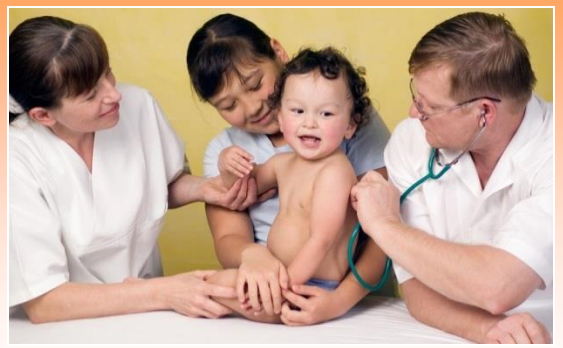
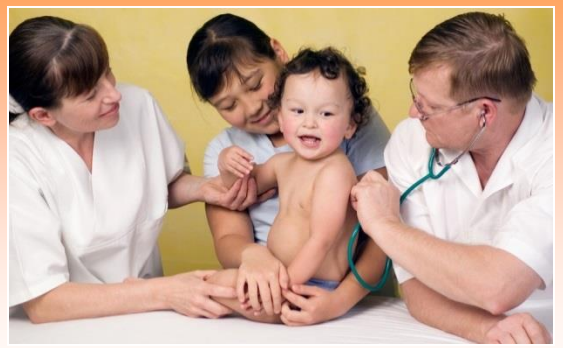


CommUnityCare™
HEALTH CENTERS

Serving People with Disabilities within CommUnityCare



https://vimeo.com/79245891

CommUnityCare™
HEALTH CENTERS

Where did we come from?

CommUnityCare Milestones

1970	1992	2001	2004	2009	2010	2011
The Austin City Council and Travis County Commissioner's Court develop a system of primary care, dental care, and family planning clinics. The "East Austin Clinic" becomes the first publicly funded health clinic in the community to serve those with limited resources.	The clinic system earns "Federally Qualified Health Center Look-Alike" status through the federal government. A 15-member FQHC Board of Directors is appointed. The majority of the members are patients who use the health centers.	The Community Health Centers are officially designated a "Federally Qualified Health Center" system. The centers receive a Section 330 federal grant from the Bureau of Primary Health Care/Health Resources and Service Administration.	Central Health (Travis County Healthcare District) is established as a limited-purpose taxing district. Funding for the Community Health Center system is transferred to Central Health from the City of Austin and Travis County Commissioners Court.	The Community Health Center system becomes the non-profit corporation, CommUnityCare.	CommUnityCare is accredited by The Joint Commission, which recognizes quality healthcare institutions around the world.	Today CommUnityCare operates 20 federally qualified, Joint Commission accredited health centers. The system expects to provide 277,000 medical and dental encounters and serve 66,000 patients in 2011 with a budget of $64.5 million.

CommUnityCare

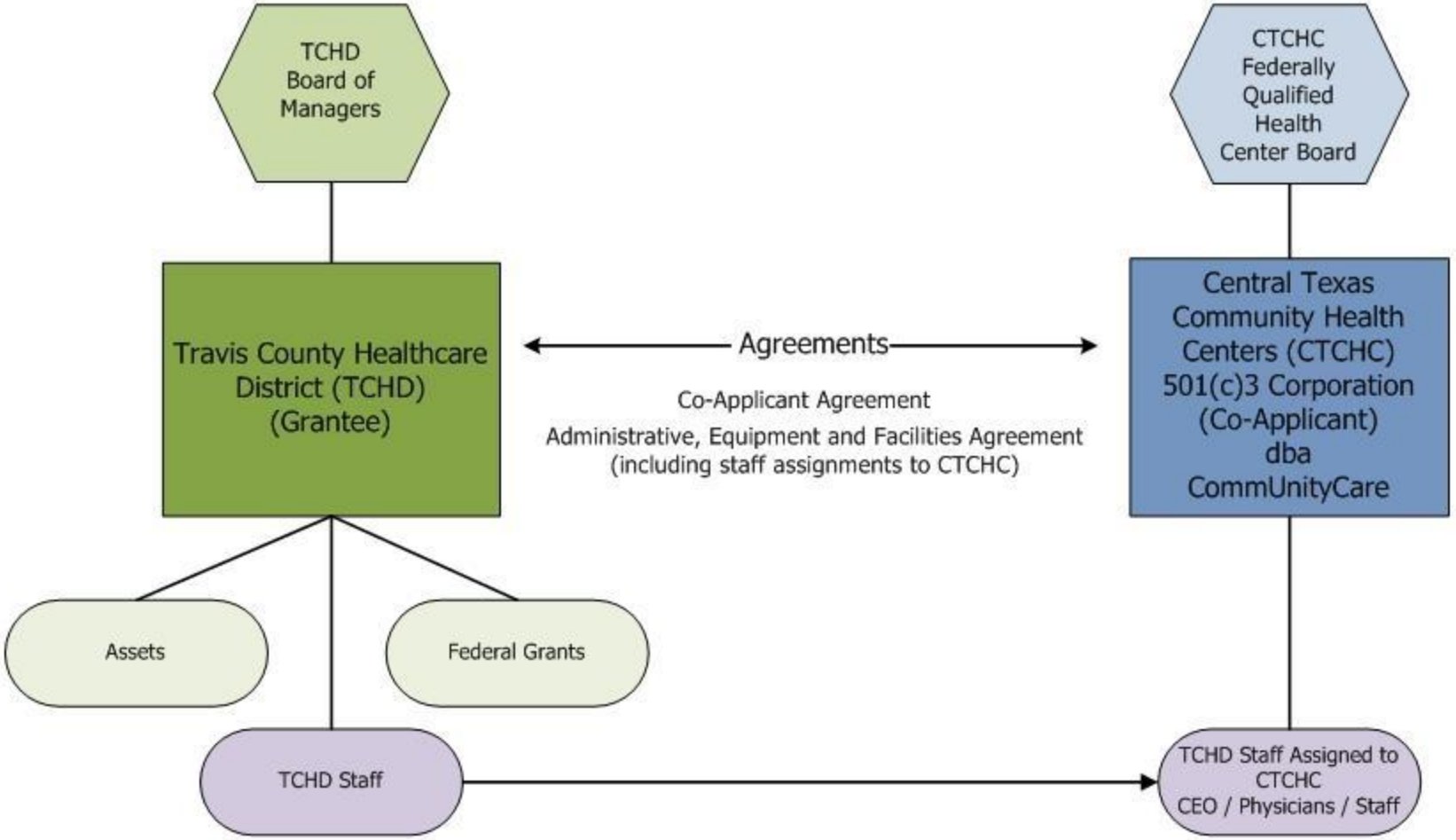
What are some of the requirements and benefits of being a Federally Qualified Health Center?

