

Hospital(s): McLeod Loris/Seacoast

HOP Name: McLeod Community Health Access Program

Healthy Outcomes Plan (HOP) Application

Proviso 33:34 Sections A (1), C, D

Application Cover Page

HOP Name	McLeod Community Health Access Program
Application Date	8/31/2013
Name of Hospital(s)	McLeod Health Loris/Seacoast
Name of Partner(s)	Access Health Horry, Little River Medical Center, Waccamaw Center for Mental Health, Friendship Medical Clinic & Pharmacy, and Shoreline Behavioral Health Services

I attest that, on behalf of the above named hospital(s), I am the organization representative approved to submit a Healthy Outcomes Plan (HOP) process improvement proposal. I further attest that the partner(s) signature(s) is also the approved representative for the respective organization(s) to request participation in the HOP with the above named hospital. Additionally, I attest that all partners will participate in SCDHHS HOP evaluation activities.

By signing this form, the representatives certify that the information contained herein has been reviewed by all parties and all parties have had the opportunity to consult with their respective legal entity.


Dick Tinsley, Hospital Representative

8.28.13
Date


Pam Davis, Partner Representative

8/27/13
Date

Hospital(s): McLeod Loris/Seacoast

HOP Name: ~~McLeod Community~~ Health Access Program

E. B. Bellamy, MA, LPC/S
Ethel Bellamy, Partner Representative

8/27/13
Date

[Signature]
John Coffin, Partner Representative

8/27/13
Date

[Signature]
Terri Harris, Partner Representative

8.27.13
Date

[Signature]
Dr. Richard Osman, Partner Representative

8/27/13
Date

**Additional signature lines may be added for additional community service and primary care safety net partners participating in the proposed collaboration.*

Hospital(s): McLeod Loris/Seacoast

HOP Name: McLeod Community Health Access Program

LETTER OF INTENT TO COLLABORATE BETWEEN
[McLeod Health]
and
Access Health Horry, Little River Medical Center, Waccamaw Center for Mental Health,
Friendship Medical Clinic & Pharmacy, and Shoreline Behavioral Health Services

We, the “Parties” listed above, intend to develop a Collaborative Partnership based upon the following principles:

The Parties desire to undertake this collaboration to build on existing relationships and/or form new relationships in order to implement a new service delivery model that aims to coordinate care for the uninsured, high utilizers of ED services and the chronically ill, and to support the Triple Aim initiative which will lead to improved health of the population, improved patient experience of care and reduce per capita cost of health care.

The Parties recognize that this is a general overview regarding the roles of the individual parties in this proposal, and a formal Memorandum of Understanding between the Parties will be agreed upon and submitted by the beginning of the Performance Period, October 1, 2013, if selected for participation.

The Parties shall enter into good faith negotiations for the purpose of establishing a Memorandum of Understanding for each of the activities described in the Process Improvement Plan. The rights and obligations of each Party will be contained within the Memorandum of Understanding.

Consistent with applicable law and each Party’s policies and procedures, the Collaborative Partnership may enter into agreements to support and perform each of the activities described in the Process Improvement Plan for the purpose of realizing any or all of the objectives of the collaboration.

The Parties agree to adhere to the highest scientific quality, values and ethical standards in their joint activities.

The Parties have designed this HOP Process Improvement Plan based upon a commitment to maintain an equal partnership and long term sustainability in a manner which maximizes their mutual ability to: generate and disseminate knowledge; apply that knowledge to solve priority health problems; and measure and assess improvement plan output throughout the collaboration.

The term of this Letter of Intent to Collaborate (LOIC) shall be for the duration of the performance period, if approved.

Either Party may terminate this LOIC without cause upon at least thirty (30) days’ prior written notice to the other Party and agrees to notify the South Carolina Department of Health and Human Services of the termination.

