We are starting the new year with many uncertainties in health care, but one good news story was the congressional renewal of CHIP, the Children’s Health Insurance Program, for the next 10 years. It is always good to start the year in a positive direction, and I am happy to report that this also is the case at DCMS. It is a new beginning.

DCMS and the Dallas-Fort Worth Hospital Council have a history of collaboration dating back to the 1970s. Leaders from both organizations used to meet on a yearly basis, with meaningful results; some mutually beneficial entities were created. Our organizations also worked side-by-side during crisis situations. The mission of the Dallas-Fort Worth Hospital Council is “to enhance hospital value by continually promoting safety and cost-effective, quality health care in our region.”

The DCMS mission is “to promote public health, advocate for physicians, and their relationship with patients, while upholding professionalism in medical practice.”

Although DCMS and DFWHC have continued to work together closely, we have not, until this year, engaged in a prospective view of the changing healthcare environment or shared our ideas to tackle the difficult healthcare issues in the future.

This was the main reason DCMS and DFWHC leaders met in late January 2018 — to start conversations and to find opportunities for collaboration.

At this meeting, most of the major hospital systems were well-represented by their CEOs, including Parkland Health & Hospital System, Baylor Scott & White Health, Texas Health Resources, Methodist Health System, Children’s Health System of Texas, and Medical City Healthcare. DCMS was represented by our Executive Committee — Drs. Kevin Klein, president-elect; Mark Casanova, secretary/treasurer; and me — as well as DCMS past president/board chair Dr. Lee Ann Pearse, and current DCMS board member Dr. James Chanez. The hospital executives, together with the physicians and the DCMS executive staff, reviewed current healthcare issues in the state and in North Texas. Of particular interest was the strengthening of the relationship between the hospitals and physicians.

We tackled some issues that we considered priorities in North Texas. As you can imagine, this dinner meeting was filled with weighty topics. These included Medicaid reform, children’s health issues, chronic diseases, mental health issues, leadership succession planning at the Dallas County Health and Human Services Department, and options to improve access to
care in the vulnerable population.

We discussed some models of community collaboration, both locally and in other parts of Texas, that deserve further exploration here in North Texas. One project discussed was the Dallas Choice Plan, which is one of many options that could support health care for vulnerable patients.

The take-away from this meeting is that for the first time in many years, hospital and medical leaders are serious about working more closely together. A gathering like this is noteworthy, and should provide hope to our healthcare community and to the patients we serve. It was an honor to be among these leaders as we brainstormed and addressed difficult healthcare issues, and developed an initial plan to continue to meet to develop better options for our patients. It was a very positive experience to see all these leaders honestly discussing the critical healthcare issues of the day, and trying to find solutions. Together, we can walk far.

Everyone agreed that this meeting was a new beginning of commitment for DCMS and DFWHC to work more closely. More to come.

Dallas County Medical Society truly appreciates the commitment and engagement of the following leaders:

**DCMS Physician and Staff Leaders**
- Ruben Velez, MD
- Kevin Klein, MD
- Mark Casanova, MD
- Lee Ann Pearse, MD
- James Chanez, MD
- Michael Darrouzet
- Connie Webster
- Steve Winn

**Hospital System Leaders**
- Erol Akdamar
- Barclay Berdan
- Fred Cerise, MD
- Chris Durovich
- James Hinton
- Steve Love
- Stephen Mansfield, PhD
- Matt Moore