Austin City Council
Public Health and Human Services Committee

February 18, 2014

Health Care that revolves around you

About Lone Star Circle of Care

In its 12-year history, LSCC has grown from one small community clinic in Georgetown…

to one of the most robust and innovative federally qualified community health centers in the nation…

with 600 employees and a network of 30+ clinics serving 100,000+ people in Central Texas.

LSCC - History

2002

LSCC Established

2006

BH & OB/Gyn Services Launched

2009

- Expansion into Travis & Bell Counties
- Optimization Center Launched

2011

Vision Services Launched

2004 | **2008** | **2010** | **2013**

2004

FQHC Status Obtained

2007

Seton Healthcare Family

2008

Centex

- EMR Launched

St David's HealthCare

2010

- NCQA Level 3
- Joint Commission Accreditation
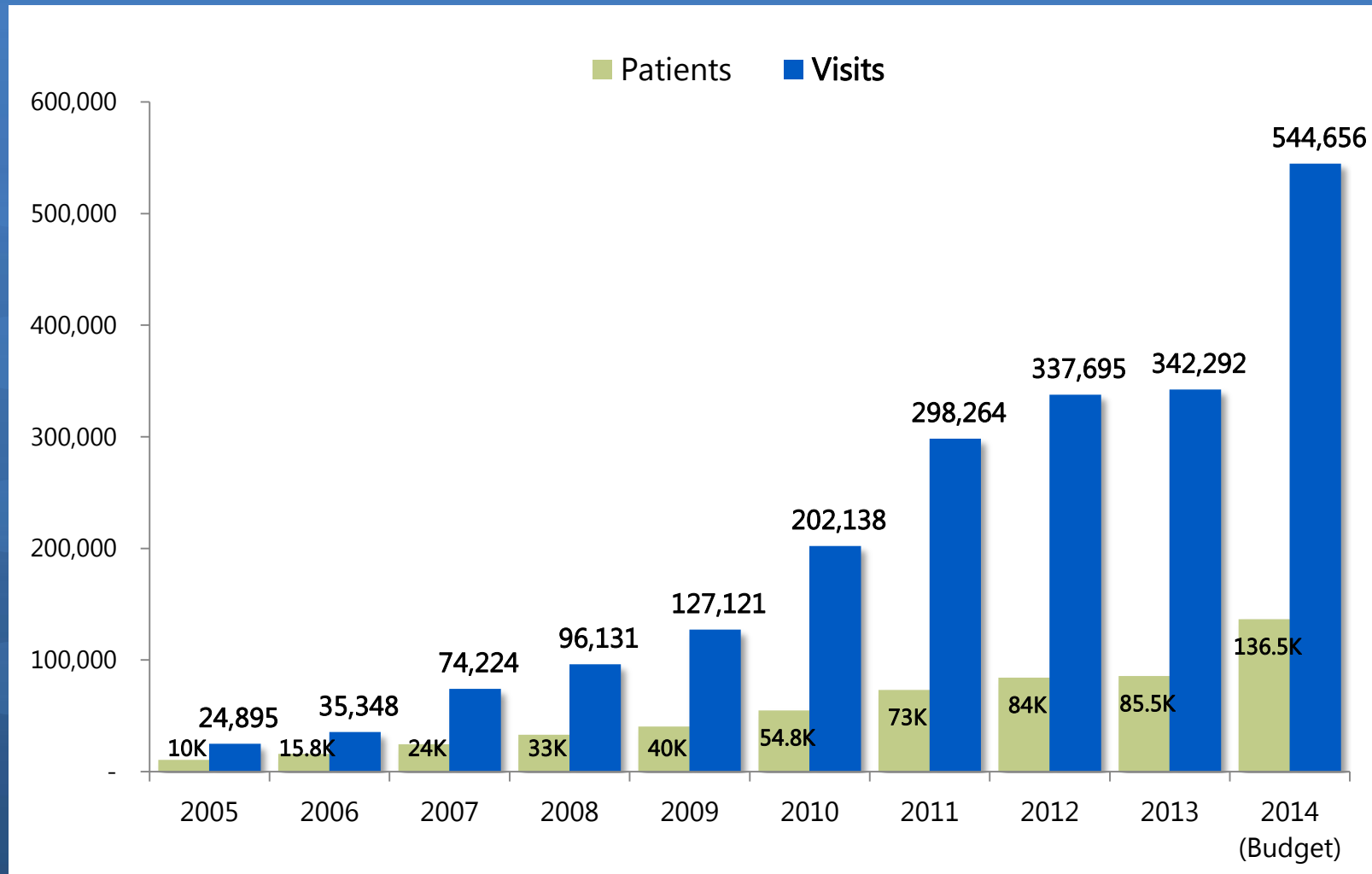- Senior Service Line Launched
- HCCN
- HIE Development
- Harden Pilot
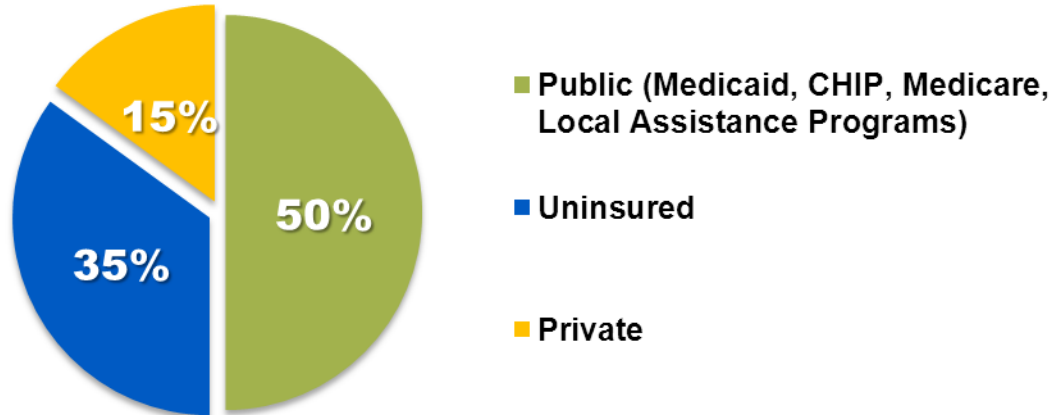
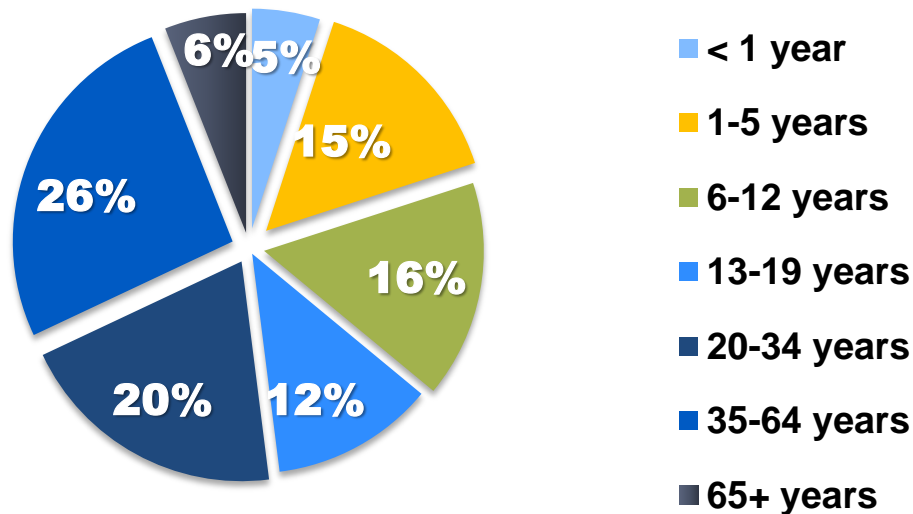**2013**

