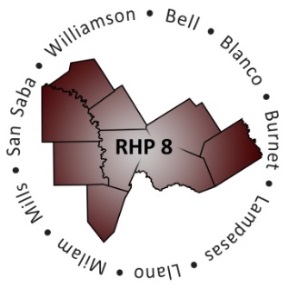
**Meeting Agenda and Minutes**

**Bi-Weekly Conference Call**

**Tuesday, December 10, 2013 • 9:00 a.m. – 10:00 a.m.**

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

**Attendance**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Organization** |  | **Name** | **Organization** |
| N/A | Bell County Public Health District | Carol Saucedo | Seton Highland Lakes |
| Karen Doyer | Bluebonnet Trails | Diana Flores | Seton Highland Lakes |
| Mark Janes | Bluebonnet Trails | Denise Watson | Seton Highland Lakes |
| Melinda Gilee | Bluebonnet Trails | N/A | St. David’s Round Rock Medical Center |
| Joey Smith | Center for Life | Mary Faith Sterk | Williamson County and Cities Health District |
| Eldon Tietje | Central Counties Service | Lisa Morse | Williamson County and Cities Health District |
| Ray Helmcamp | Central Counties Service | Dina Cavazos | Williamson County and Cities Health District |
| Steve Slaughter | Central Counties Service | Kerry King | Williamson County and Cities Health District |
| N/A | Hill Country MHMR |  |  |
| N/A | Little River Healthcare |  |  |
| Bill Galinsky | Scott & White -Llano |  |  |
| Bill Galinsky | Scott & White -Memorial |  |  |

**AGENDA**

*Purpose of Meeting: RHP 8 Providers will promote collaborative learning around shared or similar projects. Participation may include: 1) sharing challenges and any solutions; 2) sharing results and quantitative progress on new improvements that the Provider is testing; and 3) identifying a new improvement and publicly commit to testing it in the week to come.*

1. **Welcome and Introductions**

Anchor led roll call to take attendance and welcome participants to first, bi-weekly conference call.

1. **Updates from HHSC**

Anchor reviewed the HHSC Anchor call notes with participants.

* 1. October DY2 Reporting Review

Reminder to Providers they should expect to hear from HHSC regarding DY2 October reports on Monday, December 23rd (tentative date from HHSC). Providers are responsible for reviewing their reports and reviewing what metrics were approved/what metrics were not approved at this time and require more information/etc. If Providers have questions about their DY2 October reports, email the HHSC Waiver inbox at: [TXHealthcareTransformation@hhsc.state.tx.us](mailto:TXHealthcareTransformation@hhsc.state.tx.us) (copy Anchor team on email submission).

* 1. Phase 4 Submission

RHP 8 submitted Phase 4 documents to HHSC on Wednesday 12/6/13. HHSC expects to provide feedback to Anchors and Providers in mid- to late-January.

* 1. New, DY 3 Year Projects

There are three Providers (two existing and one new) who plan to propose a total of four new projects in RHP 8 starting DY3. Full projects and workbooks are due to Anchor team no later than Monday, December 16. Anchor most compile projects and other associated materials and provide report to HHSC by Friday, December 20.

* 1. DY 4-5 Valuation

Only one Provider in RHP 8 has shown up on the valuation list that was sent out the region on Monday (12/10/13). HHSC will work with this Provider and Anchor on this project.

* 1. DSHS State Initiatives

Only existing contracted Providers may work with DSHS’ on the projects that have been proposed by the State. If you are interested in viewing the projects, please see the link below. Comments are being accepted through 5 pm Monday, December 16.

