



Presentation to the House Appropriations Article II Subcommittee: Behavioral Healthcare Projects in the 1115 Transformation Waiver

Lisa Kirsch
Deputy Director
Healthcare Transformation Waiver Operations
Health and Human Services Commission

Lauren Lacefield Lewis
Assistant Commissioner
Mental Health and Substance Abuse
Department of State Health Services

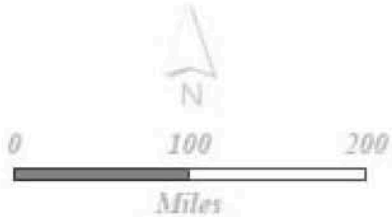
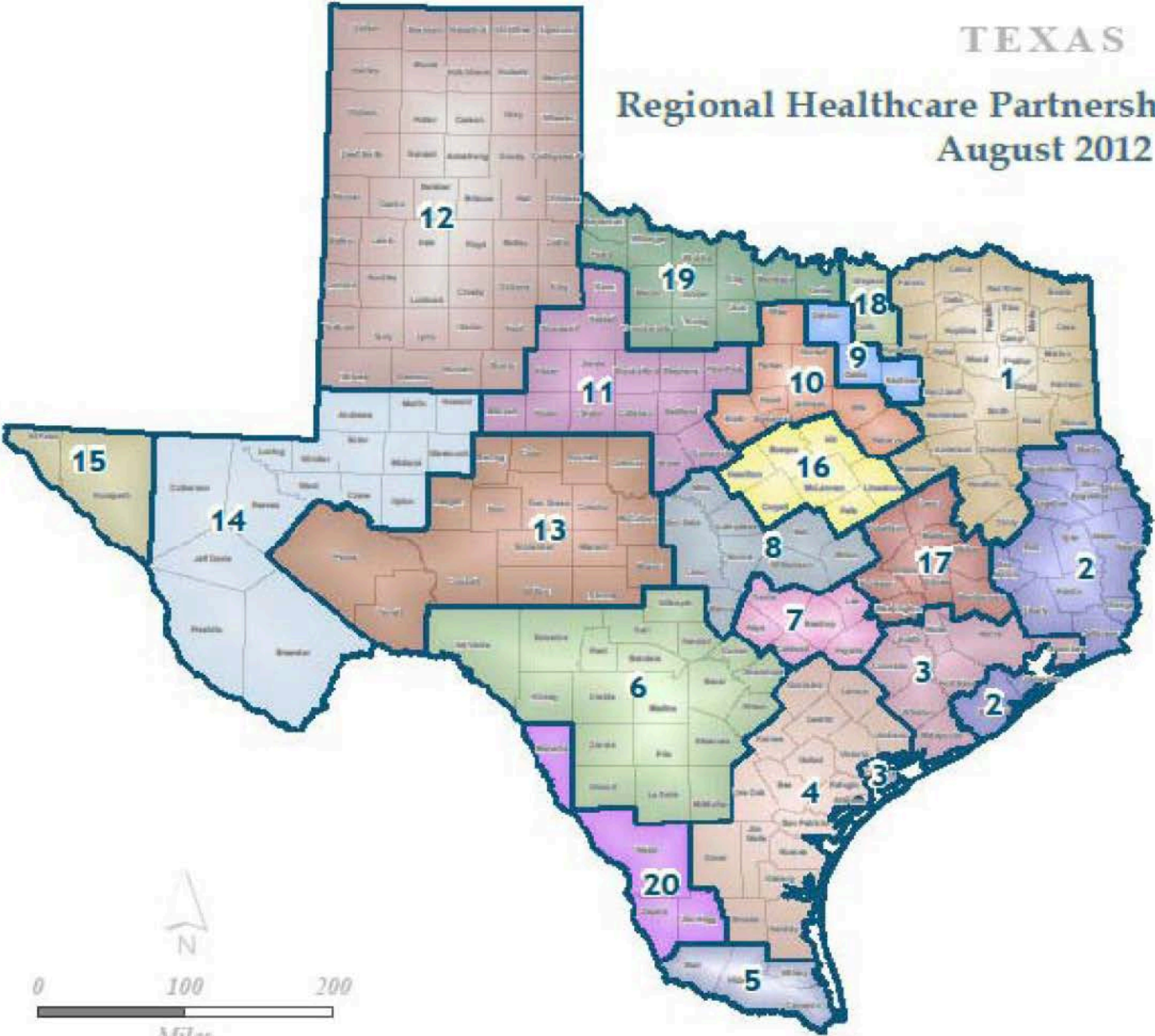
June 16, 2014

