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Community Health Access and Rural Transformation (CHART) Model – Community Transformation Track

General Overview



Agenda

- CHART Model Goals
- CHART Model in Texas: Overview
- Health Care in Rural Texas
- Alternative Payment Models
- CHART Model in Texas: Benefits of Participation, Hospital Eligibility, Timeline and Resources
- Advisory Council
- Roadmap to CHART Model Participation
- Wrap Up and Thank You!

CHART Model Goals

- ✓ Improve quality of care and health outcomes for rural beneficiaries
- ✓ Increase adoption of alternative payment models (APMs) among rural providers
- ✓ Improve rural provider financial sustainability



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CHART Model in Texas: Overview (1 of 2)

- There are two CHART Model tracks:
 - Community Transformation Track (which is the one HHSC was awarded)
 - Accountable Care Organization (ACO) track – *Removed by CMS*
- The **Community Transformation Track** is a 7-year funding opportunity that will test whether aligned financial incentives, increased operational flexibility, and increased technical support can help rural health care providers to transform.



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CHART Model in Texas: Overview (2 of 2)

- 1. Regular Medicare payments** - based on a hospital's fee-for-service income (a.k.a. capitated payment amount).
- 2. Cooperative Agreement Funding** - HHSC will disperse up to \$2.7 million in cooperative agreement funding over 7 years to up to 14 hospitals to establish a telemedicine project.
- 3. Operational Flexibilities** - CMS will allow certain operational flexibilities to expand HHSC's ability to implement health care delivery system redesign and promote participating hospitals' capacity to manage patient care.



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Health Care in Rural Texas (1 of 2)

- 254 counties, 70 percent rural
- 24 rural hospital closures since 2004

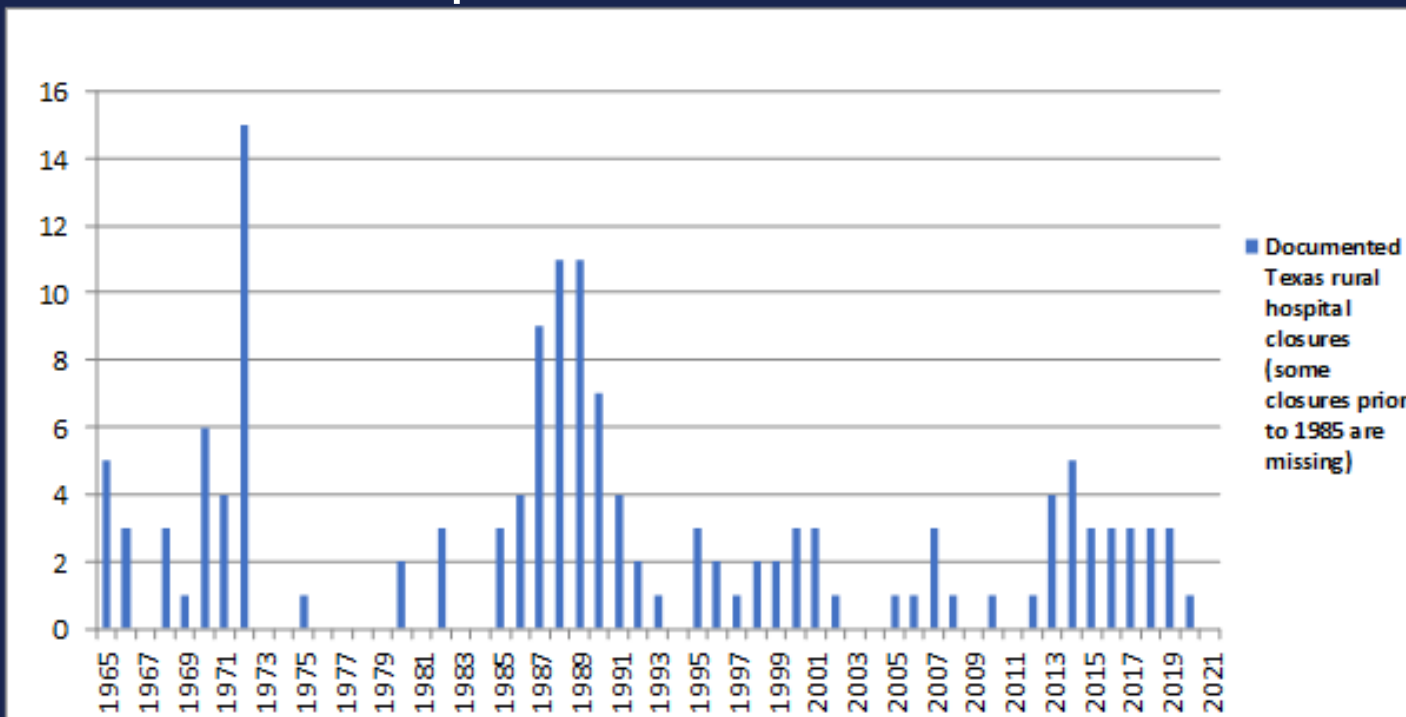


Table Source: Prepared by the Texas Organization of Rural & Community Hospitals and updated on 06.05.2021



Health Care in Rural Texas (2 of 2)

Community Health Challenges:

- Lack of coordinated care
- Uncoordinated care transitions resulting in unplanned hospital readmissions
- Improved treatment and prevention of chronic conditions
- Limited or no access to primary and specialty care



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Alternative Payment Models (1 of 2)

Alternative Payment Models (APMs) are payment approaches that incentivize high-quality and cost-efficient care.