- Must be 51% patient representation on Board of Directors
- Board hires and fires CEO, approves the scope of services, and approves the budget
- An FQHC receives deeply discounted pharmaceutical cost via the 340B program
- Federal Tort Claims Act provides malpractice coverage for the practice
- Fair market reimbursement for Medicaid/Medicare/CHIP patient visits

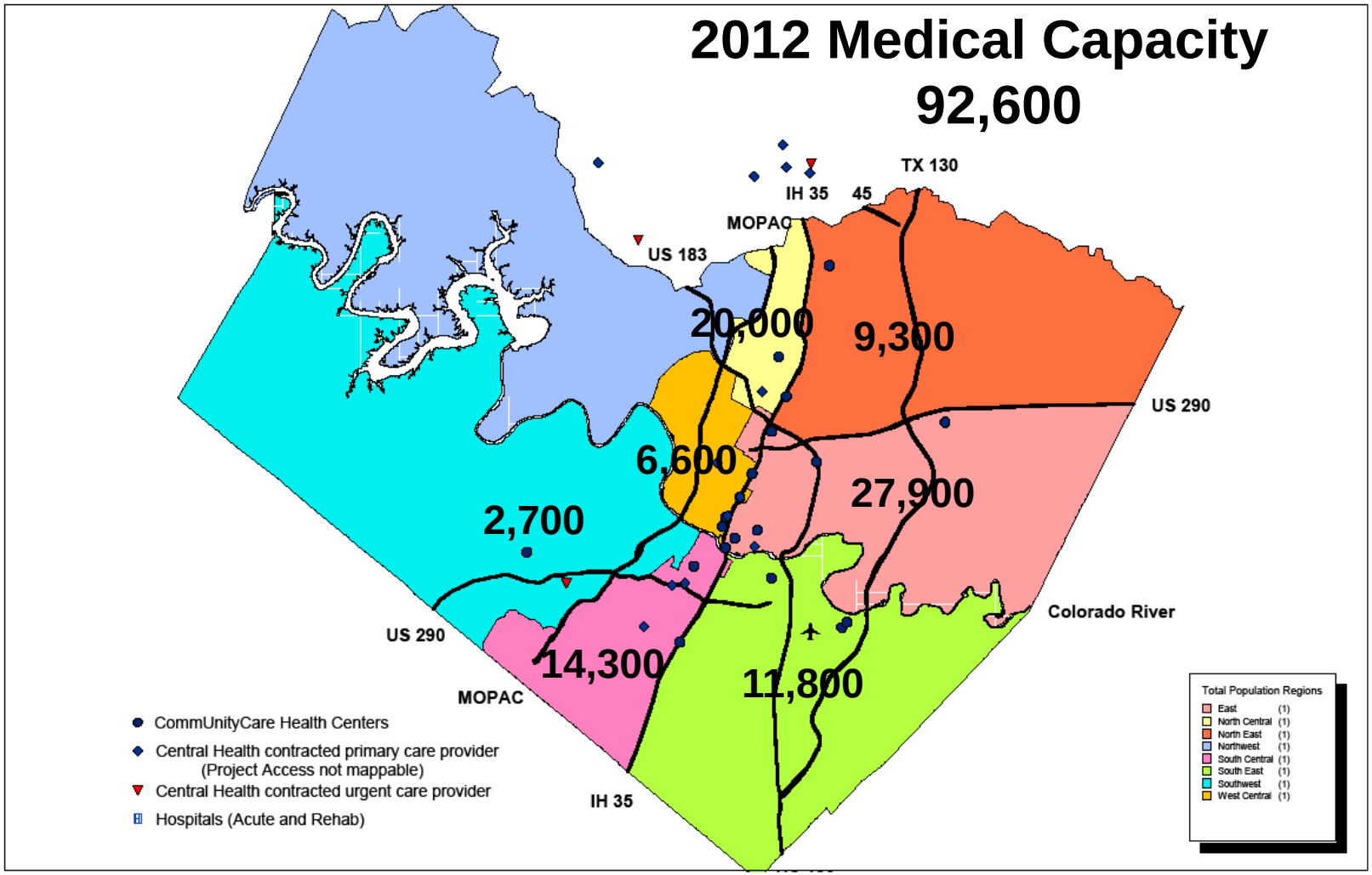
Travis County Healthcare District/Central Texas Community Health Centers

Federally Qualified Health Center Structure

March 1, 2009



REGIONS BASED ON EQUAL TOTAL POPULATION



Expected capacity by 12/31/12

CommUnityCare Organizational Goals

- Our budgeted encounters for FY2013 are:
  - 221,841 medical
  - 35,934 dental
  - 13,667 behavioral

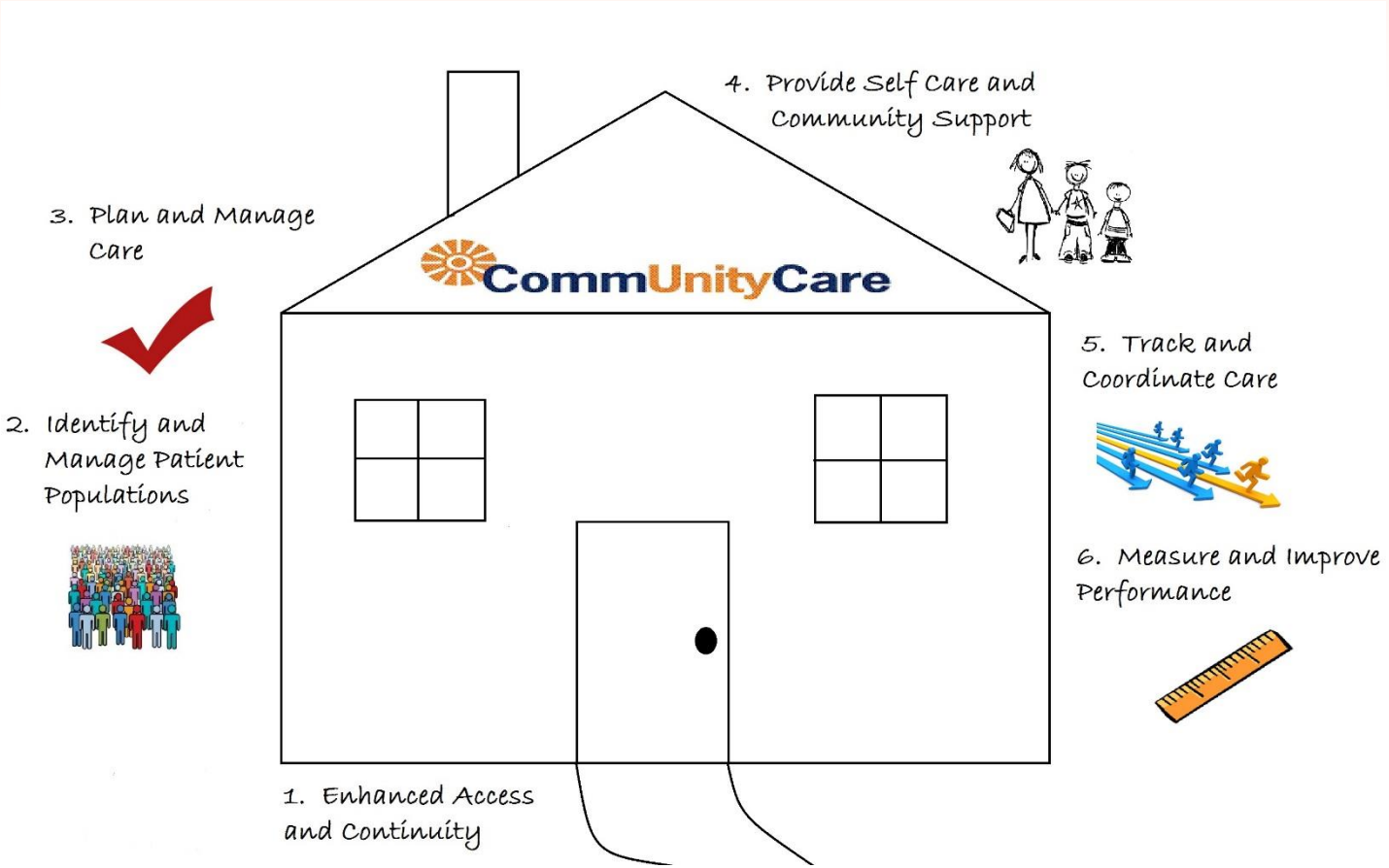
Total of 271,445 encounters

Why Use PCMH As Our Practice Model?