Transformation Waiver Overview

- Five-Year Medicaid 1115 Demonstration Waiver (2011 – 2016)
- Allows expansion of managed care while protecting hospital supplemental payments under a new methodology
- Uncompensated Care (UC) Pool
 - \$17.6 billion All Funds
 - Replaces UPL to offset costs for care provided to individuals who have no third party coverage for hospital and other services
- Delivery System Reform Incentive Payments (DSRIP) Pool
 - \$11.4 billion All Funds
 - New program to support coordinated care and quality improvements through 20 Regional Healthcare Partnerships (RHPs)

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Regional Healthcare Partnership (RHP) Regions August 2012



Map Prepared by: Strategic Division Support Department,
Texas Health and Human Services Commission,
August 7, 2012

What is DSRIP?

- DSRIP is an incentive program to transform delivery systems through infrastructure development and testing innovative care models.
 - Improve care for individuals (including access, quality, and health outcomes)
 - Improve health for the population
 - Lower costs through efficiencies and improvements
- Projects are funded at the Medicaid federal match rate with the non-federal share of funds coming from a local or state public entity.
- DSRIP funds must be earned based on achievement of project-specific metrics each year.
 - Different than Medicaid fee-for-service or encounter-based payments
 - Projects earn funds by establishing project infrastructure, serving additional patients, showing improvements in outcomes, and continuous quality improvement.

- Across the 20 RHPs, 300 DSRIP performing providers submitted projects in late 2012:
 - 224 hospitals (public and private)
 - 18 physician groups
 - 38 community mental health centers
 - 20 local health departments.
- Texas made behavioral health a priority in DSRIP by allocating 10% of the DSRIP funds to community mental health centers and including many behavioral health -focused project options in the DSRIP menu.
- As of March 2014, there were 1,277 active DSRIP projects.
- DSRIP participants are eligible to earn \$4.66 billion, All Funds, for the first three years of the waiver.
 - As of January 2014, DSRIP participants had earned over \$2.1 billion All Funds for achievement through September 2013.
- More than 200 additional 3-year DSRIP projects received initial federal approval in late May 2014.

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- Years 2 and 3 of the waiver (October 2012 – September 2014) have focused on start-up activities, including developing project infrastructure like:
 - Project planning
 - Hiring and training of providers and other staff
 - Expansion of space, hours
 - This year, projects have begun reporting their direct patient impact and establish benchmarks for project outcomes.
 - Common outcomes for behavioral health-focused projects include decreased admissions/readmissions to criminal justice settings, reduced emergency department visits, quality of life, client satisfaction.
 - Providers report twice a year (April and October) on project metrics and milestones completed to earn DSRIP payments.
 - For April 2014 reporting, payments will be made in July 2014.

Overview of DSRIP Projects and Behavioral Healthcare

- Of the 4-year DSRIP projects, almost one third (390) have a behavioral healthcare focus, including:
 - 90 interventions to prevent unnecessary use of services (in the criminal justice system, ED, etc.)
 - 58 projects to enhance BH service availability (hours, locations, transportation, mobile clinics)
 - 49 projects to develop BH crisis stabilization services
 - 49 projects to integrate primary and BH care services
 - 40 projects to deliver BH care services through telemedicine/telehealth
- Of the 390 active projects:
 - 293 performed by community mental health centers
 - 97 performed by hospitals and other DSRIP providers
- These projects are eligible to earn over \$937 million All Funds during their first two years of the waiver operation (October 2012 to September 2014).

