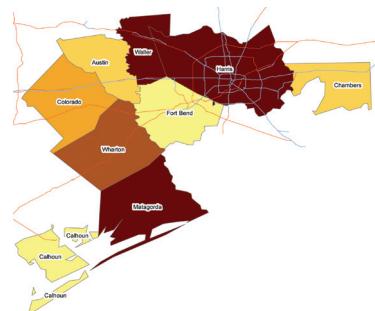


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**WELCOME TO THE NEW REGION 3 NEWSLETTER****ANCHOR UPDATES****MORE WAYS TO GET INFORMATION**

For almost two years the Anchor for Regional Healthcare Partnership (RHP) 3 has provided its stakeholders with information through various sources including, the region's website, Monthly Regional Status Calls, and tons of emails! Now we're expanding to give you more ways to get more information such as research, white papers, learning moments and other news from around the State.

This new *Anchor Updates* newsletter delivers a monthly compilation of important 1115 Waiver information. From project highlights to the latest timeline, along with Project Management Best Practices, our new newsletter will help you stay up-to-date with the progress of the Waiver across our region and the State.

Anchor Updates will arrive in your inbox or can be found on our soon to be re-vamped

website, containing a combination of Anchor Information and Performing Provider content.

Subscribers can expect to receive Best Practices, State Updates and Learning Collaborative progress including:

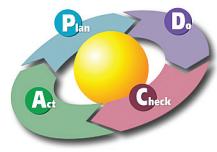
- Breaking news about rules and regulations
- Insightful columns on RHP3 projects and progress, and challenges faced
- How-to advice on the project management software, Performance Logic
- Relevant research and data sources that may further improve your projects and/or organization through innovative strategies
- Other stakeholder announcements that are relevant to our diverse region

We hope the newsletter serves you well. As we continue to improve our communication throughout RHP3, we value your feedback. Please email us at setexasrhp@harrishealth.org with any suggestions. ■

PROJECT SPOTLIGHT**LEARNING MOMENT****A GREAT SUCCESS**

The Learning Collaborative (LC) was a great success. Thanks to everyone who attended the event on June 19, 2013! The agenda consisted of an introduction by Harris Health leadership; 161 project overviews; a primer on the customized software tool, Performance Logic; data review and discussion; as well as two group activities including a mapping exercise and Cohort work group information.

The primary purpose of the Learning Collaborative is to provide a learning structure to support all RHP3 projects and improve Category 3 and Category 4 outcome measures through process improvement cycles and utilization of The Institute for Healthcare Improvement (IHI) Model of Improvement.



To accomplish that goal, five cohort work groups were formed that will work towards process improvements that can be shared region-wide. The first cohort work group centers on Emergency Center utilization, and had its kick-off meeting August 22nd with ideas already put in action. Recruitment emails are forthcoming to form the following cohorts: Behavioral Health, Access to Primary Care, Navigation, and Chronic Care. Please email the Anchor Team if you have any upcoming educational webinars, trainings etc...that are open to our Regional Members for participation. Save the date for our 2nd Learning Collaborative Dec 4th, 2013 at the Bayou City Event Center.

Want more information about the past event?

Check our our website at www.setexasrhp.com or [Click here](#) for the RHP 3 LC Plan (draft). ■



STATE UPDATES

FEEDBACK

AND PHASES AND TEMPLATES...OH MY!

Region 3 has been on an incredible journey through the wonderful land of DSRIP. As it continues to follow the yellow brick road, not a day goes by that another flying monkey isn't encountered along the way. Nonetheless, sight of the benefit to the community that lies somewhere over the rainbow has never been lost.

This part of the journey began on March 17, 2013 when Region 3 performing providers submitted the third phase of the Regional Healthcare Partnership (RHP) plan to Health and Human Services Commission (HHSC). The plan was made up of over 1,000 pages and included 161 projects and 27 different performing providers.

The entire plan was officially submitted by HHSC to Centers for Medicare and Medicaid Services (CMS) for review and approval in April 2013. As of May 23, 2013, Region 3 was able to begin moving further down the road when CMS feedback and initial approvals were received.

Due to the incredible number of projects received from Texas, CMS had to separate the approval process into initial and final approvals. Region 3 providers have received initial approval and feedback for projects' DY2-3 metrics and milestones with pending approval of DY4-5. Through this, four phases were developed to guide providers down the road of approvals and closer to the land of incentive payments.

Performing providers never lacked brains, a heart, or courage as they continued to work through all the stages of Phases 1-4. As of August 23, 2013, all 73 Phase 1 projects were officially submitted to CMS for review and initial approval. Of these, there were 51 projects with formal review submission, 20 projects with pre-review submission, 1 project withdrawn, and 1 project replaced. In September, Region 3 received initial approval for 147 projects and pending approval on 14 other projects. Dependent upon final decision on these 14 projects, five



replacement projects were submitted for post feedback review to HHSC on October 31, 2013. These projects will then be sent to CMS for review and approval.

Quantifiable Patient Impact (QPI) templates were completed and submitted through Phase 2 for full approval of DY4-5 values. Phase 3 templates allowed providers to verify DY2 milestone and metrics for all projects. Through this entire whirlwind, August reporting was accomplished and submitted by some, with October reporting around the corner for all. As of October 31, 2013, all Region 3 providers have survived DY2 reporting.

