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**Regional Healthcare Partnerships 8 and 17**

**Joint Monthly Learning Collaborative Webinar**

**Thursday, July 14, 2016 • 10:00 a.m. – 11:00 a.m.**

**MINUTES**

1. **Welcome and Introductions/Roll Call**

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| **Organization** | **Name(s)** |  | **Organization** | **Name(s)** |
| RHP 8 Anchor Team  | Jennifer LoGalbo, Shawna Jiles | RHP 17 Anchor Team | Shayna Spurlin, Carmela Perez |
| Bell County Public Health District | Renee Stewart | Health For All | Liz Dickey  |
| Bluebonnet Trails | Corinne TurmelleMorgan StarrTiffany GonzalezMeghan Nadolski  | MHMR Authority of Brazos Valley | Robert Reed  |
| Center for Life | Ranita Oliver, Joey Smith  | CHI St. Joseph Regional  | Martha Fuentes |
| Central Counties Services | Tia Mays | TAMP – PCMH | Ryan Pekarek |
| Hill Country MHMR  | Kristie Jacoby | TAMP – TCC | Trey Armstrong  |
| Little River Healthcare  | George DeReese | TAMP – PCMH | Ryan Pekarek |
| Baylor Scott & White | Melissa Cote | TAMP – BVCCP | Debbie Meusse |
| Seton Harker Heights | Patrick McGreevy, Zach Dietze | TAMP – EBP  | Doris Howell |
| Seton Highland Lakes | Cindy Sanchez | Tri-County Behavioral Health | Cynthia Peterson |
| Williamson County and Cities Health District | Matt Richardson, Virginia Headley  |  |  |  |
| Williamson County EMS  | Pauline VanMeursMichelle Covarrubias |  |  |  |

1. **Raise Performance – Focus Area and Open Discussion**
	1. **July Spotlight:** Program Design and Implementation (Program Evaluation Series)
* Concluding evaluation series that started in January
* Program Evaluation series offered for all providers, not just those doing SA3
	1. **Innovator Agent(s):** Sharing of information related to factors that influence program design and implementation including; program need, target population, resources, project goals, efficiency of service delivery, relationship of activities and outcomes.
		+ **Presenter: *Carmela Perez, MBA, Program Coordinator*
		1115 Waiver, Texas A&M Health Science Center**

See presentation**, *July Call\_Program Design and Implementation***

* 1. **Open Discussion**

***Facilitated by Shayna Spurlin***

**As you reflect on the last few years of your project’s implementation, are there significant changes in the components of the project design? If so, how have changes in these factors influenced outcomes?**

* Tri County Behavioral Healthcare
	+ Target population may need to be broadened. Process requires providers to review project and sometimes they are taking a few steps back. Trying to find what the contributing factors are and add them to the treatment plan. “Spreadsheets” – internal documents Tri-County created and uses to show how they meet metrics, what they are accomplishing, and who they are serving.
* Shayna
	+ Hindsight is 20/20, look at how project was written, and if something was too prescriptive or broad, how could that change. Take this time to explore what was planned and what was actually implemented.
	+ Look at what the needs were for the initial implementation of the project – refer to PPT.

 **Have you identified additional enhancements to your project that have not yet been implemented?**

* Shayna - Anyone identified need to change direction of project?
	+ - WCHHD -Is HHSC doing any lessons learned from first Waiver?
			* Shayna – HHSC wants to reduce admin burden. They are attempting to be as transparent as possible. HHSC has been heavily focused on DY6. They do want to streamline metrics. Cat 3 has been, and continues to be a struggle. CMS request to make Cat 3 higher % of payment; HHSC was able to negotiate and keep current funding levels. Important for providers to review and submit feedback to HHSC.
		- Bluebonnet Trails – They have P4P MLIU QPI metrics during DY5. Will there be an opportunity for providers to update MLIU QPI for DY7 and on?
			* Shayna – HHSC is still negotiating terms of DY7 and on with CMS. There will be a new PFM for DY7 and on and there should be an opportunity for stakeholders to make comments on the PFM, similar to the comment periods for the rule packets for DY6. The Anchor Team encourages providers to ask questions of HHSC staff at 7/28 LC event.
		- What about replacement/next logical step?
			* Shayna – True replacement project are those that have been told by HHSC they will have to replace and to those providers who withdrew a project during the withdraw window. All other active projects that decide to continue would need to transition/take “next” steps for DY7 and on. The Anchor Team encourages providers to perform some sort of project evaluation to justify a rationale for the next step of a project.
1. **Upcoming Learning Collaborative Events**

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| **RHP 8 & 17 DY5 Learning Collaborative Event****Date**: July 28, 2016 **Location**: Baylor Scott & White Hospital – College Station **RSVP:** Please send your RSVP to your respective anchor by Monday, July 18! |
| **2016 HHSC Statewide Learning Collaborative Summit****Date**: August 30-31, 2016**Location**: AT&T Executive Education and Conference Center – Austin |

1. **Next Steps & Adjourn**
	1. Next joint call scheduled for **Thursday, August 11 at 10 a.m.**