School-Engaged Model Launched

Increasing Access

Chart legend: Patients (green), Visits (blue)

Year	Patients	Visits
2005	10K	24,895
2006	15.8K	35,348
2007	24K	74,224
2008	33K	96,131
2009	40K	127,121
2010	54.8K	202,138
2011	73K	298,264
2012	84K	337,695
2013	85.5K	342,292
2014 (Budget)	136.5K	544,656

LSCC – Patient Demographics

Insurance Status, FY 2013

- Public (Medicaid, CHIP, Medicare, Local Assistance Programs) — 50%
- Uninsured — 35%
- Private — 15%

LSCC Age Distribution, 2013

- < 1 year — 5%
- 1-5 years — 15%
- 6-12 years — 16%
- 13-19 years — 12%
- 20-34 years — 20%
- 35-64 years — 26%
- 65+ years — 6%

LSCC Race/Ethnicity Distribution, 2013

- Hispanic or Latino — 41%
- White — 33%
- Black or African American — 11%
- Not reported — 10%
- More than one race — 2%
- Asian — 2%
- Other — 1%
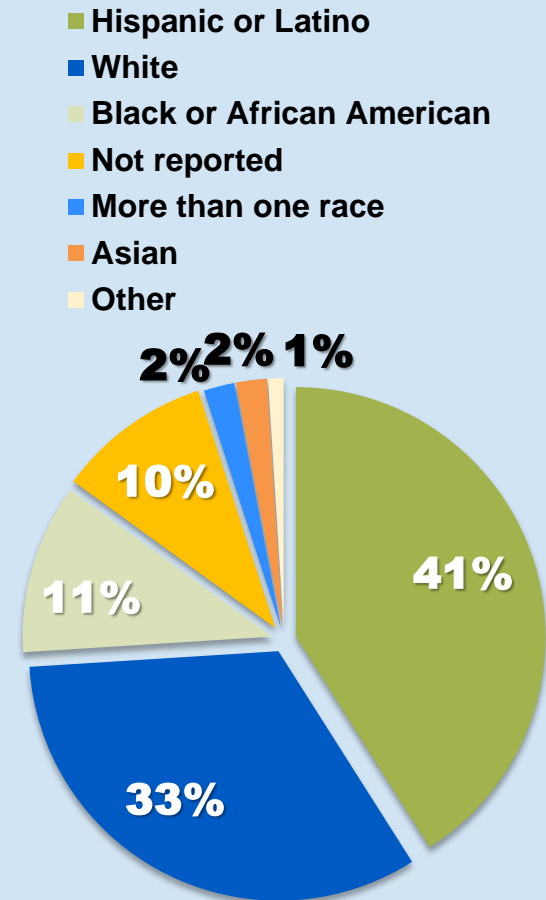
LSCC - Services

- ★ Family Practice
- ★ Pediatrics and Adolescent Health
- ★ OB/GYN (prenatal, labor & delivery, post-partum)
- ★ Senior Care
- ★ Integrated Behavioral Health
- ★ General Dentistry
- ★ Vision
- ★ Pharmacy
- ★ Optimization Center

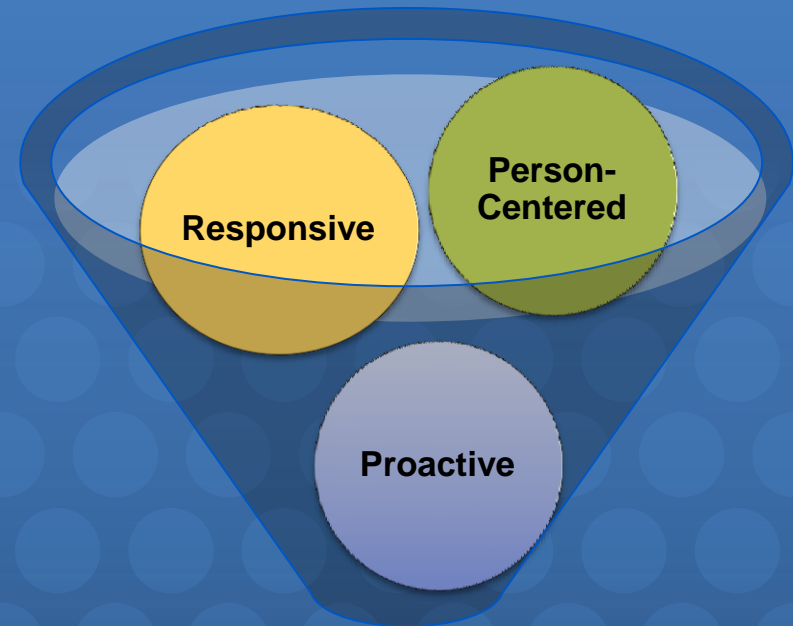# Maximizing Member Contact Points

- **School Engaged Health Home**
  - Non-traditional contact points specific to population management and optimization by defining a new model of school care that currently does not exist
    - Secure large segments of the population as part of the narrow network and ACO strategy
    - Create an affinity for Partner Ntwk Brand
    - Create intellectual property around population optimization
    - Connect children into the Partner Network
    - Create natural progression from PCP selection model to focused network model

- **Employer Health Models**
  - Independent School Districts
  - City/County Governments
  - Private Insurance Plans

- **Health Plan Member Outreach**
  - MCO, Star Health Plan
    - Welcome to Plan
    - Preventative Reminders
    - Compliance/Education
    - LSCC and non-LSCC patients

- **Home Visits by Care Team**
  - MCO, Star Plus & Exchange
    - PMPM regardless of covered vs. non-covered services
  - RN care coordination contracted services for full optimization of each member contact through advanced navigation and technology capabilities and innovations

