



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS

SPECIAL MEETING

Thursday, August 29, 2013
4:30 p.m.

Central Health Administrative Offices
1111 E. Cesar Chavez
Austin, Texas 78702

REGULAR AGENDA*

1. Receive and discuss a presentation on the Community Care Collaborative's preliminary Fiscal Year 2014 budget.
2. Confirm the next regular Board meeting date, time, and location.

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

The Board of Managers 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.

Came to hand and posted on a Bulletin Board in the Courthouse
Austin, Travis County, Texas on this the 26 day of
August 2013
Dana DeBeauvoir
County Clerk, Travis County, Texas
By Betty Clinton Deputy



Betty Clinton
O. CLINTON

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OFFICIAL PUBLIC RECORDS

Dana DeBeauvoir

Aug 26, 2013 12:10 PM 201381791
FEE: \$0.00

Dana DeBeauvoir, County Clerk
Travis County TEXAS

STAYS IN FILE



**CENTRAL
HEALTH**

Board of Managers Special meeting

August 29, 2013

AGENDA Item 1

Receive and discuss a presentation on the Community Care Collaborative's preliminary Fiscal Year 2014 budget.



FY 2014 Preliminary Budget Presentation
Presented to Central Health Board
August 29, 2013

Dr. Mark Hernandez, CMO - Community Care Collaborative
Jeff Knodel, CFO - Central Health

Presentation Overview

- Why was the CCC created
- Overview of the Integrated Delivery System Model
- Definition and role of the CCC
- Financial Budget
 - Review of FY13 Budget
 - Presentation of Preliminary FY14 Budget
- Next Steps

Why the CCC was created

- Maximize the new tax dollars w/ federal matching funds to bring new resources into safety net population healthcare delivery
- Transform the way we deliver healthcare to the safety net population
- Serve as the main vehicle through which the new Integrated Delivery System will serve vulnerable Travis County residents