- Healthcare in the US is broken
- PCMH will help us transform ourselves into a true medical home.
- PCMH aligns with our mission of “the right care, at the right time, at the right place.”
- PCMH puts the patient at the center of the care delivery system that includes family, providers, specialists, ancillary staff and the wider community.

A patient centered medical home puts patients at the center of the health care system, and provides primary care that is “accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective.”

(American Academy of Pediatrics)



Enhanced Access and Continuity:

Provide access and advice during and after hours, give patients and their families information about their medical home and provide patients with team-based care

Patients have limited access to appointments outside of normal business hours.

Patients have access to appointments before 8 and after 5. Staff and providers have options for a work/life balance with varied work schedules.

Patients wait weeks or months for appointments.

Patients can access same day appointments for all visit types.

Our Vision & Mission

Vision

Improve the health of the community by increasing access to the best care possible.

Mission

We will work with the community as peers with open eyes and a responsive attitude to provide the right care, at the right time, at the right place.

CommUnityCare

Travis County Stats

Travis County is one of the fastest growing areas in the nation.

Current population: 1,024,266
Projected population in 2015: 1,082,986

110 People move to Austin every day.

- 20% of women living in poverty (103,108 persons)
- 25% of children and youth living in poverty (62,168 kids under 18)
- 47% of children and youth considered low-income

Texas has one of the fastest growing child populations in the country (17% vs 3%) and central Texas is growing faster than the state rate (28%).

- 11% of children and youth in the county are uninsured.

According to national statistics these children are:

- Four times more likely to delay seeking care when needed
- Five times more likely to use the emergency room for regular care
- Six times less likely to fill prescriptions due to cost

CommUnityCare has over 24 Health Centers serving Travis County

CommUnityCare

CommUnityCare

We are pleased to partner with ATCIC for Behavioral Health and JSA for Tele-Pysc

Behavioral Health, Nutrition Counseling, and Clinical Pharmacy Services are available at multiple sites by referral.

Primary Care
- Prenatal care and specialty care for high-risk pregnancies
- Prenatal, Labor and delivery, and newborn care education
- Newborn and infant care
- Pediatrics
- Immunizations
- Gynecology and women's health exams
- Physicals and annual exams
- Treatment of minor injuries
- Laboratory services
- Management of chronic diseases
- Diagnosis and treatment of chronic or acute illnesses
- Nutrition counseling
- Core specialty care services and referrals
- Clinical pharmacy counseling
- Prescription drug assistance
- Vision and hearing screenings
- Confidential HIV testing and care

•Dental
- Routine and emergency dental exams
- Teeth cleaning and sealants
- Dental fillings
- Dental extractions
- Dentures and partials (limited services)

Behavioral Health
- •Mental health counseling services
- •Family and marriage counseling
- •Assessment of behavioral problems
- Substance abuse assessments

Other Programs
- •Affiliation with UT Residency Program
- Affiliation with UT Nursing Program
- Comienzo Bien Prenatal Education Classes
- •Centering Pregnancy and Parenting Program
- •Electronic Medical Record (NextGen)

CommUnityCare

TEAM MEMBERS

We have a total of 620 team members:

- 50 physicians
- Contract with 150 other Specialists
- 17 dentists
- 30 midlevel providers (nurse practitioners and physician assistants).
- Pharmacists, Dieticians, Social Workers
- Many of our providers speak several languages and we also utilize a telephone medical translation service for less common foreign languages

Patients Served

.

In Fiscal Year 2013, CommUnityCare provided over 271,500 service encounters (patient visits), caring for approximately 70,000 individual patients.

CommUnityCare is the largest “safety net” provider of primary care health services in Travis County.

CommUnityCare

Patient Mix

66% of our patients are Hispanic

15% are Caucasian

12% are African-American

7% are other ethnicities.

Children age zero to 17 years represent 25% of the total patient population served. Fifty-eight percent are women

We care for patients regardless of ability to pay:

- 27 % are uninsured
- 32 % have Medicaid coverage, including Children's Health Insurance Program (CHIP)
- 6 % have Medicare
- 35 % have Medical Assistance Program (MAP) from Central Health

CommUnityCare

How do we transform HealthCare in Travis county?

DSRIP

CommUnityCare Patient Statistics

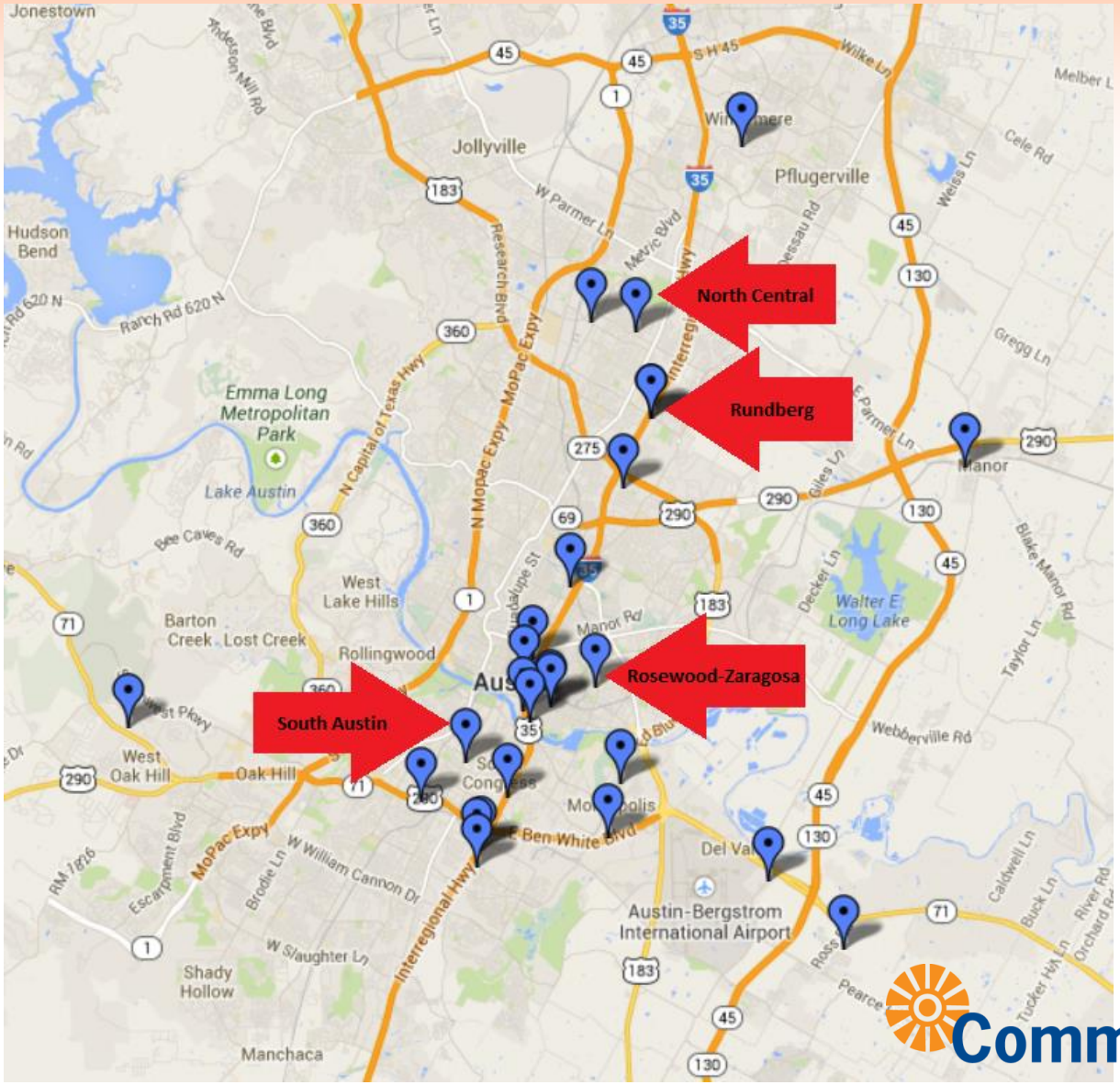
- 69,620 – Total number of individual CommUnityCare patients
- 1,048 – Total number of CommUnityCare patients diagnosed as Intellectually/ Developmentally Delayed
- 124 – Total number of CommUnityCare patients diagnosed as being Dually-diagnosed: Depression, Schizophrenia, or Bi-polar disorder
- 1.5% – percentage of Intellectually/ Developmentally Delayed CommUnityCare patients
- 0.18% – percentage of Dually-diagnosed, depressive, schizophrenic, bi-polar disorder CommUnityCare patients

