**Regional Healthcare Partnership 8**

**Bi-Weekly Conference Call**

**Tuesday, August 5, 2014 • 9:00 – 10:00 a.m.**

Phone Number: 877-931-8150 **•** Participant Passcode: 1624814****

**ATTENDANCE**

|  |  |
| --- | --- |
| **Organization** | **Name(s)** |
| Bell County Public Health District | Renee Stewart |
| Bluebonnet Trails | Vicky Hall  Kate Riznyk  Marlene Buchanan  Beth McClary |
| Center for Life | Joey Smith |
| Central Counties Services | Eldon Tietje  Ray Helmcamp  Donna Flanery  Tia Mays |
| Hill Country MHMR | Kristie Jacoby |
| Little River Healthcare | N/A |
| Scott & White – Llano | N/A |
| Scott & White – Memorial | N/A |
| Seton Hospital System | Melanie Diello  Carol Saucedo |
| Seton Harker Heights | Zach Dietz |
| Seton Highland Lakes | Crissy Calvert |
| St. David’s Round Rock Medical Center | Michelle Hays |
| Williamson County and Cities Health District | Lisa Morse  Dina Cavazos  Mary Faith Sterk  Matt Richardson |
| RHP 8 Anchor Team | Jennifer LoGalbo  Gina Lawson |
| Other Stakeholders | N/A |

**AGENDA**

1. **Welcome and Introductions**
2. Introduce Anchor team
3. Roll call of stakeholders on call by Provider-organization
4. Open to the region

Congratulations and thank you to our providers because we met the Category 3 response to HHSC feedback deadline and everyone has submitted their DY4 & DY5 plan mods for the Anchor team to review by the end of the week.

1. **RHP 8 Learning Collaborative Updates**

1. Update from Behavioral Health and Primary Care Cohort

**Cohort update** – Presented by Cohort Member, Crissy Calvert - Seton Highland Lakes

* First meeting was on July 31,2014
* About a dozen members attended.
* We discussed the general purpose of cohorts and what this cohort’s purpose would be
  + It’s a small group of individuals who are part of a learning collaborative (LC)
    - Share knowledge, common issues/challenges
    - Establish a focus area, goals, aims
    - Improve healthcare delivery and efficiencies
* This first meeting was a brainstorming session on purpose, goals, aims, challenges, etc.
* Group identified 3 focus areas: Communication, transportation, and identifying early barriers
* Group discussed goals and aims
* Group will meet every 2-3 weeks at different cohort member locations and have conference calls as needed
* Anyone interested in becoming a member should email the Anchor team.
* Joey Smith – co-facilitated requested cohort members to volunteer to invite Sacred Heart and Good Shepard staff. Mary Faith Sterk has contacts at these facilities. Jennifer LoGalbo will send Joey Smith’s email to Mary Faith so that she can assist.
* Reminder: Cohort members may utilize google group discussion forum. Please email the Anchor team to sign up. Google groups and cohort membership is open to all stakeholders.

2. Regional Newsletter: http://www.tamhsc.edu/1115-waiver/rhp8/lc/newsletter.html

* Newsletter going out today
  + See the update from SW Llano on ED diversion project
  + If you would like to include any news, events, success stories, lessons learned in the September Newsletter, email the Anchor team by August 15.

3. RHP 8 Google Group Discussion Forum: http://www.tamhsc.edu/1115-waiver/rhp8/lc/forum.html

* Please email the Anchor team to sign up. Google groups and cohort membership is open to all stakeholders.

1. RSVP for the RHP 8 Learning Collaborative Event: glawson@tamhsc.edu

REMINDER: RHP 8 Learning Collaborative on Aug 20th - Spaces are filling up. Email [glawon@tamhsc.edu](mailto:glawon@tamhsc.edu) if you would like to register. **(Agenda attached)**

* + Speaker from HHSC presenting on Health Information Exchange (HIE)
  + Provider presentations: WCCHD and Bluebonnet Trails

5. Opportunities to Participate in Other-RHP Activities

RHP 17 hosting an LC on Tuesday, August 12 in College Station – can attend their meeting – **(Agenda attached)**

**OTHER NEWS:**

**DUE DATE REMINDER**: DSRIP providers who do not expect to report baseline or anticipating reporting 0 as their baseline have until today to request TA calls from HHSC.

