NORTHEAST TEXAS REGIONAL HEALTHCARE PARTNERSHIP

PUBLIC HEARING
NOVEMBER 9, 2012

Daniel Deslatte
UT Health Science Center Tyler
• 1115 Waiver Background

• Regional Health Plan Development
  - Community Needs Assessment
  - Ranking and Prioritizing Projects
  - Project Development
  - Overview of Plan

• Public Comment
• The Waiver was approved in December 2011 as a five year demonstration waiver.

• Place decisions regarding health care delivery system improvements in the hands of local stakeholders, rather than a one-size-fits-all approach.

• Help drive down the cost of uncompensated care.

• Achieve accountability and transparency for billions of dollars in healthcare funding.
Primarily a hospital based program, but other eligible performing providers include community mental health centers, physician groups, and local public health departments.

Funding exists in two pools:
- Uncompensated Care (UC)
- Delivery System Reform (DSRIP)

DSRIP projects are risk-based and must have specific, measurable outcomes related to population health, quality, or healthcare efficiency.
**Region 1**

- 28 Counties
- 1.2 million people
- 21,000 square miles
- No city with population ≥ 100K
• Each region has one institution, called an Anchor, with responsibility for coordinating waiver activities.

• In collaboration with performing providers, the Anchor develops the regional health plan but does not control funding or approve projects.

• The University of Texas Health Science Center at Tyler serves as Anchor for Region 1.
Developing the regional health plan is a collaborative process involving many stakeholders.

1. Educating providers and the public.
2. Preparing a community needs assessment
3. Developing projects to address healthcare challenges.
4. Ranking and prioritizing projects.
5. Engaging the public in project development.

The regional health plan is prepared in two phases – Pass 1 and Pass 2 – with a final plan due in December 2012.
## Regional Health Plan Development

<table>
<thead>
<tr>
<th>Identification Number</th>
<th>Community Need Description</th>
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</thead>
<tbody>
<tr>
<td>CN.1</td>
<td>Insufficient access to primary and specialty health care services.</td>
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<tr>
<td>CN.2</td>
<td>Insufficient access to mental and behavioral health services.</td>
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<td>CN.3</td>
<td>High rates of chronic disease, including diabetes, heart disease, asthma, obesity, and cancer.</td>
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<td>CN.4</td>
<td>High costs due to potentially preventable hospitalizations.</td>
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<td>CN.5</td>
<td>Inappropriate emergency department utilization.</td>
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<tr>
<td>CN.6</td>
<td>Efficiency in and effectiveness of health care delivery.</td>
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</tbody>
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The regional health plan goals are to:

1. Improve quality of care and patient satisfaction
2. Improve the health of populations
3. Reduce the cost of care
4. Improve access to health care services – physical and behavioral health.
• Based on these goals, projects were developed that address identified community needs.

• Projects were selected from a menu of options developed by healthcare quality experts and physicians from across Texas.

• Projects were ranked and prioritized using an evidence based scoring model that considered multiple factors including alignment with community need, transformational impact, and regional collaboration.
Currently, the following entities are participating as performing providers in Pass 1:

- 5 local mental health authorities
- 7 public hospitals
- 1 academic health science center
- 9 private hospitals
- 2 local public health departments

Other providers are participating as collaborative partners.
There are currently 73 proposed projects in the draft Pass 1 regional health plan.

Clear focus is on improving access to primary care and behavioral health services and improving efficiency and effectiveness of health care delivery.

Additional projects may be proposed in Pass 2.

The draft Pass 1 regional health plan was posted for public comment from November 5 – November 9 at www.uthct.edu/waiver.
REGIONAL HEALTH PLAN DEVELOPMENT

• November 5-9: Public comment period for Pass 1 regional health plan.

• November 16: Pass 1 regional health plan submitted to the Health and Human Services Commission.

• Early-Mid December: Public comment period for final regional health plan.

• December 31: Final regional health plan submitted to the Health and Human Services Commission.
The public is invited to provide feedback on the draft Pass 1 regional health plan.

Interested parties can provide feedback in two ways:

1. Complete the public comment form
2. Provide verbal comments at today’s public hearing

Public comment period ends today at 5:00pm
Public Comment Period
For More Information

Daniel Deslatte
903-877-5077
waiver@uthct.edu

www.uthct.edu/waiver