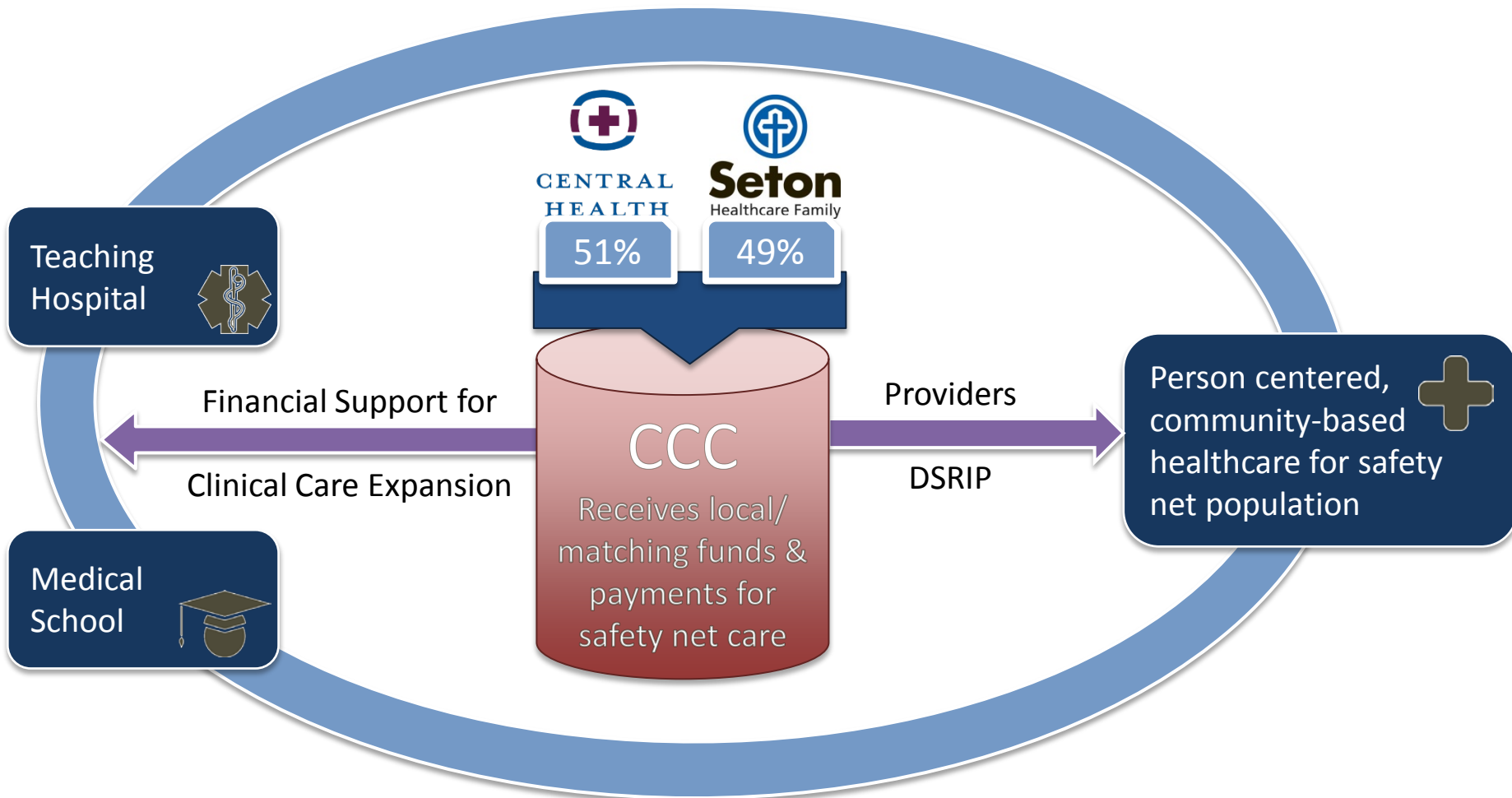
How the CCC was created

- Approval of the Master Agreement and Ancillary Agreements on June 5, 2013 between Central Health and Seton Healthcare Network to establish the Community Care Collaborative and construct a new teaching hospital to be completed in 2017
- Approval of the Memorandum of Understanding (MOU) between Central Health, CCC, Seton Healthcare Network, and UT that conveys the intent to establish a new UT Medical School with the first class expected to start in 2016
- Approval by HHSC to become a Performing Provider in the 1115 Medicaid Waiver

Community Care Collaboration

- Partnership launched by Central Health and Seton. Will eventually manage care for 50,000 safety net patients, including proactive care for an estimated 18,000 individuals with 2+ chronic conditions.
- Goal is to provide high quality, cost effective, patient-centered care that improves health outcomes through:
 - o care coordination and navigation
 - o uniform care protocols and guidelines
 - o population management
 - o health promotion and patient engagement

Integrated Delivery System Model



Objectives of the CCC

- Transform the delivery system in order to provide more effective and efficient care as evidenced by improved patient outcomes
- Reduce hospital readmissions via protocol driven care and coordinated transitional care
- Reduce inappropriate utilization of the healthcare system and increase care in the most appropriate settings
- Provide non-clinical services (e.g. patient navigation) to strengthen continuum of services
- Develop metrics to measure the effectiveness of the new system and to create continuous quality improvement
- Restructure provider payment model to focus and incentivize health outcomes rather than patient visit models

Transparency and Fiscal Accountability

- The Central Health Board of Managers will continue to provide the policy direction and fiscal accountability for the local tax dollars that will fund healthcare services through the CCC
- The CCC Board of Directors will collaborate to implement the stated objectives of the CCC
- Commitment to public CCC board meetings
- Fiscal audit of annual financial statements available to the public

CCC Budget – FY 13

	Approved Budget	Amended Budget	Estimate
<u>Sources</u>			
DSRIP Revenue	8,994,823	8,994,823	8,994,823
Estimated Payments for Safety Net Population:			
Seton (1)	0	17,000,000	17,000,000
Central Health (1)	0	3,578,889	3,578,889
Total Sources	8,994,823	29,573,712	29,573,712
<u>Uses - Programs</u>			
Healthcare Delivery	6,482,292	20,578,889	16,824,796
DSRIP Project Costs	2,512,531	8,994,823	2,230,000
Total Uses	8,994,823	29,573,712	19,054,796
Ending Balance	0	0	10,518,916

(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.

