

# **DRAFT**

## **2018 Provider Network Development Plan**

Please find attached the Gulf Coast Center's draft Network Development Plan which is currently available for comment until April 5, 2018. Please feel free to share with any interested parties including individuals in services, their family members, advocacy groups and any respective community groups (and committees).

While the Center does have a regional planning advisory committee, the Center wanted to guarantee that our local stakeholders reviewed the draft plan and provided feedback. .

Any comments or feedback is greatly appreciated.

Again thank you for your assistance with this endeavor. Feel free to call me with any questions 409-944-4314.

### **NOTES:**

- This process applies only to services funded through the Mental Health Performance Contract Notebook (PCN); it does not apply to services funded through Medicaid Managed Care. Data is requested only for the non-Medicaid population.
- The requirements for network development pertain only to provider organizations and complete levels of care or specialty services. Routine or discrete outpatient services and services provided by individual practitioners are governed by local needs and priorities and are not included in the assessment of provider availability or plans for procurement.

# THE GULF COAST CENTER

## 2018 PROVIDER NETWORK DEVELOPMENT PLAN

### PART I: Required for all LMHA/LBHAs

#### **Local Service Area**

The Counties of Galveston and Brazoria jointly agreed in 1969 to the establishment of the Gulf Coast Center (originally known as Gulf Coast Regional Mental Health Mental Retardation Center). The Center is governed by a nine-member volunteer Board of Trustees appointed by the County Commissioner's Courts of Galveston (5 members) and Brazoria (4 members) Counties, Texas.

<b>Population</b>	683,626	<b>Number of counties (total)</b>	2
<b>Square miles</b>	1736	♦ <b>Number of urban counties</b>	1 - Galveston
<b>Population density</b>	394	♦ <b>Number of rural counties</b>	1 - Brazoria

#### *Major populations centers:*

<b>Name of City</b>	<b>Name of County</b>	<b>City Population</b>	<b>County Population</b>	<b>County Population Density</b>	<b>County Percent of Total Population</b>
Alvin	Brazoria	26,164	354,195	261	52%
Angleton	Brazoria	19,491	354,195	261	52%
Galveston	Galveston	50,550	329,431	871	48%
Texas City	Galveston	48,262	329,431	871	48%

## Current Services and Contracts

The table below provides an overview of current services and contracts. The Levels of Care are specific to non-Medicaid individuals and contracts for discrete services were not used when calculating percentages.

	FY 2017 service capacity (non-Medicaid only)	Estimated FY 2018 service capacity (non-Medicaid only)	Percent total non-Medicaid capacity provided by external providers in FY 2017*
<b>Adult Services: Complete Levels of Care</b>			
Adult LOC 1m	10	13	0%
Adult LOC 1s	1502	1535	0%
Adult LOC 2	31	32	0%
Adult LOC 3	71	72	0%
Adult LOC 4	28	30	0%
Adult LOC 5	33	33	0%

<b>Child and Youth Services: Complete Levels of Care</b>	FY 2017 service capacity (non-Medicaid only)	Estimated FY 2018 service capacity (non-Medicaid only)	Percent total non-Medicaid capacity provided by external providers in FY 2017*
Children's LOC 1	13	13	0%
Children's LOC 2	34	34	0%
Children's LOC 3	9	9	0%
Children's LOC 4	2	2	0%
Children's CYC	1	1	0%
Children's LOC 5	6	6	0%

<b>Crisis Services</b>	FY 2017 service capacity	Estimated FY 2018 service capacity	Percent total capacity provided by external providers in FY 2017*
Crisis Hotline	3109	3109	100%

Mobile Crisis Outreach Team	1992	1992	0%
Other (Please list all Psychiatric Emergency Service Center (PESC) Projects and other Crisis Services):			
Crisis Respite (bed days)	1165	1165	100%
Inpatient Services (bed days)	5717	5717	100%

➤ **Below are the Gulf Coast Center's FY 2017 Contracts.**

<b>Provider Organizations</b>	<b>Service(s)</b>
University Of Texas Medical Branch (UTMB)	Physician/psychiatric services for child and adolescent services, St. Joseph Hospital physician inpatient services, and COPSD program services (physician service only)
JSA Health, Inc	Professional psychiatric telemedicine services on an as needed basis
ETBHN	Telemedicine, authorization service, pharmacy services, and medical director leadership & consultation
The Wood Group	Crisis respite services at Texas City locations; Emergency evacuation
NorTek Medical Staffing	Physician/psychiatric services
The Children's Center, INC.	Community based crisis respite to youth on an as needed basis
Boon-Chapman (Soluta)	Comprehensive psychiatric and mental health and pharmacy services in the Galveston County Jail
Hopebridge Health	Inpatient Services on an as needed basis for children and adolescents
J Allen And Associates Of Texas, Llc	Comprehensive psychiatric/telepsychiatric, mental health services and pharmacy services in the Brazoria County Jail
Coastal Health & Wellness	MOU coordinating referrals, resources, training, and technical assistance
Teen Health Center	MOU coordinating referrals, medication resources, training, technical assistance and office space in order to assist in providing quality, affordable, medical and mental health care to Galveston County kids and teens
NAMI Gulf Coast	MH family and consumer education, support and training services; and community education, training and partnerships; and Mental Health First Aid training coordination
SJ Medical Center, LLC	Adult Inpatient hospital services
The Harris Center for Mental Health and	Crisis Intervention Hotline

IDD	
Stephen F. Austin Community Health Network	Integrated Primary and Behavioral Health Care services
Youth Advocate Programs Inc.	Coordinating referrals and resources for the provision of specific Youth Empowerment Services (YES) Waiver Services
Quality of Care LLC	Coordinating referrals and resources for the provision of specific Youth Empowerment Services (YES) Waiver program for youths
Clear Creek Independent School District	Collaboration to expand the number of school personnel trained and certified in Mental Health First Aide

**Administrative Efficiencies**

The Gulf Coast Center utilized the following strategies to to minimize overhead and administrative costs and achieve purchasing and other administrative efficiencies, as required by the state legislature.