Payor Mix for Patients

We care for patients regardless of ability to pay:

- 27% are uninsured
- 32% have Medicaid or Children's Health Insurance Program (CHIP) coverage
- 6% have Medicare
- 35% have Medical Assistance Program (MAP) coverage

CommUnityCare Clinics that serve the majority of patients with Dual-diagnosis of Depression, Schizophrenia, or Bi-polar Disorder



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Meeting the Needs of Developmentally Delayed Patients at CommUnityCare

- **Pediatricians –** CommUnityCare has a staff of 9 Board-Certified pediatricians who perform developmental and behavioral screening from infancy throughout childhood.
- **Integrated Behavioral Health Counselors** perform psychosocial risk assessments of all pregnant women. They counsel children and adults with mental illness at 12 CommUnityCare sites.
- **High-Risk Clinics** provide wrap-around services for individuals who are HIV-infected, homeless, and suffer from addiction. They may also have developmental delays.
- **Referrals** to Dell Children's Neuroscience Center, Any Baby Can's "Early Childhood Prevention," and Speech and Occupational Therapy.

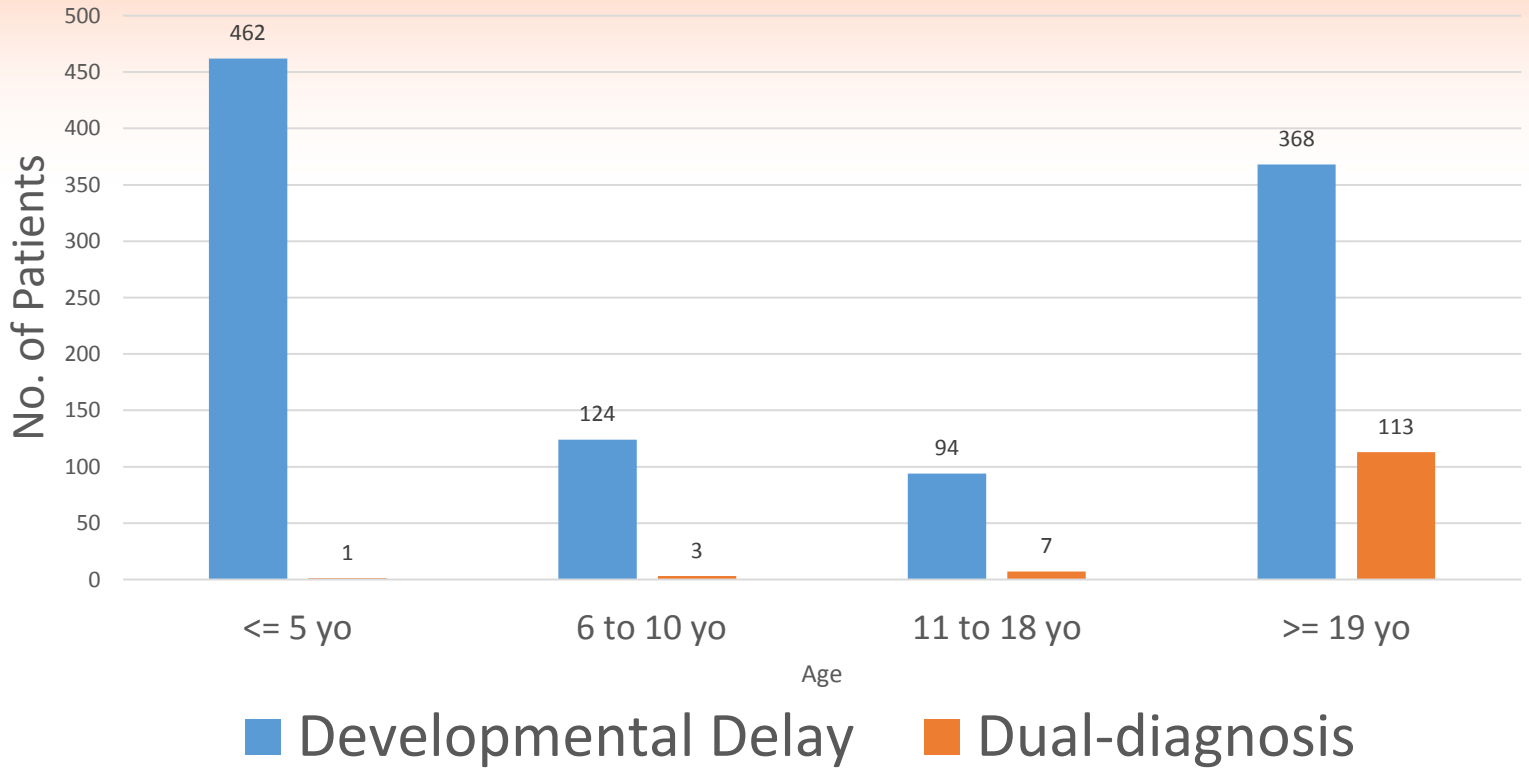
CommUnityCare Patients with Dual-Diagnosis of Depression, Schizophrenia, or Bi-polar Disorder by Age

Age	Number of Patients
<=5 years old	1
6 to 10 years old	3
11 to 18 years old	7
>=19 years old	113
Total	124

Of the 1,048 patients identified as intellectually disabled, 124 have a dual-diagnosis of depression, schizophrenia, or bipolar disorder. The majority of the patients are in the >=19 year old age group.

CommUnityCare

CommUnityCare Patients with Developmental Delay and Dual-Diagnosis (Mental Illness) by Age



Among all the patients (the original 1,048), 204 (19%) were seen by a Behavioral Health Counselor in the past year.

