

**RHP 5 Request of Additional Fund Proposal**  
**Emergency and Urgent Care Services Expansion**

**Performing Provider Name:** Doctors Hospital at Renaissance

**IGT Entity Name Supporting Requested Funds (Required):** Hidalgo County Care Services (HCCS)

**Estimated Valuation by Waiver Year:**

DY 7 (2017-2018)      Total Amount: \$2,000,000      IGT: \$ 876,400 (Based on FMAP of 43.83%)

DY 8 (2018-2019)      Total Amount: \$2,000,000      IGT: \$ 876,400 (Based on FMAP of 43.83%)

**Proposed System Definition:** Doctors Hospital at Renaissance is a 530-bed General Acute Care Hospital System in Hidalgo County that serves patients in the Lower Rio Grande Valley. The system definition will include inpatient services, outpatient services, emergency department, and affiliated outpatient clinics. Services would include Starr and Cameron County.

**Medicaid and Low Income or Uninsured Patient Population by Provider (PPP) Estimate:** 51% MLIU Percentage (36.60% Medicaid and 14.81% Uninsured) calculated from reported DY5 volumes for all DSRIP projects at Doctors Hospital at Renaissance.

**Identified Community Needs to be Addressed with Requested Funds:** Emergency Department (ED) utilization continues to be a great challenge through this region. Identified through the RHP 5 Community Needs Assessment, community residents sometimes visit the ED for a non-emergent need or situation. Through appropriate education and positioning of urgent care services, this need will be addressed in the community, reducing unnecessary costs, burdens, and utilization of the region's health care resources. Additionally, through identification of frequent ED users, the project will also collaborate with primary care physicians to establish a medical home to prevent future visits to the ER. The project will also work with the Care Link clinic to deploy navigators who will guide and navigate patients through the health care system, and ensuring appropriate care setting utilization.

ED services are only available in urbanized areas. Therefore, residents located in rural areas lack access to specialized emergency services to address their needs. This project aims to build upon the current infrastructure through improving the access to emergency transportation services. Through these initiatives, the region will provide a more patient-centered approach to urgent and emergency care services.

**Outcome Measure(s) Expected to Address Identified Community Needs:** For this project, appropriate Measure Bundles would be Access to Care and B.2 Patient Navigation and ED Diversion.

**Anticipated Core Activities Expected to Impact Identified Outcome Measure(s):** Core Activities expected to impact these outcome measures would include **Access to Specialty Care Services** and **Expansion of Patient Care Navigation and Transition Services**. This project would improve access to specialty care in underserved areas through more available emergency transportation and possibly using telemedicine/telehealth to deliver services in a quick manner. This project would also improve coordination between emergency care, urgent care, and primary care by identifying frequent utilizers of

the emergency departments and transitioning them to a medical home. In doing so, services will be provided to navigate and guide these patients to the appropriate care settings when treatments are needed and ensuring that all navigation is communicated to the patient's primary and specialty care physicians.

**Sustainability Efforts:** With regards to sustainability efforts, this project would yield a benefit in three ways. First, through appropriate diversion of patients from the Emergency Departments (ED) to Urgent Care, the net result outcome would yield cost-savings through the reduction of unnecessary ED costs that negatively impact the hospital's sustainability. Second, appropriate diversion to urgent care would also provide a benefit through ED bed and resource availability. Through a cost-benefit analysis, the resource and bed availability would allow for more appropriate patients, thus providing for potential necessary admissions that create sustainability. Third, by providing urgent care, patients would be seen and billed in this setting, allowing for reimbursements with significantly lower associated costs, providing financial sustainability. Future collaborations with MCOs will also be reviewed depending on patient panels affected.