Behavioral Health-Focused DSRIP Projects by RHP

Region	# of BH-Focused Projects	Project Value Years 2-3
1 (Northeast Texas)	24	\$35 million
2 (Galveston and Southeast TX)	29	\$41 million
3 (Houston and surrounding)	44	\$217 million
4 (Corpus Christi and surrounding)	22	\$38 million
5 (South Texas)	18	\$47 million
6 (San Antonio and surrounding)	34	\$105 million
7 (Austin and surrounding)	36	\$95 million
8 (Bell/Williamson and surrounding)	25	\$26 million
9 (Dallas and surrounding)	21	\$62 million
10 (Fort Worth and surrounding)	26	\$112 million
11 (Abilene and surrounding)	10	\$10 million
12 (Lubbock, Amarillo and surrounding)	20	\$32 million
13 (San Angelo and surrounding)	11	\$4 million
14 (Odessa/Midland and surrounding)	6	\$12 million
15 (El Paso and surrounding)	8	\$28 million
16 (Waco and surrounding)	15	\$18 million
17 (Brazos Valley)	8	\$6 million
18 (Collin County and surrounding)	16	\$30 million
19 (Wichita Falls and surrounding)	10	\$6 million
20 (Laredo and surrounding)	7	\$13 million
TOTAL	390	\$937 million All Funds

- Examples of behavioral healthcare projects from the regions:
 - MHMRA of Harris County (RHP 3) - Add three additional teams to the Crisis Intervention Response Team, which partners law enforcement officers with master-level clinicians to respond to law enforcement calls.
 - Tropical Texas Behavioral Health (RHP 5) – Develop primary care clinics co-located within 3 Tropical Texas clinics.
 - Center for Health Care Services (RHP 6) - Establish a centralized campus from which systems or families can obtain care for children and adolescents with a serious emotional and/or behavioral problem or developmental delay.
 - Metrocare (RHP 9) – Integrate behavioral health into the outpatient obstetrics setting to provide increased access to mental health services for the treatment of postpartum depression.
 - Texas Panhandle Centers (RHP 12) – Provide a 24/7 crisis respite program, focusing on rapid stabilization and averting future crises.

DSRIP Projects – Measuring Success

As part of a Medicaid demonstration waiver, success of DSRIP projects will be measured in a number of ways.

- Metric-level achievement – did the project serve as many Medicaid and low-income uninsured individuals as planned?
- Improvement in outcomes correlated with each project in the later years of the waiver - decreased admissions/readmissions to criminal justice settings, reduced emergency department visits, improved quality of life
- Sharing of best practices and lessons learned through learning collaborative meetings.
 - Learning collaborative events are underway in many regions, and HHSC will host a statewide learning collaborative summit for all RHPs in Austin September 9-10, 2014.