CommUnityCare

CommUnityCare Patients with Dual-Diagnosis of Depression, Schizophrenia, or Bi-polar Disorder

Among the subset of 124 patients with a dual-diagnosis of depression, schizophrenia, or bipolar disorder, 78 (63%) were seen by a Behavioral Health Counselor in the past year.

Patients declined being seen by a Behavioral Health Counselor in part, to social and cultural stigmas of being diagnosed with a mental illness.

Many patients tell their Primary Care Provider that they simply will not be seen by a Behavioral Health Counselor.

Many patients will schedule, then abandon, their appointment.

1115 Waiver and Central Health

- Central Health
  - *Guides* transformation as Regional Health Partnership 7 (RHP7) Anchor
  - *Supports* transformation as an intergovernmental transfer (IGT) Entity
  - *Achieves* transformation through the Community Care Collaborative (CCC)
- 1115 Waiver is an opportunity to improve our health care system through Delivery System Reform Incentive Payments (DSRIP) projects.

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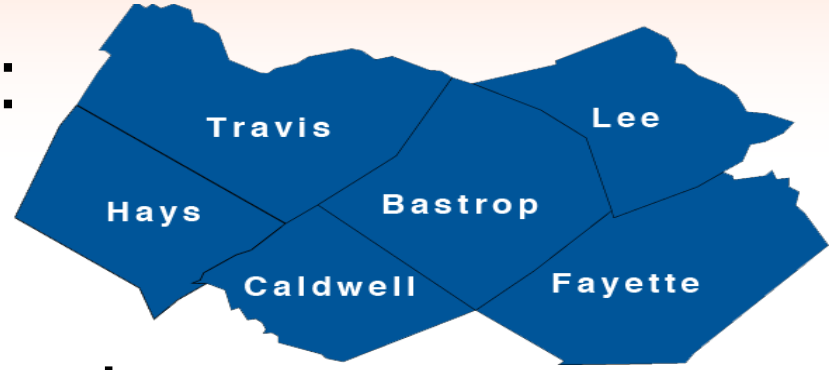
RHP7



- Six Counties within RHP7:
  - Travis, Bastrop, Caldwell, Fayette, Hays, & Lee
- Region has proposed 77 projects
- Total value: Over $700m
- Most recent program year: $129m of local & federal funds to providers.

CommUnityCare

Travis County

Performing Provider	# DSRIP Projects	IGT entity (source of local match)
St. David's	1 pending	**Central Health**
City of Austin HHSD	6 (+4 pending)	City of Austin
Dell Children's	3 (+1 pending)	**Central Health**; AISD
UMC Brackenridge	14 (+1 pending)	**Central Health**
ATCIC	9 (+3 pending)	**ATCIC**
Community Care Collaborative	**13 (+2 pending)**	**Central Health**
TOTAL	*57*	

CommUnityCare

Travis County

- 57 projects total (includes 12 recently submitted & not yet approved)
- Focus on
  - Behavioral Health
  - Chronic Disease Management
  - Expansion of Care
- Value to Travis County: $606m dollars
- Central Health provides intergovernmental transfer for St. David's, Dell Children's, University Medical Center Brackenridge, & Community Care Collaborative

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Austin Travis County Integral Care
Behavioral Health & Developmental Disabilities Services

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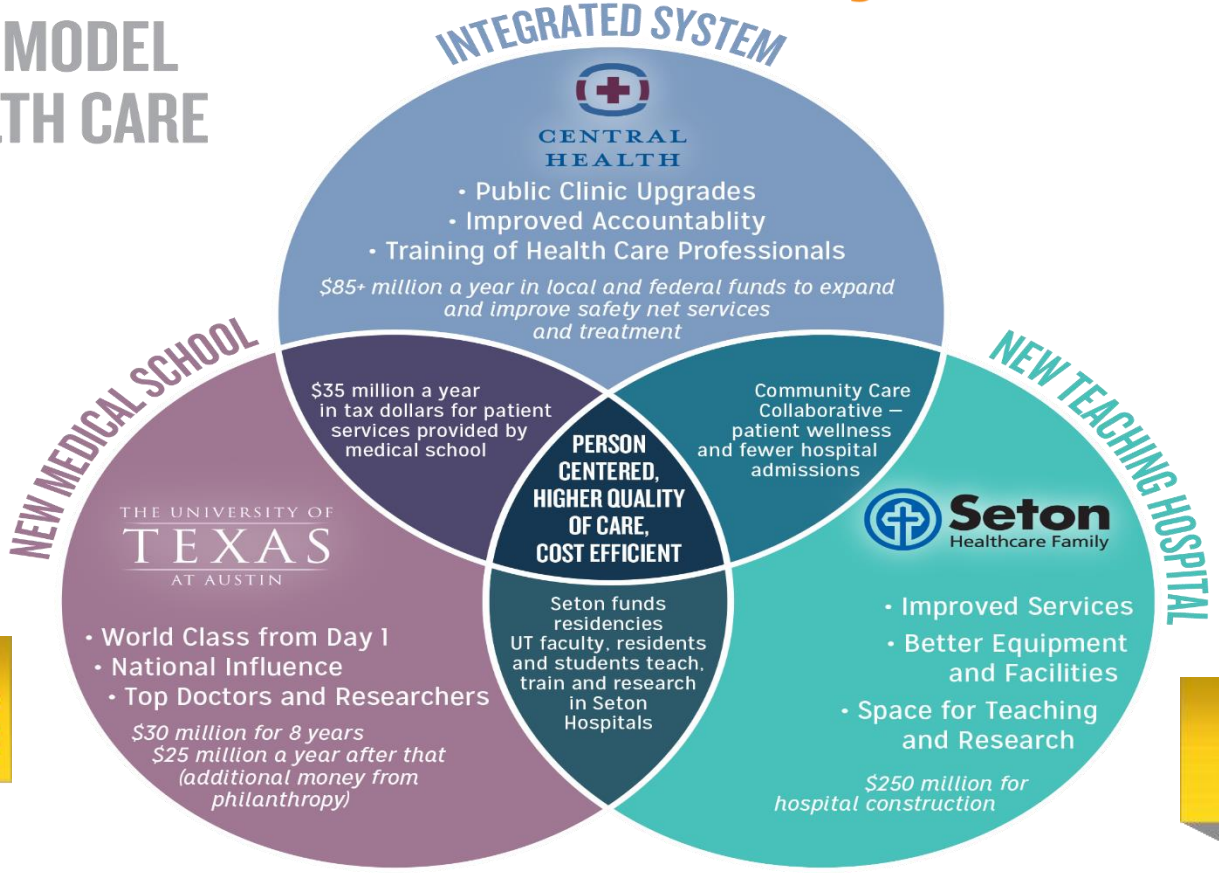
A NEW MODEL OF HEALTH CARE



Austin Travis County Integral Care
Behavioral Health & Developmental Disabilities Services

Austin Travis County Integral Care
Behavioral Health & Developmental Disabilities Services

