Knodel reviewed the FY 2015 estimate of the CCC's budget at the close of September. He presented the FY 2016 sources and uses of funds, health care delivery of providers and non-providers, IDS plan initiatives, plans for specialty care, the CCC technology budget, and the proposed budget summary.

Vice-Chairperson Hartman commented positively on the CCC budget and requested specific timelines and deadlines for two resolutions, which included a resolution identifying the CCC's direction on benefit redesign, and a resolution relating to value-based reimbursement. Mr. John Stephens, CCC Executive Director, announced that the two resolutions would be discussed at the October 20, 2015 meeting of the CCC Executive Workgroup.

Vice-Chairperson Hartman motioned "Pursuant to Section 2.7 of the CCC bylaws, I move that the CCC Board of Directors recommend approval of the CCC's 2016 budget to the Class A Members as presented by the CCC staff and the at the CCC Board of Director's further recommend that the CCC's Class A Members take action to approve the CCC's 2016 budget as presented by staff by entering into a unanimous written consent pursuant to Section 2.8 of the CCC bylaws and that by no later than November 1, 2015 the resolutions specifying specific quantifiable goals and specific timelines and deadlines on benefit redesign and value based reimbursement be approved by the *Executive workgroup or else ...the 'or else' is what I'm having a little bit of hard time with.I wanted to have some pressure on us or else ...you know...there's further.. new budget consideration..or something...I don't know what the right way to say that is..*"

Both Chairperson Young and John Stephens offered an amendment to Mr. Hartman's motion so that it would conclude with "*or else we review the budget at that time .*" Director Garbe offered a further amendment to change the reference in Mr. Hartman's motion from "Executive workgroup" to "CCC board of directors."

Chairperson Young moved that the board approve the motion as amended. Director Garbe seconded the motion. The motion passed on the following vote:

Director Patricia A. Young Brown (Chairperson)	For
Director Greg Hartman (Vice-Chairperson)	For
Director Christie Garbe	For
Director Larry Wallace	For
Director Willie Lopez (Proxy)	For

3. Receive a presentation on CCC Financial Statements as of August 31, 2015.

Clerk's Notes:

Mr. Jeff Knodel, CCC's Chief Financial Officer, presented the CCC Financial Statements for eight months of operations beginning October 1, 2014 and ending August 31, 2015, including the balance sheet, sources and uses report, and details of health care delivery expenditures. He specified that some budget line items may change due to varying factors.

Mr. Knodel also reported on the health care delivery costs through the end of August 2015 and highlighted how much of the actual budget has been utilized compared to the fiscal year budget.

IV. Closed Session

Clerk's Notes:

No closed session discussion.

V. Closing

Clerk's Notes:

Chairperson Young Brown announced that the next regular meeting of the CCC Board of Directors is scheduled to be held Tuesday, December 15, 2015, at 2:00 PM, in the Board Room, at Central Health's Administrative Offices at 1111 East Cesar Chavez Street, Austin, Texas 78702.

Director Garbe moved that the meeting adjourn. Director Wallace seconded the motion.

Director Patricia A. Young Brown (Chairperson)	For
Director Greg Hartman (Vice-Chairperson)	For
Director Christie Garbe	For
Director Larry Wallace	For
Director Willie Lopez (Proxy)	For

The meeting adjourned at 3:32 p.m.

Patricia A. Young Brown, Chairperson
Community Care Collaborative Board of Directors

ATTESTED TO BY:

Michelle Vassar, Secretary to the Board
Community Care Collaborative



Board of Directors Meeting

December 15, 2015

AGENDA ITEM

1. Receive a report on CCC Financial statements for November 2015.

Community Care Collaborative

Financial Statement Presentation

FY 2016 – as of November 30, 2015





- Financial Statements
 - Balance Sheet
 - Sources and Uses Report – Budget vs. Actual
 - Detail of Healthcare Delivery Expense
- Two months of operations
 - October 1, 2015 – November 30, 2015

Balance Sheet

As of November 30, 2015



3

Assets:

Cash & cash equivalents (1)	\$ 33,314,416
Other receivable	<u>22,953</u>
Total Assets	<u><u>\$ 33,337,369</u></u>

Liabilities and Net Assets:

AP & Accrued Liabilities	\$ 9,921,545
Accrued Payroll	<u>207,118</u>
Total Liabilities	10,128,663
Net Assets (1)	<u>23,208,706</u>
Liabilities and Net Assets	<u><u>\$ 33,337,369</u></u>