Institution: McLeod Health
 Name and Title: Dick Tinsley,
 Date: _____

Institution: Little River Medical Center (FQHC)
 Name and Title: Pamela Davis, CEO *PD*
 Date: 8/27/13

Institution: Waccamaw Center for Mental Health
 Name and Title: Ethel Bellamy, Executive Director
 Date: E. B. Bellamy, M.A.

Institution: Shoreline Behavioral Health Services)
 Name and Title: John Coffin *JC*
 Date: 8/27/13

Institution: Friendship Medical Clinic & Pharmacy
 Name and Title: Terri Harris, Executive Director
 Date: Terri S. Harris, 8.27.13

Institution: Access Health Horry
 Name and Title: Dr. Richard Osman, Board Chairman
 Date: Richard Osman - access 8/27/13

HOP Application Form

Hospital	McLeod Loris Seacoast
Partner(s)	<p>All of the partners listed below are represented on the board of directors of Access Healthy Horry and work together to insure the success of the program.</p> <ol style="list-style-type: none"> 1. Little River Medical Center (FQHC) – long standing relationship with Conway Medical Center. No contractual or financial relationship. 2. Waccamaw Center for Mental Health - long standing relationship with Conway Medical Center. No contractual or financial relationship 3. Friendship Medical Clinic & Pharmacy – long standing relationship with Conway Medical Center. 4. Shoreline Behavioral Health - long standing relationship with Conway Medical Center. No contractual or financial relationship 5. Access Health Horry- long standing relationship with Conway Medical Center. No contractual or financial relationship
Partner(s) Lead(s)	<p>Little River Medical Center – Pam Davis</p> <p>Waccamaw Center for Mental Health – Ethel Bellamy</p>

Hospital(s): McLeod Loris/Seacoast
HOP Name: McLeod Community Health Access Program

Hospital	McLeod Loris Seacoast
Partner(s)	<p>All of the partners listed below are represented on the board of directors of Access Healthy Horry and work together to insure the success of the program.</p> <ol style="list-style-type: none"> 1. Little River Medical Center (FQHC) – long standing relationship with Conway Medical Center. No contractual or financial relationship. 2. Waccamaw Center for Mental Health - long standing relationship with Conway Medical Center. No contractual or financial relationship 3. Friendship Medical Clinic & Pharmacy – long standing relationship with Conway Medical Center. 4. Shoreline Behavioral Health - long standing relationship with Conway Medical Center. No contractual or financial relationship 5. Access Health Horry- long standing relationship with Conway Medical Center. No contractual or financial relationship
Partner(s) Lead(s)	<p>Little River Medical Center – Pam Davis</p> <p>Waccamaw Center for Mental Health – Ethel Bellamy</p> <p>Friendship Medical Clinic & Pharmacy – Terri Harris</p> <p>Shoreline Behavioral Health – John Coffin</p> <p>Access Health Horry – Roscia Hardee</p>
HOP Implementation Sites	<ul style="list-style-type: none"> • Access Health Horry <ul style="list-style-type: none"> ○ 36550 Clay Pond Road ○ Myrtle Beach, SC 29579 • Little River Medical Center <ul style="list-style-type: none"> ○ Little River Location <ul style="list-style-type: none"> ▪ 4303 Live Oak Drive ▪ Little River, SC 29566 ○ Loris Office <ul style="list-style-type: none"> ▪ 3817 Main Street ▪ Loris, SC 29569 ○ Myrtle Beach Offices (MB and Annex) <ul style="list-style-type: none"> ▪ 7724 and 7726 North King’s Highway ▪ Myrtle Beach, SC 29572 ○ South Strand Office <ul style="list-style-type: none"> ▪ 3236 Holmestown Road ▪ Myrtle Beach, SC 29588

