Board of Directors

Meeting

Tuesday, July 8, 2014

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, July 8, 2014, a public meeting of the CCC Board of Directors was called to order at 2:09 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 was absent, and Vice-Chairperson Greg Hartman served as the Chair for the meeting. The clerk for the meeting was Margo Gonzalez.

Clerk's Notes:
Secretary Gonzalez took record of attendance.

Directors Present:
Vice-Chairperson Greg Hartman, Christie Garbe, Jeff Knodel, Sarah Cook (Proxy for Trish Young Brown), Tim LaFrey, and David Evans (Non-Voting Advisory Board Member)

Officers Present:
Larry Wallace (Executive Director) and Margo Gonzalez (Secretary)

Other Attendees Present:
Beth Devery (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 May 13, 2014 CCC Board of Directors meeting.

Clerk's Notes:
Director Knodel moved that the Board approve Consent Agenda item A(1). Director Cook seconded the motion. The motion was passed on the following vote:

Director Greg Hartman (Vice-Chairperson) For
Director Jeff Knodel For
Director Christie Garbe For
Director Tim LaFrey For
Director Sarah Cook (Proxy) For

2. Approve the appointment of Wesley Durkalski to serve on the Community Care Collaborative Advisory Committee to replace David Lamkin.

Clerk's Notes:
Director Garbe moved that the Central Health appointees appoint Wesley Durkalski to replace David Lamkin to serve on the CCC Advisory Committee. Director Knodel seconded the motion. The motion was passed on the following vote from Central Health appointees:

Director Greg Hartman (Vice-Chairperson) Abstain
Director Jeff Knodel For
Director Christie Garbe For
Director Tim LaFrey Abstain
Director Sarah Cook (Proxy) For

B. Regular Agenda

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

Clerk's Notes:
Sarah Cook provided an update on the 15 DSRIP Projects and distributed a dashboard on the Demonstration Year (DY) 3 DSRIP Projects. The dashboard tracks project details and provides a quick glance on the status of the performance indicators. Next to the dashboard indicators is a key that provides objective factors for each score, contract status, and project milestones. All 15 projects are underway and CommUnityCare is the performing provider for 10 of the 15 projects. Based on the objective factors such as scope of work, project schedule, and project milestones, the following 8 projects are on track: Disease Management Registry (DMR), Expanded Hours, Gastrenterology, Telepsychiatry, Patient Centered Medical Homes (PCMH), Chronic Disease Management Models, System Navigation and Centering Pregnancy. However, there are 4 projects [Mobile Health Teams, Pulmonary, Sexually Transmitted Infections (STI) Testing and Treatment, and Paramedic Navigation] where the quantifiable patient impact (QPI) milestones need adjustments to more accurately determine the impact they have on the
population served. Any adjustments made can carry over to DY 4 and 5. Ms. Cook also explained the ratings for the few projects that reflect multiple QPIs and have two dashboard indicators with a combination of red, yellow, and/or green. For DY 4 and 5, the CCC will submit and request plan modifications for specific DSRIP Projects. Requests for plan modifications require a significant variance from the approved project such as changes in the estimated patient impact or target population impact, deletion or replacement of the approved metrics, or the inability to achieve project goals. Any significant changes that lessen the scope or patient impact of the project will be reviewed and approved by the Health and Human Services Commission (HHSC) and/or Centers for Medicare and Medicaid Services (CMS).

There was no action taken on this agenda item.