(1) Includes \$5M Emergency Reserve Balance

Sources and Uses Report, Budget vs. Actual

Fiscal Year-to-Date through November 30, 2015



4

		<u>Annual Budget</u>	<u>YTD Actual</u>
Sources of Funds	DSRIP Revenue	\$ 55,665,911	\$ -
	Member payment - Seton (1)	46,100,000	-
	Member payment - Central Health (1)	26,245,166	-
	Operations Contingency Carryforward (2)	23,614,250	-
	Other Sources	15,000	1,692
	Total Sources of Funds	\$ 151,640,327	\$ 1,692
Uses - Programs	Healthcare Delivery	92,782,800	11,127,503
	UT Services Agreement	35,000,000	-
	DSRIP Project Costs	23,857,527	448,658
	Total Uses	\$ 151,640,327	\$ 11,576,161
	Sources Over Uses	-	(11,574,469)

(1) Final contributions will be subject to provisions of the MSA, 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 budget, depending upon a variety of factors.

(2) Actual amount pending FY2015 audited financial statements.

Healthcare Delivery Costs

Fiscal Year-to-Date through November 30, 2015



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	<u>Annual Budget</u>	<u>Actual</u>	<u>Percent Spent</u>
Primary Care	\$ 52,771,147	\$ 7,382,512	14%
Specialty Care	1,622,985	263,197	16%
Mental Health	8,429,022	1,340,350	16%
Misc. Specialty Care	1,188,626	142,591	12%
Pharmacy	4,500,000	677,015	15%
Client Referral Services	856,309	127,587	15%
Claims Administration/TPA	1,000,000	300,000	30%
HCD Operating Cost	1,276,435	100,887	8%
Service Expansion Funds	500,000	-	0%
Health Information Technology	5,550,000	427,689	8%
Integrated Care Collaborative	160,000	160,000	100%
Administration	1,238,451	159,723	13%
IDS Plan Initiatives	12,024,549	45,952	0%
Operations Contingency	1,665,276	-	0%
Total Healthcare Delivery	<u>\$ 92,782,800</u>	<u>\$ 11,127,503</u>	<u>12%</u>

Selected HCD Providers Expenditures

Fiscal Year-to-Date through November 30, 2015



6

	<u>Annual Budget</u>	<u>YTD Actual</u>	<u>% of Budget</u>
Primary care			
Primary Care - CommUnityCare	\$42,101,395	\$6,291,652	15%
Primary Care - El Buen Samaritano	2,350,000	249,335	11%
Primary Care - Lone Star Circle of Care	4,364,995	292,578	7%
Primary Care - Peoples Community Clinic	1,798,000	243,598	14%
Primary Care - Volunteer Clinic	100,000	24,740	25%
Primary Care - Recuperative Care Beds	400,000	76,500	19%
Primary Care - Urgent Care	191,000	22,074	12%
Primary Care - Planned Parenthood	585,000	94,441	16%
Primary Care - City of Austin EMS	696,822	116,000	17%
Primary Care - Paul Bass Clinic - Primary	709,647	65,177	9%
	<u>\$53,296,859</u>	<u>\$7,476,095</u>	<u>14%</u>
Specialty care			
Paul Bass Clinic - Specialty	\$933,985	\$152,023	16%
Austin Cancer Centers	359,000	55,778	16%
Project Access	330,000	55,000	17%
Ophthalmology	550,915	63,821	12%
Orthotics	41,000	4,098	10%
Oral Surgery/Dental Devices	596,711	74,672	13%
	<u>\$2,811,611</u>	<u>\$405,392</u>	<u>14%</u>
Mental health			
ATCIC	\$8,045,166	\$1,300,000	16%
SIMS Foundation	383,856	40,350	11%
	<u>\$8,429,022</u>	<u>\$1,340,350</u>	<u>16%</u>
Pharmacy	<u>\$4,500,000</u>	<u>\$677,015</u>	<u>15%</u>

Questions? Comments?