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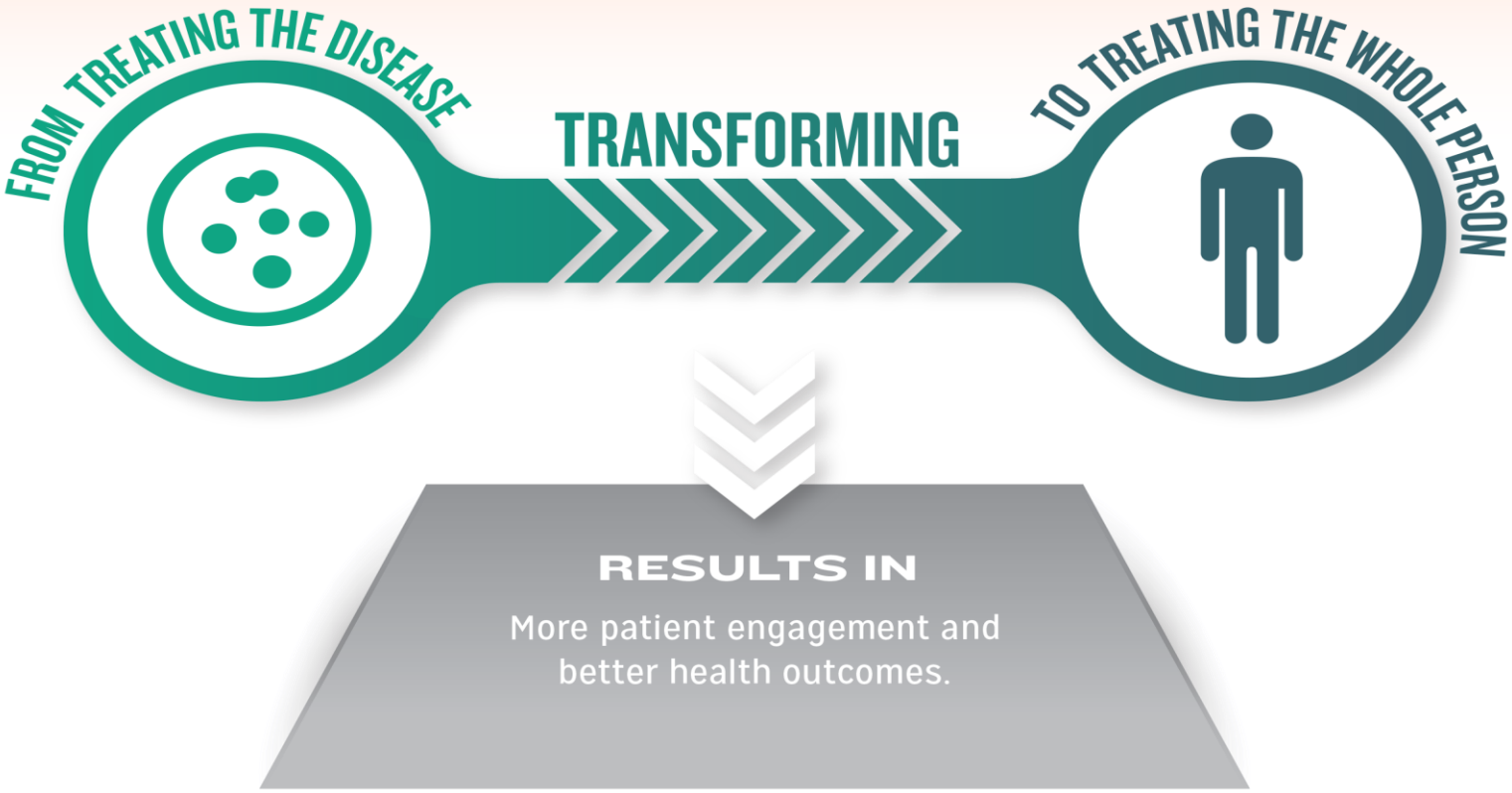
FIRST AIM: IMPROVED PATIENT EXPERIENCE



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SECOND AIM: HIGHER QUALITY CARE

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WHAT DOES PROGRESS LOOK LIKE?

FROM NO SYSTEM

TRANSFORMING

TO METRICS BASED SYSTEM

RESULTS IN

A metrics-based system that supports the Triple Aim: Improved patient experience, higher quality of care, and increased cost efficiency.

CommUnityCare

WHAT DOES PROGRESS LOOK LIKE?

FROM FRAGMENTED CARE

TRANSFORMING

TO SEAMLESS CARE

RESULTS IN

An integrated delivery system that provides better health care and health outcomes for the community.

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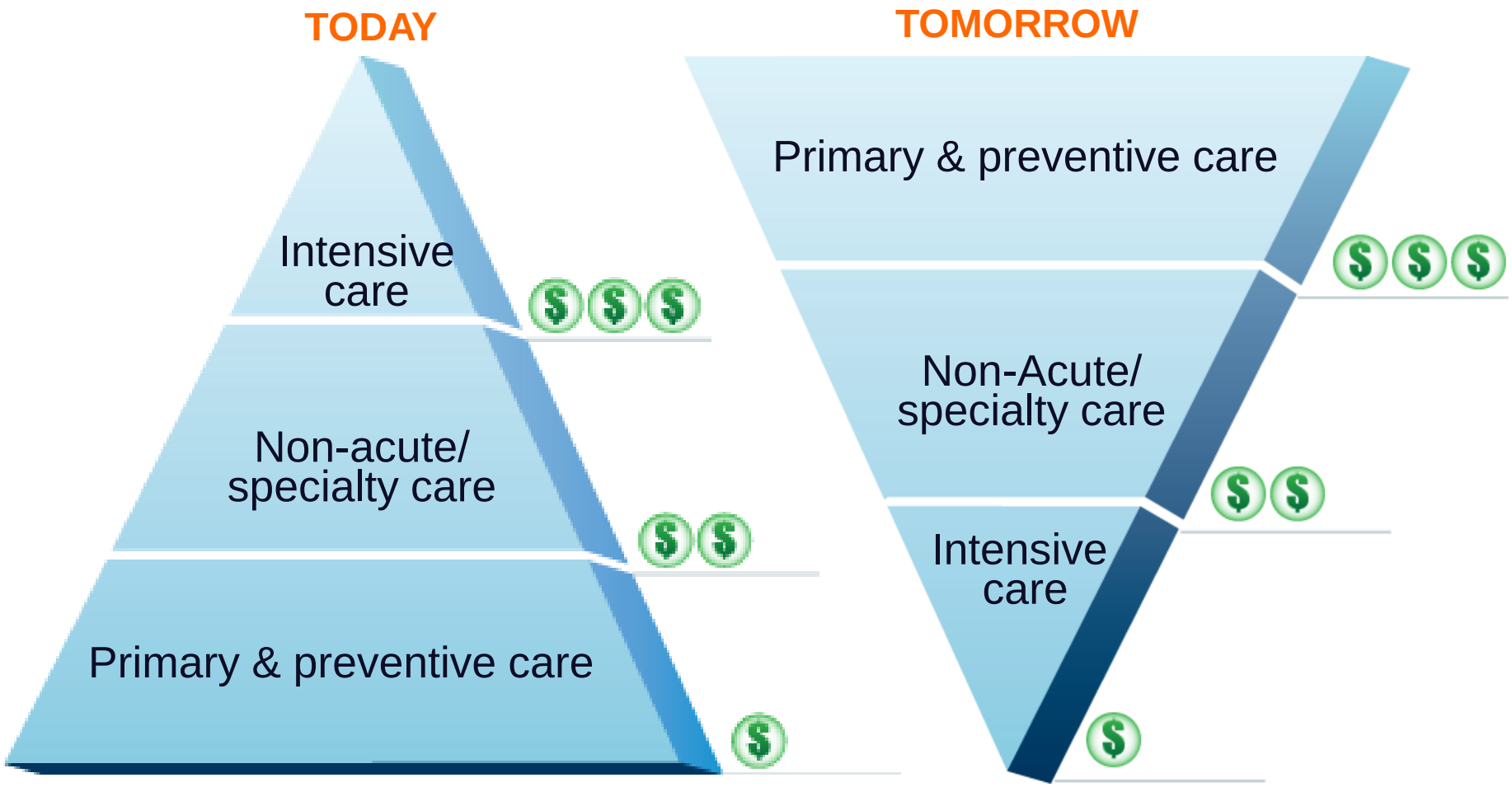
Health Care Delivery