DSRIP Projects - Measuring Success

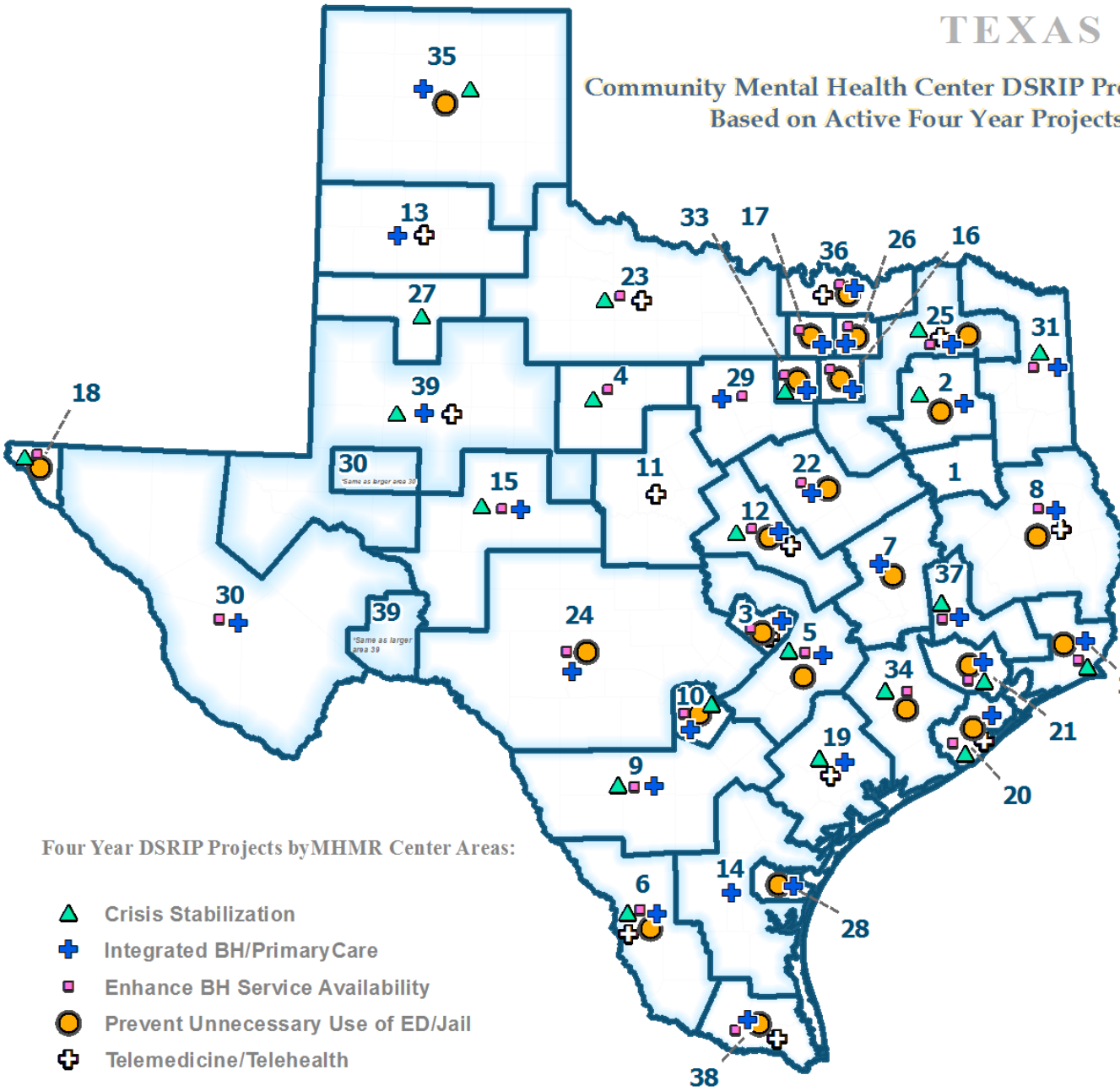
- The Meadows Institute and the University of Texas at Austin-Texas Institute for Excellence in Mental Health are doing a detailed descriptive analysis of the DSRIP behavioral health-focused projects.
- The analysis will highlight innovative projects and enable interested stakeholders to better understand the scope of all the behavioral health-focused projects in each region and statewide.

Behavioral Health Funding and DSRIP

- DSRIP has provided an opportunity to leverage state and local public funds to earn additional federal matching funds to increase behavioral service capacity and enable innovative models to improve how care is delivered.
- DSHS Rider 79, Senate Bill 1, 83rd Legislature, gave community mental health centers the authority to utilize new state general revenue to draw down additional federal funds to participate in DSRIP.
 - As a result, the community mental health centers have 293 four-year DSRIP projects, and may put up over \$240 million in general revenue to earn federal match dollars for years 2 and 3 of the waiver.

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Community Mental Health Center DSRIP Projects in Major Project Areas Based on Active Four Year Projects as of May 1, 2014



- MHRM Center Areas:
- 1, ACCESS
 - 2, Andrews Center Behavioral Healthcare System
 - 3, Austin Travis County Integral Care
 - 4, Betty Hardwick Center
 - 5, Bluebonnet Trails Community Services
 - 6, Border Region Behavioral Health Center
 - 7, MHMR Authority of Brazos Valley
 - 8, Burke Center
 - 9, Camino Real Community Services
 - 10, The Center for Health Care Services
 - 11, Center for Life Resources
 - 12, Central Counties Services
 - 13, Central Plains Center
 - 14, Coastal Plains Community Center
 - 15, MHMR Services for the Concho Valley
 - 16, Metrocare Services
 - 17, Denton County MHMR Center
 - 18, Emergence Health Network
 - 19, Gulf Bend Center
 - 20, Gulf Coast Center
 - 21, MHMR Authority of Harris County
 - 22, Heart of Texas Region MHMR Center
 - 23, Helen Farabee Centers
 - 24, Hill Country Mental Health & Developmental Disabilities Centers
 - 25, Lakes Regional MHMR Center
 - 26, LifePath Systems
 - 27, StarCare Specialty Health System
 - 28, Behavioral Health Center of Nueces County
 - 29, Pecan Valley Centers for Behavioral & Developmental HealthCare
 - 30, Permian Basin Community Centers for MHMR
 - 31, Community Healthcare
 - 32, Spindletop Center
 - 33, MHMR of Tarrant County
 - 34, Texana Center
 - 35, Texas Panhandle Centers
 - 36, Texoma Community Center
 - 37, Tri-County Services
 - 38, Tropical Texas Behavioral Health
 - 39, West Texas Centers