Board of Directors Meeting

December 15, 2015

AGENDA ITEM

2. Receive a CCC Delivery System Reform Incentive Payment (DSRIP) Projects Update.

(No Back up)



Board of Directors Meeting

December 15, 2015

AGENDA ITEM

3. Receive a report on the implementation of the 2016 CCC budget and Integrated Delivery System (IDS) development plan.

Community Care Collaborative

Review of FY 2016 Budget and Accomplishments



Budget Review and Accomplishments
CCC Board of Directors
December 15, 2015





FY16 — Sources of Funds (millions)

2

	FY15	FY16
	<u>Amended</u>	<u>Approved</u>
Operations contingency	8.2	23.6
DSRIP revenue	48.9	55.7
Member payment – Seton	60.0	46.1
Member payment – Central Health	<u>15.8</u>	<u>26.2</u>
Total sources	132.9	151.6

FY16 — Uses of Funds (millions)



3

	FY15	FY16
	<u>Amended</u>	<u>Approved</u>
Providers, pharmacy, admin, HIT	73.7	79.8
IDS initiatives	-	12.0
Third party administrator	3.5	1.0
UT Affiliation Agreement	35.0	35.0
DSRIP project costs	<u>20.7</u>	<u>23.8</u>
Total uses	132.9	151.6



FY16 IDS Plan Components

4

- Patient health management (care coordination)
- Health information technology
- Enhance and expand specialty care
- Benefit plan redesign and enhancement
- Measurement, Assessment, and Performance
- Obstetrics redesign
- Federally qualified health center (FQHC) service delivery task force and value-based payment methodology

FY16 IDS Plan Initiatives (millions)



5

Specialty care	3.518
IDS plan contingency reserve	4.781
• Health management (care coordination)	
• OB navigation	
• FQHC service delivery/value payment methodology	
Measurement, assessment, and performance	.475
Benefit plan redesign	.250
Benefit plan enhancement reserve	<u>3.000</u>
Total	12.024

Future State of Health Management



6

Extends care team beyond institutional boundaries

- Conduct pilots focusing on three populations:
 - Uncontrolled diabetes + high emergency department (ED) use
 - Transitioning from the hospital to primary care
 - Enhanced Obstetrics (OB) navigation
- Working with patients with multiple chronic conditions
- Navigation is a key component

Current State of Navigation



7

System lacks capacity—even to meet all of CommUnityCare's patient needs

Patient Navigation Center gets calls routed from 11 of 24 health centers

Serves less than half of the CCC MAP and sliding fee scale patients

Current hours are 7 a.m. to 7 p.m. Mon-Fri; 8 a.m. to noon Sat.

Future State of Navigation



8

Centralize appointments for all 24 clinics

Serve 80% of CCC Medical Access Program (MAP) and sliding fee scale patients

Centralize referral management and expand nurse help line

Expand coverage time

Budget Highlights



9

Reduced payment for CUC medical encounter from \$240 to \$190 and added PMPM payment for nonprovider services

Added El Buen Samaritano as a MAP provider

Increased funding to People's Community Clinic and EBS for family planning

Will add new urgent care providers in new locations beginning in early spring

Budget Highlights



10

Hired a general counsel and will hire paralegal soon

Hired VP for Strategic Partnerships

Contract Manager and Specialty Care Project Manager will begin January 4

Beginning partnership with Seton Health Plan for third-party administrative services at 50% cost reduction

Budget Highlights



11

Implementing Organized Health Care Arrangement (OHCA) with all providers

Developing data sharing agreement with Dell Medical School for orthopedic and other specialty care pilots

Patient Navigation Center

- leased space to build out CUC patient navigation center
- begin to build CCC health management functions
- purchasing furniture and equipment for the PNC

CCC Service Delivery Task Force



12

Define service locations/options (RFP for service location guidelines)

Define services CCC will purchase from primary/specialty care providers

Redefine / establish guidelines for care team models

Revise provider payments from fee-for service basis to value-based basis



Board of Directors Meeting

December 15, 2015

AGENDA ITEM

4. Discuss and take appropriate action on the 2016 CCC Board of Directors proposed meeting dates.



2016 CCC BOARD OF DIRECTORS PROPOSED MEETING SCHEDULE

DATE	TIME	LOCATION	COMMENTS
January 26, 2016	1:00 PM - 3:00 PM	Board Room Cesar Chavez	Review Audit Report.
April 19, 2016	2:00 PM - 4:00 PM	Board Room Cesar Chavez	
July 19, 2016	2:00 PM - 4:00 PM	Board Room Cesar Chavez	Review of preliminary budget.
September 27, 2016	1:30 PM - 3:30 PM	Board Room Cesar Chavez	Approval of budget.



Board of Directors Meeting

December 15, 2015

CLOSED SESSION AGENDA ITEM

1. Discuss and take appropriate action on CCC personnel matters.

(No Back up)