National transformative drivers of change

- Demand for value
- Engaging the individual in their health care
- Increased diversity

A unique opportunity

- Central Health, CommUnityCare and Sendero, in cooperation with the Community Care Collaborative (CCC) and Central Health's primary partners in the CCC Seton Healthcare Family and ATCIC, have a unique opportunity to re-design care delivery and financial incentives by leveraging federal and state funds

- In order to be most successful in adding value, it is critical for Central Health, Sendero and CommUnityCare to align themselves internally and focus on maximizing the efficient use of limited resources and ability to add measureable value

- This can be achieved in part by developing shared services where possible and aligning and coordinating across the three organizations and with the new CCC

Our goal is to create an Integrated Delivery system within the Central Health Enterprise

Travis County Regional Trends

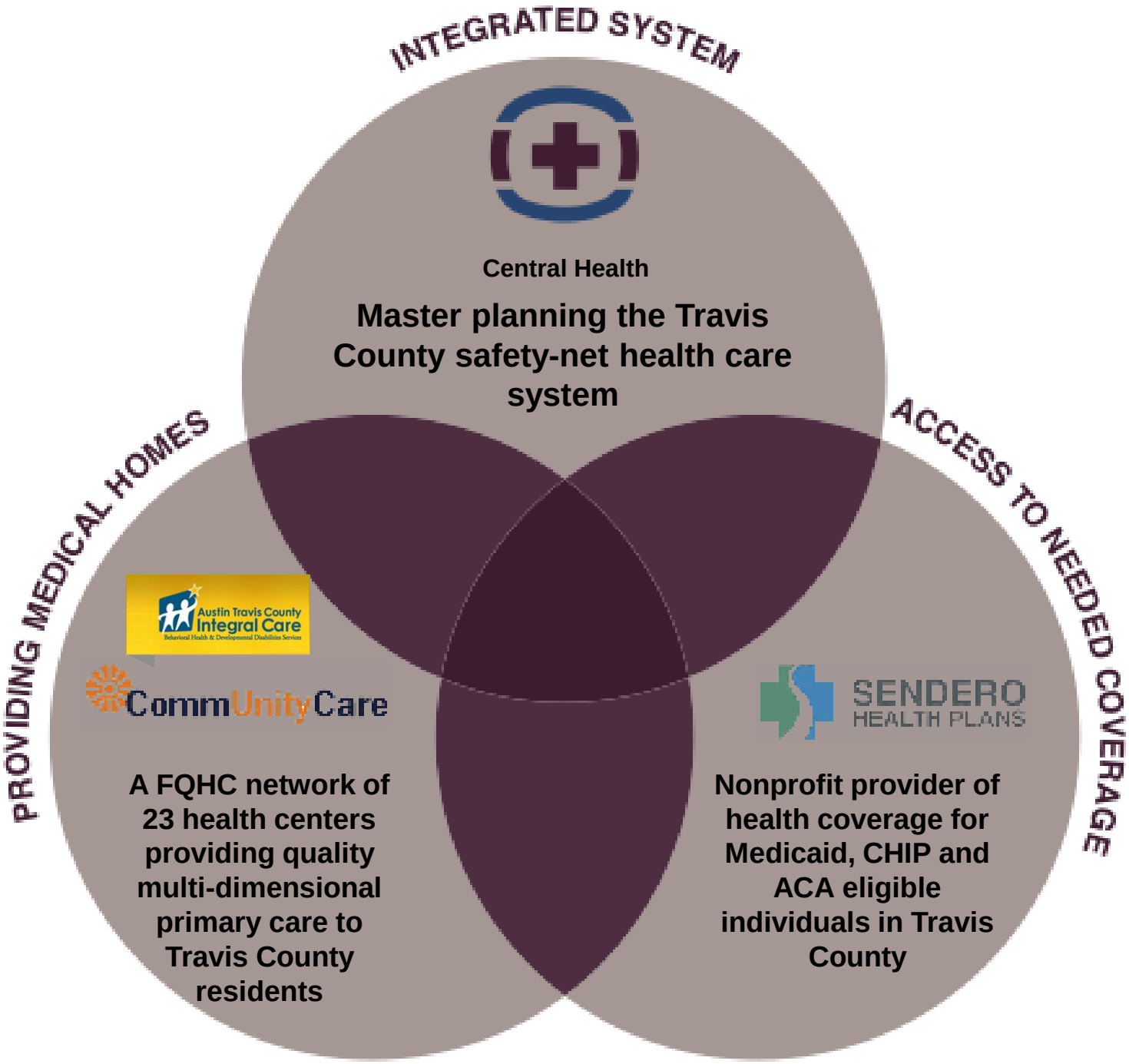
- Our healthcare system is fragmented and overwhelmed
- The public safety net hospital is aging and outmoded
- We have a shortage of doctors and other providers
- Rise in costly chronic conditions among population
- Our population is rapidly growing and aging
- Texas has the highest rate of uninsured in the nation

…that will require real change

- Realization of a future state that can survive in these assumptions will require an investment of time, resources and coordination by all three entities to fundamentally redesign current business operations, specifically:
  - Develop a clear decision making process and accountability to establish common goals and initiatives and pave the foundation of the enterprise infrastructure
  - Re-assign roles and responsibilities to ensure efficient use of resources

CommUnityCare and ATCIC are at the Table

- Develop strategic management and performance improvement capacity and competency
- Develop a long term unified financial strategy that includes enhancement of market share, aligned financial incentives, and integration of 1115 Waiver projects into health plan costs
- Invest in the right technologies and share platforms/infrastructure as possible to reduce duplicatioand n and improve overall efficiency


INTEGRATED SYSTEM
Central Health
Master planning the Travis County safety-net health care system
PROVIDING MEDICAL HOMES
ACCESS TO NEEDED COVERAGE
Austin Travis County Integral Care
Behavioral Health & Developmental Disabilities Services
CommUnityCare
A FQHC network of 23 health centers providing quality multi-dimensional primary care to Travis County residents
SENDERO HEALTH PLANS
Nonprofit provider of health coverage for Medicaid, CHIP and ACA eligible individuals in Travis County

Austin Travis County Integral Care
Behavioral Health & Developmental Disabilities Services

CommUnityCare

CENTRAL HEALTH

Healthy People.
Strong Community.

