Board of Directors

Meeting

Tuesday, April 7, 2015

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, April 7, 2015, a public meeting of the CCC Board of Directors was called to order at 2:04 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 and Vice-Chairperson Greg Hartman were both present. The clerk for the meeting was Margo Gonzalez.

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

Directors Present:
Chairperson Patricia A. Young Brown, Vice-Chairperson Greg Hartman, Christie Garbe, Larry Wallace, Willie Lopez (Proxy for Tim LaFrey), and David Evans (Non-Voting Advisory Board Member)

Officers Present:
John Stephens (Executive Director) and Margo Gonzalez (Secretary)

Other Attendees Present:
Randy Floyd (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 January 27, 2015 CCC Board of Directors meeting.

Clerk's Notes:
Vice-Chairperson Hartman moved that the Board approve Consent Agenda item A (1). Director Wallace seconded the motion. The motion was passed on the following vote:

Director Patricia A. Young Brown (Chairperson) For
Director Greg Hartman (Vice-Chairperson) For
Director Christie Garbe For
Director Larry Wallace For
Director Willie Lopez (Proxy) For

B. Regular Agenda

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

Clerk's Notes:
Sarah Cook, Central Health Medicaid Waiver Director, gave an update on the DSRIP Waiver Projects, Demonstration Year ("DY") 4 reporting and progress, and DSRIP sustainability / extension. For the exception of Centering Pregnancy, mid-Point Assessments of DSRIP waiver projects are in progress. These assessments will determine priorities for DYs 4 and 5 and clarify milestones and performance measurements. She also reported that the majority of milestones for DY3, all October 2014 submissions totaling a value of $54 million, and all change requests for DYs 4 and 5 have been approved. As a result, the Regional Health Partnership 7 ("RHP") successfully earned 91 percent of DY3 funds in DY3. Ms. Cook further explained that 4 of 5 DSRIP Project milestones, eligible for April reporting, will carry forward from DY3. Central Health will submit 3 DY4 milestones and forgo a fifth to focus on DY4 Quantifiable Patient Impact ("QPI") milestones that measure the impact DSRIP projects have on the population served. Throughout DY4, QPIs and 15 DSRIP Projects have remained on target; new subcontracted providers have been added to expand services; and Category 3 quality improvements will improve efficiency and effectiveness. There are several innovative approaches to providing care to the CCC’s covered population. Ms. Cook shared the following examples: service expansion with a referral pathway to the Mobile Health Team and Expanded Dental DSRIP Projects at People’s Community Clinic and CommUnityCare in an effort to increase patient encounters; adding El Buen Samaritano as a new contracted DSRIP provider for Integrated Behavioral Health services; and CommUnityCare successfully implementing text message reminders to Centering Pregnancy DSRIP Project patients to decrease no show rates. She also explained how the United Way contract for navigation call center services, including outreach and education services, has provided an improved coordinated patient care system by assisting MAP patients in accessing proper health care resources and thereby decreasing the number of MAP patients who visit the emergency room. The CCC monitors 18 unique improvement targets for Category 3 quality outcomes; however, these targets are restricted to Medical Assistance Program ("MAP") patients which is a subset of the CCC’s covered
population. HHSC may submit a request for an extension of DSRIP Waiver Projects in September.

Vice-Chairperson Hartman requested that the CCC Board discuss comparable data from Seton Healthcare Family and CCC DSRIP Projects at the next CCC Board meeting.

2. Discuss and take appropriate action on the Community Care Collaborative’s Purchasing Policy.

Clerk’s Notes:
John Stephens, CCC Executive Director, explained that the CCC Purchasing Policy is modeled after Central Health’s Purchasing Policy. This policy limits the Executive Director’s authority to award contracts and/or contract amendments and modifications for goods or services up to $100,000 except for transactions requiring additional approval.

Chairperson Trish Young Brown clarified that this policy is meant to reflect the best possible solution to soliciting goods and services in a timely and cost effective manner while also ensuring appropriate business processes are followed.