Hospital(s): McLeod Loris/Seacoast

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	<ul style="list-style-type: none"> • Friendship Medical Clinic & Pharmacy <ul style="list-style-type: none"> ○ 1396 Highway 544 ○ Conway, SC 29526 • Shoreline Behavioral Health Services <ul style="list-style-type: none"> ○ 2404 Wise Road ○ Conway, SC 29528 • Waccamaw Center for Mental Health <ul style="list-style-type: none"> ○ 164 Waccamaw Medical Park Drive ○ Conway, SC 29526 																											
Clinical Lead	Rachael Ellsworth																											
Administrative Lead	Dick Tinsley																											
Name of HOP	McLeod Community Health Access Plan																											
<p>Background and Rationale</p> <p>Maximum 1,000 words</p>	<p>The challenge that faces emergency departments nationwide is high utilization for non-emergent conditions. McLeod Health 's emergency department cares for approximately 44,797 patients per year and some of these visits could be avoided if the patients had other options. The purpose of the joint project of MH, Access Health Horry, Little River Medical Center, Waccamaw Center for Mental Health, Friendship Medical Clinic & Pharmacy, and Shoreline Behavioral Health Services is to address these issues and offer a vulnerable population additional options for receiving much needed health care. Historically, MH has served as a cornerstone of the medical community in Loris and Little River. The hospital offers the largest variety of services of any facility in the area. Based on these services and reputation of physicians on the medical staff, many patients seek care at this facility. Coupled with the transient nature of the McLeod Health Seacoast medical center location population, many patients encounter job loss, social conditions, and family dynamics that leave the hospital as the only option to address medical issues. Data reviewed to determine the target population included review of the high prevalence conditions based on environmental scan of the hospital's local data based on high utilization and/or high cost.</p> <p>Below are the top chronic conditions (excluding any acute illness or injury) that patients required 4+ emergency room department visits for April 2012 to March 2013 for uninsured patients:</p> <table border="1" data-bbox="488 1465 1490 1900"> <thead> <tr> <th>CHRONIC CONDITION</th> <th>ED PATIENTS</th> <th>ED VISITS</th> </tr> </thead> <tbody> <tr> <td>HYPERTENSION</td> <td>48</td> <td>177</td> </tr> <tr> <td>BEHAVIORAL HEALTH</td> <td>46</td> <td>138</td> </tr> <tr> <td>DIABETES</td> <td>15</td> <td>43</td> </tr> <tr> <td>CHRONIC OBSTRUCTIVE PULMONARY DISEASE</td> <td>10</td> <td>30</td> </tr> <tr> <td>ASTHMA</td> <td>9</td> <td>36</td> </tr> <tr> <td>KIDNEY/URINARY INFECTION</td> <td>26</td> <td>59</td> </tr> <tr> <td>DENTAL CONDITIONS</td> <td>22</td> <td>71</td> </tr> <tr> <td>ASTHMA</td> <td>9</td> <td>36</td> </tr> </tbody> </table>	CHRONIC CONDITION	ED PATIENTS	ED VISITS	HYPERTENSION	48	177	BEHAVIORAL HEALTH	46	138	DIABETES	15	43	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	10	30	ASTHMA	9	36	KIDNEY/URINARY INFECTION	26	59	DENTAL CONDITIONS	22	71	ASTHMA	9	36
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	<p>The facility specific data outlines obvious gaps in coverage for behavioral health and common primary care type issues –hypertension, COPD, and diabetes.</p> <p>Behavior health is a huge gap in Horry County. There are very few available inpatient beds available to behavioral health patients in our area and many patients go without treatment. Additionally, many behavioral health patients do not follow through with referrals to outpatient behavioral health services. These patients use the ED at McLeod as the primary source of care. This is a serious issue given that we have limited behavioral health services. There are case managers in the facility that make multiple phone calls to all resources to gain access to inpatient treatment for this patient population. The unlikelihood of patients following through with referrals to behavioral health services is commonly recognized as one of the major barriers to treatment for this population.</p> <p>Primary care for uninsured patients is another gap in Horry County. There are very few options for those patients needing basic care without the ability to pay at the time of services. Little River Medical Center and Friendship Medical Clinic & Pharmacy offer primary care for this population but resource capacity and transportation issues keep these organizations from being fully utilized.</p> <p>The joint project of MH, Access Health Horry, Little River Medical Center, Waccamaw Center for Mental Health, Friendship Medical Clinic & Pharmacy, and Shoreline Behavioral Health Services will address these concerns and provide needed care for people in this area.</p>
<p>Targeted Population and Inclusion Data</p> <p>Maximum 1,000 Words</p>	<p>The partnership reviewed and analyzed the Emergency Department patient information for the previous year. In this data, the visits were condensed to those patients that had multiple visits to the ED (more than 4) as well as high cost conditions. Then this information was categorized by type diagnosis. Additional drill down of the hospital data included a drill down by zip code to analyze the hot spot areas of the high utilizers for the repeat ED visits. The following was observed:</p> <ol style="list-style-type: none"> 1. The facility specific data with the drill down to the hot spots outlines obvious gaps in coverage for behavioral health (34 Patients) and common primary care (53 patients) type issues –hypertension (35 patients), COPD (5 patients), diabetes (13 patients). With the current allocation in the proviso, the above mentioned numbers are the allotted numbers that are sustainable in the plan. With additional allocated funding, the partnership could also focus on more of the high utilizers and high cost population in the ED with conditions such as dental (22 patients), urinary tract infections (26 patients) and asthma (9 patients). 2. These patients were listed as self-pay with no ability to pay - - attempts will be made to enroll in Medicaid and Health Insurance Exchange.
<p>Strategic Objectives</p>	<p>The following strategic objectives will be addressed:</p> <ul style="list-style-type: none"> • Increase in # of patients with Social Determinants Screening • Reduce ED Utilization • Reduce system fragmentation and address social determinants of health that affect health behaviors and influence outcomes