Region 3 continues to wait for approval of a Category 3 menu by CMS for Category 3 final measure selections. As the Phase 4 December deadline quickly approaches, all providers continue to follow the yellow brick road and encounter friendly webinars to address technical corrections, update plans, and submit outcome measure targets for DY4-5 based on the expected targeting methodology for Category 3. The journey does not end; with brains, heart, and courage, Region 3 continues to travel through the land of DSRIP to prioritize and submit new 3-year projects based on available funds and keeps working to meet the March 2014 final submission deadline. ■



PERFORMANCE LOGIC

ASSISTING PERFORMING PROVIDERS

Many RHP3 DSrip projects are multi-layered, complex and in some cases have significantly compressed timelines with critical predecessors that carry business, safety and financial risk. Not all DSrip projects can be described this way, however many do. Project Management Standards and Best Practices are good business, regardless of whether the project is similar to the description above or if the project requires minimum resources and time. Considering the complexity and significant outcomes at stake, Performing Providers are encouraged to adopt the standards and processes established by the Project Management Institute (PMI).

To aid in adopting PMI project management standards, RHP3 is providing a software management system (Performance Logic) that, if utilized will significantly assist Performing Providers in completing their DSrip projects.

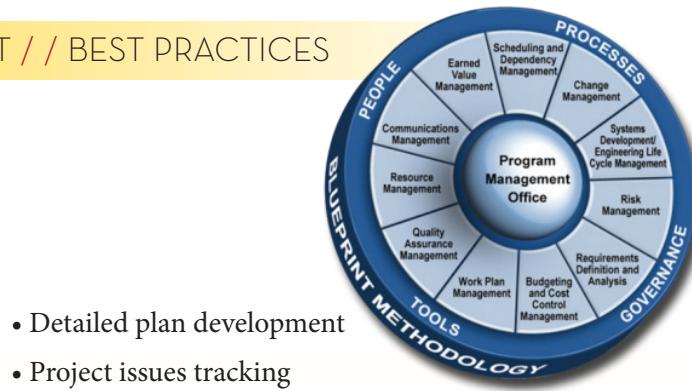
All providers are encouraged to use recognized standards for project management. This would include support through Performance Logic, other project management software, or forms and manual tracking.

Project management standards, when consistently applied, have a significant positive impact on the successful delivery of related and complex projects implemented across multiple workgroups and organizations – ex. those that have granular reporting and transparency requirements.

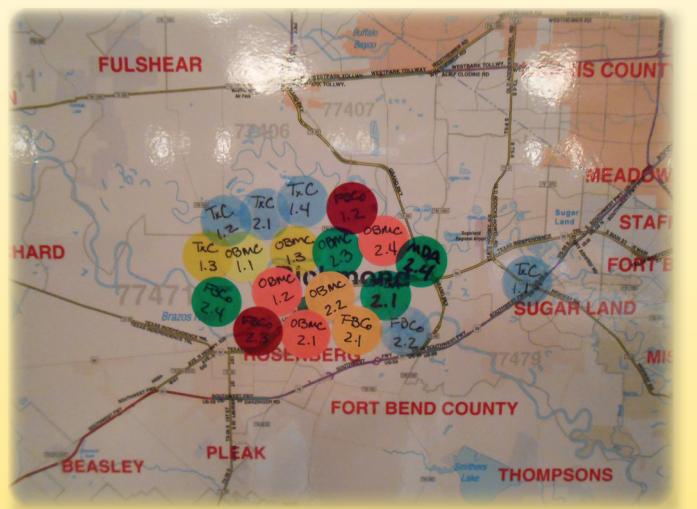
Performance Logic PPM (Project Portfolio Management) is a comprehensive, web-based application that takes you from project intake and prioritization through planning, implementation and ongoing project monitoring and analysis.

The benefits of using Performance Logic include:

- Full project planning and management capability



- Detailed plan development
- Project issues tracking
- Project progress and status updates
- Meeting planning with agendas and minutes
- Microsoft Project compatibility
- Enterprise-wide reporting capability
- Structured project plan templates for performance improvement and template customization to accommodate existing methodologies
- Over 150 performance measures and 60 analyses to help support performance improvement
- User-based permissions to facilitate project assignments, communication, and information sharing
- Best practice and benchmarking capabilities to support implementation
- Ability to export project outputs in a variety of formats
- Web-based delivery for ease of installation and 24/7 availability ■



TIMELINE

REGION 3 DSRIPI TIMELINE

DECEMBER 2013

Full project submissions to HHSC:

- Priority technical corrections
- Category 3 improvement target achievement levels
- Requests for plan modifications to the plan narrative and milestones and metrics for DY's 3-5

HHSC and CMS will complete their review and approval of October DY2 reports or request additional information regarding the data reported. If additional information is requested, the DY2 DSRIPI payment related to the milestone/metric will be delayed until the next DSRIPI payment period. HHSC and CMS will also approve or deny the additional information submitted in response to HHSC comments on August reported milestones/metric achievement.

Anchor annual reports due to HHSC



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JANUARY 2013

IGT due for October DY2 DSRIPI payments for October reports are approved by HHSC and CMS on December 6, 2013 (FMAP 58.69).

October DY2 DSRIPI payments processed. Oct DY2 report approvals or request additional information

MARCH 2013

Full RHP Plan submission to HHSC

APRIL 2013

First DY3 (or late DY2) reporting

preparative confirmation
eligible initially
verification services plan
reporting human funding objectives
approval milestones metrics process include available Phase achieving submission remaining
provider providers provide waiver
Medicaid by DSRIP projects reporting transformation system uc HHSC Table
assist four fund CMS-approved proposed
state healthcare project needs pass patients projects state
funders partners providers
plan entity quality program review
plans including UPL measures
Approved provider authorized
Patient Protocol Program managed public healthcare programs
Services required corresponding supplemental
Protocol based

*All dates are subject to change. Please refer to HHSC for the most recent updates: <http://www.hhs.gov/state.tx.us/1115-Waiver-Deadlines.shtml>.