www.CentralHealth.net
@CentralHealthTX
www.communitycaretx.org

DSRIP Access Initiatives

DSRIP Project	DY3 Target	DY3 Actual to Date	Comments
Expanded Hours	3 sites; 5,000 encounters	3 sites (100%); 2,978 encounters (60%)	Accent Health and flyers to advertise. New providers hired with expectation regarding expanded hours service. Same expectation for existing providers in DY4.
Mobile Health Teams	2 teams; 1,300 encounters	2 teams (100%) ; 280 encounters (22%)	MOU - HACA (Housing Authority for the City of Austin) in progress. MHT cards being distributed. Partitions to be purchased for use at Health Screenings in the community. Teams being completed with permanent members. Vaccines being ordered for Hornsby Bend Back to School festival.
Dental Services	3,500 patients over baseline of 13,643 during expanded hours = 17,128; including 100 OB over baseline of 453 = 553; and 750 with 2+ chronic conditions over baseline of 3059 = 3809	11,619 patients (68%); 350 OB patients (63%); 2,341 chronic 2+ patients (61%)	MA training planned for appts in dental templates. Clinical Supervisors to receive training on education of OB patients regarding oral hygiene.
Gastroenterology	0.5 FTE Gastroenterologist; 1,285 encounters over baseline of 1,343 = 2,628	0.5 FTE Gastroenterologist (100%); 2,018 encounters (77%)	On track for success -
Pulmonology	1.0 FTE Pulmonologist; 1846 encounters over baseline 136 = 1982	1.5 FTE Pulmonologist (67%); 612 encounters (31%)	NP Scanlon recently added.
Telepsychiatry	500 patients (215 with depression; 60 with anxiety); 750 encounters	365 patients (73%) (182 with depression – 85%; 109 with anxiety - >100%); 489 encounters (65%)	Provider “road show” Friday July 10, 2014 with Dr. John and Tammy Liu. Telepsych equipment to be added to DPC by the end of July 2014.
Centering Pregnancy	20 unique individuals receiving services/intervention	unique individuals	

DSRIP Infrastructure Initiatives

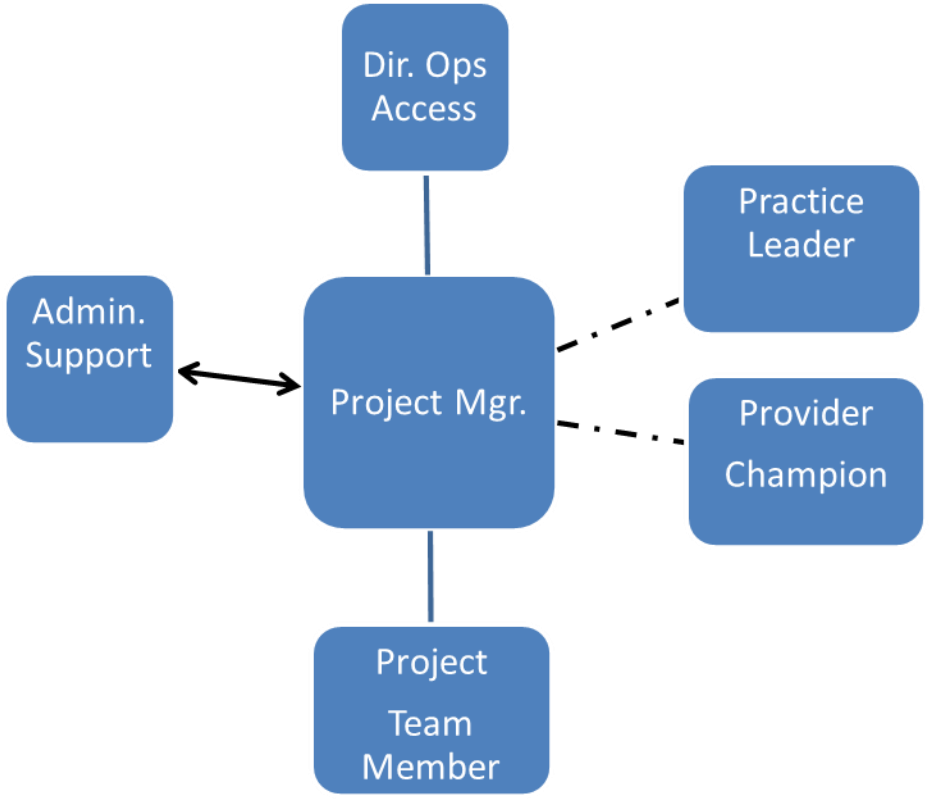
DSRIP Project	DY3 Target	DY3 Actual to Date	Comments
Disease Management Registry	Expanded DMR functionalities by: 3,000	2,101 (43%)	
Patient Centered Medical Home Model	10,000 patients will receive care through clinics adopting the PCMH model	12,304 patients (123%)	
Chronic Care Management Model	Enroll 1,000 patients	858 patients (86%)	

DSRIP Interim Support Team
Proposed Model for Access Initiatives

Management Team:
- Clinical & Operations Leadership
- Performance Improvement
- Legal/Regulatory

Workgroup Team:
- HR
- Financial/Purchasing
- Grant Writing
- Data Analyst

Systems Team:
- Training
- IT



DSRIP Access Teams

DY3 - Interim

Current DSRIP Initiatives	Proj. Mgr./ Team Lead	Team Member	Provider Champion	Practice Leader
Centering OB	Andrea Guerra (CH)/Jesus Kain	Lynce Espinosa	Ted Held, MD	**Sonal Patel**
Expanded Hours Dental	Margarita Arroyo (CCC)	Ruby Sanchez	Brigitte Beiter, DDS	**Amanda Gomez** (Sonal Patel)
Expanded Hours Medical		Ruby Sanchez	Kevin Shrank, PA	**Aaron DeLaO** (Matt Balthazar, Julie Amerault)
Mobile Teams		Regina Stoneham	Angela Brubaker, FNP	**Patricia Barrera**
Pulm & GI	Tammy Liu (COPE)	Debbie Caldwell & Debbie Benavides	(GI) Imtiaz Alam, MD (Pulm) Loana Suazo, MD	**Matt Balthazar**
TelePsych		Adrian Martinez	Abraham John, MD	**Dina Jensen** (Matt Balthazar)

New Initiatives

Project	Description	Comments
SEHWC	Development of new South HUB site. Phase I to open with dental services September 2014 and first medical pod October 2014. Phase II planned for 2015 opening.	On schedule.
Huston Tillotson University	Development of a new access point on the HT campus as part of its health center development initiative.	Await response to information provided to HT regarding service recommendations and space requirements for CommUnityCare presence on HT campus.
Blackstock Clinic	Transition of existing Seton clinic at UMCB to CommUnityCare.	Change of scope application submitted but disposition will be pended until agreement with Seton is provided. Currently negotiating anticipated relationship with Seton moving forward including plans for residency program.
High Risk OB Clinic Relocation	Requested move of HROB to MOB in closer proximity to Seton Main.	Currently evaluating impact of site relocation on proforma for HROB as well as companion Gynecology Clinic for which relocation has not been requested.
ATCIC – School Based DSRIP Project	Integrated behavioral health in primary care health center sites located within schools. DVISD, MISD and PISD targeted.	Collaborating with ATCIC to expand access to BHCs at existing CommUnityCare CW site within DVISD. PCC has expressed interest in supporting project at MISD. Planning collaboration in coming months to determine best means to support need at PISD.
AISD - School Based DSRIP Project	Integrated behavioral health in schools	Project currently being assessed by CommUnityCare project manager.
Capital Plaza LSCC	Site recently closed by LSCC. May present opportunity for ED diversion program for Dell Childrens Medical Center.	Under consideration using information developed by CommUnityCare Director of Strategic Planning and Development as well as that provided by LSCC under the terms of a NDA.
Site Evaluation	Assessment of all CommUnityCare existing sites of service to determine whether they best support the community.	George has presenting evaluations to the CommUnityCare Board of Directors.

Thank you!

Contact Information:

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(512) 978-9049

CommUnityCare