	<ul style="list-style-type: none"> • Improve patient access to and utilization of quality and affordable care. • Promote adherence to clinical, evidence-based guidelines • Integrate the biopsychosocial approach (medical, behavioral health, social) into a comprehensive patient care planning process • Establish a medical home • Improve coordination of transitions of care • Increase provisions and utilization of comprehensive, routine primary care
<p>Strategic Measures</p>	<ul style="list-style-type: none"> • Care Metrics <ul style="list-style-type: none"> ○ Number of patients referred to strategic partners with outlined conditions ○ Number of ED visits of these specific patients ○ Number of follow-up visits to partners for outlined conditions ○ % of successful contact with target population within the 1st 30, 60, 90 days of program. ○ % of target population established with medical home (primary care physician) ○ % of target population with Social Determinants Screening within first 30, 60, 90 days <ul style="list-style-type: none"> ▪ % of target population connected to one or more community services as a result of SDS. ▪ Type of community service referral, per patient ○ % of target population with Health Affordability Programs Eligibility Screening. ○ % of target population with a Patient Care Plan within the first 30, 60, 90 days of program enrollment. ○ % Patients that have had at least one primary care encounter that includes preventive care, screenings and interventions. • Cost <ul style="list-style-type: none"> ○ ED Utilization Rate ○ Inpatient Utilization Rate ○ Total Charges per patient • Health Metrics <ul style="list-style-type: none"> ○ A1C for Diabetic patients ○ BP Readings ○ Medication utilization/compliance
<p>Description of HOP</p> <p>Maximum 1,000 Words</p>	<p>The McLeod HOP will leverage the existing relationship of the hospital with Access Health Horry’s system of partners that include Little River Medical Center, Waccamaw Center for Mental Health, Friendship Medical Clinic & Pharmacy, and Shoreline. This network will provide the necessary treatment for patients requiring access to either (or both) primary care and mental health/ behavior health services, including substance/alcohol abuse.</p> <p>The initial point of contact will be emergency department at and hospital employed case management. After the patient is cleared of any emergency conditions the case manager will work with the patient and Access Health Horry system providers. McLeod staff will determine if they will utilize the telepsych services available at McLeod prior to referring a patient to Access Health Horry for services to be coordinated with Waccamaw Center for Mental Health and/or Shoreline Behavioral</p>