Healthcare Delivery – Program Activities

	Approved Budget	Amended Budget	Estimate
<u>Uses</u>			
Healthcare Delivery Program:			
Provider Contract Services	6,482,292	16,824,796	16,824,796
Operations Contingency	0	3,654,093	0
Service Expansion Funds	0	100,000	0
Total	6,482,292	20,578,889	16,824,796

Base FY 14 Budget Assumptions

- FY 13 Ending Balance Estimate will be appropriated in Operations Contingency for FY 14
- 90% of DY2 DSRIP revenue budgeted in FY14
- Medical Access Program (MAP) Benefit Plan same as FY 13
- Provider contracts same as FY 13 base, with the exception of CommUnityCare
 - FY 13 = \$38.9m (excludes pharmacy of \$5.4m)
 - FY 14 = \$40.3m + \$5.4m pharmacy = \$45.7m
- Service Expansion Funds
 - \$5m in Central Health Budget
 - \$500k in CCC

CCC Preliminary Budget – FY14

	Preliminary Budget
<u>Sources</u>	
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>
<u>Uses</u>	
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	<u><u>0</u></u>

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FY 14 Healthcare Delivery – Program Activities

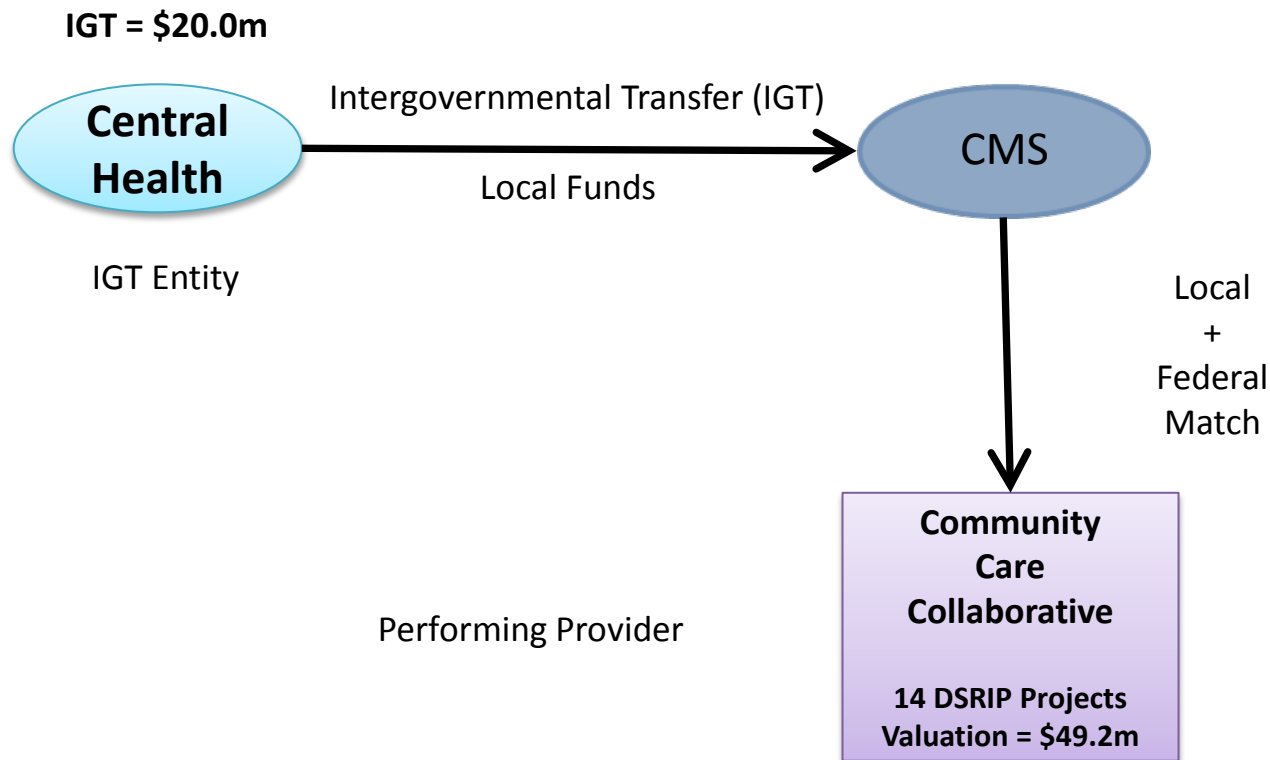
	Preliminary Budget
Uses	
Healthcare Delivery:	
Provider Contract Services	62,452,837
Operations Contingency	10,330,653
Service Expansion Funds	500,000
Total	73,283,490