Four Year DSRIP Projects by MHRM Center Areas:

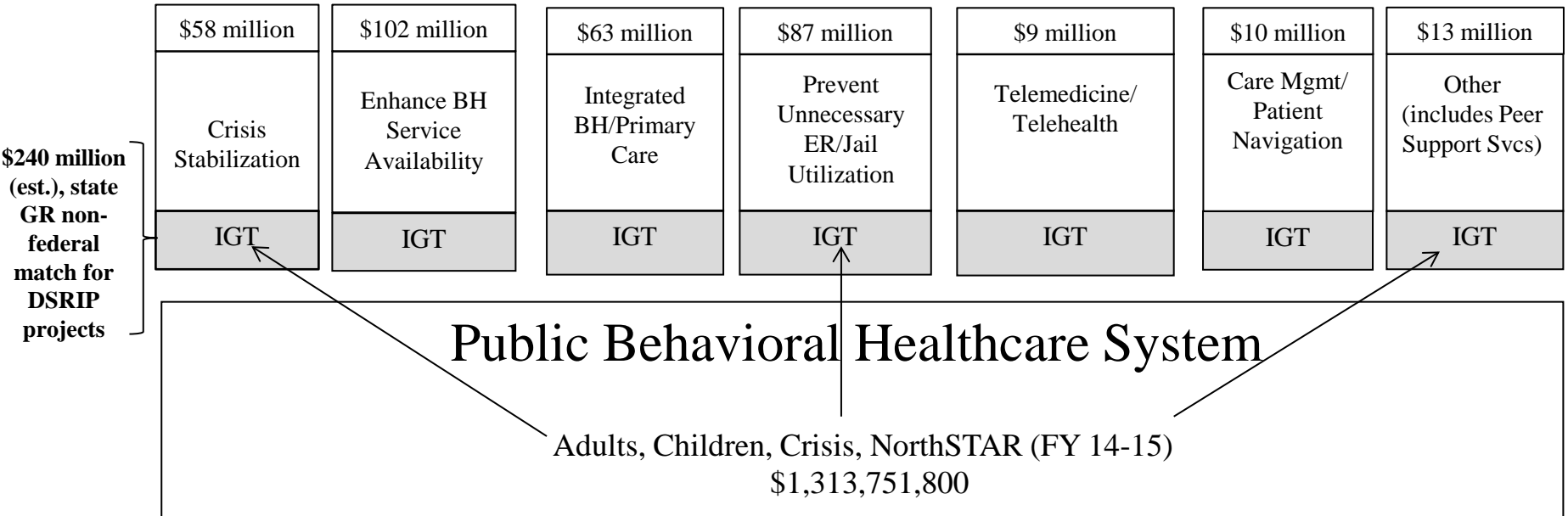
- ▲ Crisis Stabilization
- + Integrated BH/Primary Care
- Enhance BH Service Availability
- Prevent Unnecessary Use of ED/Jail
- + Telemedicine/Telehealth



Map Prepared by: Strategic Decision Support Department, Texas Health and Human Services Commission, May 30, 2014

Behavioral Health Funding and DSRIP

\$342 million in Federal Matching Funds may be earned through DSRIP in FY14-15*



*Conservative estimate based on approved DSRIP values for FFY13-14 (demonstration years 2-3).

Behavioral Health Funding and DSRIP

- DSRIP projects complement and enhance the capacity and types of services funded by DSHS by allowing the community centers to:
 - Provide services to additional populations.
 - Provide additional types of services (e.g. housing supports, Applied Behavioral Analysis)
 - Enable the testing of innovative delivery models and development of infrastructure for service delivery.
- It is important to note that unlike DSHS funds, DSRIP funds must be earned based on specific project performance metrics that are not tied to individual claims or encounters.
- DSRIP projects are still early in their implementation.
 - More will be known about their impact in the next two years as data on quantifiable patient impact and outcomes comes in.