Director Wallace moved that the CCC Board of Directors approve the CCC Purchasing Policy as presented by staff and as approved by the Central Health Board of Managers. Director Lopez seconded the motion. The motion was passed on the following vote:

- Director Patricia A. Young Brown (Chairperson)  For
- Director Greg Hartman (Vice-Chairperson)  For
- Director Christie Garbe  For
- Director Larry Wallace  For
- Director Willie Lopez (Proxy)  For


Clerk’s Notes:
Jeff Knodel, Central Health Chief Financial Officer, and Diane Hosmer, CCC Contract Administration and Medical Management Director, presented the CCC Financial Statements for five months of operations (October 1, 2014 through February 28, 2015), including the balance sheet, sources and uses report – budget versus actual, and details of healthcare delivery expenditures. He specified that some budget line items may change due to varying factors.

Ms. Hosmer reported on the health care delivery costs through the end of February 2015 and highlighted how much of the actual budget has been utilized compared to the fiscal year budget.

David Evans, Austin Travis County Integral Care (“ATCIC”) Chief Executive Officer, asked which of the contracts listed are Central Health contracts. Chairperson Young Brown clarified that Planned Parenthood and ATCIC are Central Health contracts and expenditures.

4. Receive a presentation on the Community Care Collaborative Integrated Delivery System (“IDS”) and a Benefit Redesign overview.

Clerk’s Notes:
Mr. Stephens presented the CCC’s Integrated Delivery System (“IDS”) Draft Work Plan. In September 2014, the CCC Board adopted a resolution to create the IDS. The resolution sets specific requirements for the development of an IDS, including an implementation plan and a Benefit Redesign Plan for the CCC’s covered population. He explained that the key elements of the plan include care coordination, Health Information Technology (“HIT”) infrastructure,
expanded access to specialty care services, an IDS system delivery redesign, an evaluation of the IDS’s effectiveness, and a framework for moving towards a value-based reimbursement methodology. Mr. Stephens clarified that the plan will be reviewed and revised regularly as this is a complex system that will involve multiple organizations and a continuous assessment of what priorities can be accomplished in an 18-month period and that some portions of the IDS Plan are lagging due to data sharing implications. However, at some point, the IDS Plan will include 3 to 5 year projections. Next, the CCC will also present the IDS Draft Work Plan to the Central Health Strategic Planning Committee and Board of Managers, and at some point, request consideration for approval from the CCC Board.

Chairperson Young Brown clarified that more detail about the IDS Plan and its progress will be shared at a later date. She also clarified that the Benefit Plan Redesign is meant to advance current programs, care coverage, and service delivery in a way that efficiently provides a coordinated continuum of services for the CCC’s covered population.

Director Garbe asked for perspective of the IDS Draft Work Plan from Dr. Mark Hernandez, CCC Chief Medical Officer.

Dr. Hernandez generally described the IDS Draft Work Plan as a broad view of the CCC’s achievements as it includes a staff assessment of current health care services and medical needs of the CCC’s covered population. He also explained that the IDS Draft Work Plan prioritizes the most critical needs of the CCC’s covered population over an 18-month period. For implementation to begin, infrastructure and staff resources, service delivery improvements, and industry experts will be needed to operationalize the plan.

Director Wallace expressed that the plan defines the future of specialty care that is collaborative and forward-thinking as it leverages the most appropriate resources creating a win-win for the CCC, participating providers, patients, and the community.

IV. Closed Session

Clerk’s Notes:
No closed session discussion.

V. Closing

Clerk’s Notes:
Chairperson Young Brown announced that the next regular meeting of the CCC Board is scheduled to be held Tuesday, August 11, 2015, at 2:00 PM, in the Board Room, at Central Health’s Administrative Office at 1111 East Cesar Chavez Street, Austin, Texas 78702.

There being no further discussion or agenda items, Director Garbe moved that the meeting adjourn. Director Wallace seconded the motion.

Director Patricia A. Young Brown (Chairperson)   For
Director Greg Hartman (Vice-Chairperson)   For
Director Christie Garbe   For
Director Larry Wallace   For
Director Willie Lopez (Proxy)   For

The meeting adjourned at 2:56 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