Provider Contract Services

Provider	Amount	Provider	Amount
Blackstock	262,045	Project Access	330,000
Paul Bass Specialty	462,000	Austin Cancer Centers	334,000
Paul Bass Continuity	709,647	SIMS Foundation	265,000
Insure-a-Kid	35,000	Dental Services	596,711
CommUnityCare	45,730,910	ICC Medicaider	164,760
El Buen	1,800,000	United Way	700,000
Lone Star Cir of Care	4,364,995	EMS	696,822
Sendero	3,500,000	Front Steps	300,000
People's Clinic	1,398,000	Orthotics	27,000
Volunteer Healthcare Clinic	100,000	UMCB Pharmacy	171,670
Urgent Care	166,000	Other	103,000
Specialty Care - Vision	235,277	Total	<u>62,452,837</u>

CCC DSRIP Projects Funds Flow

(illustrative purposes only)



14 CCC DSRIP Projects

Infrastructure

- Disease Management Registry
- Patient Centered Medical Home Model
- Chronic Disease Management Model

Care Expansion

- Expanded Hours at Community Clinics
- Mobile Care Vans
- Gastroenterology at Community Clinics
- Pulmonology at Community Clinics
- Expanded Dental Services

Behavioral Health

- Integrated Behavioral Health for Diabetes
- Telepsychiatry at Community Clinics