♦ Continued membership in ETBHN (see below) resulting in the benefits and efficiencies of consolidation and standardization of various activities
♦ Continued participation in group purchasing contracts such as DIR, The Interlocal Purchasing System (TIPS-TAPS) of the Region VIII Education Service Center, HGAC, and BuyBoard
♦ Actively seeks collaboration with local agencies and providers, as well as ETBHN, in seeking major grant and funding opportunities

1) Partnerships (current, ongoing) with other LMHA/LBHAs related to planning, administration, purchasing, and procurement or other authority functions, or service delivery are listed in the below table:

Start Date	Partner(s)	Functions
	ETBHN: Members include ACCESS	<ul style="list-style-type: none"> <li>• Utilization Management Authorization for Center services</li> <li>• Medical Director leadership and consultation services</li> </ul>

	Andrews Center Bluebonnet Trails Community Center Burke Center Community Healthcore Gulf Bend Center Gulf Coast Center Lakes Regional Center Pecan Valley Center Spindletop Services Tri-County Services	<ul style="list-style-type: none"> <li>• Sharing of IT personnel for consultation, training, and programming services.</li> <li>• Pharmacy Services which provides cost containment of medication costs, as well as provides needed oversight and monitoring assistance</li> <li>• Regional Planning and Advisory Committee comprising of 11 member Centers</li> <li>• Regional purchase of electricity – which results in a group purchase of power; and provides assurance of stable electricity costs</li> <li>• Regional Informational Technology purchasing and projects</li> <li>• Consultation and training in areas such as fundraising, financial wellness, assessment tools, etc are available to Member Centers.</li> <li>• Seek major grants and other funding opportunities; i.e. recently awarded a grant for services for Veterans.</li> </ul>

**Provider Availability**

*NOTE: The LPND process is specific to provider organizations interested in providing full levels of care to the non-Medicaid population or specialty services. It is not necessary to assess the availability of individual practitioners. Procurement for the services of individual practitioners is governed by local needs and priorities.*

➤ **The following steps were taken to identify potential external providers for this planning cycle**

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| * Provider Interest notice posted on Center’s website (www.gulfcoastcenter.org) and Facebook page in November and December |
| * Continuous review of DSHS website specific to Potential Provider Profiles  |

➤ **The following table represents those potential providers who expressed interest in joining the Center’s Provider Network.**

<b>Provider</b>	<b>Source of Identification</b>	<b>Summary of Follow-up Meeting or Teleconference</b>	<b>Assessment of Provider Availability, Services, and Capacity</b>
Champions Behavioral Health	HHSC website: Provider Inquiry Form	1/22/18 discussed the different service areas and the meaning of full level of care. Determined interest is for discrete services. Information forwarded to COO and to Disaster Coordinator due to disaster mgmt experience noted.	Interested in discrete services. Able to provide psychosocial services, psychiatric/substance abuse discrete services.
Dominion Recovery Managers, LLC	HHSC website: Provider Inquiry Form	2/12/18 discussed potential areas of service, difference between full level of care vs discrete services. Full level of care not an option at present. Provider contact info provided to COO as a potential contractor to assist with Central Intake and Assessment.	Interested in discrete services. Able to provide psychosocial rehab and social work services.

## Part II: Required for LMHA/LBHAs with potential for network development

- Due to the Center NOT receiving inquiries from interested providers to provide a full level of care to the non-Medicaid population serviced, Part II is not required and has been omitted.

## PART III: Required for all LMHA/LBHAs

### ***PNAC Involvement***

- *The involvement of the Planning and Network Advisory Committee (PNAC) is reflected in the table below:*

Date	PNAC Activity and Recommendations
3/3/2018	Plan submitted to the RPNAC for final review. As a result of the review by the RPNAC the following recommendations were made: PENDING

### **Stakeholder Comments on Draft Plan and LMHA/LBHA Response**

*Allow at least 30 days for public comment on the draft plan. Do not post plans for public comment before March 1, 2018.*

*In the following table, summarize the public comments received on the draft plan. If no comments were received, state “None.” Use a separate line for each major point identified during the public comment period, and identify the stakeholder group(s) offering the comment. Describe the LMHA/LBHA’s response, which might include:*

- ◆ *Accepting the comment in full and making corresponding modifications to the plan;*
- ◆ *Accepting the comment in part and making corresponding modifications to the plan; or*
- ◆ *Rejecting the comment. Please explain the LMHA/LBHA’s rationale for rejecting the comment.*

Comment	Stakeholder Group(s)	LMHA/LBHA Response and Rationale
PENDING public comment period		



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COMPLETE AND SUBMIT ENTIRE PLAN TO [performance.contracts@dshs.state.tx.us](mailto:performance.contracts@dshs.state.tx.us) by April 30, 2018.