



Community Healthcare Access and Rural Transformation (CHART) Advisory Council

Membership Requirements

The role of the CHART Advisory Council is to represent the Community's perspective and advise the Recipient as it implements the Community Transformation Track requirements. The Advisory Council must include the following representatives:

- i. The State Medicaid Agency (SMA) (if the Recipient is not the SMA) even if the SMA is physically located outside of the Community;
- ii. At least one Participant Hospital;
- iii. At least one Aligned Payer (if Recipient has recruited any commercial payers) as described in A.4.5.3. (Multi-payer Alignment) of the Notice of Funding Opportunity (NOFO);
- iv. At least one beneficiary or unpaid caregiver; and
- v. At least three distinct entities from the following list:
 - a. A primary care provider, such as a Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC), or physician group practice.
 - b. A health care provider of substance use disorder treatment and/or mental health services.
 - c. An additional Participant Hospital.
 - d. The State Office of Rural Health.
 - e. An additional Aligned Payer.
 - f. A community stakeholder group, such as a rural patient advocacy group, Area Agency on Aging, or faith- and community-based organizations.
 - g. A long-term care facility (e.g., nursing home), home health provider, or hospice provider.
 - h. An Indian Health Service (IHS) or Tribal health provider or Federally-recognized Tribe or Tribal organization.
 - i. The U.S. Department of Veteran's Affairs (VA).

Please reach out with any questions to HHSC_CHART@hhs.texas.gov.

Membership List

Member	Job Title	Organization	Member Category	Responsibilities ^a
April Ferrino	Director FPC	HHSC	Lead Organization	A, B, C, D, E
Gary Young	Senior Advisor	HHSC	Lead Organization	A, B, C, D, E
Trina Ita	Assoc. Comm. for Behavioral Health Services	HHSC	Lead Organization	A, C, D, E
Fabian Borrego	Regional CFO – South Texas	Fort Duncan Regional Hospital	Participant Hospital	A, B, C, D, E
Rebecca McCain	Chief Executive Officer	Electra Hospital	Participant Hospital	A, B, C, D, E
Lydia Long	Director of State Programs	Ascension Texas	Additional Participant Hospital	A, B, C, D, E
Carolyn Quan, MD, MHCDS, SFHM	Division VP, Clinical Efficiency and Utilization	CHI St. Luke’s Health	Additional Participant Hospital	A, B, C, D, E
J. Michelle Stevens	Chief Executive Officer	Haskell Co. Hospital District	Additional Participant Hospital	A, B, C, D, E
Michael Diel	Senior Vice President of Network Development & Contracting	Superior Health Plan	Aligned payer	A, B, C, D, E
Daverick Isaac	Chief Finance Officer	Community First Health Plans	Additional Aligned payer	A, B, C, D, E
Donna Boatright	Retired Hospital Administrator	Self	Medicare Beneficiary and Retired Hospital Administrator	D, E
Shenita Guillory	VISN 17/ Telehealth & Rural Access Mgr.	U.S. Dept. of Veteran Affairs	U.S. Dept. of Veteran Affairs	A, D, E
Eva Cruz	Rural Health Specialist	State Office of Rural Health	State Office of Rural Health	A, C, D, E
John Henderson	Chief Executive Officer	Texas Organization for Rural & Community Hospitals (TORCH)	Community Stakeholder Group	A, B, C, D, E
Jessica Whitesides	Administrator	Mitchell Co. Nursing & Rehabilitation Center	Long-Term Care or Home Health	A, B, C, D, E

^a Key for Roles and Responsibilities (may change): A - contribute feedback for transformation plan; B - contribute feedback for capitation arrangements; C - contribute to data sharing and outcomes; D - collaborate and monitor progress; E - contribute feedback about community needs/impact.