- **Telemedicine/Telemonitoring**

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Member Optimization Center

- Proactively manages patients (members) using state-of-the-art technology, connecting them to every service they need throughout the continuum

- Maximized via LSCC's EHR and enhanced by Health Optimization Technology

  - OC staff can access data across LSCC's entire network versus a single clinic site

  - HIE includes data from external entities allowing for a more comprehensive picture of member service utilization and health status

  - All technology-driven business processes are designed to scale to 10million+ lives

Responsive

Person-Centered

Proactive

Improves Quality Reduces Cost

Defined Value Networks & Strategies

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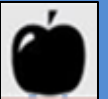
Optimized Contact Points

Clinical Interventionists (RN's)

Specialty Referral Coordinators (LVN/MA's)

Member Service Representatives (Internal Certification)
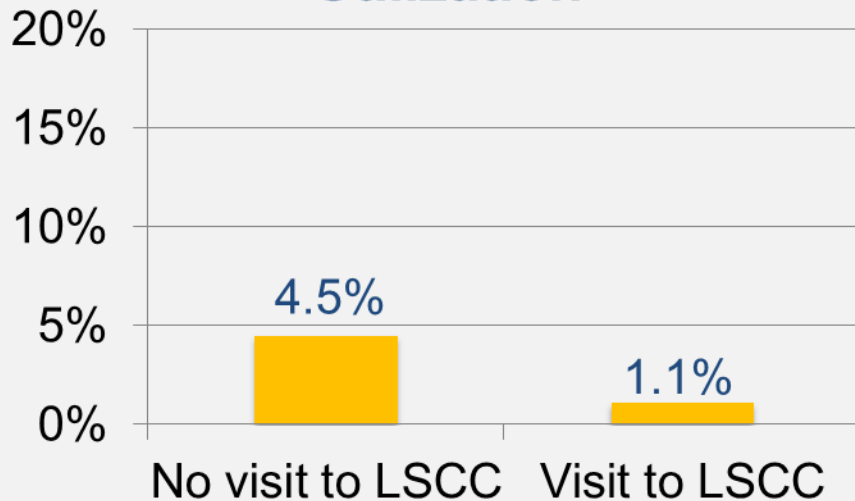
Member Health Team
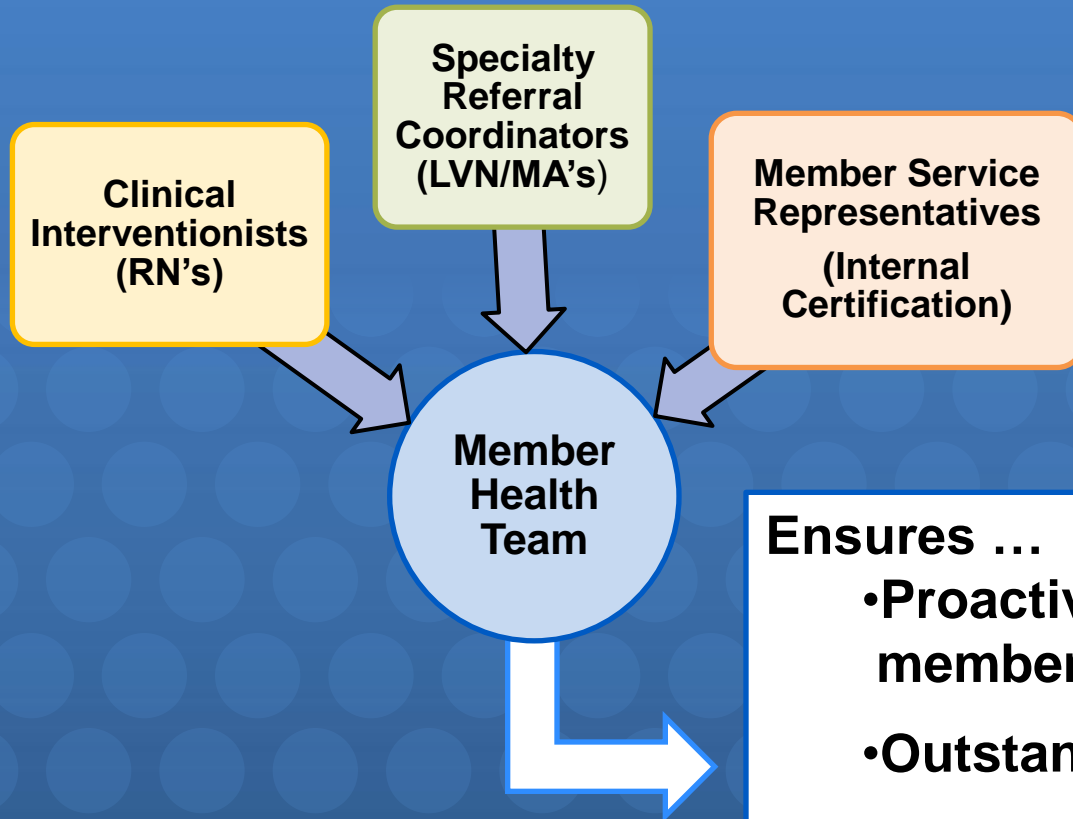
Ensures …
- Proactive follow up to determine member experience
- Outstanding questions are answered
- Further education is provided when needed

