



CHART Model Project Abstract

Texas' proposed health care delivery system redesign concept is to bring improved financial stability to participant hospitals through capitated arrangements and provide strategies to address Community health challenges through telemedicine. Using community assessments to identify gaps between services and resources available, four Community health challenges common to each Community county have been identified. They include: (1) lack of coordinated care, (2) uncoordinated care transitions resulting in unplanned hospital readmissions, (3) improved treatment and prevention of chronic conditions like diabetes, cardiovascular disease, and congestive heart failure, and (4) limited or no access to primary and specialty care. Texas envisions a framework from which participating hospitals can customize their role in the CHART Model transformation plan by selecting one or more of the Community health challenges to address through a telemedicine project(s) that fits the needs of their county.

Texas is requesting \$5,000,000 in funding for its proposed project. If awarded, a significant portion of the cooperative funding would be used to: (1) provide technical assistance related to transformation, (2) allow hospitals to purchase telemedicine equipment, training, software, and (3) hire additional staff, if needed, to implement transformation goals. Using the funding award for telemedicine allows hospitals to create new or expanded services to generate new or expanded revenue streams, as well as maximize the number of patients treated; thereby, leading to improved financial stability for the facility. Texas proposes to transform its Medicaid payment arrangements by developing an outpatient prospective payment system model using a bundled payment arrangement like enhanced ambulatory patient groups. If these payment systems prove beneficial to participating hospitals, Texas may expand them each performance period to meet Medicaid participation targets and address Community health goals. Additionally, Texas plans to replicate one or more bundled payment arrangements now tested in Medicare. The CHART Model Texas advisory council will play a key role in the development and implementation of capitated payment arrangements and improving state Medicaid telemedicine policy.

The geographic boundaries of Texas' chosen Community are 13 noncontiguous rural counties and census tracts spread across the state. They include: (1) Angelina County, (2) Brown County, (3) Burnet County, (4) DeWitt County, (5) Dawson County, (6) Census Tract 48187210400 in Guadalupe County, (7) Haskell County, (8) Maverick

County, (9) Mitchell County, (10) Polk County, (11) San Augustine County, (12) Census Tract 48485013700 in Wichita County, and (13) Young County.