	<p>Health Services Access Health Horry will provide dedicated case managers/care coordinators for 12 hours per day 7 days per week. These case managers/care coordinators will take calls, referrals and information from the ED at MH and route the patient to either behavior health service or primary care services. These case managers/care coordinators will work with case management at McLeod to determine appropriate screening tools (both behavior health and social determinants) that can be used for any patient meeting the target population criteria. These patients will be screened at the hospital for Medicaid eligibility. Additional screening for Medicaid eligibility and enrollment in the health insurance exchange will be handled by Access Health Horry and/or Little River Medical Center’s outreach HIE workers. Once the patient is screened and the need is identified, the new staffing resources listed above will develop the plan of care and provide care coordination and medical education and work directly with the patient to guide her/him through the system that will include:</p> <ul style="list-style-type: none"> • Primary care services at Little River Medical Center, Friendship Medical Clinic & Pharmacy , or other system provider • Access to medications, equipment, coaching, mentoring, or supplies available at any partner location • OP behavioral health and/or alcohol/substance abuse services provided by WCMH or Shoreline Behavioral Health Services <p>The primary goal is to introduce the patient population to the needed resources, establish a patient medical home and reduce the number of repeat ED visits. By having central contacts and established relationships, the patient will be empowered to participate in the care needed to improve overall well-being. Overall, the ED has reduced repeat visits which save overall cost in the system and allows the hospital to focus on those in emergency situations. The goal is also to link the targeted population with appropriate, effective, quality and affordable care.</p>
<p>Resources Required for Implementation of HOP Maximum 1,000 Words</p>	<ol style="list-style-type: none"> 1. Little River has 5 locations to receive primary care patients 2. Friendship Medical Clinic & Pharmacy has both medical access and pharmacy resources for primary care 3. Waccamaw Mental Health provides comprehensive mental health services to treat behavioral patients that meet criteria 4. Shoreline has one main location to receive alcohol and substance abuse patients 5. Provide a statement of the anticipated resources. The resources listed here are required to support the targeted population of the 87 patients in the proviso. <ol style="list-style-type: none"> a. 1 FTE that will be used to coordinate access to partnership resources - \$36,192

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	<ul style="list-style-type: none"> b. .20 FTE for provider at LRMC for Primary Care Services - \$20,160 c. Services for mental health/behavioral health services - \$50,000 d. Services at Friendship Medical Clinic & Pharmacy – No charge e. Computer, phones, mobile devices access for patient tracking and coordination of care - \$4,938 f. Travel for staff - \$5,000 g. Medical supplies, equipment, medications, and other misc expenses including patient transportation for partnership - \$5,000 <p>Note: With additional funding, the following additional population with more than 4 visits to the ED and high costs associated would be included in the project in order to provide more effective care at an affordable cost for the patients, while reducing the costs to the hospital, improving access and quality of care for the community. The targeted populations would include dental, urinary tract infections and asthma. Little River Medical Center would provide a fast track system for these targeted patients to be seen for these conditions. The additional resources that would be needed would include:</p> <ul style="list-style-type: none"> a. .50 FTE provider and clinical support staff - \$85,400 b. .20 FTE Dental and dental support staff – \$35,000 <p>The total cost projected for the total plan listed above is \$241,690.</p>
Reporting Capacity	<p>The entire partnership is fully committed to tracking the data by month and reporting to the network of providers at each quarterly meeting. Using Access Health as a care management hub for the system, it is expected that over time the involved partners will be able to collectively track outcomes and monitor/manage utilization with the Access Health Program operating in some ways like a locally based managed care organization designed specifically to deal with the unique needs of high utilization patients. Where possible, Access Health will broker those services necessary to fill the social and environmental access gaps for this population. Access Health Horry has a software system, CareScope, that will collect and track information on social determinants, services offered/received, number of Medicaid/ Health Insurance Exchange applications, health outcomes, care plans, and other critical data necessary for the reporting criteria for this program and for the partner network.</p>
Performance Period	October 1, 2013 – September 30, 2014