2. Receive a DSRIP Projects update from CommUnityCare.

Clerk’s Notes:
Terri Sabella, CommUnityCare Chief Operating Officer, provided an update on CommUnityCare’s DSRIP Projects and strategic initiatives. In the last year, CommUnityCare has undergone several changes that will enhance efficiency and drive large-scale transformation. Under its new executive leadership, CommUnityCare has relocated corporate offices; developed a patient navigation center; created a strategic plan that is intended to increase access, quality, efficiency and productivity; and identified ways to improve workplace factors to become the employer of choice and the provider of choice for the safety-net population. Ms. Sabella highlighted the following seven DSRIP Projects for which CommUnityCare provides additional health care access: Expanded Hours, Mobile Health Teams, Dental Services, Gastroenterology, Pulmonology, Telepsychiatry, and Centering Pregnancy. To support each of these projects, CommUnityCare has created project teams to execute the tasks necessary to meet the project milestones. Each team consists of a project manager, administrative support, and clinical and operational staff to ensure the success of the project. In addition to CommUnityCare staff, these teams are comprised of staff from other organizations, including the CCC, Central Health, and COPE Health Solutions. Proposed project teams for DY4 DSRIP Infrastructure Initiatives is under development. The DSRIP Infrastructure Initiatives category will contain investments in additional resources such as people, places, processes and technology to expand, improve, and/or create efficient health care access at a lower cost. CommUnityCare will provide updates to the CCC Board of Directors on developments of these initiatives as they become available. In the meantime, CommUnityCare is focused on improving healthcare quality and access. With eight new initiatives in place, CommUnityCare will soon have additional health centers in convenient locations in the Central Texas Region. Integrated Behavioral Health Services in primary care health center sites in Austin, Del Valle and Pflugerville Independent School Districts will be provided by CommUnityCare as part of a DSRIP Project initiative and expansion of services. To determine the best way to support the community, CommUnityCare is conducting an assessment of all their existing sites of services.

Serena Bumpus, CCC Director of Integrated Delivery System (IDS) Development, provided an update on the implementation of the clinical protocols. The CCC is coordinating with CommUnityCare Pflugerville and Rosewood Zaragosa Health Centers to implement protocols for Type 2 Diabetes Mellitus. The protocols provide evidence-based care recommendations in the screening and treatment of patients with specific chronic medical conditions in a primary care setting. These protocols were created as a standard for treatment of care with applicable best practices and an appropriate referral process. The CCC will also implement protocols related to Hypertension, Heart Failure, Depression and Hepatitis C. Ms. Bumpus also specified that protocol development for Chronic Pain Management and Asthma will begin in late August 2014.
There was no action taken on this agenda item.

3. Discuss and take appropriate action on agreements for performing CCC DSRIP Projects.

Clerk's Notes:
This agenda item was not discussed.


Clerk's Notes:
Jeff Knodel provided an update on the interim financial statements, including the balance sheet, sources and uses report – budget versus actual, and the healthcare delivery report and costs for nine months of operations October 1, 2013 through June 30, 2014. He also explained the expansion funds report which includes allocations for expanded specialty care at CommUnityCare for gastroenterology and pulmonology. Mr. Knodel provided an overview of the budget expenditure comparison for Fiscal Years 2013 and 2014. The Fiscal Year 2014 Budget includes $906,479 in service expansion funds from Central Health for specialty care, specifically vision services and behavioral health services at SIMS Foundation. These requests were approved by the CCC Advisory Committee, CCC Board of Directors, Central Health Budget and Finance Committee and Central Health Board of Managers.

No action was taken.

5. Receive a report on the current number of Unique MAP Enrollees.

Clerk's Notes:
Larry Wallace reported the current number of unique MAP enrollees for June 2014 which was 24,262. This number is comparable to trends from last year. He also provided an update on recent Advisory Committee meeting discussions related to MAP enrollment exceeding 25,000 enrollees. The Advisory Committee will propose a recommendation to the CCC Board of Directors that provides reasoning for MAP enrollment if the number of enrollees exceeds 25,000.

No action was taken.

6. Receive and take appropriate action on a recommendation from the Advisory Committee if MAP enrollment exceeds 25,000 enrollees.

Clerk's Notes:
This agenda item was not discussed.

IV. Closed Session

Clerk's Notes:
No closed session discussion.

V. Closing

Clerk's Notes:
There being no further discussion or agenda items, Director Knodel moved that the meeting adjourn. Director Cook seconded the motion.

Director Greg Hartman (Vice-Chairperson) For
Director Jeff Knodel  
Director Christie Garbe  
Director Tim LaFrey  
Director Sarah Cook (Proxy)  

For  
For  
For  
For  

The meeting was adjourned at 3:02 p.m.

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

ATTESTED TO BY:

Margo Gonzalez, Secretary to the Board  
Community Care Collaborative