* + 1. Read about the projects: <http://www.hhsc.state.tx.us/1115-Waiver-Initiatives.shtml>
    2. Submit comments: [http://dsripstatewidefeedback.questionpro.com](http://dsripstatewidefeedback.questionpro.com/)
  1. Anchor Annual Report

Anchor team is working this week to finish compiling and submitting the RHP 8 Annual Anchor Report. Anchor team will send a copy of submitted report to the RHP 8 stakeholders for reference.

g. UC Tool

As a reminder, the UC Tool application is available on the HHSC website. ALL PARTICIPATING HOSPITALS interested in being involved with UC must submit the application by THIS FRIDAY, December 13. Once HHSC receives the application, UC Hospital Providers will be sent the UC Tool which will need to be completed and submitted to HHSC by 5 pm, Thursday, January 30, 2014.

1. **Providers Share Updates on RHP 8 Projects**
   1. **Central Counties Services – Temple ISD Project**

**Update:** Six new staff members have been brought on board; staff was aware of project based on initiatives in other schools in the District.

**Goal:** Assist children who are having difficulty adjusting to the classroom setting.

**Lesson(s) Learned:** Importance in re-evaluating metrics and QPI – made plan modification to increase age group from kindergarten – 3rd grades to kindergarten – 5th grades.

* 1. **Center for Life – Tele-med Project**

**Update:** Implementing telemedicine project in three RHPs; technology has been successfully implementing in 2 of the 3 RHPs at this point.

**Goal:** Increase the number of people receiving mental health care in the rural areas of Central Texas.

**Lesson(s) Learned:** Organizations need to have a static ID address in place if implementing telehealth projects – this allows users to login from different tele-med sites.

* 1. **Seton Highland Lakes – Patient Navigation Project**

**Update:** Provider is working with stakeholders associated with the project to educate staff on how to refer patients; project staff is looking at ways to best organize data to analyze at later date.

**Goal:** Project aims to increase care to patients in the county at the right time and right place, thereby reducing emergency department overuse.

**Lesson(s) Learned:** N/A

* 1. **Williamson County and Cities Health District – REAL Data Project**

**Update:** Project staff is working with stakeholders on how to best collect data, both by asking questions and then by entering information in the software; project staff is training about the importance of this project and impact it will have on the community.

**Goal:** Project aims to provide health district with data regarding race, ethnicity, and age which will assist health department in development of future initiates in the community.

**Lesson(s) Learned:** Ability to organize and manage the training of not only health department staff, but also staff in other stakeholder groups (e.g., county EMS).

* 1. **Bluebonnet Trails – Extended Observation Unit Project**

**Update:** Provider has opened the extended observation unit in Taylor, Texas.

**Goal:** Extended observation unit will serve as a physical location that will be used to help assist with those that have mental health issues from being sent straight to the jail system.

**Lesson(s) Learned:** Training of staff is vital when working with other stakeholders (e.g., county sheriff department).

1. **Next Steps/Adjourn**

Anchor asked participants what they would like to see in this meeting. Does this time/day of the week work for the majority of participants? Feedback: participants liked the format of the meeting.

Anchor reviewed next steps and upcoming due dates for Providers to be aware of and called the meeting to an end.

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| --- | --- |
| December 2013 | |
| 15 | Anchor Annual Reports Due to HHSC |
| 16 | Providers submit full project descriptions to Anchor |
| 20 | Anchor submits full project descriptions for new three-year projects to HHSC |
| 23 | HHSC provides results of DY 2 October reporting reviews, including requests for metrics that ‘need more information’ |
| January 2014 | |
| Early - January | IGT due for October DY 2 DSRIP payments if October reports are approved by HHSC and CMS (FMAP rate 58.69) |
| Mid- to Late-January | HHSC will request confirmation of lead contacts, related to Section I. of the RHP Plan |
| HHSC provides feedback on Phase 4 submissions |
| 17 | Providers respond to DY 2 October reporting ‘needs more information’ requests |
| Late-January | October DY 2 DSRIP payments processed |
| Phase 4: RHPs submit responses to HHSC feedback. Performing providers must submit responses to HHSC feedback to the Anchor to compile and send in one submission packet to HHSC by the due date |