

# REGION 3

## anchor updates

### ANCHOR WELCOME

It is time to cool off! This time of year can bring soaring temperatures. It is definitely a time to cool off. Luckily, DSRIP in July offers just that. April reporting is done, NMI's are turned in, the second DY4 Learning Collaborative is complete and, hopefully, vacations are scheduled. That said, great work still continues. The Project Spotlight on Fort Bend County is a great example of DSRIP projects targeting one of the most watched indicators - ED Utilization. Congratulations to them on their success. Plan ahead for the ICD-10 transition so that DY5 reporting can go smoothly. Your Anchor team is ready and available to help through regional calls and other forms of technical assistance. Don't forget to visit the RHP3 website to pick up your supporting documentation for June's Learning Collaborative and check out future events across the State. As always, thank you for all you are doing and the high level of continued dedication to our Region and the Waiver. Happy Summer! ◀



### PROJECT SPOTLIGHT



#### Fort Bend County

HEALTH & HUMAN SERVICES  
TRANSFORMING HEALTH CARE  
Right Care, Right Place, Right Time

The project highlighted below is a Fort Bend County EMS project that is designed to induce a shift of patients with primary care or chronic disease care needs away from episodic utilization of emergency departments and EMS transport and toward ongoing primary-care. The shift would produce both significant savings and an improvement in the health status of the patients.



(from left to right): Tama Blair, MS, Lic-P, CHW and Elizabeth DeLeon, NRP, CHW

Not Pictured:  
Mary Fuglaar, RN, LP, CHW

The Fort Bend County Community Paramedic Project was implemented in November 2014. The program provides primary care and follow-up in the patient's home, and contributes to management of chronic conditions. It improves community health and results in more appropriate use of acute health care resources. Three community paramedics (two community paramedics and one community paramedic coordinator) have been hired to serve the Fort Bend community. The Community Paramedics provide an at-home alternative to hospital visits for those with chronic illnesses, while referring patients to and coordinating with a medical home. ◀

[To view the entire article, CLICK HERE](#)

### April DY4 Reporting (Round 1):

Congrats to Region 3 on a successful reporting period. Below please find the total amount approved for the Region.

Category	Number of Metrics	Dollar Amount Approved
DY3 Carry Forward Approved (R1)	88	\$51,695,426
DY4 Approved (R1)	128	\$81,326,390
<b>Total Approved (R1)</b>	<b>216</b>	<b>\$133,021,816</b>

### Learning Collaborative Follow-Up

Thank you to all that participated in the second DY4 Learning Collaborative held on June 17, 2015 at the University of Houston Hilton. [CLICK HERE](#) for supporting documentation and all conference documents. ◀

Thank You!

## Are You Ready for ICD-10?

The transition from the International Classification of Diseases, Ninth Revision (ICD-9) to International Classification of Diseases, Tenth Revision (ICD-10) is fast approaching and required for everyone covered by the Health Insurance Portability Accountability Act (HIPAA). The transition is guaranteed to have an impact on our DSRIP projects, but any negative impact can be minimized by planning ahead.

ICD-10-CM is the abbreviated way to refer to the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) and International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS). ICD-10-CM is the diagnosis code set that will be replacing ICD-9-CM Volumes 1 and 2. ICD-10-CM will be used to report diagnoses in all clinical settings. ICD-10-PCS is the procedure code set that will be replacing ICD-9-CM Volume 3. ICD-10-PCS will be used to report hospital inpatient procedures only. The ICD-10 compliance deadline is October 1, 2015 and all services and discharges on or after the compliance date must be coded using the ICD-10 code set.

Fortunately, the October 1st implementation date provides a clean cut-off between the use of ICD-9 in DY4 and previous years and ICD-10 use beginning in DY5, with the April 2016 reporting period being the first time ICD-10 codes will be used during a reporting period.

### BELOW ARE A FEW THINGS TO KEEP IN MIND:

#### Productivity Decreases

- Learning curve for clinicians and coders
- Increase in the number of coding options

#### Metric and Milestone Report Adjustments

- Creation of new reports may be necessary
- Higher levels of specificity for codes, increased laterality and specificity
  - One to many conversion
- Missing or incorrect codes could result in an artificial drop in encounters and individuals

#### Carry-Forward Metrics

- Spanning DY4 and DY5
  - Access to dual systems/ reports
  - Require ICD-9 & ICD-10 information codes

The transition is likely to impact DSRIP reporting in addition to daily operations within all Performing Provider organizations and in DSRIP projects. We are encouraging Providers to identify issues and changes that may be required to ensure that the data that is collected accurately reflects the work that is being done within our projects. On June 16th, 2015, the Anchor hosted a regional call to discuss the ICD-10 transition and DSRIP and as always we are here to help. Please email [setexasrhp@harrishealth.org](mailto:setexasrhp@harrishealth.org) if you would like a meeting summary or technical assistance. ◀

## Required Dates and Deadlines

**July 21, 2015** - April reporting DY4 DSRIP payments processed for transferring hospitals and top 14 IGT entities.

**July 31, 2015** - April reporting DY2 and DY3 DSRIP payments processed for all providers and DY4 DSRIP payments processed for remaining providers that were not paid on July 21.

**August 7, 2015** - HHSC and CMS will approve or deny the additional information submitted in response to HHSC comments on April reported milestone/metric achievement and semi-annual progress reports.

**August 19, 2015** - RHP3 1115 Waiver - Monthly Region-wide Status and Information Call

**August 27th and 28th, 2015** - Statewide Learning Collaborative

**September 16, 2015** - RHP3 1115 Waiver - Monthly Region-wide Status and Information Call

**September 30, 2015** - 1115 Waiver Renewal/Extension Application due to CMS

**October 31, 2015** - DY4 DSRIP Reporting due

**December 9th and/or 10th** - First RHP 3 DY5 Learning Collaborative (*tentative*).

## Regional Statewide Events

**July 17, 2015 - RHP 2** Category 3 Work Session  
Contact: Susan Seidensticker: [smseiden@utmb.edu](mailto:smseiden@utmb.edu)

**July 20, 2015 - RHP 6** Learning Collaborative  
Contact: Carol Huber: [carol.huber@uhs-sa.com](mailto:carol.huber@uhs-sa.com)

**August 5, 2015 - RHP 8** Learning Collaborative  
Contact: Event Jennifer: [LoGalbo@tamhsc.edu](mailto:LoGalbo@tamhsc.edu)

**August 5, 2015 - RHP 9** PDSA Raise the Floor Webinar #3  
[CLICK HERE](#) to register.  
Contact: Margie Roche: [Margaret.roche@phhs.org](mailto:Margaret.roche@phhs.org)

**August 11, 2015 - RHP 1** Chronic Disease Learning Collaborative  
Contact: Brittney Nichols: [Brittney.nichols@uthct.edu](mailto:Brittney.nichols@uthct.edu)

**August 13, 2015 - RHP 10** Webinar - Care Transitions: Overuse of ED  
Contact: Meredith Oney: [RHP\\_Region\\_10@jpshealth.org](mailto:RHP_Region_10@jpshealth.org)

**September 3, 2015 - RHP 7** Stakeholder Forum and Learning Collaborative  
Contact: Katie Coburn: [Katie.coburn@centralhealth.net](mailto:Katie.coburn@centralhealth.net)

**September 15, 2015 - RHP 1** Learning Collaborative  
Contact: Stephanie Fenter: [Stephanie.fenter@uthct.edu](mailto:Stephanie.fenter@uthct.edu)