APMs shift payment from volume (fee-for-service (FFS)) to quality and/or value (where value = quality/cost).

APMs:

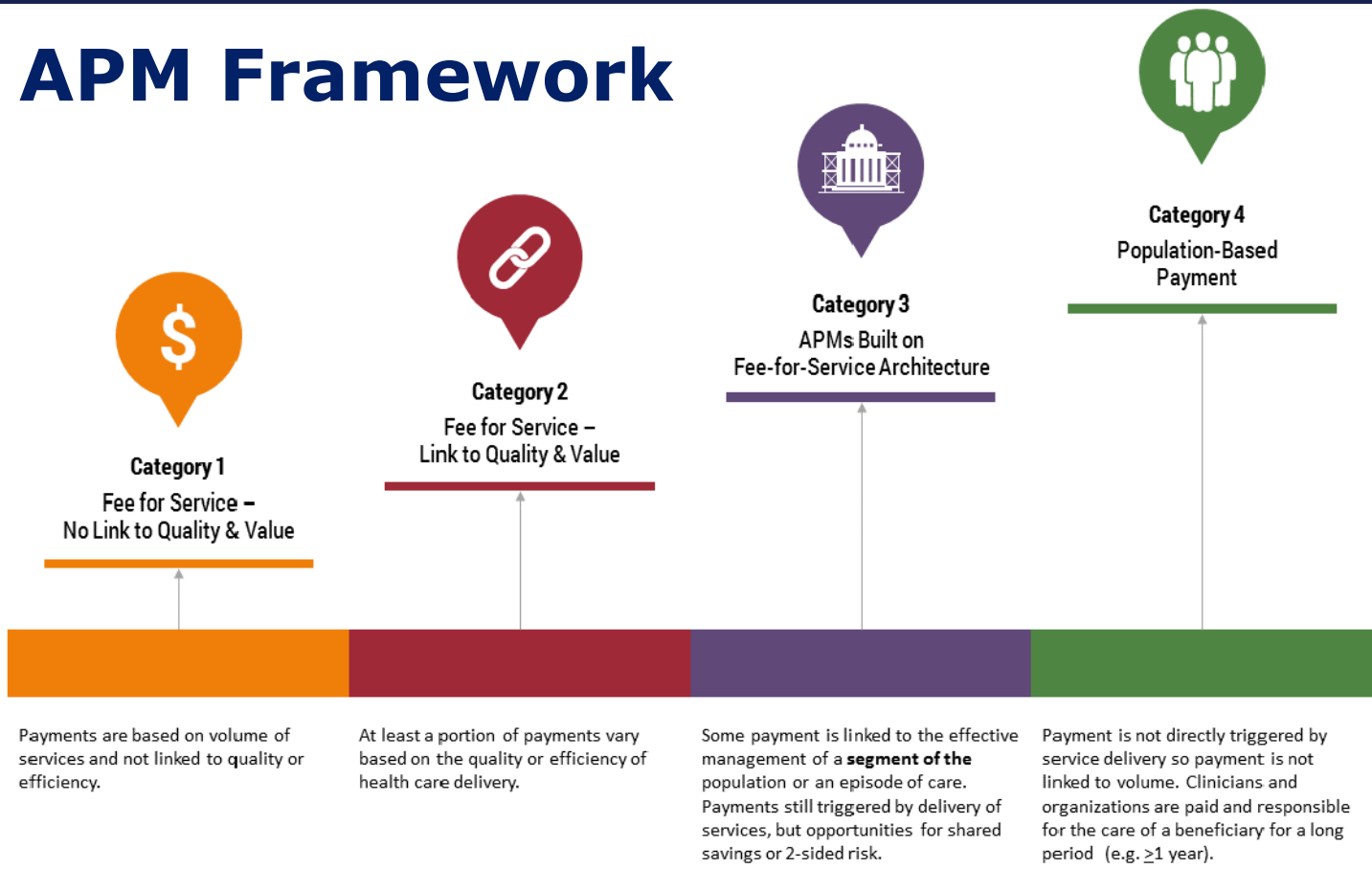
- May apply to a specific clinical condition, care episode or population.
- May involve financial risk and rewards, or simply be rewards-based.
- Span the full continuum of risk from no shared risk to full risk-sharing.