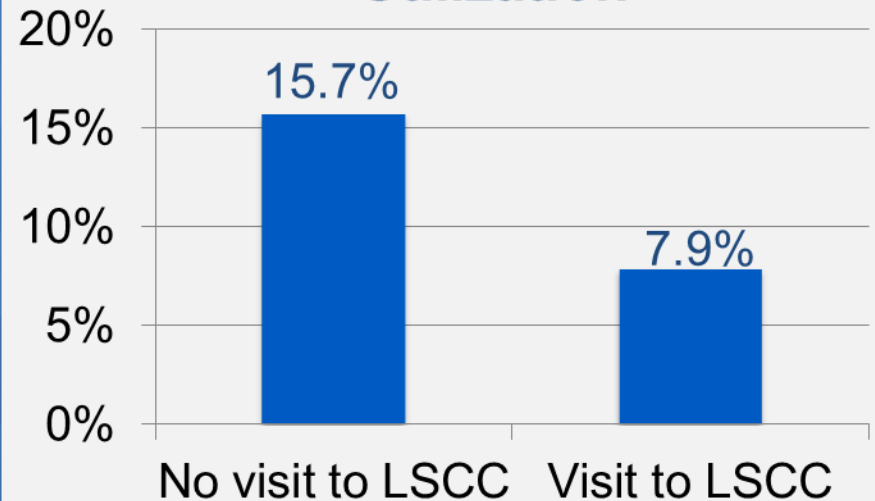**Overall coordination of patient's healthcare**

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Optimization Model – Measured Outcomes

In-Patient Hospital Utilization

- No visit to LSCC: 4.5%
- Visit to LSCC: 1.1%

Emergency Department Utilization

- No visit to LSCC: 15.7%
- Visit to LSCC: 7.9%

- **Patients who had not had a visit to LSCC were more than 4 times as likely to have at least one avoidable hospital visit.**

- **Patients who had not had a visit to LSCC were nearly twice as likely to show up in the Emergency Department.**

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LSCC Assets

- An innovative technology company, Centex System Support Services, and enabling technology and optimization platforms
  - Centered on the consumer
  - Ease of data mining and system-wide push of interventions
  - Encompasses all types of data

- Institution of population accountability models
  - Achieve best outcomes at lowest cost
  - Movement from process measures to functional measures
  - Focus on sustainability of health
  - Thrivability of a human

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LSCC Assets
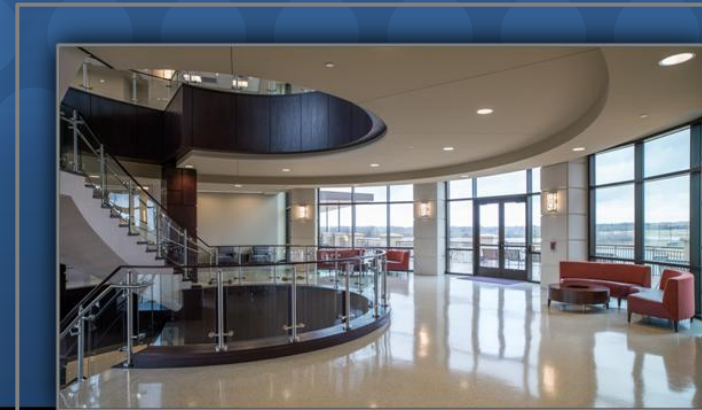
- Consumer centric service delivery model
  - Convenience in location and hours for the consumer
  - Maximize each interaction
  - Standardization across system
  - Reduce delays and duplication

- Institutional, departmental, and individual staff alignment across the integrated delivery system
  - Unified health teams
  - Stomp out silos
  - Internal and external customers

Q&A

Thank you!

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