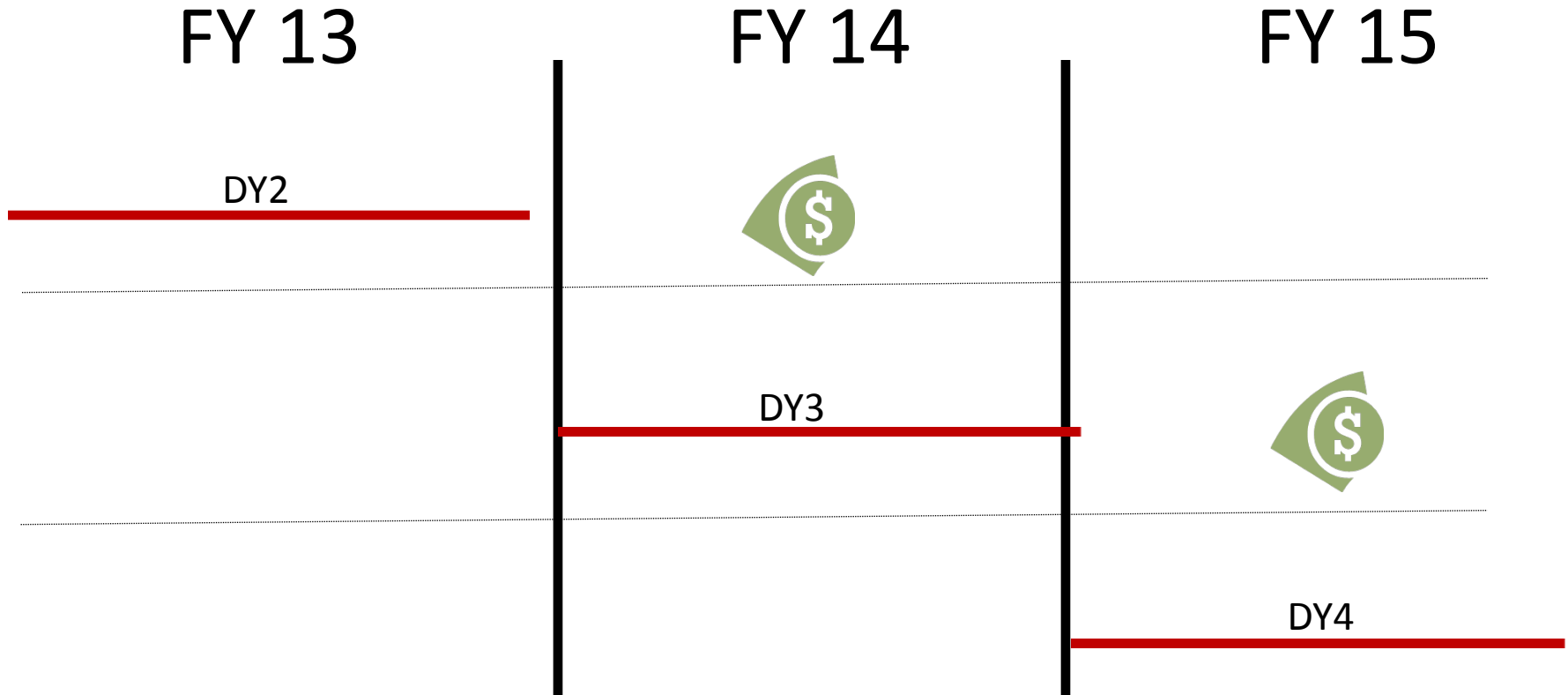
Women's Health/Sexual Health

- Pregnancy Reduction Program
- STD/HIV Screening & Treatment

Navigation

- Patient Navigation - CCC
- Community Paramedic Navigation

DSRIP Project Funds Flow

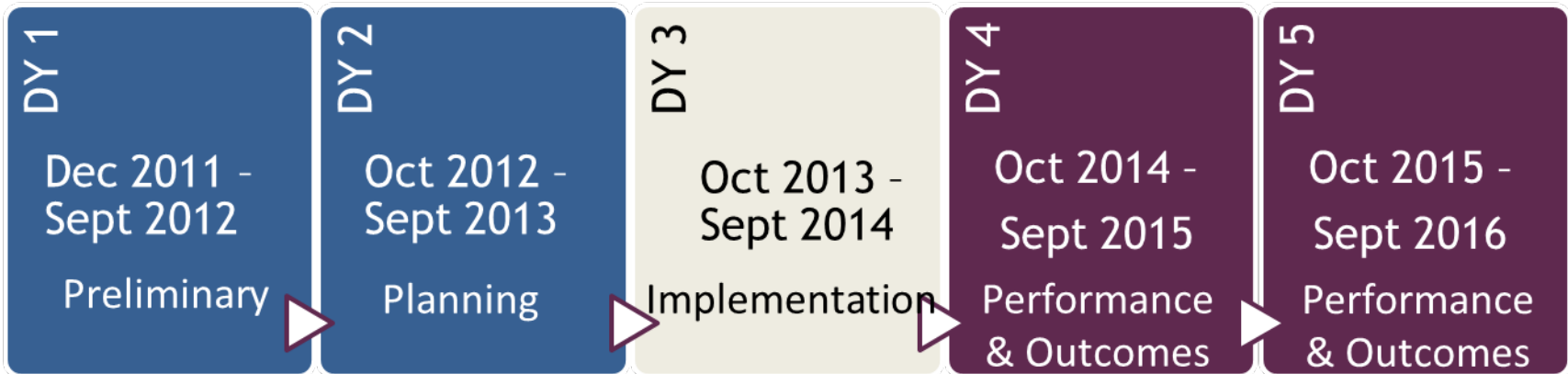


DSRIP Project Spend

DSRIP Project Payment based on Performance

CCC DSRIP Project Timelines

FY 14



Closing

- Utilizes and leverages funding approved by Proposition 1 for new and improved healthcare in Travis County
- Beginning to create the necessary components of a new Integrated Delivery System
- Focus on DSRIP projects – implements new and expanded healthcare delivery to un and underinsured

Next Steps

- August 27 – Budget presentation to CCC Board of Directors
- August 29 – Budget presentation to Central Health Board; Public Hearing
- September 4 – Public Hearing
- September 10 – CCC Board of Directors (*tentative*) for approval consideration
- September 11 - Central Health Board for approval consideration



**CENTRAL
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Board of Managers Special meeting

August 29, 2013

**AGENDA Item 2
(NO BACKUP)**

Confirm the next regular Board meeting date, time,
and location.