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Alternative Payment Models (2 of 2)

APM Framework



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* [Source: hcp-lan.org](http://hcp-lan.org)

CHART Model in Texas: Benefits of Participation

- In return hospitals that participate in the CHART Model will:
 - Work to increase the percent of their Medicaid revenue under a capitated arrangement each year by participating in Alternative Payment Models (APMs).
 - Take part in a telemedicine project that addresses a community health challenge identified in HHSC's application.
 - Report certain Quality Measure data.
 - Address selected health equity and social determinants of health challenges.



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CHART Model in Texas: Hospital Eligibility Criteria

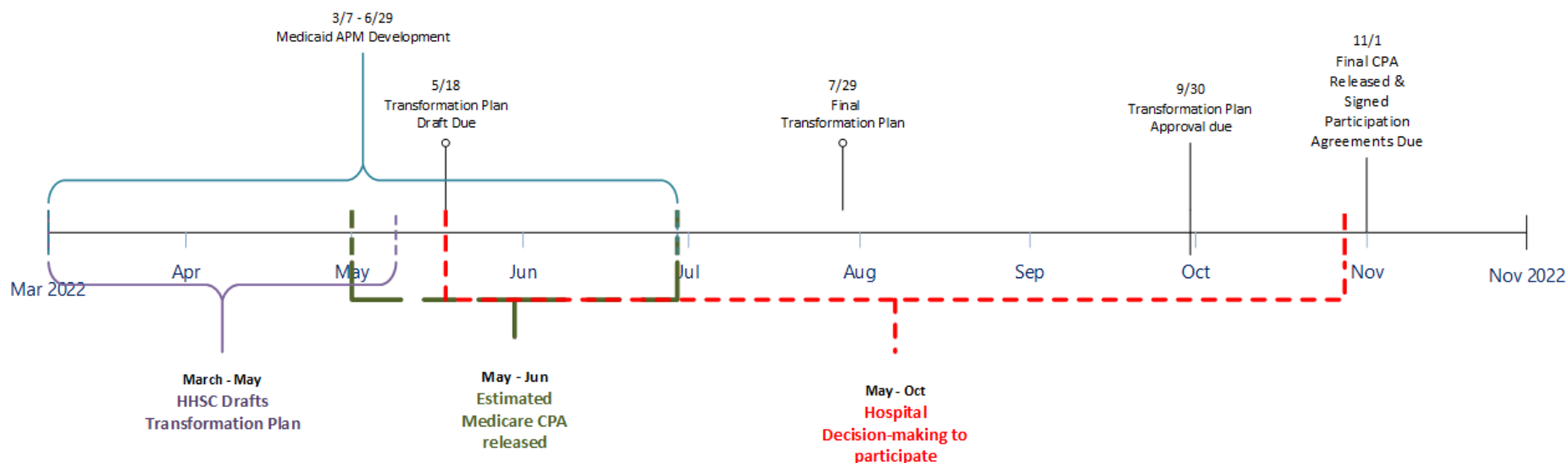
- Each Participant Hospital must be (1) an acute care hospital or (2) Critical Access Hospital that either:
 - Is physically located within the Community and receives at least 20 percent of its Medicare FFS revenue from Eligible Hospital Services provided to residents of the Community; or
 - Is physically located inside or outside of the Community and is responsible for at least 20 percent of Medicare expenditures for Eligible Hospital Services provided to the residents of the Community.



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CHART Model in Texas: Timeline

CHART Model Pre-Implementation Period Key Dates



*Hospitals are requested to review the CMS-provided estimated Capitated Payment Amount (CPA) and inform HHSC of whether they intend to participate in the CHART Model by July 1. Signed participation agreements with CMS are due November 1.

CHART Model in Texas: Resources

<https://www.hhs.texas.gov/>

Search for: CHART Model

1. Rural Hospital Grant Facilitation page

- CHART Model Award

- ✓ Roadmap to CHART Model Participation
- ✓ Detailed Information for Participating in the CHART Model
- ✓ Sign up for email updates about CHART Model



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Advisory Council (1 of 2)

Established

- The Council is a multi-stakeholder organization which include the following representatives:
 - The State Medicaid Agency
 - Participant Hospital
 - Aligned Payer
 - Beneficiary or unpaid caregiver; and
 - Three distinct entities
- The Council meets on a quarterly basis.



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Advisory Council (2 of 2)

Purpose

- Provide critical feedback in the development and implementation of the CHART Model Transformation Plan and assists with collaboration efforts.
- Other activities include, but are not limited to, advising on:
 - hospital and payer recruitment, developing arrangements with payers governing APM alignment and data-sharing,
 - monitoring progress, and
 - identifying necessary changes.



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Roadmap to CHART Model Participation

- Notify HHSC (HHSC_CHART@hhsc.state.tx.us) if you have any questions or if your hospital reaches a decision NOT to participate.
- Review and complete identified steps in CHART Model Participation Checklist.
 - Financial Specifications Resource Documents
 - Telemedicine Project Worksheet
 - Continue to educate key stakeholders
- Participate in optional HHSC hosted monthly meetings with potential Participant Hospitals.



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Questions about the **CHART Model?**

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