**III. “Raise the Floor” – Providers Discuss Topic Areas and Open Discussion**

1. Overview from the Anchor team about 1115 Waiver projects and sustainability

2. Open Discussion

**SUSTAINABILITY PRESENTATION –** Presented by Jennifer LoGalbo, RHP 8 Program Director **(PowerPoint attached)**

* Waiver Background
* Providers saved dollars to be tucked away to sustain the project
* Sustainability efforts were required to be outlined in 2013 report
* Mid-point assessor may inquire if provider has a sustainability plan
* Statewide LC on September 9 -10 in Austin will hold a session on sustainability
* Review the attached document titled *Overview of Renewal/Extension for the Texas Healthcare Transformation and Quality improvement Program 1115 Demonstration Waiver –* provided by HHSC
* Waiver is from 2011 – 2016
* Last slide has a reference for helping to create a sustainability business plan

**WAIVER RENEWAL/EXTENSION OPTIONS:**

* + A 3-year extension – same terms and conditions, protocols may be amended
  + A 5-year renewal – all terms and conditions are up for negotiation
  + If neither a renewal nor an extension is requested, Texas will still be required to submit a phase-out plan
  + Pending direction from legislature

**QUESTIONS TO ASK YOUR ORGANIZATION:**

* + Do you have a plan in writing?
  + How would you incorporate your projects into your existing organizational structure?
  + Who’s responsible for developing a sustainability plan?
  + Who’s currently funding your project and what is their plan for sustaining

**PLANING STEPS**

* + 1 – Vision –What do you want to continue doing? What do you want to add or change
  + 2 – Collaboration with IGT, community stakeholders and staff for sustainability support
    - Meet regularly with IGT to show successes, how saving money, discuss plan for sustainability
    - Align with other stakeholders if IGT is the main funding source but cannot fully support project at needed level
    - Meet with providers/hospitals that the project is impacting a cost savings and show the increased costs to the provider/hospital should the project end
  + 3 – Identify needs, action plan and budget. Develop cost analysis where savings and return on investment to your organization, the State, and stakeholders are identified.

**SUSTAINABILITY GROUP DISCUSSION:**

* Williamson County and Cities Health Department – Mary Faith Sterk
  + Systems of Care meets regularly and discusses sustainability
  + Building the cost model is difficult
  + Use of algorithms
  + Financial models among the Systems of Care members are complex and difficult
  + Integrated eligibility screening (software application) helps to identify all external payor sources that may be able to help identify other paying sources for those who are on sliding fee scale and/or not Medicaid eligible
* Bluebonnet Trails – Vicky Hall
  + The majority of their clients are underinsured, uninsured, not Medicaid recipients.
  + Medicare recipients don’t qualify for Medicaid and many of their services aren’t covered by Medicare
* Central Counties – Eldon Tietje
  + HHSC has sliding fee scale they must use. 92% of clients qualify under “No fee”
  + Many services are not Medicaid eligible
  + Discuss impact of Affordable Care Act
* Jennifer LoGalbo – We have an extension since project approval was late. A 3- year extension could provide more time to collect and analyze data to show the impact.

**OUTSTANDING QUESTIONS:**

* + Can Providers in other RHPs share input on discussions of sustainability?
  + Can Providers who have multiple IGT entities discuss how they are addressing sustainability?
  + Can Providers with multiple projects who are not IGTing for themselves share how you are getting the sustainability conversation started with county officials?
* Central Counties – Eldon Tietje – Building stakeholder collaboration/support for sustainability

Central Counties is gaining support from Temple ISD by meeting with Temple ISD leaders regarding the positive impact on a financial and an educational level that their project is having. Temple ISD has a high percentage of retained students which may further impact their dropout rate. Dropout rate impacts state/federal financial support for Temple ISD.

Law enforcement groups also show supporting of mental health services because of the positive impact on jails, finances, overall community safety.

Mental Health Task Force garner support among stakeholders. No Task Force in Bell County.

1. **Next Steps/Adjourn**

Next call scheduled: Tuesday, August 19, 2014, 9-10 a.m.